

**POWYS TEACHING HEALTH BOARD
DELIVERY & PERFORMANCE COMMITTEE**

CONFIRMED

**MINUTES OF THE MEETING HELD ON TUESDAY 28 FEBRUARY 2023
VIA MICROSOFT TEAMS**

Present:

Mark Taylor	Independent Member (<i>Chair</i>)
Ronnie Alexander	Independent Member
Kirsty Williams	Independent member
Cathie Poynton	Independent Member
Rhobert Lewis	Independent Member
Tony Thomas	Independent Member

In Attendance:

Hayley Thomas	Deputy Chief Executive and Director of Primary, Community Care and Mental Health
Stephen Powell	Director of Planning and Performance
Pete Hopgood	Director of Finance & Information Technology (IT)
Debra Wood-Lawson	Director of Workforce and Organisational Development
Kate Wright	Medical Director
Helen Bushell	Director of Corporate Governance (to item 2.3)
Jamie Marchant	Director of Environment
Hywel Pullen	Assistant Director Finance
Jayne Lawrence	Assistant Director Primary Care (for item 2.2a)
Jacqueline Seaton	Chief Pharmacist (for item 2.2b)

Observers:

David Collington	Community Health Council
Carl Cooper	PTHB Chair

Apologies for Absence:

Carol Shillabeer	Chief Executive
Claire Madsen	Director of Therapies and Health Sciences

Committee Support:

Liz Patterson	Interim Head of Corporate Governance
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D&P/22/70	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>The Committee Chair welcomed members and attendees to the meeting. Apologies for absence were NOTED as recorded above.</p>
D&P/22/71	<p>DECLARATIONS OF INTERESTS</p> <p>There were no declarations of interest in addition to the declarations already made and published on the register.</p>
D&P/22/72	<p>MINUTES OF THE DELIVERY & PERFORMANCE COMMITTEE ON 11 NOVEMBER 2022</p> <p>The minutes of the previous meeting held on 11 November 2022 were AGREED as a true and accurate record.</p> <p>Clarity was sought in relation to the improvements in the Integrated Performance Report to quantify the cost of financial blockages in social care.</p> <p>The Director of Finance and IT confirmed the intention was to include a response within the Month 10 Finance Report to Board.</p> <p>Action: Director of Finance and IT</p> <p>Clarity was sought regarding Aneurin Bevan UHB's comparatively strong performance in referral to treatments times.</p> <p>The Director for Planning and Performance undertook to seek this information.</p> <p>Action: Director of Planning and Performance</p>
D&P/22/73	<p>COMMITTEE ACTION LOG</p> <p>The Action Log recorded updates with the following additions provided during the meeting:</p> <p>D&P/22/21a - An update to be provided regarding communication with Health Education and Improvement Wales (HEIW) around the Dentistry workforce issues and following the assessment of the Dentistry contract reform – HEIW were developing a national dental plan, the timescales of which were unknown. The number of dental therapists has increased at Cardiff Dental School, and Bangor University will commence dental hygienist training in September 2023. An additional 30 training places will be available.</p>

D&P/22/27 - An update to be provided in terms of OOH service issues with Swansea UHB to include the gap data and timescales of implementation of the National reporting system – The system supporting Shropdoc, 111 and Swansea Bay out of hours emergency arrangements has been fully functional since 15 February 2023.

Action closed.

D&P/22/58 - To provide an update on dental services, following the completion of the contract procurement exercise – A contract has been awarded in Llandrindod Wells and the tender process in Newtown has been completed with Ministerial Approval awaited.

Action closed.

D&P/22/56b - To explore the categorisation and accessibility of Wales NHS Digital App to operate cross borders, update to be provided at next meeting – The National programme team advise that it cannot be assumed that there is full interoperability between NHS England and the NHS Wales app. The NHS App (England) and the NHS Wales App will work for two distinct groups of patients, based on whether their GP practice is in England or Wales. As an indication of future direction of travel the data architecture of the NHS Wales App has been designed to take data feeds from service delivery organisations in England and so will be able to capture and display additional English information such as appointments etc. but that is in the future and will require quite a considerable amount of service transformation activity.

Action closed.

Given nearly 60% of secondary care is provided in England the lack of seamless information flow will be a challenge. What will be done to encourage this to be addressed?

The Director of Finance and IT advised that a letter would be sent to Digital Health and Care Wales from the Chief Executive or Digital Lead expressing concern regarding the lack of progress in this area.

Action: Director of Finance and IT

D&P/22/56c - To link with the Director of Public Health regarding the Nurse staffing issues across the Occupational Health service request to be deferred to Q4. To update on forward planning – A 0.5 Full Time Equivalent Occupational Health Physician has been appointed until June 2023, a

	<p>Nurse Physician has also been appointed and an Occupational Health Nurse will start on 6 March 2023.</p> <p>Action closed.</p> <p>D&P/22/56a - DPCCMH to liaise with DPH to review the whole system approach to diabetic care to include analysis of excess death rates.</p> <p><i>What is the timescale for action D&P/22/56a (DPCCMH to liaise with DPH to review the whole system approach to diabetic care to include analysis of excess death rates)?</i></p> <p>The Director of Primary, Community Care and MH advised that a timeframe would be agreed with the Director of Public Health.</p> <p>D&P/22/56d - To explore appropriate pathways to maintain awareness of the Value Based Health Care momentum and progress.</p> <p>The Director of Finance and IT presented a paper on this action.</p> <p><i>Could an evaluation of one project outlined in the Value Based Health Care report be made available to the Committee?</i></p> <p><i>The report notes that 103 care home staff from 14 homes had received training on safely lifting a fallen patient. How many care homes have not received this training?</i></p> <p>The Medical Director advised that this data would be shared when more was available but early indications (one month of data) showed a reduction in falls, and no falls related conveyances from those care homes that took part in the project.</p> <p>Action: Medical Director</p> <p>The Committee received the updates on the action log.</p>
ITEMS FOR ASSURANCE	
D&P/22/74	<p>PERFORMANCE MATTERS</p> <p>A) INTEGRATED PERFORMANCE REPORT</p> <p>The Director of Planning and Performance presented the report providing performance data to Month 9 (December 2022) against the 2022/23 NHS Wales Performance Framework.</p>

It appears good progress was made in recovering the performance in therapies but are there problems in maintaining performance?

The Director of Planning and Performance advised that mitigating actions would be included future reports.

Action: Director of Planning and Performance

The report records 50 breaches for Speech and Language Training (SALT) for adults, were there any breaches for children?

The Director of Primary, Community Care and MH confirmed that there had been no escalations of SALT breaches for children.

What are the fragilities for in-reach endoscopy services and what progress is being made on increasing use of endoscopy services?

The Director of Primary, Community Care and MH advised that endoscopy services continue to be fragile and alternatives, including internal, in-sourcing and inviting regions to use local facilities are being explored.

The health board are first in Wales for neurodevelopmental assessments but the levels are falling, and at 53% are some way off the 80% target. What can be done to support the team?

The Director of Planning and Performance confirmed the waits were variable and performance was not good enough. This was an issue of capacity and sustainability of posts, with the potential to use multidisciplinary teams under consideration.

The Committee took ASSURANCE from the health boards performance against NHS Wales Performance Framework.

B) Q3 IMTP DELIVERY

The Director of Planning and Performance presented the report outlining progress made against the IMTP for the period October 2022 – December 2022.

Are change requests to delay delivery dates being made as teams are working on the Accelerated Sustainable Model instead?

The Director of Planning and Performance advised there is fragility in the workforce, and it is necessary to focus on what is wrong, what can be done and to move at pace.

Will reflecting on the current plan help in developing the new plan?

	<p>The Director of Planning and Performance confirmed actions needed to be sharper and in which quarter they would be delivered in defined. Delivery will be key, and the plan will need to be structured to ensure accountability. Unforeseen issues (such as industrial action) may occur which will impact on the ability to deliver.</p> <p>The Committee took ASSURANCE from the health boards delivery against the IMTP.</p>
<p>D&P/22/75</p>	<p>PRIMARY CARE SERVICES PERFORMANCE REPORT:</p> <p>A) GMS PERFORMANCE</p> <p>The Assistant Director of Primary Care presented the report outlining the General Medical Services Commissioning Assurance Framework process during the 2021/22 contract year.</p> <p>No General Practice has required escalation. Two practices failed to comply with provision of information for random audits due to workforce pressures. Non-compliance was focussed on national flu targets and six week baby checks with support given to help practices improve. General Practice is experiencing workload pressures particularly in Llanfyllin, Rhayader and Crickhowell.</p> <p><i>The health board have undertaken research to ascertain how easy it is to see a doctor. Can this be triangulated against reports from the CHC and Nuffield?</i></p> <p>The Director of Primary, Community Care and MH advised that CHC reports are shared with surgeries. The Nuffield Report will be considered to ascertain how best to use when considering access to General Practice.</p> <p>Action: Director of Primary, Community Care and MH</p> <p><i>How does the health board determine patient experience?</i></p> <p>The Assistant Director of Primary Care advised that all surgeries are required to undertake a patient experience survey and submit an improvement plan by March 2023. It is a requirement to survey 25 per 1,000 patients.</p> <p><i>The Chair of the Patient Experience, Quality and Safety Committee observed the role of that committee in considering patient experience.</i></p> <p><i>A common thread appears to be problems with staff absence and sickness. How does the health board support primary care colleagues?</i></p> <p>A level of Occupational Health support is provided to General Practice which will be offered to Dental and Optometry.</p>

Attention to immediate need is given but further work is needed to support resilience and stability, including cross-practice cluster working.

In England many GPs work part time. Is that a strain on the system locally?

In Powys many GPs hold portfolio careers with several practices supporting hospitals. There are also a high number of enhanced services offered due to the rurality of the area. This creates additional pressure, but other staff are employed to support these services.

Who is responsible for assessing compliance with audit?

Peer review on quality improvements and audit is undertaken on a cluster basis and provides evidence for re-evaluation.

The Committee took ASSURANCE that the General Medical Services Commissioning Assurance Framework provided contract monitoring of General Medical Services.

B) COMMUNITY PHARMACY

The Chief Pharmacist presented the report which provided an account of Powys' community pharmacy activities during 2022/23 and drew attention to the following areas:

- There are 23 pharmacies in Powys of which 2 receive a guaranteed income as 'essential small pharmacies.
- The Pharmaceutical Needs Assessment identified one gap in Llanwrtyd Wells which has since been addressed with a new contractor.
- All pharmacies have transitioned onto the new pharmacy contract with the intention of providing more consistent access.
- Financial challenges exist with a large spend on rota services. The level of use of these services will be investigated.
- Consideration is being given to move to 56 day prescribing (Wales is the only nation that still uses 28 day prescribing). This will improve efficiency but will have an adverse financial impact on the 11 dispensing practices who would lose approximately £900k in dispensing fees.

Whilst Health Education and Improvement Wales are supportive of increasing Independent Prescribers is funding available to support this?

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How will the sustainability of dispensing practices be assured with the move to 56 day prescribing?

	<p>It is not intended that the 11 prescribing practices will move to 56 day prescribing as that would be unsustainable. If the move was to be made the prescribing practice would move into the category of 'essential small pharmacy' which would trigger a guaranteed income thereby reducing potential savings.</p> <p>The Committee took ASSURANCE that the health board is fulfilling its role in the context of the community pharmacy contractual framework.</p>
D&P/22/76	<p>FINANCIAL PERFORMANCE REPORT MONTH 10</p> <p>The Director of Finance and IT presented the financial performance update including the financial position and financial recovery plan.</p> <p>There is a year to date deficit of £6.35m. The projected year end deficit remains at £7.5m. The capital spend is forecast to breakeven.</p> <p>The forecast underlying deficit at the start of 2023/24 is £18.6m resulting from:</p> <ul style="list-style-type: none"> • continued growth in Continuing Health Care; • English provider recovery activity; • winter unscheduled care pressures; and • prescribing pressures <p><i>What does item 08 'provided services – non pay' on page 3 of the report refer to?</i></p> <p>The Director of Finance advised that this related to accountancy gains which are non-recurrent savings.</p> <p><i>Given that nursing and midwifery is causing particular pressure on variable pay what can be done to make cover slots attractive to internal staff?</i></p> <p>The Director of Workforce and OD advised that enhanced pay could be used (offering enhancements for early or late booked slots) but that could result in gaming of the system. Welsh Government wants the use of enhanced rates to be reduced. Other advantages such as weekly pay could be offered to encourage take-up.</p> <p><i>Is the forecast deficit of £8m in commissioned services due to additional work being undertaken or due to payment of block funding for work not undertaken?</i></p>

	<p>The Director of Finance and IT advised that in England payment was on activity whereas in Wales it was via a semi-block agreement. The overspend relates particularly to the higher performance of English providers.</p> <p><i>Page 4 of the report refers to 'red pipeline opportunities'. How will these be actioned?</i></p> <p>The Director of Finance advised there were several avenues to help activate these including:</p> <ul style="list-style-type: none"> • benchmarking information to identify opportunities; • the Accelerated Sustainable Model; • value based health care; and • the vault – a warehouse of information benchmarking including savings plans and best practice. <p>This requires encouraging all employees to make improvements.</p> <p>The Committee;</p> <ul style="list-style-type: none"> • DISCUSSED and NOTED the Month 10 2022/23 financial position. • DISCUSSED and NOTED the 2022/23 financial forecast deficit position. • DISCUSSED and NOTED the 2023/24 financial outlook.
D&P/22/77	<p>IT INFRASTRUCTURE AND ASSET MANAGEMENT INTERNAL AUDIT REPORT</p> <p>The Director of Finance and IT advised that the Audit, Risk and Assurance Committee had received a Limited Assurance Report on IT Infrastructure and Asset Management.</p> <p>A Management Action Plan was provided to the Committee who would receive updates on this matter to each meeting to enable progress to be monitored.</p> <p>Action: Director of Finance and IT</p>
ITEMS FOR DISCUSSION	
D&P/22/78	<p>INNOVATIVE ENVIRONMENTS OVERVIEW REPORT:</p> <ul style="list-style-type: none"> • CAPITAL AND ESTATES COMPLIANCE REPORT • HEALTH AND SAFETY UPDATE <p>The Director of Environment presented the report.</p> <p><i>The mitigations which led to a reduced fine in the recent Health and Safety Court case are noted. Can assurance be given that health and safety arrangements are properly in</i></p>

place to ensure lessons have been learnt. In particular, is the arrangement where team members act as health and safety inspectors appropriate?

The Director of Environment advised the arrangements in relation to health and safety case were outlined within the report which was provided for assurance. The Health and Safety Group are able to provide assurance to Executive and Independent Members.

The position locally where team members act as health and safety inspectors enables team learning.

What are the intentions in relation to an Estates Strategy?

The health board have engaged consultants to produce an Estates Framework including a Development Control Document and six facet surveys where gaps are identified. Improvements such as the kitchen at Knighton Hospital and the roof at Ystradgynlais Hospital are examples of this work.

Can the Director of Environment give his professional opinion on if the health board are engaging at the right level for capital in the partnership arena?

The Director of Environment advised an increasing amount of funding is being routed through the Regional Partnership Board. To date this has come from local authority funding but it is expected that health board funding will be increasingly routed this way.

What are the difficulties identified in the report in relation to the site at Newtown for the North Powys Wellbeing Programme?

The Director of Primary, Community Care and MH advised that the Strategic Outline Case has been submitted to Welsh Government who have instructed that the infrastructure element of the Business Justification Case requires resubmission. Capital funding has been released for the education element of the programme, but it will be necessary to wait for the infrastructure element of the programme to be approved before capital funding for the health element of the programme is released.

Can assurance be given that the kitchen at Bronllys that has been downgraded from 5 to 4 for food hygiene, will be brought up to standard?

	<p>The Director of Environment advised that the minor issues which resulted in the downgrade were being addressed and a reinspection would be requested.</p> <p><i>Could the Committee be provided with detail of the Machynlleth Project Gateway Review.</i></p> <p>The Director of Environment advised the Gateway Review had been undertaken because Welsh Government had expected the project to have been further ahead. A report has been considered at the Innovative Environments Group which can be provided to the Delivery and Performance Committee.</p> <p>Action: Director of Environment</p> <p><i>What is the position with the Llanfair Caereinion Primary Care development?</i></p> <p>The Director of Environment advised that a paper would be taken to Executive Committee in March 2023 concerning the developer's ability to PROCEED and timelines associated with that. This would be brought to the Committee.</p> <p>Action: Director of Environment</p>
ESCALATED ITEMS	
D&P/22/79	There are no items for inclusion within this section.
ITEMS FOR INFORMATION	
D&P/22/80	There are no items for inclusion within this section.
OTHER MATTERS	
D&P/22/81	<p>COMMITTEE RISK REGISTER</p> <p>The Director of Finance and IT presented the Risk Register of risks relevant to the Committee.</p> <p>Both risk 004 (urgent and emergency care) and 005 (inequality of access to planned secondary and specialised care) are being kept under regular review.</p> <p>The Committee RECEIVED the Risk Register and took ASSURANCE that the risks were being managed in line with the Risk Management Framework.</p>
D&P/22/82	DEVELOPMENT OF COMMITTEE ANNUAL PROGRAMME BUSINESS

	<p>The Interim Head of Corporate Governance presented the development of Committee annual programme report. The following key points were highlighted:</p> <ul style="list-style-type: none"> • delivery of 2022/23 Annual Programme of Business; • committee terms of reference; • feedback from committees (discussions and performance review); and • feedback from the Board <p>The Committee DISCUSSED and NOTED the Development of Committee Annual Programme.</p>
D&P/22/83	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES</p> <p>There were no items noted.</p>
D&P/22/84	<p>ANY OTHER URGENT BUSINESS</p> <p>There were no items of urgent business.</p>
D&P/22/85	<p>DATE OF THE NEXT MEETING</p> <p>Tuesday 02 May 2023 at 13:30, via Microsoft Teams</p>
IC/D&P/22/86	<p>The following resolution was passed:</p> <p>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.</p>
IC/D&P/22/87	<p>MINUTES OF IN-COMMITTEE 11 NOVEMBER 2022</p> <p>The minutes of the In-Committee meeting held on 11 November 2022 were AGREED.</p>
IC/D&P/22/88	<p>FINANCIAL SUSTAINABILITY</p> <p>The Director of Finance and IT advised the Committee that an Accountable Officer letter had been submitted to Welsh Government confirming that it will not be possible to deliver a financially balanced plan for 2023/24.</p> <p>Further detail relating to the financial position were shared with Members including the work that is required prior to submission of the Integrated Medium Term Plan on 31 March 2023.</p>

	The Committee NOTED the update on financial sustainability.
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