

POWYS TEACHING HEALTH BOARD

CONFIRMED

MINUTES OF THE MEETING OF THE BOARD HELD ON THURSDAY 22 OCTOBER 2020, AT 10.00AM VIA TEAMS

Present

Vivienne Harpwood Independent Member (Chair)

Carol Shillabeer Chief Executive

Melanie Davies Independent Member (Vice-Chair)

Trish Buchan Independent Member (Third Sector Voluntary)

Susan Newport Independent Member (TUC)
Ian Phillips Independent Member (ICT)

Mark Taylor Independent Member (Capital & Estates)

Tony Thomas Independent Member (Finance)

Matthew Dorrance Independent Member (Local Authority)

Julie Rowles Director of Workforce, OD & Support Services

Jamie Marchant Deputy Chief Executive and Director of

Primary, Community Care and Mental Health

Hayley Thomas Director of Planning & Performance

Paul Buss Interim Medical Director

Claire Madsen Director of Therapies & Health Sciences

Alison Davies Director of Nursing & Midwifery

Pete Hopgood Director of Finance and IT

In Attendance

Rani Mallison Board Secretary

Adrian Osborne Assistant Director (Engagement and

Communications)

Clare Lines Assistant Director (Commissioning

Development)

Katie Blackburn CHC

Elaine Matthews Wales Audit Office

Liz Patterson Corporate Governance Manager
Caroline Evans Head of Risk and Assurance
Josh Thomas IT Network Support Officer

Kara Price Digital Transformation Project Manager

Apologies for absence

Stuart Bourne Frances Gerrard Rebecca Collier Director of Public Health Independent Member (University)

PRELIMINARY MATTERS

RESOLVED THAT due to the unprecedented health emergency of COVID-19, and the clear Public Health instruction to practice social distancing, meetings will run by electronic means as opposed to in a physical location. This decision had been taken in the best interests of protecting the public, staff and Board Members.

The meeting was live-streamed and uploaded to the website after the meeting for viewing on demand.

PTHB/20/76	WELCOME AND APOLOGIES FOR ABSENCE
	The Chair welcomed all participants to the meeting noting that a number of observers were present as outlined in the attendance record. Apologies for absence were noted as recorded above.
PTHB/20/77	DECLARATIONS OF INTEREST
	No new declarations of interest were made.
PTHB/20/78	MINUTES OF MEETING HELD ON 30 SEPTEMBER 2020
	The minutes of the meeting held on 30 September 2020 were received and AGREED as being a true.
PTHB/20/79	MATTERS ARISING
	There were no matters arising from the minutes.
	The Chief Executive provided an update regarding the South Powys Pathways Programme relating to changes to the patient flow for urgent and emergency care around the Heads of the Valleys which affected large parts of south Powys. The changes had been made as a result of bringing forward the opening of the Aneurin Bevan's Grange University Hospital (GUH) as a part of Aneurin Bevan's Covid-19 and Winter planning. Close partnerships had been formed with Aneurin Bevan UHB and Welsh Ambulance Service Trust and Cwm Taf Morgannwg UHB on implementing the required changes. Patient flows in south Powys will generally change from Nevill Hall Hospital to Prince Charles Hospital, Merthyr Tydfil. A Communications Plan had been created and the content of the household drop was being agreed.

Assurance was given that all necessary steps had been taken at this stage and that Independent Members would be kept updated on progress of this change outside of Board. The next Board meeting will take place a few days after the opening of GUH and a comprehensive report would be brought to Board outlining how the risk has been managed and how the first few days of opening had worked. **Action: Chief Executive**

PTHB/20/80

BOARD ACTION LOG

PTHB/20/70 - A deep dive into risk to ascertain if any escalations or de-escalations were required to include the workforce risk - The Board Secretary advised that a paper had been taken to Gold Group outlining the work undertaken to mitigate risk and this would be taken to Performance and Resources Committee. The Risk Register would be brought to Board in November 2020.

ITEMS OR APPROVAL, DECISION OR RATIFICATION

PTHB/20/81

WINTER PROTECTION PLAN (OCTOBER 2020 - MARCH 2021)

The Chief Executive, Director of Planning and Performance and Director of Finance and IT presented the Quarter 3/4 Operational Plan which also responded to the Winter Protection Plan issued by Welsh Government. The report was attached to the agenda and the presentation can be viewed on the recording of the Board meeting which can be accessed on the PTHB website.

The Plan was required to be submitted to Welsh Government on 19th October 2020 and was therefore submitted in draft to allow for any comments Board may wish to make. The Plan had been produced in partnership with colleagues from Powys County Council, the Joint Partnership Board and the Regional Partnership Board.

The framework for the Winter Protection Plan was based on the 'Four Harms'. These were identified as:

- 1. harm from Covid-19 itself,
- 2. harm from non-Covid-19 (e.g. harm from not being able to access services because of the ability of the NHS to respond),
- 3. harm from an overwhelmed NHS system and social care systems, and

Board Minutes Meeting held on 22 October 2020 Status: Approved 4. harm from the wilder societal restrictions and challenges we are living under.

The Chief Executive noted that the 19-day Firebreak national lockdown would start the following day. This was intended to reduce the spread of covid-19 and reduce the pressure on hospitals during the difficult winter period.

The Clinical Response Model had been updated throughout the pandemic along with the Support Services Model. The plan outlined priorities for the next six-months, but referenced longer term objectives as it was expected that planning would be introduced on an annual basis. The first section summarised the position over the first six months of the pandemic. The learning from the Auditor General's Structured Assessment had been incorporated along with a Learning for the Future exercise which included staff feedback. There would be a continuous reflection of the response as the demand increased during winter, with a strong focus on high risk settings, the work of care homes and on implementing mass vaccination across the county.

The Winter Protection Plan was outlined by a five-step approach, it was identified the vital role individuals play in reducing the spread of Covid-19. The importance of self-care alongside the continued support of families and communities within Powys. It was identified that primary care services are crucial, therefore, as demand increases during the winter period it is essential to have more beds in place and there is a large focus on workforce skills and finally the importance of strong relationships with neighbouring acute and specialist care providers.

The provision of essential services was outlined with a focus on the big four and within this a particular focus on mental health due to the increasing impact of the pandemic on the population's emotional health and well-being. The organisation had adapted to new ways of working to ensure the health care system could see a higher number of patients, with the priority of face to face appointments for those with the greatest need. There was a backlog of patients waiting for care and discussions were taking place locally, regionally and nationally to address this. The Winter Protection Plan aimed to remain within the funding allocated for both revenue and capital spend, the confirmed funding of £15.5 million was a direct allocation

and there were a number of National Funding schemes to cover the costs of PPE, TTP, mass vaccination and care homes. The total forecast expenditure regarding the Winter Protection Plan and Covid-19 is £26.5 million. This included the local authority element of TTP costs of approximately £4.8 million.

With reference to page 21 of the Winter Protection Plan and the risk heat map, could the wording of the oxygen supply be clarified?

In terms of the risk heat map, bulk oxygen storage was now in place across the three hospitals sites. Continuous monitoring of the oxygen supply arrangements and how to identify if it was reaching capacity would be necessary, there on going monitoring of the oxygen supply available at the hospitals. The risk is accurately worded and it was expected this will decrease once all three sites are fully operational (Welshpool was nearing completion). The risk in terms of the available capacity would still need continuous assurance that there was adequate monitoring of the oxygen supply when the beds are fully utilised and oxygen was being used on a daily basis.

In respect of workforce the risk register is currently showing amber as a likely risk (a risk likely to happen) and the impact as 2. If it is likely to happen wouldn't the risk be higher?

The Director of Workforce and IT confirmed that the risk was shown as Amber as it was likely to happen, but there was no guarantee it would happen at this time. There were discussions on contingency plans and in terms of the ability to deliver within the plan, it was anticipated it would not impact on the overall ability to deliver. It was monitored very closely via Executive and Gold Committees ensuring that all alternatives are considered as they arise.

The Winter Protection plan for the Quarter 3/4 was APPROVED.

PTHB/20/82

NORTH POWYS WELL-BEING PROGRAMME: PROGRAMME BUSINESS CASE

The Director of Planning and Performance presented the North Powys Well-Being Programme. The report was attached to the agenda and the presentation can be viewed on the recording of the Board meeting which can be accessed on the PTHB website.

The long-term health and care strategy for Powys 'Healthy Caring Powys' set out the priority for three rural regional centres across Powys. This programme is a flag ship programme for the Regional Partnership Board to implement the new Integrated Model of Care in Powys and Newtown was selected to achieve this.

The Health Board, alongside Powys County Council and the Regional Partnership Board approved the Integrated Model of Care presented earlier this year. This would offer a more integrated model with a focus on well-being, early health prevention and providing support which was to be delivered closer to people's homes and communities.

The proposals are for a collaborative, multi-agency, well-being campus for the population for North Powys. The Programme, which was established in 2019 was supported through Welsh Government Transformation funding. The Business Case demonstrated the ambition to bring together partners across Health and Social Care as well as education, housing, community and the third sector. Further opportunity was also available to link and strengthen the model around leisure, Police and Ambulance services. A focus on supporting the economic growth and regeneration within the area which will be in line with National Development Framework.

The Programme Business Case aimed to set out the strategic direction for investment and the benefits it would provide, with a focus on securing capital investment. This Business Case followed the five-case model which set out the strategic, economic, financial and managements arrangement, proposed for the programme going forward.

The Programme supported the delivery of the long-term strategy within Powys and strongly linked to Welsh Government Policy, in particular the contribution across various areas such as education, housing, health and regeneration. There was also a strong focus on the Wellbeing of Future Generations Act and how to build a sustainable model for care for future generations. In addition, there has been a strong focus on co-production with partners and the public.

Although the focus of this report was financial, assurance was given that the North Powys Well-being Programme was supporting the implementation of new ways of working.

The core aim of this programme was to provide significantly improved and advanced local services delivered from a single location within sustainable and 'fit for purpose' accommodation. This approach would maximise efficiency, integration and potential for innovation across the sectors. It is a different way of working which fits the rural context. The location which had been identified for development has the highest population, there are high levels of health and economic deprivation which makes Newtown a key area of focus. This would also be an opportunity to mitigate against the effects of changes in health arrangements across the borders. A number of sites had been appraised and the proposed site was the highest scoring option. The site was owned by Powys County Council who had agreed the proposals at Cabinet this week.

Assurance was given that the site was large enough to accommodate the requirements of the programme.

The Programme Business Case was the overarching process by which the programme can progress. Subsequent to this would be a series of Strategic Outline Cases for individual parts of the programme which can be progressed independently of each other,

The feasibility study had been completed, and the model of care has been developed and approved. This was based on a detailed population needs assessment and significant engagement assessment. The next stage of development would be design details which would include the input of the workforce staff, clinical, professional service users, public and stakeholder involvement.

The detailed design of the facilities and the capital investment will be developed to respond to requirements of the model and to serve the population of North Powys.

The Chief Executive recalled when this process had started the views of hundreds of people across Powys had been sought. People wanted joined up care, as much as possible to be done close to home, to have a focus on health and not just ill-health and it was hoped that this reflected these desires. This was a once in a generation opportunity to create a fit for the future facility. There were risks as elections for Welsh Parliament would take place in May 2021 and it was important to submit this for signoff well in advance of these elections.

The Vice-Chair advised that overview arrangements had been strengthened for this Programme with four representatives appointed from Powys County Council, four from Powys Teaching Health Board and four from the third sector which would allow for greater assurance going forward.

How will the Covid-19 restrictions affect the future development of this plan long-term? In particular, the difficulties that are faced around public consultation, in education and in leisure facilities.

The Business Case included learning that had taken place since the pandemic and there would be an opportunity during the detailed design stage to revisit this and ensure that any further learning was considered.

This was very much built for the future and with the longterm in mind, it needed to be 'fit for purpose' after the pandemic.

North Powys Well-Being Programme Business Case was APPROVED.

PTHB/20/83

LLANDRINDOD WELLS WAR MEMORIAL HOSPITAL, PHASE 2: PROGRAMME BUSINESS CASE

The Director of Planning and Performance presented the Phase 2 Business Case at Llandrindod Wells War Memorial Hospital.

The report was attached to the agenda and the presentation can be viewed on the recording of the Board meeting which can be accessed on the PTHB website.

There had recently been investment of £8 million in Llandrindod Wells Hospital site, which has been identified as one of the regional rural centres. This has supported the delivery of care closer to home, for example, better improvements to dental facilities, x-ray, out-patients,

endoscopy, the birthing unit and the work on renal dialysis. There have been large amounts of positive feedback despite delays and disruptions.

The efficiency and sustainability of the part of the site which had been upgraded had improved as a result of the initial investment which had addressed some of the maintenance backlog. However, the rest of the hospital site contained a significant backlog of maintenance issues and there was a need to make sure that the service model could be developed further to provide the right model moving forward. It was important to emphasise that this business case would be supporting de-carbonisation and will be highlighted to the Welsh Government.

There are four key packages, the first sets out the works plan to complete the front block; the second package is the remaining part of the hospital; the third deals with adjacent properties and the final package is based on the external works to heating and infrastructure elements that are outside the hospital site but ensure that the services can continue to provide care.

The plan is to submit the Programme Business Case and first Business Justification Case to ensure this programme of work can start promptly. The estimated time for completion is a few years which is subject to financial capital availability and how the detailed design is managed to avoid prolonged disruption on services. It would be necessary to submit a series of Business Justification Cases to cover the four packages of work.

A key benefit to this business case is the Rural Regional Centre will enable more services available in Powys. This would result in better patient care locally, due to accessibility and the delivery services within county when it is safe and appropriate to do so. This would result in the reduction of commissioning costs in the long-term.

The Financial Case was outlined for all four packages to be in the region of £11-14 million. For each Business Justification Case detailed financial cases would be submitted.

Page 85 of the report details the use of advisors. It will be important to ensure that the use of digital technology is

driven by the clinical requirements of people rather than the technology itself.

Whilst support has been received from the IT department it is important to ensure that this is led by the requirements of the service rather than the availability of technology. This will be reflected upon and reviewed.

Llandrindod Wells War Memorial Hospital Programme Business Case for phase 2 and submission of the Business Case to Welsh Government was APPROVED.

ITEMS FOR DISCUSSION	
	There were no items for discussion.
OTHER MATTERS	
PTHB/20/84	ANY OTHER URGENT BUSINESS:
	There was no other urgent business.
PTHB/20/85	DATE OF THE NEXT MEETING:
	25 November 2020, 10:00 via Teams