

POWYS TEACHING HEALTH BOARD

CONFIRMED

MINUTES OF THE MEETING OF THE BOARD

HELD ON WEDNESDAY 24 MAY 2023

VIA TEAMS

Present

Present	
Carl Cooper	Independent Member (Chair)
Kirsty Williams	Independent Member (Vice Chair)
Hayley Thomas	Interim Chief Executive
Chris Walsh	Independent Member (Local Authority)
Mark Taylor	Independent Member (Capital & Estates)
Ronnie Alexander	Independent Member (General)
Simon Wright	Independent Member (University)
Pete Hopgood	Director of Finance and IT/Interim Deputy Chief Executive
Claire Madsen	Director of Therapies and Health Sciences
Debra Wood-Lawson	Director of Workforce and OD
Joy Garfitt	Interim Director of Operations/Community and
	Mental Health
Kate Wright	Medical Director
Mererid Bowley	Director of Public Health
Stephen Powell	Interim Director of Performance and
	Commissioning
In Attendance	
Helen Bushell	Director of Corporate Governance / Board
	Secretary
Marie Davies	Deputy Director of Nursing and Midwifery
Katie Blackburn	Regional Director Llais Powys
Liz Patterson	Interim Head of Corporate Governance

Interim Corporate Governance Manager

Attendees for item 1.3 and 2.3 only

Dr Adam Pearce

Stella Parry

Service Lead for Welsh Language and Equalities

Attendees for item 2.1 only

Adrian Osborne	Assistant Director Engagement and
	Communication
Jayne Lawrence	Assistant Director of Primary Care

Apologies for absence

Independent Member (Trade Union)
Independent Member (ICT)
Independent Member (Third Sector)
Independent Member (General)
Independent Member (Finance)
Director of Nursing and Midwifery
Associate Member (Director of Social Services
Powys County Council)

PRELIMINARY MATTERS	
PTHB/23/01	WELCOME AND APOLOGIES FOR ABSENCE
	The Chair welcomed all participants to the meeting,
	Apologies for absence were noted and recorded as above.
PTHB/23/02	DECLARATIONS OF INTEREST
	The following declarations of interest were made in relation to agenda item 2.1 (Belmont Branch Surgery Gilwern closure application):
	 Ronnie Alexander, Independent Member (General) declared that several family members were registered with Crickhowell Group Practice, therefore it was he would not participate in the agenda item;
	 Kate Wright, Medical Director declared that she was a patient of Crickhowell Group Practice and would therefore limit her contribution to the item to that of her professional capacity as Medical Director; and
	 Katie Blackburn, Regional Director Llais declared that she was a patient of Crickhowell Group Practice and would therefore limit her contribution to the articulation of the perspective of Llais.
PTHB/23/03	EXPERIENCE STORY
	a) Patient Experience Story
	The Deputy Director of Nursing introduced the item which provided an overview of Monty's Story, a young person in

	Powys with complex needs who had recently received
	treatment at the Grange University Hospital. An overview of the challenges faced, and the steps taken to support good patient experience was provided.
	The Board welcomed the presentation and expressed their thanks to Monty and his family for sharing their experience.
	b) Staff Experience Story
	The Director of Workforce and OD introduced the item and welcomed the Service Lead for Welsh Language and Equalities to the meeting. The presentation provided an anonymised account of lived experience of racism within the NHS. The story provided helpful experience in advance of the Anti- Racism Plan, which was due for consideration for approval later on the agenda.
	The Board welcomed the presentation and wished to extend their thanks to the member of staff for sharing their story, from which the Board had taken significant learning.
	The Service Lead for Welsh Language and Equalities left the meeting.
PTHB/23/004	UPDATE FROM THE CHAIR
	The Chair presented his update report.
	UPDATE FROM THE VICE CHAIR
	The Vice Chair presented her update report.
	UPDATE FROM THE CHIEF EXECUTIVE OFFICER
	The Chief Executive presented the report and drew attention to the following matters:
	 Changes to Executive Team Portfolios Update from Joint Executive Team meeting with Welsh Government Health and Care Research Wales Hosting Agreement NHS75 Duty of Quality and Duty of Candour Recent success at National Awards
PTHB/23/05	ASSURANCE REPORTS OF THE BOARD'S COMMITTEES
	PTHB COMMITTEES The following Chair's Assurance Reports were received:

Patient Experience, Quality and Safety Committee
The Committee Chair presented the item which provided an overview of matters considered by the Patient Experience, Quality and Safety Committee on 25 April 2023. The Committee Chair wished to highlight the following matters for the attention of the Board:
 Maternity Services have been de-escalated locally to business as usual; the Patient Experience, Quality and Safety Committee have concerns regarding capacity constraints in respect of the use of the Civica System in relation to patient experience. The Committee will continue to review and update at the relevant time.
The Board NOTED the report.
Audit, Risk and Assurance Committee
The Committee Chair presented the item which provided an overview of matters considered by the Audit, Risk and Assurance Committee on 21 March 2023 and an interim summary of matters considered on 16 May 2023. The Committee Chair wished to highlight the following matters for the attention of the Board:
 the Audit, Risk and Assurance Committee Annual Report 2022/23 was approved by the Committee on 16 May 2023; the final Audit Wales Structured Assessment 2022/23, which was considered by the Committee on 16 May 2023; the final Annual Audit Report 2022 was received by the Committee on 16 May 2023.
The Board NOTED the report.
Delivery and Performance Committee
The Committee Chair presented the item which provided an overview of matters considered by the Delivery and Performance Committee on 2 May 2023.
The Committee Chair wished to highlight the following matter for the attention of the Board:
 the Delivery and Performance Committee will continue to monitor progress against the Records Management

	Action Plan by way of a scheduled mid-year review against outstanding actions.	
	The Board NOTED the report.	
	Executive Committee	
	The Committee Chair presented the item which provided an overview of matters considered by the Executive Committee on 5 April, 19 April and 3 May 2023.	
	The Board NOTED the report.	
ITI	ITEMS FOR APPROVAL/RATIFICATION/DECISION	
PTHB/23/06	BELMONT BRANCH SURGERY GILWERN CLOSURE APPLICATION	
	The Assistant Director of Communications and Engagement and the Assistant Director of Primary Care joined the meeting.	
	The Chair introduced the item and recognised the scale of work undertaken in the proceeding months to fully inform the decision making process of the Board. It was noted that questions from the public had been invited via the Health Board's communication channels and that no questions had been received in response to the invitation.	
	It was reported that in November 2022 the Health Board received an application from Crickhowell Group Practice to close their Belmont Branch Surgery premises in Gilwern to enhance future sustainability of the practice. Over recent years the Practice had taken various measures to maintain its sustainability and to avoid submitting a formal sustainability application to the Health Board. A review of the Sustainability Assessment matrix over recent years identified the practice moving from a low risk to a medium risk of unsustainability, and to an assumed position of high-risk unsustainability by January 2024 if GP replacements are not found with willing to work across a multi-site practice.	
	 A further overview of the following matters was provided: Current access model and access rates; 	
	 Impact the closure will have on patients and services at the main site; 	
	Main Site Accommodation;	

	 Engagement with Key Stakeholders;
	 Options Considered to Maintain General Medical Services (GMS); and
	 Equality Impact Assessment and proposed mitigations if PTHB accepts the closure request
	Assurance was provided in relation to the process that had been followed in accordance with the PTHB Branch Surgery Closure Process, including the evidence collated in response to the application received, and a report on the engagement process to support conscientious consideration and informed decision-making by the Board.
	The following comments were made:
	• The Medical Director recognised the small amount of provision provided at the branch surgery and shared her comments in relation to professional safety at the branch surgery as a potential result of lone working and sole practitioner sessions.
	• The Regional Director of Llais reported that she had worked closely alongside her Llais colleague in Aneurin Bevan but was representing Llais at this Board meeting as the branch surgery is part of the Powys based practice. The engagement had been robust and comprehensive, and thanks were expressed to the engagement team for both the online, and face to face engagement in Gilwern which had been very well attended by a range of backgrounds and ages.
	It was highlighted that a 25% response rate had been returned to the comprehensive engagement process which demonstrated the strength of community voice in relation to the proposed closure. Two examples of recent branch surgeries which had remained open were given. It was reported that a driving principle for Llais was more care closer to home, important for both Llais and the Health Board. Llais were of the view that the reason for the proposals related solely to the desire to sell the surgery, and concern was expressed in relation to other branch surgeries in Powys given recruitment and sustainability issues.
	Llais were of the view that pre-covid services should be reinstated at the branch surgery.
	In relation to the responses, concern was raised in relation to the potential travel impact for patients of the

practice, compounded by the aging population in the area. Although distances were short, public transport travel times were lengthy. It was noted that a mitigation plan had been developed. However, it was suggested that a conclusion date of October for the mitigation plan was inappropriate given the proposed closure date of November. It was suggested that a review of this timeline be undertaken to ensure the mitigation plan could be in place well in advance of the closure.
Independent Members sought assurance by asking the following questions:
Recognising the recommendation that no alternative could be identified, was the Health Board confident that no further support could be provided in relation to transport provision to support the changes?
The Assistant Director of Primary Care recognised the challenges in relation to public transport from Gilwern to Crickhowell. It was however noted that regular public transport was available from Gilwern to Abergavenny, and Brynmawr several times a day. There were several practices with open lists in both locations for which Gilwern based patients could register should they choose too.
Would it be possible to receive ongoing assurance as a Board in relation to the effectiveness of the mitigations, including confirmation of mitigations being implemented prior to closure?
The Assistant Director of Engagement and Communications recognised the complexity of the issues under discussion and suggested that an update report in relation to the progress of mitigations could be brought forward to the next meeting of the Board for further consideration, with further updates on progress every two months thereafter.
Action: Director of Finance and IT
Was it felt that the application would have been considered in any way differently had the practice in question resided wholly in Powys?
The Chief Executive confirmed that there was no concern that the outcome of considerations would have been any different

if the practice had been wholly within Powys, though it was recognised that the process has been slightly different due to the cross border and partnership working element with Aneurin Bevan University Health Board (ABUHB).
Noting the issues raised in relation to lone working, would there be any potential to provide some health care provision in another community location?
The Medical Director noted that health care provision would still be available within the community via District Nurses and the Pharmacy located within the village.
Had the provision for the sheltered housing accommodation Coed Uchel been appropriately considered?
The Medical Director confirmed that the provision for Coed Uchel would not be affected by the closure, as care was already provided by the Main Practice in Crickhowell and District Nurses under the current arrangements.
Was there a requirement for a Board decision prior to the implementation of the mitigating actions, or could, potentially, the Board test the mitigation in place prior to making a decision?
The Chief Executive recognised the concern in relation to the leading time and implementation of mitigations. However, it was recognised that the Health Board had suggested a timeline of six months, which was longer than the standard timeline in recognition of the complex relationship with ABUHB, Monmouthshire County Council and the Community.
The Chief Executive noted that there had been some reference to potential for the Board decision to set a precedent in relation to future branch practice closure applications. It was confirmed that each Branch Practice Review process is entirely unique and would be considered on an individual basis, therefore there would be no implied precedent as a result of the Board decision in relation to this particular matter.
The Chair welcomed the debate and summarised the discussion, the following decision was agreed including an amendment to the original recommendation in relation to the mitigation plan. The Board:

	 RECEIVED and NOTED the Engagement Report (Appendix 2), the Equality Impact Assessment (Appendix 3) and the response from Powys CHC/Llais and Gwent CHC/Llais (Appendix 4 and 5). APPROVED the recommendation from the Branch Practice Review Panel to accept the application from Crickhowell Medical Practice to close their premises in Gilwern, with a planned closure date of 30 November 2023.
	 AGREED that the proposed mitigations (Appendix 6), which were due to be further developed in continued partnership with ABUHB following approval, would return to the Board in July 2023 for further consideration;
	 RECEIVED and NOTED the assurance provided against the Branch Surgery Closure Process.
	The Assistant Director of Communications and Engagement and the Assistant Director of Primary Care left the meeting.
PTHB/23/07	INTEGRATED PLAN 2023/24 SUPPLEMENTARY SUBMI SSION The Chief Executive presented the item which noted that the Health Board is required to submit a three year Integrated Medium Term Plan (IMTP) to Welsh Government (WG) as part of its statutory duty under the NHS Finance (Wales) Act 2014. The Health Board is unable to achieve a balanced three year plan and submitted a 'working draft' supported by the Board on 30 March 2023 to Welsh Government on 31 March 2023. Given the scale of delivery and financial challenge, the yearend forecast deficit position for 2023/2024 is £33.5 million inclusive of a £7.5 million savings target. Despite the challenging context, the plan commits to achieving all 16 ministerial priorities as a provider. All Welsh Health Boards had received feedback on their plan from Welsh Government and have been asked to review components of the plan submitted. The Health Board has reviewed the submission based on the feedback received at a scrutiny meeting held on 2 May and during the Joint Executive Team with Welsh Government on 9 May 2023. The Health Board has considered and discounted a range of options to achieve balance in year as action of this nature would slow down recovery and result in negative service access impact. The Health Board has set an ambitious savings target of £7.5 million and will be making minor adjustments to the plan. The report provided the Board with updated information

in relation to the Integrated Plan for 2023 – 2026, for approval, ahead of submission to Welsh Government by 31 May 2023.
Independent Members sought assurance by asking the following questions:
Was there any potential additional funding anticipated in-year to support the position? The Director of Performance and Commissioning confirmed that the revised performance trajectories are based on the assumption that the health board will secure £2.8M funding from the Welsh Government's £50M Recovery Funding.
Could the way in which judgements, in relation to elements of the plan strongly influenced by partners, e.g., Delayed Transfers of Care, have been made be articulated?
The Director of Planning advised that the judgements had been reassessed from the draft submission and where for example there had been delays to treatment times where Powys patients were on commissioned partners lists, if these patients had been repatriated the breaches would be noted if they were as a result of long waits from commissioned partners.
Could clarity be provided in relation to how the Board would monitor performance going forward? The Chief Executive confirmed that performance reporting would be submitted to the Board on a bi-monthly basis, this would be complimented by regular reporting to, and consideration by, the Delivery and Performance Committee.
 The Board: NOTED the requirements for resubmission of elements of the Plan to Welsh Government by 31 May; APPROVED the updated supplementary information for inclusion in a revised submission noting the plan remains a Working Plan, for submission to the Welsh Government, recognising that further work will be required, to achieve a fully compliant Integrated Medium Term Plan in relation to the financial breakeven duty over a longer planning period; RECOGNISED that further work will continue, both locally and nationally, on options to improve the financial plan position; and

	 ENDORSED an approach that outlines further consideration to take place at the Board in terms of modification of the current Plan, considering options to further progress compliance with the financial duty. 	
PTHB/23/08	2023/24 ANNUAL DELIVERY PLAN The Chair introduced the item by providing public reassurance that significant time had been spent considering the detail of the plan as a Board at a recent Board Development session.	
	The Chief Executive presented the 2023/24 Delivery Plan which details the actions to be taken during the year. It was noted that the Delivery Plan is a key planning and operational delivery plan for the Health Board and part of the overall suite of planning documents required as part of the NHS Wales annual planning framework. This Annual Delivery Plan 2023- 24 provides the detailed annual priorities that underpin the strategic priorities set out in the Integrated Plan 2023-26. It was reported that the collective ambition for 'A Healthy Caring Powys' which is shared across key partners in Powys remains strong and sits at the heart of this plan.	
	Independent Members sought assurance by asking the following questions:	
	Was there confidence that the actions included could be delivered in-year for example in endoscopy, given the fragility within the service?	
	The Chief Executive confirmed that more detailed plans are in place to support delivery for some areas, though judgements had been made in relation to the level of detail included in the annual delivery plan. It was confirmed that a more detailed diagnostic plan had been developed and would report through to the Board separately.	
	The Board DISCUSSED and APPROVED the Annual Delivery Plan and NOTED the associated risks to delivery.	
PTHB/23/09	ANTI RACISM PLAN <i>The Service Lead for Welsh Language and Equalities re-joined</i> <i>the meeting.</i>	

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The Director of Workforce and OD presented Powys Anti - Racism action plan which had been developed in response to the objectives set within Welsh Government's Anti-Racist Wales Action Plan. Progress on the plan would be reported to both the Board and Welsh Government via the existing Equality Annual Report process, as per Welsh Government guidance. It was noted that the Equality Annual Report for 2022-23 would be the first to record progress on the Anti- Racist Action Plan.
Independent Members sought assurance by asking the following questions:
Could assurance be provided that similar action plans were in place or under development for other under-represented groups? The Director of Workforce and OD confirmed that the plan was inclusive of under-represented groups within the Health Board and also formed part of the Health Board's wider approach to Equality, Diversity and Inclusion.
It was noted that some elements of the plan were incomplete, could it be confirmed that the only elements outstanding were those were awaiting further guidance from Welsh Government? The Service Lead for Welsh Language and Equalities confirmed that the plan would be further developed as further
national guidance becomes available. Was there any intention of including a statement in relation the Health Board's plan for Anti-Racism in the induction
<i>process?</i> The Director of Workforce and OD confirmed that the Health Board's stance in relation to racism would be included in the induction process, a pre-enrolment tool was also under development to ensure that any new starters are full informed of the Health Board's anti-racism culture and identity.
Was it felt that the measures in making the Board diverse were sufficiently robust? The Director of Corporate Governance recognised there was further work to do in relation to the diversity of the Board and confirmed work was due to be undertaken to consider diversity in the public appointment recruitment process for the future pipeline of Board members. It was also noted that Powys was fully supportive of the aspiring Board Members

	programme. However, it was recognised that further work was required in this area.	
	Has any consideration been given to the impact on Equality, Diversity and Inclusion on healthcare outcomes? The Director of Public Health confirmed that the Health Board works closely with Public Health Wales who monitor a broad spectrum of specific groups in relation to a range of health and care inequalities.	
	The Board APPROVED the Anti-Racist Wales Action Plan.	
	The Service Lead for Welsh Language and Equalities left the meeting.	
	DIRECTOR OF CORPORATE GOVERNANCE/BOARD	
PTHB/23/10	SECRETARY REPORT	
	The Director of Corporate Governance presented the item which provided an overview of a series of updates and requested approval of various decisions in relation to Board related corporate governance.	
	 The Board: APPROVED the temporary change to the Model Standing Orders regards section 3.1; APPROVED the revised Scheme of Delegation (in relation to Executive Directors, Other Directors and Officers); APPROVED the Committee work programmes for 2023/24 for the following Board Committees: Audit and Risk Assurance Delivery and Performance Patient Experience, Quality and Safety Planning, Partnerships and Population Health Workforce and Culture NOTED that work programmes for the following groups would be presented to the Board in July 2023: Executive Committee Remuneration and Terms of Service The Board NOTED the terms of reference for all Board Committees, together with Committee membership, would be presented to the Board in July 2023 for review; and NOTED that the frequency of Delivery and Performance Committee meetings had been increased from quarterly to bi-monthly. 	

PTHB/23/011	WHSSC STANDING ORDERS	
	The Director of Corporate Governance provided an update on	
	the WHSSC Governance and Accountability Framework for	
	information, assurance and approval.	
	 The Board: NOTED the report; APPROVED the proposed changes to the Standing Orders (SOs) and include as schedule 4.1 within the respective Health Board SO's; APPROVED the proposed changes of the Memorandum of Agreement (MoA) and Hosting Agreement in place with CTMUHB, and include as schedule 4.1 within the respective Health Board SO's; and APPROVED the proposed changes to the financial scheme of delegation and financial authorisation matrix updating the Standing Financial Instructions (SFIs). 	
PTHB/23/012	MINUTES OF MEETINGS HELD ON 29 MARCH 2023	
	The minutes of the meeting held on 29 March 2023 were	
	APPROVED as a true and accurate record.	
PTHB/23/13	BOARD ACTION LOG	
	The Board RECEIVED and DISCUSSED the Action Log.	
	ITEMS FOR BOARD ASSURANCE	
PTHB/23/14	FINANCE AND PERFORMANCE:	
	INTEGARTED PERFORMANCE REPORT MONTH 12	
	The Director of Performance and Commissioning presented the item which provided an update on the latest available performance position for Powys Teaching Health Board against NHS Wales Performance Framework up until the end of March 2023 (month 12).	
	FINANCE REPORT 2022/23, MONTH 12	
	The Director of Finance and IT presented the item which confirmed the actual position for the year of a £7.0m revenue overspend and a £0.1m capital underspend. It was noted that the areas of revenue overspend which were of concern continued to be:	
	 growth in CHC costs; 	

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	 ongoing increase above historic trend in variable pay; and
	 underlying secondary healthcare commissioning pressures.
	It was confirmed that the areas of concern all feature in the financial plan for 2023/24 with action plans under development to help mitigate the position.
	FINANCE REPORT 2023/24, MONTH 1
	The Director of Finance and IT presented the item which provided a high level summary of the revenue financial position. A further detailed report containing trend analyses would be provided from month 2 onwards. It was noted that at Month 01, there was a £2.738m overspend. This comprised a twelfth of the planned deficit £2.790m less an operational underspend of £0.052m.
	Independent Members sought assurance by asking the following questions:
	It was queried whether there was any potential for reporting on matters such as Dental, per 1,000 population to enable Members to identify areas of concern?
	It was agreed that a review of metrics and potential benchmarking would be undertaken to inform future reports.
	Action: Director of Finance and IT/Director of Performance and Commissioning.
	It was queried whether the trend of sickness absence was up or down, and whether it was felt that staff were being appropriately supported for returning to work?
	The Director of Workforce and OD confirmed that sickness absence had trended downwards for the last four data points, and that significant progress had been made in the reduction in wait time for accessing occupation health services.
	The Board DISCUSSED and NOTED the Finance and Performance Reports.
PTHB/23/15	CORPORATE RISK REGISTER, MARCH 2023
	The Director of Corporate Governance presented the item which provided the March 2023 version of the Corporate Risk Register. Each risk had been reviewed and updated by the lead executive since the last meeting of the Board. No

	changes to risk descriptions or scoring had been suggested as a result of the review. It was reported that a review of the register was currently underway to reflect the updated Integrated Plan. It was anticipated that a revised register would be brought forward to the next meeting of the Board.	
	The Board NOTED that CRR 009, which related to Cyber Security would be considered in the In-Committee session due to the confidential nature of its content.	
	The Board REVIEWED and ENDORSED the March 2023 Corporate Risk Register.	
PTHB/23/16	ASSURANCE REPORT OF THE BOARD'S PARTNERSHIP ARRANGEMENTS AND JOINT COMMITTEES	
	The Chief Executive provided an update to the Board in respect of the matters discussed and agreed at recent partnership board meetings, including the following:	
	 NHS Wales Shared Services Partnership Committee (NWSSPC); 	
	Powys Public Services Board (PSB);	
	 Regional Partnership Board (RPB); and 	
	Joint Partnership Board (JPB)	
	The Board RECEIVED and NOTED the updates provided.	
	JOINT COMMITTEES	
	The Chief Executive presented the item which provided an update to the Board in respect of the matters discussed and agreed at recent meetings of the Joint Committees of the Board:	
	 Welsh Health Specialised Services Committee (WHSSC); and Emergency Ambulance Service Committee (EASC) 	
	The Board NOTED the report.	
PTHB/23/17	ASSURANCE REPORT OF THE LOCAL PARTNERSHIP FORUM	
	The Director of Workforce and OD presented the item which provided an update on the work of the Board's Local Partnership Forum since the last meeting of the Board.	

	The Board DISCUSSED and NOTED the Report of the Board's Local Partnership Forum.	
PTHB/23/18	COMMUNITY HEALTH COUNCIL (CHC) TRANSFER TO LLAIS	
	The Director of Workforce and OD presented the item which provided assurance in relation to the successful transfer of the Community Health Councils Wales function, staff and resources from Powys Teaching Health Board to 'Llais', a newly created Welsh Government Sponsored Body.	
	The Board took ASSURANCE that the Health Board had discharged its duties and managed a smooth transition from the CHCs to Llais.	
PTHB/23/19	REPORT OF THE REGIONAL DIRECTOR OF LLAIS	
	The Regional Director of Llais presented her first report to the Board, which focused on the citizens and community voice heard during the reporting period. Feedback in relation to the report was welcomed and it was reported that work was ongoing with the Director of Corporate Governance in relation to opportunities as a result of new ways of working.	
OTHER MATTERS		
PTHB/23/20	ANY OTHER URGENT BUSINESS	
	No other urgent business was raised.	
PTHB/23/21	DATE OF THE NEXT MEETING:	
	26 July 2023, via Microsoft Teams	
РТНВ		
PTHB	The following motion was passed:	
PTHB IC/23/22	The following motion was passed: Representatives of the press and other members of the public shall 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.	
	Representatives of the press and other members of the public shall 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	
IC/23/22 Present	Representatives of the press and other members of the public shall 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. Chair Interim Chief Executive Vice Chair Independent Member (University)	

Mark Taylor	Independent Member (Capital & Estates)
Stephen Powell	Interim Director of Performance &
	Commissioning
Kate Wright	Medical Director
Claire Madsen	Director of Therapies & Health Sciences (for
	items 5.3 and 5.4)
In Attendance	
Helen Bushell	Director of Corporate Coverpance
Michelle Kirkham	Director of Corporate Governance Professional Head of Radiography (item 5.3)
Liz Patterson	Interim Head of Corporate Governance
Observers to item (item	
5.3)	National Programme Lead (DHCW)
Gareth Cooke	SME Lead (DHCW)
John Collins	Consultant Radiologist (DHCW)
Sian Phillips	Finance Lead (DHCW)
Grant Griffiths	

Apologies for	r absence		
Chris Walsh		Independent Member (Local Authority)	
Tony Thomas		Independent Member (Finance)	
Jennifer Owen	Adams	Independent Member (Third Sector Voluntary)	
Cathie Poynto	n	Independent Member (Trade Union)	
Ian Phillips		Independent Member (ICT)	
Rhobert Lewis		Independent Member (General)	
Debra Wood L		Director of Workforce, OD & Support Services	
Claire Roche		Director of Nursing & Midwifery	
Pete Hopgood		Director of Finance and IT	
Mererid Bowle		Interim Director of Public Health	
	<i>.</i>		
PTHB	WELCOME A	AND APOLOGIES FOR ABSENCE	
IC/23/23	The Chair we	lcomed all participants to the meeting. Apologies	
	for absence v	were received as recorded above.	
РТНВ	DECLARATI	ONS OF INTEREST	
IC/23/24	No interests	were declared in addition to those already	
	declared in the published register.		
РТНВ	RADIOLOGY INFORMATICS SYSTEM PROGRAMME		
IC/23/25			
10/23/23	 (RISP) – FULL BUSINESS CASE Rationale for item being held in private: Commercial in Confidence. The Director of Therapies and Health Sciences presented the paper which gave a briefing on the RISP full business case, highlighted the current situation and benefits of RISP to Powys patients and any associated risks. The Board: 		
	Progra A) • APPRC	OVED the Radiology Informatics System Imme (RISP) Full Business Case (FBC) (Appendix OVED the Programme Team to proceed to	
		ement of the preferred solution	
	 NOTED the need for additional work to secure capital funding for the neurophysical 		
	funding for the new equipment		
		attendees left the meeting:	
	 Michelle Kirkham, Professional Head of Radiography Gareth Cooke National Programme Lead (DHCW) 		

	John Collins SME Lead (DHCW)	
	 Sian Phillips Consultant Radiologist (DHCW) 	
	Grant Griffiths Finance Lead (DHCW)	
РТНВ	NON EMERGENCY PATIENT TRANSPORT – APPROVAL TO	
IC/23/26	TRANSFER TO WAST	
10/23/20		
	Rationale for item being held in private: Commercial in	
	Confidence.	
	The Director of Therapies and Health Sciences presented the	
	report which sought Board approval for the novation of the	
	Health Board's existing Hereford and Shropshire area Non-	
	Emergency Patient Transfer Service (NEPTS) to WAST on 1	
	July 2023 under the national commissioning approach of the	
	Emergency Ambulance Service Committee.	
	The Board:	
	APPROVED the novation of PTHB's existing Hereford and	
	Shropshire area Non-Emergency Patient Transport	
	Service (NEPTS) contracts to WAST on 01 July 2023	
	under the national commissioning approach of	
	Emergency Ambulance Service Committee (EASC).	
	The Director of Therapies and Health Sciences left the meeting	
	15.15	
	REMUNERATION AND TERMS OF SERVICE COMMITTEE	
PTHB	ANNUAL REPORT	
IC/23/27		
	Rationale for item being held in private: The item is the	
	Annual Report of a Board Committee that is held in private.	
	A maar Report of a board committee that is field in private.	
	The Board:	
	RECEIVED the Committee Annual Report for 2022/23	
	• RECEIVED the committee Annual Report for 2022/23 summarising the key areas of business activity	
	undertaken;	
	Took ASSURANCE that the Committee is fit for purpose	
	and operating effectively in fulfilling its terms of	
	reference.	
PTHB	MINUTES OF PREVIOUS MEETING 29 MARCH 2023	
IC/23/28	The minutes of the meeting held on 29 March 2023 were	
	APPROVED.	

РТНВ	CORPORATE RISK REGISTER (CYBER SECURITY)			
IC/23/29	Rationale for item being held in private: to avoid providing information in the public arena which could lead to potential harm to the organisation.			
	The Director of Finance and IT advised that the risk and likelihood for risk CRR 009 had been recommended for rescoring.			
	Could the risk score be reported publicly with the detail of mitigations kept confidential? The Director of Corporate Governance advised this would be put in place.			
	The Board REVIEWED and ENDORSED the amendment to ris			
	The amended risk CRR 009 is as follows:			
	Corporate Risk Rating			
	CRR 009Current Score:Risk Description: A cyber- attack results in significant disruption to services andCurrent Score: L4 x 15 = 20			
	quality of patient care $4 \times 3 = 12$			
PTHB	ANY OTHER URGENT BUSINESS			
IC/23/30	The Chair provided a short update in relation to the COVID- Public Inquiry with regards to module 2B and module 3.			