

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

CONFIRMED

**MINUTES OF THE MEETING HELD ON MONDAY 1 NOVEMBER 2021
VIA MICROSOFT TEAMS**

Present:

Mark Taylor	Independent Member (Committee Chair)
Melanie Davies	Vice-Chair
Rhobert Lewis	Independent member
Ronnie Alexander	Independent member

In Attendance:

Carol Shillabeer	Chief Executive
Claire Madsen	Director of Therapies and Health Sciences
Hayley Thomas	Director of Planning and Performance
Jamie Marchant	Director of Primary, Community Care and Mental Health
Julie Rowles	Director of Workforce and Organisational Development
Pete Hopgood	Executive Director of Finance, Information & IT Services
Marie Davies	Deputy Director of Nursing
Samantha Ruthven-Hill	Assistant Director of Planning
Rani Mallison	Board Secretary
David Collington	CHC
Ross Whitehead	Deputy Welsh Ambulance Commissioner

Apologies for absence:

Tony Thomas	Independent Member (Committee Vice-Chair)
Vivienne Harpwood	PTHB Chair
Alison Davies	Director of Nursing and Midwifery
Rebecca Collier	Welsh Government

Committee Support:

Holly McLellan	Senior Administrator/Personal Assistant to Board Secretary
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PPPH/21/01	<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>
PPPH/21/02	<p>DECLARATIONS OF INTERESTS</p> <p>No interests were declared.</p>
PPPH/21/03	<p>UNCONFIRMED MINUTES OF THE DELIVERY & PERFORMANCE COMMITTEE ON 2 SEPTEMBER 2021</p> <p>The minutes of the previous meeting held of the Delivery & Performance Committee on 2 September 2021 were CONFIRMED as a true and accurate record.</p>
PPPH/21/04	<p>MATTERS ARISING FROM PREVIOUS MEETINGS</p> <p>No matters arising were declared.</p>
PPPH/21/05	<p>COMMITTEE ACTION LOG</p> <p>There were no action log updates.</p>
ITEMS FOR APPROVAL/RATIFICATION/DECISION	
PPPH/21/06	There were no items for inclusion in this section.
ITEMS FOR DISCUSSION	
PPPH/21/07	<p>Performance Reporting a) Performance Overview</p> <p>The Director of Planning and Performance presented the report which provided an update on the changes to the latest performance position for Powys Teaching Health Board up until October 2021 with the latest availability of data, including a high-level overview of COVID, Test, Trace and Protect and mass vaccination performance.</p>

It continued to be an interim process as a result of the COVID pandemic in the absence of the regular Integrated Performance Report.

The report contained a high-level summary of COVID e.g. infection rates, mortality and vaccination progress and a brief update on Powys Teaching Health Board's (PTHB) performance, set against the revised 2021/22 National Outcome and Delivery Frameworks four aims, and their measures. The document contained relevant dashboards and extra analysis data showing the levels of compliance against the National Framework, and Powys Teaching Health Board local measures.

The data, highlighted performance achievements, and challenges at a high level, as well as brief comparison to the All Wales performance benchmark where available.

Would a Powys resident unscheduled care waiting time break down be made available for the next meeting?

The Director of Planning and Performance confirmed that a Powys resident unscheduled care waiting time break down would be brought to the next Committee meeting.

Action: Director of Planning and Performance

Had in-reach providers been withdrawing from hospitals?

The Director of Primary, Community Care and Mental Health responded that there had always been fragility around in reach. Some clinicians had been redirected to other areas.

Was there evidence of COVID-19 pressures on timescales in the Referral To Treatment (RTT) data?

The Director of Primary, Community Care and Mental Health responded that there was no evidence, the time scale of the treatment of course itself would not have changed. The Chief Executive added that there was not sufficient evidence at this stage, however, concerns were noted in cancer due to members of the public not coming forward.

Had members of the public that took part in vaccine trials been embedded in the system?

The Director of Planning and Performance responded that clear guidance for vaccine trial patient access had been released and were adhered to.

Could assurance be provided on endoscopy waiting times?
The Director of Planning and Performance responded that urgent suspected cancer referrals had separate waiting times to routine endoscopy referrals. The Director of Primary, Community Care and Mental Health added that patients were clinically triaged. Prior to COVID-19 the service was achieving waiting time targets. Endoscopy was currently a key focus.

The Chief Executive noted that since the report had been written it had been a challenging time for performance. 800 patients were in Welsh Hospitals with COVID-19. 1200 – 1400 were awaiting discharge pending appropriate conditions to return home to, 43 of which were Powys residents. Fewer beds were present on wards due to adherence to bed spacing guidelines. Winter would bring a focus on system resilience. There would also be a focus on actions to improve the access to planned care.

The Director of Planning and Performance noted that operational details were under review to be brought to Committee.

b) Commissioning Escalation

The report highlighted providers in Special Measures or scored as Level 4 and above. The PTHB Internal Commissioning Assurance Meeting (ICAM) did not meet in September.

There were:

- 2 providers with services in Special Measures
- 1 provider at Level 4.

The report also provided:

- A high-level summary of key issues in relation Shrewsbury and Telford Hospitals NHS Trust (SaTH) and Cwm Taf Morgannwg University Health Board (CTMUHB)
- Referral to treatment times (RTT) times.

c) Annual Plan Delivery, Quarter 2

The report provided an update of the progress made against the milestones and actions in the PTHB Delivery Plan for the quarter 2 period (July 2021 to September 2021).

	<p>Due to the ongoing uncertainty Welsh Government determined that it was not feasible to return immediately to the three-year planning cycle and instead required that an Annual Plan was submitted for the period April 2021 to March 2022, building on the Quarterly Plans developed during 2020/1.</p> <p>The Annual Plan sets out the PTHB Priorities for the year ahead, and the accompanying Delivery Plan includes the detailed objectives, milestones and timescales for delivery in order to achieve these priorities. The plan was submitted to Welsh Government on the 30 June 2021.</p> <p>The Committee Chair noted that the report would go to Board with further detail.</p> <p>The Committee DISCUSSED and NOTED the reports.</p>
PPPH/21/08	<p>Financial Performance: Month 07, 2021/22</p> <p>The Executive Director of Finance, Information and IT Services presented the paper which provided an update on the September 2021 (Month 05) Financial Position including Financial Recovery Plan (FRP) delivery and Covid. The Chief Executive raised that Board members needed a detailed awareness of the financial position.</p> <p><i>What was the PTHB capital position?</i></p> <p>The Executive Director of Finance, Information and IT Services responded that the capital resource limit would be reduced to carry through budget to the next financial year.</p> <p>The Director of Planning and Performance noted that full detail around Bro Ddyfi Community Hospital, Machynlleth's delays had been discussed with Welsh Government. There would be no monetary loss but a reprofile of work would be required.</p> <p><i>At what stage did Welsh Government Monitor the £16.085M Capital Resource Limit?</i></p> <p>The Executive Director of Finance, Information and IT Services responded that the £16.085m Capital Resource Limit was subject to constant dialogue with Welsh Government.</p>

	<p><i>Given the forecast gross opening plan deficit / (surplus) 2022/23 of £16.337m why was the £5.1m recurrent saving to offset opening unmet b/f savings deducted?</i></p> <p>The Executive Director of Finance, Information and IT Services responded that if PTHB was able to deliver on the financial plan then funding could be brought forward or additional funding unlocked.</p> <p>The Chief Executive reiterated that Board Members needed a detailed awareness of the financial position.</p> <p>The Committee:</p> <ul style="list-style-type: none"> • DISCUSSED and NOTED the Month 6 2021/22 financial position. • NOTED that actions required in 2021/22 to deliver a balanced position at the 31st March 2022, including savings delivery. • NOTED and APPROVED the COVID-19 Report position reported on page 8 and in the attachments detailed in appendix 1. • NOTED additional risks on delivery of balanced position at 31st March 2022. • NOTED the underlying financial position and AGREED actions to deliver recurrent breakeven for 2022/23.
<p>PPPH/21/09</p>	<p>Performance Position of Services Provided by Welsh Ambulance Services NHS Trust</p> <p>The Director of Primary, Community Care and Mental Health introduced the report which the Deputy Welsh Ambulance Commissioner presented. The report which articulated the national challenges relating to the delivery of the 8-minute Red target for emergency ambulance services with a specific focus on the performance within Powys. The red target, of 65% within 8 minutes had been met only twice in the last 2 years within Powys. The paper outlined specific information relating to demand and capacity, workforce measures as well as efficiencies to be gained. The paper concluded with a summary of the actions within the EASC Improvement Plan.</p> <p><i>What changes could enable District General Hospitals to increase capacity?</i></p> <p>The Director of Primary, Community Care and Mental Health responded that conversations regarding the management of demand and capacity were ongoing. Identifying where District General Hospitals could be improved was a key topic. The Chief Executive added that the Minor Injuries Unit hybrid model was being evaluated to ensure accessibility. Numbers going through Minor Injuries Units were comparatively low,</p>

	<p>therefore, there was the potential for diversification of their purpose. Avoiding patients incorrectly going to Emergency Departments or calling ambulances was a focus.</p> <p><i>When would improvements be tangible from a patient perspective?</i></p> <p>The Deputy Welsh Ambulance Commissioner responded that everything possible was being done to ensure capacity. The Trust was on target for their recruitment quotas. A Powys specific operating model would require further work. The Chief Executive added that military support had been deployed into WAST and had resulted in a positive impact. Emergency Department hand over delays were still a key issue which winter pressures would compound.</p> <p>The Director of Primary, Community Care and Mental Health noted that Powys was subject to a rural WAST model, work was being undertaken with WAST to further define this. There was a clear margin for improvement.</p> <p>The Chief Executive raised that creating a flow through the hospitals would be essential.</p> <p><i>What was the average ambulance travel time in Powys?</i></p> <p>The Director of Primary, Community Care and Mental Health responded that in Powys the fallow time was partially inbuilt. The Deputy Welsh Ambulance Commissioner added that in rural areas it was essential for ambulances to be less busy to allow for greater travel times to patients.</p> <p><i>Could assurance be provided on the response times?</i></p> <p>The Deputy Welsh Ambulance Commissioner responded that modelling was planned on the achievement of all Health Boards.</p> <p>The Committee DISCUSSED and NOTED the report.</p>
<p>PPPH/21/10</p>	<p>COVID-19 VACCINATION: PHASE 3 PLAN</p> <p>The Director of Planning and Performance presented the report. COVID-19 Vaccination began in Powys in December 2020 following the approval of the Pfizer/BioNTech vaccine. PTHB’s Phase 1 and 2 Plan set out our ambitions for offering a first and second dose COVID-19 vaccination based on national guidance from the Joint Committee on Vaccination and Immunisation and national policy and guidance from Welsh Government.</p>

	<p>Uptake in Powys by the end of Q2 2021/22 was the highest of all health boards in Wales. All three aims of Phase 1 and 2 Plan had been achieved and Phases 1 and 2 were closed.</p> <p>The Chief Executive raised that expectations on uptake for 12 – 15 year olds needed to be managed as individuals who currently had COVID-19 could not be vaccinated.</p> <p><i>Were drop-in slots available at PTHB vaccination centres?</i> The Director of Planning and Performance responded that all PTHB vaccination centres were open to 12 – 15 year old drop-in slots. It was not possible currently to offer general drop-in slots due to a lack of spare capacity however the centres were being as flexible as possible.</p> <p><i>What was the condition of staff in the vaccination centres?</i> The Director of Planning and Performance responded that it was a rewarding programme therefore motivation and moral were high. Work hours had been made more regular, however, work was laborious. PTHB had listened to feedback and would be ensuring that staff were able to take annual leave in order to have a proper Christmas. It had been possible to extend temporary contracts of staff to promote job security and provision for the busy booster programme.</p> <p>The Director of Workforce and Organisational Development raised that it was important to recognise the staff behind the front line. It was of the upmost importance to keep the momentum of the vaccination programme going.</p> <p>The Committee:</p> <ul style="list-style-type: none"> • NOTED the closure of the Phase 1 / 2 Vaccination Programme • NOTED and DISCUSSED the Phase 3 Delivery Plan
PPPH/21/11	<p>CAPITAL DEVELOPMENTS:</p> <ul style="list-style-type: none"> • LLANDRINDOD WELLS HOSPITAL PROJECT: LEARNING & EVALUATION <p>The Director of Planning and Performance presented the report. A lessons learnt template had been developed in relation to the first significant major capital project, Llandrindod Reconfiguration Phase 1, delivered by the Health Board for a number of years.</p> <p>The document contained three main elements, namely; Best Practice, Improvement Areas and Benefits Realisation. The</p>

	<p>learning identified was intended to be clearly set out and to act as a demonstration of closure and reflective learning for the project, and to provide a baseline for good practice and governance for future capital project activity.</p> <ul style="list-style-type: none"> <p>NORTH POWYS WELLBEING PROGRAMME, GATEWAY REVIEW</p> <p>A Programme Assessment Review was commissioned by Welsh Government for the North Powys Programme at Programme Business Case (PBC) stage.</p> <p>An amber status was indicated which reflected successful delivery appeared feasible but significant issues already existed requiring management attention. These appeared resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun.</p> <p>The Committee Chair raised that there needed to be awareness of selection of contractors to deliver the vision of an integrated campus.</p> <p>The Committee DISCUSSED and NOTED the reports.</p>
	<p>INFORMATION GOVERNANCE PERFORMANCE REPORT</p> <p>The Board Secretary presented the report which provided assurance and informed of the most recent Information Governance compliance figures. The report had been developed to show an assessment against key performance and compliance indicators for information governance (IG).</p> <p>The Committee DISCUSSED and NOTED the report.</p>
<p>ITEMS FOR INFORMATION</p>	
<p>PPPH/21/12</p>	<p>Delivery & Performance Committee, Terms of Reference and Operating Arrangements, approved by Board 29 September 2021</p> <p>Inline with Standing Orders and the Board’s Scheme of Delegation and Reservation of Powers, the Health Board had established a committee to be known as the Delivery and Performance Committee. The Terms of Reference and operating arrangements set by the Board in respect of the committee were set out in the report.</p> <p>The scope of the Committee extended to the full range of PTHB responsibilities. This encompassed the delivery and performance management of all directly provided and commissioned services.</p> <p>The Committee NOTED the report.</p>

	OTHER MATTERS
PPPH/21/14	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES</p> <p>There are no items for inclusion in this section</p>
PPPH/21/15	<p>ANY OTHER URGENT BUSINESS</p> <p>There was no urgent business.</p>
PPPH/21/16	<p>DATE OF THE NEXT MEETING</p> <p>20 December 2021 at 10:00, via Microsoft Teams.</p>