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Powys Teaching
Health Board

**POWYS TEACHING HEALTH BOARD
SUMMARY OF THE DELIVERY & PERFORMANCE COMMITTEE MEETING
HELD ON THURSDAY 2 SEPTEMBER 2021
VIA MICROSOFT TEAMS**

Board and Committee Meetings of Powys Teaching Health Board are meetings held in public under the Public Bodies (Admission to Meetings) Act 1960. However, the COVID-19 Public Health emergency and the associated instruction to Stay at Home has meant that Board resolved to hold the Board and Committee meetings virtually. In the absence of live streaming being available, a summary of the proceedings will be made available within ten days of the meeting.

Present:

Mark Taylor	Independent Member (Chair)
Melanie Davies	Independent Member
Rhobert Lewis	Independent Member
Tony Thomas	Independent Member

In Attendance:

Carol Shillabeer	Chief Executive
Hayley Thomas	Director of Planning and Performance
Julie Rowles	Director of Workforce and Organisational Development
Pete Hopgood	Director of Finance and IT
Rani Mallison	Board Secretary
Jayne Lawrence	Assistant Director of Primary Care Services
Jason Crowl	Assistant Director of Community Services Group
Louise Turner	Assistant Director of Women's and Children's Services
Lucie Cornish	Assistant Director Therapies & Health Science
Marie Davies	Deputy Director of Nursing
Ian Virgil	Head of Internal Audit

Observers:

David Collington	Community Health Council
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Apologies for absence:

Ronnie Alexander	Independent Member
Claire Madsen	Executive Director of Therapies & Health Science
Jamie Merchant	Director of Primary, Community Care and Mental Health
Rebecca Collier	Welsh Government

Committee Support:

Holly McLellan	Senior Administrator / Personal Assistant
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PERFORMANCE OVERVIEW

a) PERFORMANCE DASHBOARD

The report provided a performance update against the 2020/21 NHS Delivery Framework and limited local measures.

It continued to be an interim process as a result of the COVID-19 pandemic in the absence of the regular Integrated Performance Report. The report contained a summary of COVID-19 including infection rates, mortality and vaccination progress.

An update on Powys Teaching Health Board's (PTHB) performance, set against the four aims and their measures which included a dashboard that showed the levels of compliance against the National Framework and Powys Teaching Health Board local measures.

Performance achievements and challenges at a high level were highlighted, a brief comparison to the All Wales performance benchmark was detailed. Since the report had been finalised in August the case rate had increased to 295.99 per 100,000.

Increases in referral to treatment times were being affected by a number of contributing factors with key areas of issue in Swansea Bay in trauma and orthopaedics, and in Aneurin Bevan in ophthalmology.

b) COMMISSIONING ASSURANCE

The report highlighted providers in Special Measures or scored as Level 4 and above following the 18th August 2021 PTHB Internal Commissioning Assurance Meeting (ICAM). At the time of the last meeting 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.

ELECTIVE CARE PERFORMANCE UPDATE

The report provided a summary of current operational performance, national programme requirements relating to Elective Care and Powys provided services.

Actions were listed where performance was not compliant with national or local Powys Teaching Health Board (PTHB) annual plan targets and highlighted short- and long-term risks to delivery. PTHB had received funding from Welsh Government for the renewal priorities and non-recurring money had been allocated for the workstream of Diagnostics, Ambulatory and Planned Care.

Key challenges moving forward were noted as general surgery, orthopaedics, eyecare and endoscopy.

NEURODEVELOPMENTAL SERVICES PERFORMANCE UPDATE

The report provided progress on the implementation of a redesigned ND service and the paper:

- Explored the key drivers for change.
- Outlined the breach of the Welsh Government (WG) 26-week RTT waiting time target.
- Highlighted the challenges experienced by the ND service due to a mismatch in demand and capacity.
- Outlined solutions to address the backlog, maintain the ND service and effectively respond to post diagnostic support for families.
- Outlined a new ND service model and the objectives and benefits the proposal will deliver for the organisation and the local child and young person's population of Powys.

FINANCIAL PERFORMANCE, MONTH 04

The report outlined:

- PTHB was reporting an overspend at month 4 for financial year 2021/22 of £0.063m.
- Financial forecast to 31 March 2022 was to maintain a balanced plan based on the plan submitted to Welsh Government and presented to Board on 31 March and 30 June 2021.
- To date £0.275m of green savings schemes had been identified by the Health Board for delivery in 2021/22 to meet the required target as per the plan of £1.7m.
- PTHB had a capital resource limit of £15.125m and had spent £1.117m to date.

Any changes in the expenditure assumed within the plan would impact the Health Board's ability to deliver a balanced position based on the 'opening plan' position of £5.6m over committed. COVID-19 funding was anticipated but yet to be confirmed in full by Welsh Government. Tracking the underlying deficit was important.

GENERAL MEDICAL SERVICES OUT OF HOURS PERFORMANCE 2020/2021

The paper provided assurance around the Out of Hours (OOH) service provision for Powys patients. PTHB contracted with three providers to deliver its OOH services, 111, Shropdoc and Swansea Bay University Health Board (SBUHB).

Attention was drawn to the inability the first providers (Shropdoc and SBUBH) IT systems to report against the OOH standards. PTHB had commissioned a data feed to access the necessary data to enable full reporting against these standards. A national replacement IT system for 111

/ Out of Hours, called SALUS, was being developed for implementation in the next financial year.

Shropdoc provide PTHB with monthly reports detailing contract achievement against the All Wales OOH standards. Shropdoc performance against the standards is consistently very good. The current Shropdoc contract would terminate in June 2022.

Concern was expressed regarding the 111 service and the link this and attendance at A&E. Further information regarding 111 abandonment rates was requested.

FUNDED NURSING CARE AND CONTINUING HEALTHCARE PERFORMANCE REPORT

The report provided an update on Funded Nursing Care (FNC) and Continuing Health Care (CHC) provided to adults, children and young people's Continuing Care (CC) in 2020-21, and to identify future plans for oversight and reporting.

The Health Board sought assurance of the quality of services provided. In 2020-21 there had been a significant impact from the COVID-19 pandemic. Over the year a wider focus to view the service on a population basis had been taken, the opportunity to maximise the presentation and interpretation though data and intelligence helped to inform and develop a value-based approach to care provision.

The live Complex Care Dashboard was used in conjunction with the Council's Dashboard.

CAPITAL AND ESTATES PERFORMANCE UPDATE

The Health Board had benefitted from increase in capital allocation in 2021/22 with the Welsh Government (WG) committed Capital Resource Limit (CRL) at £14.575M. Progress had been made to engage a further three substantive Project Managers.

The construction industry material supply issue could impact availability, cost and project programmes. Estates Funding Advisory Board (EFAB), PTHB secured £2.2M additional funding which meant exceptional items no longer need to be funded by Discretionary Capital.

The following major projects were supported by the All Wales Capital Funding (AWCF) / Integrated Care Funding (ICF):

- North Powys Programme,
- Llandrindod Phase 2 and
- Brecon Car Park

INFORMATION GOVERNANCE PERFORMANCE REPORT

The paper showed compliance and an assessment against key information governance (IG) performance and compliance indicators.

In terms of freedom of information requests Q1 saw 77 requests. Achieved a 62% compliance. 149 access to information requests had been received with an 86% compliance rate. 14 access requests had not been responded to within the 1-month deadline. One complaint had been received for Information Governance, which related to the Womens and Childrens Service Group, an investigation was undertaken and improvements had been made.

There had been 28 information breaches within Q1. 1 breach had been escalated. Key themes were identified around staff and patient confidentiality, records management and information being sent to the wrong places.

RECORDS MANAGEMENT IMPROVEMENT PLAN UPDATE

The report provided an outline of progress made in implementing the Records Management Improvement Plan, approved in November 2019.

The Executive Committee agreed investment in the appointment of a "Documents and Records Manager". This post would replace the Service Improvement Manager role previously established on an interim basis, which had been vacant since January 2021.

The Executive Committee agreed investment in the appointment of an experienced Project Manager to lead the planning and development of the Health Board's approach to digitisation of records.

ANY OTHER URGENT BUSINESS

An update on the supply of blood vials as discussed at informal Board Development was provided. PTHB was in line with the national response. The shortage was predicted to continue until November with a critical point in the next few weeks.