

**Betsi Cadwaladr University Health Board (BCUHB)  
Minutes of the Health Board meeting held in public  
on 28 September 2023 at Venue Cymru, Llandudno  
and via zoom livestream**

<b>Board Members Present</b>	
<b>Name</b>	<b>Title</b>
Dyfed Edwards (DE)	Chair
Karen Balmer	Independent Member
Jason Brannan (JB)	Deputy Director of People
Clare Budden	Independent Member
Russell Caldicott (RC)	Interim Executive Director of Finance
Gareth Evans (GE)	Acting Executive Director of Therapies & Health Science
Dyfed Jones	Independent Member
Prof Mike Larvin	Independent Member
Dr Nick Lyons	Executive Medical Director/Deputy Chief Executive
Phil Meakin	Acting Board Secretary
Dylan Roberts	Chief Digital and Information Officer
Fôn Roberts	Associate Member
Carol Shillabeer (CEO)	Interim Chief Executive Officer
Helen Stevens-Jones (HSJ)	Director of Partnerships, Engagement & Communications
Dr Chris Stockport	Executive Director of Transformation and Planning
Rhian Watcyn Jones	Independent Member
Jane Wild	Associate Member
Gareth Williams	Independent Member
Angela Wood	Executive Director of Nursing and Midwifery
<b>In Attendance</b>	
Rob Atenstaedt	Consultant in Public Health Medicine/Deputy Director Public Health
Dave Beard Luke Parry	For IT and livestream support
John Bowden	For audio visual support
Jody Evans	For livestream support
Lowri Gwyn Sioned Jones	For simultaneous translation
Dave Harries	Head of Internal Audit to observe
Eleri Hughes-Jones	Head of Welsh Language Services (item HB23.226 only)
Diane Davies	Corporate Governance Manager (minutes)

Agenda Item	Action
<b>OPENING BUSINESS</b>	
<p><b>HB23/206 Welcome, introductions and apologies for absence</b></p> <p>The Chair welcomed everyone to the bilingual meeting and encouraged full participation. Apologies were noted from Teresa Owen, Executive Director of Public Health for whom Robert Atenstaedt deputised and Adele Gittoes, Interim Executive Director of Operations.</p>	
<p><b>HB23/207 Declarations of Interest on current agenda</b></p> <p>There were no declarations of interest made.</p>	
<p><b>HB23/208 Draft minutes of the previous meetings held on 31 July 2023 and 24 August 2023</b></p> <p>The draft minutes of the meetings held on 31.7.23 and 24.8.23 were approved as an accurate record.</p>	
<p><b>HB23/209 Table of actions</b></p> <p>The document was agreed and further verbal updates were recorded to the table of actions.</p>	
<p><b>HB23/210 Patient Experience/Story</b></p> <p><b>HB23/210.1</b> The Board watched a detailed account of a patient whom had undergone breast cancer treatment and had encountered a number of issues during this time. She had requested, given her family history, the opportunity to have total removal of her breasts instead of the lumpectomy she received following consultation with her consultant surgeon. Very sadly, the cancer returned and had progressed significantly before being detected once more.</p> <p><b>HB23/210.2</b> The Board heard how the deeply sad experience of not feeling listened to had affected her. She felt that “She had treatment, but she did not receive care”.</p> <p><b>HB23/210.3</b> The Board was extremely grateful that this patient had been willing to share this experience and welcomed hearing from the Executive Director of Nursing and Midwifery how BCU had addressed the patient’s experience with the services concerned and be provided with assurance that learning had been embedded within them to avoid the risk of any similar experience for patients within their care. The importance of listening to patients and engaging with them on their treatment plans was emphasised.</p>	

<p><b>HB23/210.4</b> A discussion ensued in which the Board also concurred on the importance of supporting clinicians with effective digital patient records, which was being moved forward, along with other supportive measures such as the introduction of the care navigator role. Other suggested areas for development included enhancing this learning within Fundamentals of Care staff training, and introducing patient experience stories to BCU orientation sessions. In terms of assurance, the Executive Director of Nursing and Midwifery clarified the governance route of patient experiences to Board. The Interim CEO advised that learning and engagement were key areas of Special Measures and would address the systemic need to draw out and deal with themes of concern.</p> <p><b>It was resolved that</b> the Board</p> <ul style="list-style-type: none"> <li>• <b>noted</b> the patient's experience and</li> <li>• <b>received</b> assurance that learning had been embedded within the service to avoid a similar experience for any future patient</li> </ul>	
<p><b>HB23/211 Chair's Report</b></p> <p><b>HB23/211.1</b> The Chair was pleased to report on the many visits he had undertaken since the previous Health Board meeting. He emphasised the importance of connection with staff, patients and services within the community and was particularly pleased to report on the positively received AGM and Health Fair event held the previous day in Llandudno.</p> <p><b>HB23/211.2</b> He stated the Minister's intention to focus on early prevention to help the population live more healthily which BCU would need to move forward.</p> <p><b>HB23/211.3</b> The Chair was keen to emphasise the ambition needed within BCU to provide North Wales' population with the best care and best services, along with the ability to access them. These opportunities were what the population within in our communities deserved to receive.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the report</p>	
<p><b>HB23/212 Chief Executive Officer's Report</b></p> <p><b>HB23/212.1</b> The Interim CEO highlighted within the report the importance of the service visits she had undertaken, recognition of commitment at recent Long Service Award ceremonies, importance of receiving the flu vaccination to protect patients, colleagues and others in their families and communities. In addition there were environmental challenges within the Board to address. She outlined how the recent adverse NHS-wide report on inappropriate sexual behaviour was</p>	

<p>addressed through safeguarding systems established within BCU, emphasising that such behaviour would not be tolerated within the organisation.</p> <p><b>HB23/212.2</b> The Interim CEO stated that the Winter Plan, usually presented to the Board at this time would be presented to the November Board meeting in order to include more robust planning that would also incorporate partnership discussion which was scheduled to take place shortly.</p> <p><b>HB23/212.3</b> In a wider discussion on accommodation availability and affordability, it was agreed that the Director of Partnerships, Engagement and Communications would liaise with the Independent Member whom had suggested sharing potential staff opportunities to seek assistance. The Interim CEO would also be exploring this area further.</p> <p><b>HB23/212.4</b> The Board was pleased to hear that 6 BCU nominations were to be considered at the Advancing Healthcare Awards, the Acting Executive Director of Therapies and Health Science agreed to circulate further information on progress to Board members. In regard to the Executive Director of Nursing and Midwifery's reporting of improvements in monitoring action tracking of recent Healthcare Inspectorate Wales reports, the Chair emphasised that these, and other reports, were very important opportunities to ensure that learning was effectively embedded within the organisation.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the report</p>	<p>HSJ</p> <p>GE</p>
<p><b>HB23/213 Questions from the Public</b></p> <p><b>HB23/213.1</b> The Chair advised that some questions had been submitted from two sources however, not within the agreed timeline to enable responses to be prepared. He stated these would be published on the website at the earliest opportunity following the meeting. It was also noted that a meeting had been arranged to respond to detailed questions received by the Board from a member of the public.</p> <p><b>HB23/213.2</b> The Chair invited feedback from the public on how the Board could more effectively respond to their questions through this forum. It was his intention to also seek feedback on a more effective process with Llais and other partner organisations. He welcomed correspondence to be forwarded at anytime between meetings to himself, or the Interim CEO, on any issues of concern.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the verbal report</p>	

**HB23/214 ITEMS FOR APPROVAL/RATIFICATION/DECISION**

**HB23/215 Special Measures – Full 90-day cycle Report**

**HB23/215.1** The Executive Director of Transformation and Strategic Planning presented the report. He welcomed the constructive feedback provided by Committees and was keen to work towards improved scheduling of reporting to improve timeliness moving forward. Assurance was provided that any outstanding 90 day actions had been carried forward into the second 90 day cycle action plan and these would also include slippage arising from the more complex Independent Reviews.

**HB23/215.2** The Board raised a number of questions. In response to querying the realism of Savings targets outlines, the Interim Executive Director of Finance advised that escalation meetings were taking place to address the slippage of the current £18.5m performance against the £25.2m target. He shared the concern however focus continued on delivery in year and benefits would not be lost in continuing to move these forward. In regard to slippage of the Procurement Review, work was progressing to receive a draft within 2 to 3 weeks that would be considered by the Performance, Finance and Information Governance Committee (PFIGC). It was noted that progress was moving forward in relation to senior HR cases which was affecting progression on some actions and an executive portfolio review remained to be explored.

**HB23/215.3** Discussion ensued on slippage in a number of areas and concerns with capacity to address the number of 'Red' actions accumulating. The Interim CEO advised that BCU was currently in a stabilisation/discovery phase which was required to establish a firm foundation on which effective assessment of impacts and outcomes could be built on and long lasting sustainable change be embedded. The Chair emphasised the need to ensure that the actions to be undertaken effectively addressed "Getting it right for *this* Board".

**HB23/215.4** A brief discussion took place on the level of detail provided within the report. The Board also reflected on the need for an improved Integrated Performance report format to provide greater understanding of the Board's services, it was understood that this was currently being developed.

**It was resolved that** the Board **received** assurance on the progress made in cycle 1, acknowledging the areas of challenge, along with which elements of the plan would be required to continue in to the second 90-day cycle

**approved** the proposed areas of work for the second 90 day cycle



## **HB23/216 The Development of an Elective Orthopaedic Surgical Hub at Llandudno Hospital - Single Stage Business Case**

**HB23/216.1** The Executive Director of Transformation and Strategic Planning presented the item. He highlighted the benefits of developing the hub for high volume, low complexity orthopaedic cases which included protecting planned activity and improved specialist support services at the site eg radiology. The development of the Centre for Excellence would also improve recruitment prospects and potential to contribute to the Board's University status in terms of education and innovation. In addition there was potential to develop a second phase, following discussion with clinicians and the public that could strengthen the future of the Llandudno hospital site.

**HB23/216.2** Discussion ensued. It was strongly emphasised that the development had been clinician led with an extremely engaged collaborative approach undertaken. In regard to the future of the Abergele site, the Board listened to the accounts of significant staff engagement, enthusiasm and support for the Llandudno site development and the challenging fabric of the existing Abergele site. The clinical Executive Board members were very excited and supportive of the deeply committed team work which continued to support and move the development forward.

**HB23/216.3** The Board members raised a number of questions in regard to the revenue position which were clarified by the Interim Executive Director of Finance. He also stated that extensive preparatory work needed to be undertaken to ensure a productive and efficient service was enabled.

**HB23/216.4** The Interim CEO extended her thanks to the clinicians involved and looked forward to presenting the business case to the Investment Board shortly.

**It was resolved that** the Board

- **approved** the content of the business case, including the recommended option to develop single site Orthopaedic surgical hub capacity in Llandudno, and the requisite capital (estimated at present) and revenue requirements.
- **noted** and **supported** the intention of the Programme Team to progress the development of a phase two proposal to expand the model further should the business case be approved

## **HB23/217 Framework for approval: Risk Management Framework**

**HB23/217.1** The Acting Board Secretary stated the Framework took into account feedback provided at a recent Board Development session and also the Audit Committee.

<p><b>HB23/217.2</b> Several Board members commented on the Risk Management Framework. There was a need for a less risk averse approach and employees at all levels within the organisation should be comfortable in reporting risks. The PFIGC Chair remarked on the need for prioritisation of resources in regard to capital business cases developments, including consideration of those identified as medium to longer term. The Acting Board Secretary took on board positive suggestions regarding the Welsh Language and undertook to consider potential interpretation of data issues for those whom are colour blind within the report. The Acting Board Secretary acknowledged the supportive feedback that he had received in discussion with Board colleagues in the preparation stage of this framework.</p> <p><b>It was resolved that</b> the Board</p> <ul style="list-style-type: none"> <li>• <b>approved</b> 2023/24 Board appetite for risk types</li> <li>• <b>approved</b> the risk management framework</li> </ul>	
<p><b>HB23/218 Framework for approval: Performance Framework</b></p> <p><b>HB23/218.1</b> The Interim Executive Director of Finance presented the item which set out how the Integrated Performance Framework (IPF) would support delivery of the Health Board’s plans and articulate how performance would be monitored in year within directorates, divisions and integrated healthcare communities (IHCs). He drew particular attention to the Executive Delivery Group’s function within the process.</p> <p><b>HB23/218.2</b> In response to a Board member’s question, it was advised that the Quality, Safety and Experience (QSE) Committee would be presented with detail of commissioning services. The Chair was keen to ensure clarity in this area. Following brief discussion it was noted that the role of an effective PADR process would need to be considered further within the IPF. The Interim CEO concurred that further work to strengthen the IPF would need to be undertaken.</p> <p><b>It was resolved that</b> the Board</p> <ul style="list-style-type: none"> <li>• <b>reviewed</b> the contents of the report and</li> <li>• <b>endorsed</b> the Framework for Integrated Performance reporting for the Health Board</li> </ul>	
<p><b>HB23/219 Framework for approval: Planning Framework</b></p> <p><b>HB23/219.1</b> The Executive Director of Transformation and Strategic Planning presented the item clarifying that alignment with the NHS’s annual framework had also been taken into account. The Board stated the need to ensure capacity and skills were in place to ensure delivery. A discussion ensued on the achievability of the timeline presented and it was agreed that a standard timeline</p>	

<p>would be incorporated which was not swayed with the current slippage issues that caused the timeline to appear tight.</p> <p><b>HB23/219.2</b> The Interim CEO reminded all that the Framework was being developed across the organisation and not only centred around the annual plan to ensure that planning skills were in place across the organisation. It would be key to move the three Frameworks forward together through implementation.</p> <p><b>It was resolved that</b> the Board</p> <ul style="list-style-type: none"> <li>• <b>received</b> the report</li> <li>• <b>approved</b> the Framework for adoption within the Health Board subject to the feedback provided to the Executive Director of Transformation and Strategic Planning</li> </ul>	
<p><b>HB23/220 Corporate Governance Report</b></p> <p><b>HB23/220.1</b> The Acting Board Secretary advised that the latest Standing Orders provided by Welsh Government (WG) had included significant amendments and localised tailored changes would be actioned shortly. The Standing Orders document also included updated Governance and Accountability frameworks for the Joint Committees of the Health Board. (Welsh Health Specialised Services Committee and Emergency Ambulance Services Committee)</p> <p><b>HB23/220.2</b> The Acting Board Secretary stated that the Committee structure would be implemented when sufficient Independent Members had been recruited should the Board approve the proposal outlined. A Board Member stated that Independent Member role adverts did not honestly reflect the time commitment necessary to undertake the full extent of the duties required. The advertised 4 days per month was not an accurate reflection of the time required to attend Board development, workshops, Board meetings, interview panels, Committee meetings and other activities such as preparatory work, and visiting staff and services across the organisation. There was a strong case that this could preclude some candidates coming forward and thereby reflect inequality in the WG recruitment process.</p> <p><b>HB23/220.3</b> The Chair agreed to raise these concerns directly with the Minister for Health and Social Care and emphasised the need to ensure capacity within BCU to service the Committee structure outlined.</p> <p><b>HB23/220.4</b> It was noted that the Audit Chair welcomed the addition of a further Committee due to the size of the organisation. The Interim CEO advised that the Executive Team had been in receipt of Mental Health Act reports whilst the Mental Health Capacity and Compliance Committee had been stood down due</p>	DE



to lack of IM capacity however, it was a high priority to establish the appropriate Committee when sufficient IMs were recruited.

**It was resolved that** the Board

- **received assurance** that the Chair's Action and Common Seals enacted since the previous Health Board meeting were noted in the report.
- **approved** the incorporation and adoption of the model Standing Orders.
- **received assurance** that work was being progressed on the BCUHB specific Schedules of the Standing Orders.
- **approved** the establishment of Committees set out in the Outline Committee Framework.
- **received assurance** that the Outline Committee Framework and the identified next steps would be developed to meet the requirements of the Health Board.

**HB23/220.5 Report of Audit Committee**

**It was resolved that** the Board  
**noted** the report

**HB23/220.6 Report of Remuneration Committee**

**It was resolved that** the Board  
**noted** the report

**HB23/221 ITEMS FOR DISCUSSION/ASSURANCE**

**HB23/222 Financial Performance 2023/24**

**HB23/221.1** The Interim Executive Director of Finance set out the current financial position, highlighting the similar level of deterioration (£5m (cumulatively £20m) on the previous month's forecast. He advised that meetings were taking place to deal with this and how to address the £134m deficit position and gave examples of some of the actions that had been brought in to improve grip e.g. Establishment control group, weekly meetings addressing temporary workforce usage, performance escalation meetings prioritisation. The Interim Executive Director of Finance also set out key savings performance actions being undertaken and the work being undertaken by the Executive Delivery Group to tackle the sizeable challenges ahead. He gave assurance that Audit Wales would be appropriately informed.

**HB23/221.2** The Board requested comparative data on when, during the previous years, it was understood that financial balance could be achieved.

**HB23/221.3** A number of questions were raised by Board members. The Board was keen to understand how it could support the team with its challenges and why some divisions were able to deliver on savings. It was noted that the Executive Team and Executive Delivery Group were looking into how the

RC

<p>challenged Integrated Healthcare Communities (IHCs) could be supported to improve their financial performance. The Interim Executive Director of Finance highlighted the challenges associated with delivering immediate emergency care and the consequent effects on other services, an improved model of how patients were seen needed to be implemented to assist in addressing performance. It was noted that PFIGC had incorporated IHC performance deep dives into its Cycle of Business.</p> <p><b>HB23/221.4</b> The Interim CEO reported that long term work was required to address the significant financial challenges, however a ‘together’ approach was being undertaken. Difficult choices would need to be made and there was a need to address the longer term cultural change required to address spending discipline.</p> <p><b>HB23/221.5</b> The Chair stated that this was a time for leadership. He emphasised the need for BCU staff to receive assurance that these challenges would be met in a collaborative partnership approach. Overspending needed to stop and cash savings needed to be made to address the deficit.</p> <p><b>It was resolved that</b> the Board</p> <ul style="list-style-type: none"> <li>• <b>received</b> and scrutinise the report and</li> <li>• <b>supported</b> the proposed adjustments to the capital programme.</li> </ul>	
<p><b>HB23/223 Integrated Performance Report</b></p> <p><b>HB23/223.1</b> The Interim Executive Director of Finance presented the report advising that the format was being revamped and would take into account feedback provided by colleagues. He drew attention to areas of concern highlighted within the report including urgent care, ambulance handovers, orthodontics, increasing outpatient appointments and dermatology risks.</p> <p><b>HB23/223.2</b> A discussion ensued. In response to questions raised, the Interim CEO advised the improved booking system would be monitored via PFIG Committee moving forward and undertook to arrange for greater detail of Ophthalmology performance to be shared with Board members. She was pleased to note that there had been a significant reduction in ambulance waits at Emergency Departments. The Executive Director of Nursing and Midwifery shared positive news of joint working undertaken by the Interim Executive Director of Operations to address conveyancing from Care Homes to BCU’s front doors.</p> <p><b>HB23/223.3</b> Following concerns raised regarding Estates and Facilities absence rates, the PFIGC Chair undertook to consider this and further detail of all</p>	<p>CEO</p> <p>JB</p>

<p>absence rates at the next PFIG Committee meeting with the Deputy Director of People.</p> <p><b>HB23/223.4</b> The Interim Chief Executive advised that the approved Integrated Performance Framework would provide a greater foundation in improving the Board’s understanding of service performance. The Chair sought assurance that the developing IP report would provide clarity on “What worked and What didn’t work” in future reports to the PFIG Committee.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the report</p>	RC
<p><b>HB23/224 Integrated Quality Report</b></p> <p><b>HB23/224.1</b> The Executive Director of Therapies and Health Sciences presented the report on behalf of the clinical executives. He highlighted the levels of patient safety incidents reported, never events, notable reductions in patient experience concerns, challenging overdue investigations rates and increasing patient feedback reporting which was benefitting learning within BCU services.</p> <p><b>HB23/224.2</b> An update was also provided on the recent Health &amp; Safety Executive prosecution and it was noted that a contravention order had also been served.</p> <p><b>HB23/224.3</b> In the discussion which followed concerns were particularly raised in relation to long investigation times which were detrimental in ensuring learning was disseminated quickly to avoid similar risks being raised for other patients. It was understood that this, and other areas of deep dives suggested, would be explored further through the QSE Committee.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the report</p> <p><b>HB23/224.4 Report of the Quality, Safety and Experience Committee</b> The Committee Chair advised that the Committee would be considering Falls at the next meeting and had also considered two special reviews at a recent development session. Work was ongoing to refine the Committee’s agenda.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the report</p>	
<p><b>HB23/225 Culture, Leadership and Engagement Report</b></p>	



**HB23/225.1** The Deputy Director of People presented the item. The report set out proposals for work to be undertaken within BCU in partnership to understand and improve upon the organisation's culture, leadership and engagement through the Board's active participation as part of addressing WG's special measures. The systemic approach would need to tie in with provision of safe and reliable services to the people of North Wales and be measureable to demonstrate improvement in this critical area.

**HB23/225.2** The Board was extremely pleased to receive the proposals and keen to welcome the strengthening of cultural links with multilingual and Welsh language provision as well as being an organisation that actively demonstrated the importance of learning being implemented and sustained. A discussion ensued which included the effect of the many different forms of prevalent culture on an organisation e.g. compassionate, supportive etc. The Board recognised that it would take patience and resource to ensure long term improved cultural change at all levels.

**It was resolved that** the Board  
**approved** the proposal

#### **HB23/226 Welsh Language Annual Monitoring Report 2022/23**

**HB23/226.1** The Head of Welsh Language Services presented the annual monitoring report which provided detail of the wide scope of activity undertaken by the Welsh Language Team and also an assessment of compliance against Welsh language standards for submission to the Welsh Language Commissioner in the 'More than just words' update report.

**HB23/226.2** In response to the Board's questions, the Head of Welsh Language Services clarified that the number of new learners were for the current year only and did not include previous years. In regard to the discussion on the importance of promoting confidence in speaking the Welsh language at all levels of competency, she was pleased to advise of plans to introduce a role to address this within BCU, through a pilot of the National Welsh Language at Work Plan.

**HB23/226.3** The Board was passionately supportive of all opportunities to encourage staff to be able to speak in Welsh, and other languages, to enable them to provide services to patients and colleagues in their first language. Many examples were discussed, especially patients with dementia. The Chair and Board stated their ambition to be the best in Wales in Welsh language provision for the benefit of the North Wales population.

**It was resolved that** the Board

<ul style="list-style-type: none"> <li>• <b>approved</b> the Annual Report for publication and submission to the Welsh Language Commissioner's Office.</li> <li>• <b>approved</b> the <i>More than just words</i> update report for submission to the Welsh Language Policy Unit at the Welsh Government's Health and Social Services Department.</li> </ul>	
<p><b>HB23/227 Partnerships Report</b></p> <p><b>HB23/227.1</b> The Director of Partnerships, Engagement and Communication presented this item. The report highlighted the discussions and work programmes in the Regional Partnership Board (RPB), Public Service Boards (PSBs) and Shared Services Partnership Committee being key forums where the Health Board meets with partners across North Wales, including the six local authorities, North Wales Fire and Rescue Authority and Natural Resources Wales.</p> <p><b>HB23/227.2</b> Recent areas of focus in the RPB included the Dementia Friendly Communities Scheme, the draft North Wales Together for Mental Health interim strategy and Annual Delivery Plan. In the PSBs, work had recently centred on the Wellbeing Plans and discussions around the inverse care law.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the reports</p>	
<p><b>HB23/228 Joint Committees Report</b></p> <p><b>HB23/228.1</b> The following reports were provided for information: Quality Patient Safety Committee (QPSC) of the Welsh Health Specialised Services Committee (WHSCC), and accompanying WHSCC Services in escalation reports i.e. Burns, Ty Llidiard, Paediatric surgery and Wales fertility institute.</p> <p><b>HB23/228.2</b> The Interim CEO drew attention to the second consultation phase of the Emergency Medical Retrieval and Transfer Services (EMRTS) taking place in the Autumn of the Emergency Ambulance Services Committee (EASC). She advised that the Board would be preparing a response in due course.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the reports</p>	
<p><b>HB23/229 Advisory Fora Reports</b></p> <p>Reports of the activity undertaken at the latest Health Professions Forum (HPF), Stakeholder Reference Group (SRG) and Local Partnership Forum (LPF) were received. The Associate Member (HPF Chair) drew particular attention to the Digital Strategy discussion that had taken place and the potential positive effect on future recruitment.</p> <p><b>It was resolved that</b> the Board <b>noted</b> the reports</p>	



<b>HB23/230 OTHER MATTERS</b>	
<b>HB23/231 Any other urgent business</b>  There was no other business for discussion.	
<b>HB23/232 Date of next meeting</b>  30 November 2023, venue to be confirmed.	
<b>Resolution to exclude the Press and Public</b>  <b>It was resolved that</b> 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	