



Betsi Cadwaladr University Health Board (BCUHB)
Minutes of the Health Board meeting held in public on 7.11.19
in Porth Eirias, Colwyn Bay

Present:

Mr M Polin	Chair
Mr G Doherty	Chief Executive
Prof N Callow	Independent Member ~ University
Cllr C Carlisle	Independent Member
Mrs D Carter	Interim Director of Operations
Mr J Cunliffe	Independent Member
Mrs M Edwards	Associate Member ~ Director of Social Services
Mr G Evans	Chair of Healthcare Professionals Forum
Dr D Fearnley	Executive Medical Director
Mrs S Hill	Acting Executive Director of Finance
Mrs J Hughes	Independent Member
Mr E Jones	Independent Member
Mrs L Meadows	Independent Member
Miss T Owen	Executive Director of Public Health
Mrs L Reid	Independent Member
Ms D Sharp	Acting Board Secretary
Mr A Thomas	Executive Director of Therapies & Health Sciences
Mrs H Wilkinson	Independent Member
Mr M Wilkinson	Executive Director of Planning & Performance
Mr Ff Williams	Chair of Stakeholder Reference Group

In Attendance:

Mrs Clare Darlington	Assistant Director Primary Care (Centre) (<i>part meeting</i>)
Ms Estelle Hitchon	Welsh Ambulance Service Trust (WAST) Director of Partnerships & Engagement
Mrs Ffion Johnstone	Area Director West – <i>for Executive Director Primary and Community Services</i>
Mrs L Singleton	Director Partnerships Mental Health & Learning Disabilities <i>for MH Director</i>
Mr Jonathan Sweet	WAST Operations Manager West
Ms Diane Davies	Corporate Governance Manager

Translator, members of the public, observers

Agenda item	Action by
<p>19.153a Opening business</p> <p>19.153a.1 The Chief Executive advised that in relation to proposals in respect of Nursing rostering, discussion was continuing in partnership to address the matter at an extraordinary meeting of the Local Partnership Forum taking place the following day. The Independent Member (Trade Union) affirmed that Trade Unions had been engaged throughout, including discussion at the Local Partnership Forum and the decision making process undertaken. The Executive Director of Workforce and OD emphasised that engagement had been undertaken with Trade Union colleagues whom she thanked for their participation. However, she highlighted that the proposals were being introduced to provide equity and consistency of practice across the organisation and that consultation had taken place on the operational process to reduce negative impact. The Chair advised</p>	

that the Finance and Performance (F&P) Committee had endorsed the executive decision on 24.11.19.

19.153a.2 The Chair referred to recent media interest in the Board's appointment of an Interim Recovery Director. He stated that the Board was aware of the appointment and confirmed the involvement of himself and the Board's independent financial advisor in the selection process which had been undertaken following the recommendation of the Public Accounts Committee to bring in expertise to assist with financial recovery and planning. He affirmed the appointment and justification of the carefully considered remuneration offered, stating that this was similar to rates paid in NHS England. He emphasised that there was a clear expectation of return on the investment in a broader sense and he was assured by delivery up to this point. He stated that he found some aspects of social media reporting on the postholder and his wife to be abhorrent. The Chair clarified that whilst the rostering issue had been driven in part by financial savings, there had also been important considerations such as safety and equity across the organisation. He recognised the difficulty of some of the Board's decisions whilst emphasising that consequences were also carefully considered and that status quo was not an option.

19.153b Chair's introductory remarks

19.153b.1 The Chair welcomed everyone to the meeting and all board members introduced themselves bilingually.

The Chair made reference to:

19.153b.2 Petitions received

19.153b.2.1 It was noted that a petition of 281 signatures had been received from Eglwysbach residents regarding parking facilities at Ysbyty Glan Clwyd. The Chair also advised that the matter of Park and Ride was discussed at the Finance and Performance Committee on 24.10.19.

19.153.2.2 It was noted that two petitions had been received (from Plaid Cymru and Unite) regarding nurse rostering.

19.153b.3 Chair's actions

The following Chair's actions had been undertaken since the previous meeting:

- Chair's Action was reported to the Finance and Performance Committee on 24.10.19 to approve the acquisition of the lease for Hillcrest Medical Centre for a period of six years.
- Chair's Action was taken to approve a Funded Nursing Care inflation uplift on an all Wales basis for a further two years to cover 2019/20 and 2020/21.
- Chair's Action had been taken following the Finance and Performance Committee on 24.10.19 to approve a contract recommendation to proceed with a request for ministerial approval for the Blood Gas Analyser Managed Service Contract.

<p>19.154 Apologies for absence</p> <p>Apologies were received from Mrs M W Jones, Dr C Stockport, Mrs G Harris and Mr A Roach.</p>	
<p>19.155 Declarations of Interest</p> <p>None received</p>	
<p>19.156 Draft minutes of the Health Board meeting held in public on 5.9.19 for accuracy and review of summary action log</p> <p>19.156.1 The minutes were approved as an accurate record pending noting that Cllr M Hughes was present.</p> <p>19.156.2 Updates were provided to the summary action log.</p> <p>19.156.3 A range of briefing notes circulated to the board members were noted.</p>	
<p>19.157 Special Measures Task & Finish Group Chair's assurance report 10.10.19</p> <p>It was noted that the framework was currently under discussion with Welsh Government (WG) and the importance of progressing at pace. The Chair iterated that BCU's plan needed to show ambition in removing BCU from the current position in special measures. The Chief Executive advised that discussion had been held at the Executive Team meeting the previous day, emphasising the importance of moving the organisation forward and demonstrating this more tangibly within its plan.</p>	
<p>19.158 Draft minutes of the Annual General Meeting held on 25.7.19</p> <p>The minutes were approved as an accurate record.</p>	
<p>19.159 Standing Orders (SOs) / Scheme of Reservation and Delegation of Powers (SoRD)</p> <p>19.159.1 The Chief Executive recognised the work undertaken in the revision of the SOs and SoRD. It was noted that the Senior Information Responsible Officer role had been assigned to the Executive Director of Finance.</p> <p>19.159.2 It was resolved that the Board</p> <ul style="list-style-type: none"> • Note the documents presented, and the fact that they have been subject to prior scrutiny and approval by the Audit Committee • Ratify the adoption of the model SOs, SoRD and other documents presented • Note that the BCU SOs and SoRD are subject to ongoing annual review as a minimum, the outcomes of which will continue to be submitted to the Audit Committee • Note that for each Corporate Department, Division, Area and District General Hospital, operational SoRDs will be updated, detailing delegation of powers to the level of authority directly beneath that shown in the master SoRD. The updated operational SoRDs will be submitted to the December Audit Committee for scrutiny and approval. 	

<p>19.160 Mental Health Act 1983 as amended by the Mental Health Act 2007. Mental Health Act 1983 Approved Clinician (Wales) Directions 2008. Update of Register of Section 12(2) Approved Doctors for Wales and Update of Register of Approved Clinicians (All Wales)</p> <p>19.160.1 It was resolved that the Board ratify the list of additions and removals to the All Wales Register of Section 12(2) Approved Doctors for Wales and the All Wales Register of Approved Clinicians</p>	
<p>19.161 Child Adolescent Mental Health services – response to Delivery Unit report on Primary Care services (Part 1 of the measure)</p> <p>19.161.1 The Area Director West presented the item, setting into context the importance of this area as stipulated by the First Minister. She advised that the initial report provided a number of recommendations which were being moved forward by the organisation as set out in the actions advised. Progress of delivery of the recommendations would be presented to the Quality, Safety & Experience Committee in line with their cycle of business. It was particularly noted that WG’s delivery unit was pleased with BCU’s integrated approach however there was room for improvement.</p> <p>19.161.2 In response to members’ questions the Area Director West advised that recommendation 3 had been resolved and implemented. Regarding recommendation 4 she assured members that a communications plan was on track to be developed and would be circulated to members in due course. In respect of recruitment and retention issues and addressing concern that GPs on the ground were made aware of standards and framework it was noted that standardised communication via clusters would improve awareness going forward. The Board questioned referrals from GPs. The Associate Member– Social Services Directors representative suggested that the local Public Service Board would be interested in moving this partnership work forward and also sharing with the Regional Partnership Board. In response to the Board’s comments, the Area Director West undertook to feedback to the Regional Leadership Board concern regarding read across to the transformation programmes and connectivity to the community and workforce. She also agreed to clarify young people’s age as at under 25 or 18 within BCU reporting.</p> <p>19.161.3 The Executive Director of Public Health reflected on the good work reported, noting the increased demands and the opportunity the report would provide to further understand the position and help children with the greatest needs to be addressed. The Chair was assured that a recent young person’s suicide in Anglesey was being looked into. He also reported positively on his recent visit to the Cefni hospital.</p> <p>19.161.4 It was resolved that the Board note the report and endorse the actions identified.</p>	<p>FfJ</p> <p>FfJ</p>
<p>19.179 Vascular Services update</p> <p>19.179.1 The Executive Medical Director presented this item. The report provided an update on the planned service review of the centralised vascular services, as agreed at the Board Workshop in October 2019. The service review was expected to be completed by March 2020 following additional executive and clinical team discussion, analysis of new national data, and external specialist clinical advice to help prepare actions arising from the review. The Executive Medical Director advised that BCUHB had been part of a benchmarking audit that had been undertaken, the report would be shared with members</p>	

<p>the next day as it was currently embargoed. The Chief Executive concurred that good assurance could be gained by the Board in respect of the level of monitoring taking place.</p> <p>19.179.2 In respect to Board members' questions the Executive Medical Director advised that risks would be addressed as the service progressed and he also advised on the governance route in respect of the Vascular Clinical Governance Group reporting via Secondary Care Management. Training and shared learning within the team and across the organisation were also described. The Interim Director of Operations advised on pathway improvements, including within Emergency Departments (EDs), in respect of stroke presentations.</p> <p>19.179.3 It was agreed that additional information would be provided so that the Board could further understand the unfortunate passing of a patient advised in the report. In addition, it was agreed that the Executive Medical Director would provide members with the Healthcare Inspectorate Wales (HIW) report referred to and be provided with an assurance report before the end of December 2019.</p> <p>19.179.4 In questioning whether incidents had increased following centralisation, the Executive Medical Director advised that there had been an improved culture of incident reporting within the organisation which was very healthy, however, he could not correlate any increases with the introduction of the centralised service. He also confirmed that pathway issues highlighted by HIW were being addressed. The Board noted the positive cultural change in incident reporting and was advised of the robust reviewing and reporting process introduced as part of patient improvement work being undertaken. The Board noted the importance of learning which was taking place.</p> <p>19.179.5 It was resolved that</p> <ol style="list-style-type: none"> 1) the report be noted together with the agreement to provide an interim report by the end of December pending completion of the Service Review at the end of March 2020; 2) a copy of the HIW report be provided to all Board Members; and 3) further detail be provided to Members on the remedial actions that have been taken following the unfortunate death referred to in the report. 	<p>DF</p> <p>DF</p>
<p>19.162 Ambulance Performance - Welsh Ambulance Service Trust (WAST) BCUHB Area Performance and Quality Report October 2019</p> <p>19.162.1 The Welsh Ambulance Service Trust (WAST) Director of Partnerships & Engagement and WAST Operations Manager West provided a powerpoint presentation detailing performance and quality indicators in respect of demand, quality, safety and patient experience, resources, developments and planning. The WAST Operations Director acknowledged the shared challenges and interests between BCU and WAST in ensuring benefits for patients were realised and also recognised pinchpoints within Winter Planning. The WAST Operations Manager West highlighted work in addressing rural areas and advised that recent improvements within the West were being replicated within the other areas. In respect of Ambulance handover he advised that there was continuing improvement at Wrexham and Ysbyty Gwynedd whilst there had been deterioration at Ysbyty Glan Clwyd (YGC).</p> <p>19.162.2 Board members raised a variety of questions. In response to the Quality, Safety and Experience (QSE) Committee Chair, further detail was provided by the Interim Director of Operations in respect of the varied performance of ambulance handover at the District General Hospitals, noting that YGC received the greatest number of</p>	

ambulance presentations and assuring that work was being done to release ambulances at the earliest opportunity into service. It was noted that across Wales, there were increases in presentations of patients with chest pain, experience of falls, respiratory problems, increased acuity and older people. The Chair was assured that work was being undertaken in a variety of ways to address such matters. The Healthcare Professionals Forum Chair was particularly concerned with alternative approaches to improve experience for falls patients such as in the community and third sector. The Area Manager WAST West advised of the social prescribing pathway under development in Ynys Môn. The Stakeholder Reference Group (SRG) Chair raised a concern which had been voiced following a recent presentation to the SRG on stroke services in respect of travel times and RAG status. The Area Manager WAST West reported that a new performance management scheme had been introduced in this area which was consistently being delivered at 95% and that amber status was currently appropriate with the current response model which was being looked at further. The WAST Operations Manager also advised that this was supported by clinical and audit reviews which had been undertaken.

19.162.3 Discussion also ensued on complaints regarding waiting times within the local community, which was acknowledged by the WAST Operations Manager and the distress caused to patients. She reminded members of the prioritisation for red calls being delivered and the finite resource available, however she advised that the service was looking at alternative solutions. She welcomed the opportunity to work further with the Third Sector and invited members to advise of any local initiatives they became aware of going forward. The Chief Executive reminded members of the demand and capacity work regularly being undertaken by the Emergency Ambulance Services Committee (EASC). The Independent Member (TU) highlighted the excellent communication operationally between BCU and WAST colleagues and the focus on delivering in partnership.

19.162.4 It was resolved that the Board note the performance and quality report

19.163 Annual Plan Progress Monitoring Report

19.163.1 The Executive Director of Planning and Performance presented this item. He drew attention to the challenges in planned care, advising on business plan progress to date within endoscopy, urology and also additional £60m funding being sought via WG in respect of Wrexham Maelor business continuity redevelopment scheme.

19.163.2 In response to the QSE Committee Chair, the Executive Director of Planning and Performance reported that an overarching programme was being prepared for consideration at the November Finance & Performance (F&P) Committee to address orthopaedic service challenges, although the Board was currently moving forward consultant recruitment due to service need across the organisation. It was also noted that the Digital and Information Governance Committee was monitoring the issue relating to the pilot introduced as an interim solution to address the national delay of the Welsh Community Care Information System.

19.163.3 A number of questions were raised in respect of BCU's current estate. It was noted that due to insufficient capital allocation, the estates strategy and business case focus would be on improving the existing estate and also utilising discretionary capital. The Board was reminded of the needs of the health records service as part of the Ablett redevelopment. The Chief Executive advised that work was also being undertaken with partners to explore shared space and different ways of working.

<p>19.163.4 The Executive Director of Planning and Performance advised that emerging cost pressures associated with urology and orthopaedic developments would be worked through via the F&P Committee to align with the Board's annual plan, advising that a new robust business case process had been introduced. The Chair iterated that there was to be no in year cost growth unless exceptional, he was also assured that the Executive Team were in discussion on stroke service developments which could be progressed without significant financial investment.</p> <p>19.163.5 It was resolved that the Health Board note the report.</p>	
<p>19.164 Integrated Quality and Performance report</p> <p>19.164.1 The Executive Director of Planning and Performance highlighted cancer services strong performance as best in Wales, however he acknowledged challenges in respect of response times. It was noted that whilst there were Unscheduled Care challenges and attendance above plan across BCU's EDs, there continued to be improvements over the past few months, especially within Wrexham Maelor's newly opened unit. The Chair reported that he and the Interim Director of Operations planned to visit the following week and was provided with detail on how the intense support provided together with the Secondary Care Nurse Director would be embedded into core working going forward to ensure sustainability of the complex improvements progressed.</p> <p>19.164.2 The Executive Director of Planning and Performance drew attention to disappointing performance within planned care, particularly in respect of over 36 and 56 week waiters where remedial actions were being undertaken. Performance in ophthalmology, orthopaedics, urology and general surgery were highlighted. The increase in high category patients presenting was also noted along with the sustained increase from 2% to 8% in ambulatory demand. Clarity was sought on the target reference on page 43.</p> <p>19.164.3 The Interim Director of Operations advised that data cleansing work would improve accuracy and that dealing with patients in time order would improve the follow up backlog. In respect of workforce performance, the Executive Director of Workforce &OD confirmed that sickness absence was higher than it should be, however BCU was third in Wales and not an outlier. The W&OD Division was focussed on addressing the biggest drivers and providing leadership and management support along with proactive work in relation to stress related absence which was the lowest rate across NHS Wales. She advised of work with Trade Union partners in moving forward improvements. The Chair advised that further detail in respect of agency staff had been circulated to members and praised the improvement reported in mandatory training completion. The Executive Director of Workforce & OD encouraged the need for the organisation to develop its own nurse agency capacity from within its own valued staff members and bank, which would be important from both a patient safety and financial perspective.</p> <p>19.164.4 In respect of Referral to Treatment (RTT) the Chair highlighted work reported at the recent F&P Committee by the newly appointed Interim Head of Planned Care. He requested that the Acting Executive Director of Finance share with members the 60/90 day plans discussed at the recent Executive Team meeting. He reported that November would be a critical month for progress being demonstrated and stated that definitive trajectories would need to be laid out along with the plans to support them when clarity of financial resource was known. Having voiced his concern regarding trajectory slippage and non-delivery of savings, the Acting Executive Director of Finance agreed to provide the Chair with clarity on the current position the following day.</p>	<p>MW</p> <p>SH</p> <p>SH</p>

<p>19.164.5 The improvements provided by the Interim Director of Operations and teams were acknowledged in respect of infection control actions. It was agreed that the Executive Director of Planning and Performance and Acting Executive Director of Finance would look into an issue highlighted within external contracting.</p> <p>19.164.6 It was resolved that the Board note the report</p>	MW/SH
<p>19.165 Finance Report month 5</p> <p>19.165.1 It was resolved that the Board note the report and would focus their discussion on the month 6 report.</p>	
<p>19.166 Finance Report month 6</p> <p>19.166.1 The Acting Executive Director of Finance presented the report which confirmed that at the end of Month 6 the Health Board was overspent by £21.2 m, £6.2m higher than that required to achieve the control total – a phased year to date plan of £15.0m (including £2.5m of additional stretch target, allocated from Month 5 onwards at £1.25m per month). It was noted that in month the Health Board delivered a £2.9m deficit. This was slightly short of a balanced position against the original plan, but the £1.3m additional stretch savings phased in-month to meet the control total plan had not been achieved. The key over spending division was Secondary Care, where the non-delivery of savings, agency premium pay costs and other cost pressures were the main causes of the over spend.</p> <p>19.166.2 The report advised cash releasing savings achieved to date of £8.7m against a year to date plan of £13.5m, giving a shortfall of £4.8m. Additional cost avoidance and efficiency savings of £3.7m had been delivered to date, and offset cost pressures arising in year. The cash requirement for the year was forecast to be £42.4m. This arose from the forecast deficit position, movements in revenue working capital balances and capital resource allocations that were not drawn in 2018/19. The Health Board would consider all possible actions to minimise the level of requested Repayable Strategic Cash Assistance. The Capital Resource Limit (CRL) at Month 6 was £17.2m. Year to date expenditure was £5.5m against a plan of £6.0m. The year to date slippage of £0.5m would be recovered throughout the remainder of the year.</p> <p>19.166.3 The Health Board's forecast deficit was £35m, in line with the initial plan but £10m behind the control total of £25m. While the extrapolated year to date position equated to a full-year deficit of £42.4m, the forecast outturn reported to Welsh Government reflected the anticipated impact of actions being managed through the Recovery Programme, including grip and control measures and the conversion and delivery of savings opportunities. The £35m deficit forecast required the delivery of all green and amber rated schemes which equated to £28.7m and £7.7m of schemes currently rated Red. The Acting Executive Director of Finance reported that work was being undertaken to drive hard on the £25m target set by WG, understanding that the current position was not acceptable and referred to the PriceWaterhouseCooper (PWC) review commissioned by the Health Board Chair.</p> <p>19.166.4 The Acting Executive Director of Finance highlighted the financial position in relation to RTT provided, sharing discussion which had taken place at the recent F&P Committee attended by representatives of WG. She also highlighted risks including</p>	

Welsh Risk Pool, potential incident claims, price increases and Continuing Health Care (CHC) packages.

19.166.5 The Acting Executive Director of Finance asserted that there was traction within the savings programme, sharing the improving grip emerging from the fortnightly Financial Recovery Group meetings and monitoring undertaken by Executive Team members of the Improvement Groups introduced which they were also responsible for leading

19.166.6 In response to the Chair of the Stakeholder Reference Group in relation to confidence on delivery of stretch targets which had not been delivered in the 3 previous months, the Chief Executive advised that whilst there had been 3 years of increasing deficit the Health Board would deliver on the plan set. A member queried progress on the validation being undertaken in respect of the increase of £9.6m in the cost avoidance category reported.

19.166.7 In response to whether the £4m overspend within YGC could realistically be turned around, the Acting Executive Director of Finance recognised this to be a high risk area, however there had been senior team support provided especially from within the Financial Recovery Group.

19.166.8 The Executive Medical Director reflected on the complexity of transformational change and highlighted volatility within medicine costs. He shared his belief that there was a need to address the pricing volatility rather than prescribing practices moving forward.

19.166.9 In respect of a member's questions, the Acting Executive Director of Finance reported that impacts were being seen within finance and performance following the grip and control measures introduced and being embedded by the Financial Recovery Group. In respect of confidence in transition from the PWC team, she reported on interim structures in place within the Delivery Management Office and Service Improvement Teams, advising that lessons would be learned from PWC as substantive arrangements were embedded. Discussion also ensued on the role of the Improvement Groups and the balance between savings and recovery actions, the Executive Director of Public Health reminded that these included areas other than financial.

19.166.10 In discussion of the savings programme which had been planned to deliver towards the latter months of the year, the importance of ensuring the F&P Committee was well sighted in monitoring the detail of this was emphasised.

19.166.11 The Chair clarified that

- savings were required to be delivered
- greater grip and control was required in respect of expenditure as well as the underlying deficit
- the organisational target was not £35m deficit.
- the 2019/20 year end target needed to be delivered.

19.166.12 It was resolved that the report be noted, including the forecast position of £35.0m deficit.

19.167 Committee and Advisory Group Chair's assurance reports

The following Chair's assurance reports were noted

19.167.1 Audit Committee 12.9.19**19.167.2 Quality, Safety & Experience Committee 24.9.19**

The Committee Chair escalated the following points:

- The Occupational Health and Safety Gap Analysis Report was received which identified significant areas of non-compliance against health and safety legislation across the Health Board. The report also highlighted the need to improve the risk management structure and the robustness of previous self-assessments undertaken. The report included a comprehensive improvement plan with timescales, but it was noted that some of the requirements might involve significant resources which the Committee were not in a position to consider.
- The Committee were concerned with the lack of progress with the Follow Up Backlog Clearance. Although the report was inconsistent in part, the size of the backlog has increased and the trajectories for improvement were unclear. The Committee was unable to note the position reported or approve the initiatives outlined as both were unclear.

19.167.3 Finance & Performance Committee 30.9.19**19.167.4 Charitable Funds Committee 4.10.19**

The Committee Chair highlighted that the Terms of Reference for the Committee and Charitable Funds Advisory Group were being reviewed following the meeting.

19.167.5 Mental Health Act Committee 27.9.19

The Committee Vice Chair highlighted the Healthcare Inspectorate Wales (HIW) Monitoring Report, in which the theme of continuous improvement was noted, along with significant improvements across the Division.

19.167.6 Remuneration & Terms of Service Committee 29.8.19

The Executive Director of Workforce and OD confirmed that objectives of Senior Managers were being considered with effect from the previous meeting.

19.167.7 Strategy, Partnerships & Population Health Committee 1.10.19**19.167.8 Digital & Information Governance Committee 27.9.19**

The Committee Chair highlighted the risks associated with the delay to national systems implementation and health records.

19.167.9 Stakeholder Reference Group 10.9.19

The SRG Chair highlighted

- progress within Mental Health as encouraging, with the pathway approach and the projection of savings to break even, including the effectiveness of the referral process and the Community Care Hub. The Group was encouraged to hear about the use of Mental Health Practitioners working with the Police before S136 Powers were implemented.
- Clinical Services Strategy, the Group emphasised the importance of public engagement that would be needed around the changes to services. Transport links, travel times to services and WAST performance needed to be taken into account and prioritised in some way.
- the on-going lack of attendance by Local Authorities and the Group agreed that the matter should be raised with them so that attendance at the SRG meeting could be prioritised.

<p>19.167.10 Healthcare Professionals Forum 13.9.19</p>	
<p>19.168 Primary Care and Care Closer to Home update report</p> <p>19.168.1 In the unavoidable absence of the Executive Director of Primary and Community Services who was attending the national Primary Care conference, the Assistant Director of Primary Care (Centre) provided a presentation which outlined the primary & community social model of care, GP practice stability and managed practices, workforce and the Academy, clinical care pathways and priorities moving forward.</p> <p>19.168.2 The Chair reinforced the importance of care closer to home and invited questions from the Board. In response the Assistant Director of Primary Care (Centre) advised on plans to recruit and train advanced nurse practitioners and other professionals. A member commented that whilst the pace of change in involvement with the third sector was positive she highlighted caution in respect of the practicalities involved in the introduction of innovation within non-managed practices. The Assistant Director of Primary Care (Centre) also acknowledged the challenge in supporting smaller practices and advised that additional workforce might be introduced on a cluster basis. In relation to concern with future developments on termination of the pilot, the Assistant Director of Primary Care (Centre) advised that the challenge was acknowledged, however, clusters would be able to develop their own future business cases for successful pilots going forward to prove their own local concepts.</p> <p>19.168.3 It was noted that the Vice Chair was also attending the national Primary Care conference that day, however she forwarded her support and congratulations to BCU's Primary Care team whom had delivered on many levels and achieved much through partnership work. She acknowledged the clear vision for service transformation and importance of the work ahead to future proof the service.</p> <p>19.168.4 The SPPH Committee Vice Chair advised that the risks associated with cluster leads highlighted could be raised at the SPPH Committee workshop being held on 12.11.19 in which cluster plans within the West were being discussed and invited Board members to attend.</p> <p>19.168.5 It was resolved that the Board note the progress made in Primary and Community service transformation during the previous year and the governance and financial implications outlined.</p>	
<p>19.169 Seasonal Plan</p> <p>19.169.1 The Interim Director of Operations presented the report which provided an update and assurance to the Board that work was ongoing in partnership with Local Authorities and other partner agencies to enable delivery of health and social care services to meet the additional demand and seasonal pressures anticipated during winter 2019/20 in conjunction with the Building Better Care programme of work for delivering improvements to Unscheduled Care (USC).</p> <p>19.169.2 It was noted that the draft submission to Welsh Government (WG) of the winter operational plan had been developed in partnership with Area Integrated Service Boards, presented to the North Wales Leadership Group and the final joint plan would be presented to the North Wales Regional Partnership Board before final submission to WG in November. The Unscheduled Care Improvement Group would oversee all Health</p>	

<p>Board initiatives for winter resilience in conjunction with the Building Better care programme of work.</p> <p>19.169.3 The Associate Board member representing Social Services Directors commented on the maturing plans developed in partnership and that working together would make a difference for patients in North Wales.</p> <p>19.169.4 It was resolved that the Board note the work being done to strengthen delivery over Winter 2019/20 through initiatives developed in partnership with agreed WG allocation of funding in conjunction with the Building Better Care improvement programme</p>	
<p>19.170 Corporate risk register and assurance framework report</p> <p>19.170.1 It was noted that the organisation was moving towards an Enterprise Risk Management Model (ERM) in order to better manage risk which would be supported by a clear governance structure via Committees. It was acknowledged that there would be challenges in order to establish systems therefore the team sought to extend the current strategy until 31.3.2020. The Audit Committee Chair supported this arrangement and the Chief Executive reminded that this development also involved other streams of work.</p> <p>19.170.2 The F&P Committee Vice Chair emphasised the need to ensure ‘getting the basics right’ in respect of controls, advising it was his opinion that the majority of controls set out within the current register were actions and not controls. He also sought clarification on why CRR10b in respect of Health Records had been amended to include reference to ‘Acute’ which was not the case in discussion at the recent Digital and Information Governance Committee which he chaired.</p> <p>19.170.5 It was resolved that the Board</p> <ul style="list-style-type: none"> • note and approved the report • support continuation of the report format until 31.3.2020 	DF/SH
<p>19.171 Executive Director Public Health Annual Report 2019</p> <p>19.171.1 The Executive Director of Public Health advised that she was privileged to present the ‘Protect and Prosper’ report prepared by the local Public Health Team which provided a brief overview of health protection issues in North Wales. She highlighted that this area had been increasingly discussed via the business of the SPPH Committee. The report provided information on the challenge of infectious diseases, vaccination, environmental impacts, screening and incident planning and response. The Executive Director of Public Health shared a brief overview of North Wales population health outcomes that highlighted smoking, alcohol, mental health & wellbeing, healthy weight, physical activity, and maternal & childhood obesity. She reminded the Board of its responsibility for planning and delivering healthcare and for promoting and <i>protecting</i> health. In concluding her presentation she also drew attention to spending in respect of healthy individuals against the Wales average, population projections within BCU’s catchment and the focus being undertaken in the areas of tackling inequalities, clusters, prevention & early intervention and the population health approach. She advised that the Integrated Medium Term Plan would be the powerhouse in driving this forward for the future alongside Regional Partnership Board work.</p> <p>19.171.2 The SRG Chair advised of the housing sector’s commitment to address inequalities and emphasised the sector’s wish to work in partnership with the Health</p>	

<p>Board and Local Authorities to move this forward. The Executive Director Public Health expressed gratitude for this offer of assistance and also acknowledged the work of the 3rd sector in areas such as foodbanks.</p> <p>19.171.3 The Executive Director Planning and Performance reflected on investment within this area and concern with finances which was pivotal to this work. It was noted that increasing spend within community work would provide the best value for money. Board members also reflected on the need for greater understanding of the preventative agenda and investment from sources such as Healthier Wales and ensuring joined up support with Public Service Boards (PSBs), Local Service Boards (LSBs) and Regional Partnership Boards. It was acknowledged that implications and risks would also require consideration. The Chair stated that he would promote moving this forward with the Chair of the LSB for the benefit of BCU's communities.</p> <p>19.171.4 The Executive Director of Public Health undertook to look further into other mediums of distributing the annual report apart from an online publication. The Chief Executive thanked the Executive Director Public Health for her presentation and work of the PHW team. He reflected on the benefit to BCU's population and the challenge to consider during discussion of BCU's 'better spending, spending well' initiative.</p> <p>19.171.5 It was resolved that the Board note the annual report.</p>	<p>TO</p>
<p>19.172 Three year outlook and 2019/20 annual plan</p> <p>19.172.1 The Executive Director of Planning and Performance presented this item. He advised that the Board's priority was to ensure focus on the 2020/21 plan, whilst encouraging work undertaken during the current financial year in preparation for the next year's challenges - particularly in respect of RTT. He highlighted that the report provided updates on changed trajectories and emphasised the need for BCU to present a position which was acceptable to WG. He drew attention to key trajectories in respect of RTT and endoscopy which were not included. The Executive Director of Planning and Performance advised that the key performance indicators had been identified by WG as well as locally within BCU.</p> <p>19.172.2 The QSE Chair questioned how the data validation process being undertaken was different from previous processes, noting that accountability had been strengthened and there was greater positivity in the change taking place. The Chair, whilst acknowledging greater confidence provided by the RTT discussion at the previous F&P Committee, stressed the need to demonstrate improvement given all the actions undertaken to date. The F&P Committee Vice Chair raised concern in respect of ensuring that as the Head of Planned Care was appointed on an interim basis, that the positive processes being introduced would be effectively embedded within the organisation. The Chief Executive assured the Board that skills transfer and the embedding of standard operating procedures would address this along with stronger leadership across BCU's three District General Hospitals.</p> <p>19.172.3 The Chair sought assurance on trajectory setting, emphasising the need for confidence and assurance in this area. The Executive Director of Planning and Performance advised on the need to ensure credibility, reflecting on the complex judgements which had been undertaken during development across the year. The Chair was also assured that the serious incident reporting stretch target provided had been considered reasonable and sufficiently ambitious.</p>	

<p>19.172.4 It was resolved that the Board</p> <ul style="list-style-type: none"> • receive the report and approve the proposed changes to the plan • note the risks associated with RTT/ diagnostics and work ongoing to develop the plan with support of WG 	
<p>19.173 A strategy for Research and Innovation 2020-2025</p> <p>19.173.1 The Executive Director of Therapies and Health Sciences presented this item. It was acknowledged that feedback provided at a Board workshop and the SPPH Committee had been fed into the development of the strategy. He advised this new strategy was key to unlocking the development of solutions to many of the challenges faced by the Health Board bringing new knowledge, evidence based technology and income. He highlighted a real energy and positivity behind its development.</p> <p>19.173.2 The Independent Member (University) shared her perspective on this development. The Executive Medical Director reflected that development at the same time as the digitally enabled clinical services strategy was positive, especially as it could enable improved evidence based decision making and improve BCU's attractiveness to external candidates as an employer. In discussion which ensued, and following reflections on the positivity of learning from others and 'doing things differently', it was agreed that the strategy be highlighted at the Regional Partnership Board (RPB).</p> <p>19.173.3 It was resolved that the Board</p> <ul style="list-style-type: none"> • approve the strategy • approve working with the RPB, and newly formed Research, Innovation and Improvement Hub to develop a Regional R&I strategy for the future 	AT
<p>19.174 Summary of In Committee Board business to be reported in public</p> <p>19.174.1 It was resolved that the paper be noted.</p>	
<p>19.175 All Wales and Other Forums</p>	
<p>19.175.1 Collaborative Leadership Forum minutes 13.5.19</p> <p>It was resolved that the minutes be noted.</p>	
<p>19.175.2 Welsh Health Specialised Services Committee joint briefing 16.9.19</p> <p>It was resolved that the briefing be noted.</p>	
<p>19.175.3 Shared Services Partnership Committee assurance report 18.9.19</p> <p>It was resolved that the report be noted.</p>	
<p>19.176 Date of next meeting</p> <p>19.176.1 It was noted that the next meeting would be rescheduled to 30.1.20 at a venue to be confirmed to enable the Board to ensure adequate preparation of the 2020/21 draft annual plan prior to submission to Welsh Government. **Post Meeting Note – meeting subsequently rescheduled to the 23.1.20**</p>	

<p>19.176.2 The Executive Director of Planning and Performance assured the Chair that the plan would align with BCU's budget and financial planning.</p>	
<p>19.177 Committee meetings to be held in public before the next Board meeting</p> <p>Quality, Safety & Experience Committee 19.11.19; Digital Information & Governance Committee 21.11.19; Finance & Performance Committee 28.11.19; Strategy, Partnerships & Population Health Committee 3.12.19; Charitable Funds Committee 10.2.19; Audit Committee 12.12.19; Mental Health Act Committee 20.12.19.</p>	
<p>19.178 Any other business</p> <p>The Chair acknowledged the dedicated work undertaken by Marian Wyn Jones as Independent Member and Vice Chair of the Board during her tenure from November 2011 which would conclude on 30.11.19. He highly commended her commitment and support to the organisation, colleagues and himself as Chair of the Board.</p>	
<p>19.179 Exclusion of Press and Public</p> <p>Resolution to Exclude the Press and Public - "That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960."</p>	