

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

CONFIRMED

**MINUTES OF THE MEETING HELD ON FRIDAY 11 NOVEMBER 2022
VIA MICROSOFT TEAMS**

Present:

Mark Taylor	Independent Member (<i>Committee Chair</i>)
Kirsty Williams	PTHB Vice-Chair
Ronnie Alexander	Independent member (<i>Committee Vice-Chair</i>)
Cathie Poynton	Independent Member (<i>Joined for part</i>)
Rhobert Lewis	Independent Member

In Attendance:

Hayley Thomas	Director of Primary, Community Care and Mental Health
Stephen Powell	Director of Planning and Performance
Pete Hopgood	Director of Finance & Information Technology (IT)
James Quance	Interim Board Secretary
Clare Lines	Assistant Director of Transformation and Value

Observers:

David Collington	Community Health Council
Carl Cooper	PTHB Chair

Apologies for Absence:

Carol Shillabeer	Chief Executive
Claire Madsen	Director of Therapies and Health Science
Jamie Marchant	Director of Environment
Tony Thomas	Independent Member
Debra Wood-Lawson	Director of Workforce and Organisational Development

Committee Support:

Bethan Powell	Interim Corporate Governance Business Officer
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D&P/22/50	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>The Committee Chair welcomed members and attendees to the meeting and CONFIRMED there was a quorum present. Apologies for absence were NOTED as recorded above.</p>
D&P/22/51	<p>DECLARATIONS OF INTERESTS</p> <p>The Committee Chair INVITED Members to declare any interests in relation to the items on the Committee agenda. None were declared.</p>
D&P/22/52	<p>MINUTES OF THE DELIVERY & PERFORMANCE COMMITTEE ON 12 SEPTEMBER 2022.</p> <p>The minutes of the previous meeting held of the Delivery and Performance Committee on 12 September 2022 were CONFIRMED as a true and accurate record.</p>
D&P/22/53	<p>MATTERS ARISING FROM PREVIOUS MEETING</p> <p>There were no matters arising.</p>
D&P/22/54	<p>COMMITTEE ACTION LOG</p> <p>The Committee RECEIVED and NOTED the Delivery and Performance Action Log. The committee discussed the following actions.</p> <ul style="list-style-type: none"> • D&P/22/21a: It was queried whether there has been progress in terms of communication with HEIW around the Dentistry workforce issues and following the assessment of the Dentistry contract reform. The Director of Primary, Community Care and MH confirmed that workforce remained a challenge across the service. However, Powys had submitted a plan to provide 10-12 additional student dental nurse places within General Dental Practices by September 2023. The Committee welcomed the enhanced recruitment in Powys for trainee dental students to experience longer term benefits. It was agreed that a verbal update would be provided at the next meeting. • D&P/22/27: It was queried whether timescales have been agreed for implementation of the national reporting system for the Out of Hours (OOH) service issues discussed at the previous meeting. The Director of Primary, Community Care and MH confirmed that the Adastra system issues persist. However, a meeting has been scheduled with Swansea Bay University

	<p>Health Board (SBUHB) at the end of November 2022 to revise the current position. Meetings have been arranged to mitigate the risks and to restart some functionality as soon as possible.</p> <p>It was agreed that an update on the OOH service position would be provided to the Board in November 2022. A further update would be provided at the next committee in February 2023.</p> <p>Action: Director of Primary, Community Care and Mental Health.</p> <p>The Chair noted that the matter discussed would be included in the Chair’s Report to the Board.</p>
<p>D&P/22/55</p>	<p>FINANCIAL PERFORMANCE REPORT</p> <p>The Director of Finance and IT presented the Month 06 report and drew attention to the following matters:</p> <ul style="list-style-type: none"> • the reported financial position for month 6 to the end of September is an operational deficit of £3.687m, a deterioration of £0.878m on the month 5 position; • a forecast deficit of £7.5m had been reported to Welsh Government. However, an additional risk of £3m in relation to CHC growth, commissioning pressures and variable pay was now forecast; • the Capital reported year to date expenditure is £3.293m; • the health board’s variable pay run rate had stabilised but there no improvements with substantive workforce availability; and • £2.7m of non-recurrent corporate opportunities have been released into the position at month 6. <p>The Director of Finance and IT highlighted three key areas of focus are:</p> <ul style="list-style-type: none"> • commissioning – growth in WHSSC and EASC costs; • Continuing Health Care – significant growth between 2020/21 and 2021/22 which continues into 2022/23; and prescribing – increased spend compared to 2020/21. This will be kept under close review. <p><i>Why is focus drawn to the staffing issues across community wards whilst other financial pressures are evident across the system?</i></p> <p>The Director of Finance and IT advised that staffing issues in community nursing has a particularly high impact for the organisation.</p>

How can Committee members be assured that there are active processes in place to manage staff absence across all service areas?

The Director of Finance and IT confirmed that all service areas across the organisation have a requirement to manage staff sickness appropriately and it is a key priority to ensure the correct support mechanisms are in place across the organisation.

What is the planning process of a clear exit strategy for the ongoing Covid-19 recovery response?

It was confirmed that the exit strategy is a collective approach which forms part of the Integrated Medium-Term Plan (IMTP) planning process for the forthcoming year.

Given previous savings have not been achieved, what barriers prevent savings from being made and what impact does this have on the organisation?

The Director of Finance and IT advised that during the pandemic the organisation had focussed attention on the covid-19 response and capacity pressures rather than implementing savings. There has since been a return to identifying and achieving savings. Business Intelligence is used to identify opportunities through benchmarking and the agreed approach is to focus on opportunities to improve outcomes, ensuring robust monitoring and performance management mechanisms are in place to support the monitoring of savings and delivery.

How can Board members assist and support in the delivery of savings targets?

The Board are aware the financial recovery position has been escalated. A Financial and Performance Executive Sub-committee has been established to monitor the financial position across portfolios. The Delivery and Performance In-Committee meeting will provide Independent Members with an opportunity to scrutinise this matter in detail.

Has the health board looked at working in partnership to reduce cost pressures?

The Director of Finance and IT confirmed that the data included within the £7.5m forecast is known expenditure for the remainder of 2022/2023. A small element of funding is linked to the Regional Partnership Board (RPB). However, no significant additional costs have been escalated to be included in the forecast to date in relation to the Winter Plan.

The Director of Primary, Community Care and MH highlighted the decisions required to balance transformation and change within the current model. The challenges previously faced during the pandemic are recognised, as is

	<p>the impact this has on staff wellbeing. The approach to protect the capacity and change agenda would be reviewed going forwards.</p> <p>Committee members acknowledged the volume of demand across Continuing Health Care services. It was recognised that the service is a strategic challenge for the health board given the volume of demand pressures and increasing costs of delivery.</p> <p>The Committee DISCUSSED and NOTED the Report.</p>
D&P/22/56	<p>INTEGRATED PERFORMANCE REPORT (IPR): Period 6 Performance</p> <p>The Director of Planning and Performance provided the Committee with the latest health boards performance as of month 6 and highlighted the health board's focus on improving performance across the organisation.</p> <p><i>Can further detail be provided in respect of the General Practice service demand expectations?</i></p> <p>The Director of Planning and Performance confirmed that all Practices are required to submit performance data at the end of October 2022. This has recently been evaluated and included within Directorate performance reviews. The latest fragility issues would be included within the IPR going forwards.</p> <p><i>Is there a quantifiable effect on limitations of social care which links to Continuing Health Care delays?</i></p> <p>It was highlighted that data is collated on a daily basis for those patients waiting to be repatriated into Powys for onward treatment, within a hospital or community setting. It was noted that improvements would be made to ensure data is clearly conveyed within the IPR.</p> <p><i>What is the reason for Aneurin Bevan University Health Board's comparatively strong performance in referral to treatment time (RTT) in commissioned services?</i></p> <p>The Director of Planning and Performance confirmed that this detail would be reviewed, and feedback would be provided to Members.</p> <p>Members requested that the IPR contain indications of response times for all red and amber calls with the Welsh Ambulance Service Trust (WAST). The Director of Planning and Performance agreed that a summary would be included within the IPR.</p> <p>Action: Director of Planning and Performance</p>

How does the health board aim to develop capacity in the Diabetes service?

The Director of Primary, Community Care and MH highlighted the current challenges across Primary Care and the broader pathway into District General Hospitals (DGH) which are being worked through. However, it was recognised the need to review a whole system approach through a Public Health analysis of excess death rates. The Director of Primary, Community Care and MH undertook to work with the Director of Public Health on the capacity of the Diabetes Service.

Action: Director of Primary, Community Care and Mental Health

Committee members observed a two-minute pause at 11:00 as respect to mark the remembrance of the British Service Memorial Day.

PROGRESS AGAINST THE INTEGRATED MEDIUM-TERM PLAN 2022-2025, FOR THE QUARTER 2 PERIOD JULY TO SEPTEMBER 2022.

The Director of Planning and Performance presented the report. It was highlighted that reflection of the mid-year review includes a new change request component to enable adjustments to be made in the external and internal context such as financial recovery planning.

There have been significant challenges across the workforce system, in particularly within joined up care in terms of the deliverability and fragility within the community model. Similar challenges of staff recruitment have also been identified within the circulatory programme.

Does the Wales NHS Digital App operate across borders and is this seen as a priority?

The Director of Finance and IT confirmed that a joint initiative with Digital Health Care Wales (DHCW) has secured funding to develop capacity to meet new system requirements. Further work is required to categorise accessibility and priorities. An update would be provided at the next meeting.

Action: Director of Finance and IT

How can members be assured of the progress against the decarbonisation strategy?

The Director of Planning and Performance confirmed that an Innovative Environment Sub-committee had been established to monitor progress and risks as they evolve. It was highlighted that it would also form part of the wider planning strategy for 2023-2024 for overall prioritisation, funding, and outcome measures. It was noted that

	<p>decarbonisation forms part of the Director of Environment reporting pathway to the Delivery and Performance Committee on a quarterly basis.</p> <p>Committee members raised concern with regards to the nurse staffing risks across the Occupational Health service request to be deferred to Q4. It was noted that this would not only exacerbate challenge pressures but require immediate intervention. The Director of Planning and Performance confirmed that this is currently under urgent review by the Director of Workforce and OD. An update would be provided at the next meeting.</p> <p>Action: Director of Planning and Performance</p> <p><i>Is there a lack of momentum regarding Value Based Health Care, as it is unclear of any progress within the report?</i></p> <p>The Director of Finance and IT confirmed that good progress had been made to increase skills and capacity. All activity and progress is reported via the Transformation and Value Executive Sub-committee and to Board Sub-Committee's. The governance and reporting routes would be reviewed to ensure appropriate arrangements were in place. It was also noted as an update later on the agenda.</p> <p>Action: Director of Finance and IT</p> <p>The Committee DISCUSSED and NOTED the Integrated Performance Report and the Progress against the IMTP 2022-2025 for the Quarter 2 Period July to September 2022.</p>
D&P/22/57	<p>INFORMATION GOVERNANCE PERFORMANCE REPORT</p> <p>The Director of Finance and IT presented the Information Governance Performance report noting that this remains a process of development with the aim for reporting to become more dashboard-based going forwards.</p> <p>It was highlighted that Freedom of Information requests had increased by 6% in comparison to the previous reporting period. The target response has not been met and this remains an area of focus for improvement. It was noted there is a new requirement for mandatory Information Governance (IG) Training to be completed by new starters within 6 weeks of recruitment. It was highlighted that future reporting will include clear indication of compliance which would be colour coded for ease of reference.</p> <p>The Committee RECEIVED and NOTED the Information Governance Performance Report.</p>
D&P/22/58	<p>PRIMARY CARE SERVICES PERFORMANCE REPORT</p>

	<p>The Primary Care General Dental Services (GDS) report was presented. It was noted that the GDS Commissioning Assurance Framework (CAF) monitors general dental service contracts. During 2021/22 Powys had 23 GDS providers.</p> <p>Due to the ongoing pandemic recovery, measures were applied by Welsh Government to the GDS contract and the monitoring of the delivery of dental services had been a complex process throughout 2021/22. The CAF metrics had been updated, and prioritisation was given to a number of national and local performance measures.</p> <p>It was highlighted that the number of patients waiting for treatment is not definitive and access to dental services continues to be a national challenge. Following the completion of the contract procurement exercise, an update would be provided.</p> <p>Action: Director of Primary, Community Care and Mental Health</p> <p><i>Do the assurance monitoring figures affect where dental trainees are placed within the service?</i></p> <p>The Director of Primary, Community Care and MH confirmed that this does not affect placement of dental trainees. The main challenges relate to contract monitoring, where reliance is dependent on work environment and capacity. It was noted that further opportunity to expand trainees across community and general dental services was being examined to assist in retaining NHS dental service delivery which remains a challenge.</p> <p><i>The dental helpline statistics show 4,435 patients are waiting for treatment, is this the number of patients waiting for a place on the NHS list of a dental practice?</i></p> <p>The Director of Primary, Community Care and Mental Health confirmed that figures do include those patients waiting for dental treatment. Additional support has been provided through the helpline to signpost patients to the appropriate care for those needing emergency treatment.</p> <p>The Committee DISCUSSED and NOTED the Primary Care Service Performance Report.</p>
ITEMS FOR DISCUSSION	
D&P/22/59	OVERVIEW OF RENEWAL STRATEGIC PORTFOLIO, INCLUDING: VALUE BASED HEALTHCARE (VBHC) PROGRESS AND PORTFOLIO RISKS.

	<p>The Assistant Director of Transformation and Value presented the report and provided an overview of eight renewal programmes which drive recovery and longer-term service renewal. The following key areas of focus were noted:</p> <ul style="list-style-type: none"> • £206k had been secured on a non-recurrent basis from Welsh Government (WG) to support VBHC projects in Powys, • the “Falls Pathway” has progressed; work on the community model is underway; engagement has taken place with Clusters regarding priority goals 2 and 3 within WG’s “Six Goals for Urgent and Emergency Care”, • a one-off sum of £284k has been secured to assist with the implementation of the community cardiology service, and • a further one-off sum of £73k has been secured from the Wales Cancer Network to enable Powys to build an information platform to track the progress of patients receiving diagnosis and treatment outside Powys. <p>Due to time constraints, Members were offered the opportunity to raise any questions outside of the meeting.</p> <p>The Committee RECEIVED and NOTED the Overview of Renewal Strategic Portfolio, including Value Based Healthcare progress and Portfolio Risks.</p>
D&P/22/60	<p>URGENT AND EMERGENCY CARE, INCLUDING: FRAILTY AND COMMUNITY MODEL UPDATE AND PERFORMANCE REPORT</p> <p>Due to time constraints the Urgent and Emergency Care, including Frailty and Community Model update and Performance Report was taken as read. It was agreed that any questions would be raised outside of the meeting.</p> <p>The Urgent and Emergency Care, Including Frailty and Community Model Update and Performance Report was RECEIVED.</p>
OTHER MATTERS	
D&P/22/61	COMMITTEE RISK REGISTER

	<p>Due to time constraints the Committee Risk Register was taken as read and any observations would be raised outside of the meeting.</p> <p>The Committee Risk Register was RECEIVED.</p>
D&P/22/62	<p>COMMITTEE PROGRAMME OF BUSINESS</p> <p>The Committee RECEIVED the Committee Work Programme.</p>
D&P/22/63	<p>ANNUAL REVIEW OF COMMITTEE TERMS OF REFERENCE 2022-2023</p> <p>Committee members RECEIVED the Committee Terms of Reference 2022-2023. Members were offered the opportunity to raise any questions or observations outside of the meeting due to time constraints.</p>
D&P/22/64	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES</p> <p>There were no items noted.</p>
D&P/22/65	<p>ANY OTHER URGENT BUSINESS</p> <p>There were no items of urgent business</p>
D&P/22/66	<p>DATE OF THE NEXT MEETING</p> <p>Thursday 28 February 2023 at 14:00, via Microsoft Teams</p>
D&P/22/67	<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>
D&P/22/68	<p>FINANCIAL SUSTAINABILITY</p> <p>The Director of Finance and IT gave an update on the financial sustainability of the organisation. The Assistant Directors of Mental Health, Womens and Childrens and Community Services were also in attendance and provided an overview of their services current financial position. Members took the opportunity to discuss the content of the report.</p> <p>It was AGREED that further updates on financial sustainability would be provided to Members of the Committee on a regular basis.</p>

D&P/22/69

DIGITAL INFRASTRUCTURE AND CYBER SECURITY

Committee members RECEIVED the Digital Infrastructure and Cyber Security report. Due to time constraints, Committee members took the report as read and it was agreed to hold an In-Committee, following the Audit, Risk and Assurance Committee on Tuesday 15 November 2022. This would provide an opportunity for discussion and to raise any questions and observations.