



POWYS TEACHING HEALTH BOARD

CONFIRMED

PERFORMANCE & RESOURCES COMMITTEE MEETING HELD ON THURSDAY 6 MAY 2021, 14:00 – 16:00 VIA MICROSOFT TEAMS

Present:

Melanie Davies	Independent Member
Ian Phillips	Independent Member
Tony Thomas	Independent Member (Chair of Meeting)

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
Marie Davies	Deputy Director of Nursing
Pete Hopgood	Director of Finance and IT
Rani Mallison	Board Secretary
Simon McLellan	Performance Manager
Andrea Blayney	CHC
Elizabeth Patterson	Corporate Governance Manager

Observers:

Rhobert Lewis	Independent Member
Ronnie Alexander	Independent Member

Apologies for absence:

David Collington	Community Health Council
Mark Taylor	Independent Member
Rebecca Collier	Welsh Government
Vivienne Harpwood	Chair

Committee Support:

Holly McLellan	Senior Administrator / Personal Assistant to Board Secretary
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MEETING GOVERNANCE	
P&R/21/01	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>It was noted that Tony Thomas, was Chairing the meeting as Committee Vice Chair, in the absence of Mark Taylor, Committee Chair.</p> <p>The Vice Chair welcomed everyone to the meeting and confirmed the meeting was quorate. Apologies for absence were noted as recorded above.</p>
P&R/21/02	<p>DECLARATIONS OF INTEREST</p> <p>No declarations of interest were received.</p>
P&R/21/03	<p>MINUTES OF THE PREVIOUS MEETING: 6 OCTOBER 2020</p> <p>The minutes of the meeting held on 22 February 2021 were AGREED as being a true and accurate record.</p>
P&R/21/04	<p>MATTERS ARISING FROM THE PREVIOUS MEETING</p> <p>There were no matters arising from the previous meeting.</p>
P&R/21/05	<p>PERFORMANCE AND RESOURCES COMMITTEE ACTION LOG</p> <p>The Director of Workforce and Organisational Development provided the following update:</p> <p>P&R/20/12 – COVID-19 had meant progress had been postponed, the team had now re-engaged with shared services.</p> <p>The Committee RECEIVED the updated Action Log.</p>
ITEMS FOR APPROVAL/RATIFICATION/DECISION	
There were no items for approval, ratification or decision at this meeting.	
ITEMS FOR DISCUSSION	
P&R/21/06	<p>PTHB ANNUAL REPORT (DRAFT) AND END OF YEAR PERFORMANCE 2020/21</p> <p>The Director of Planning and Performance presented the previously circulated paper for consideration and feedback prior to being finalised for approval at PTHB Board on 10 June 2021 and submission to Welsh Government on 11 June 2021.</p>

The Director of Planning and Performance advised that the purpose of the Performance section of the Annual Report was to provide information on Powys Teaching Health Board, its main objectives and strategies and the principle risks that it faces.

In response to the Covid-19 pandemic, the reporting requirements had been reviewed and streamlined whilst ensuring all regulatory matters were met and the report provided information to reflect the position of the NHS body within the community and provide public accountability.

There was no requirement to submit a performance analysis section, sustainability report or a separate Annual Quality Statement for 2020-21. PTHB had used information available to provide as full a picture of the year as possible. This was provided in the performance overview.

The main features of the report flowed from the Planning, Delivery and Performance Framework and demonstrate how the organisation had delivered against that framework and how the organisation adapted during the year to respond to the pandemic. The report showed the response through the year to the 4 harms and the establishment of the COVID-19 Gold Groups.

A forward look was provided which connected the Annual Report to the Draft Annual Plan for 2021/22. Highlights of individual and team achievements were included throughout the report.

In the report, PTHB undersold itself it, there was a lack of a compelling narrative. A lot of detail and bullet points were included but the report did not flow throughout. Further work could have been done on the language used.

Did the report have a dual purpose, was it for Welsh Government and members of the public? Why was some data included? There were areas that needed embellishment, Commissioned Services could be expanded.

The Director of Planning and Performance thanked the Members for their feedback and welcomed further comments outside the meeting. There was one version of the document supplied to both Welsh Government and the public. It could be difficult at times to balance the report to reflect the dual audience. In previous years a summarised version of the report was presented at the Annual General Meeting. The team would undertake further work on the Commissions Services section. The most up to date data possible was being added to the report.

	<p>The Chief Executive highlighted the importance of the opportunity to present the report to the Annual General Meeting. The public's focus on health would be heightened due to the COVID-19 pandemic. The report was for the people of Powys to look at and engage with.</p> <p>The Board Secretary noted the performance elements of the draft report were to be submitted to Welsh Government on 6 May 2021. All members would be brought together for sign off on 10 June 2021.</p> <p>The Committee CONSIDERED the draft Annual Performance Report 2020-21 and PROVIDED FEEDBACK to inform the final development of its content, ahead of submission to Welsh Government as a draft on 07 May 2021.</p>
P&R/21/07	<p>INTEGRATED PERFORMANCE, 2021/22 A) PERFORMANCE REPORT, APRIL 2021</p> <p>The Director of Planning and Performance presented the previously circulated paper which provided the Performance & Resources Committee with an update on the changes to the NHS Delivery Framework 2020/21 and the latest performance position for Powys Teaching Health Board at Month 12, and a high-level overview of COVID, Test, Trace and Protect and mass vaccination performance.</p> <p>The Director of Planning and Performance advised that it continued to be an interim process as a result of the COVID-19 pandemic in the absence of the regular Integrated Performance Report.</p> <p>The report contained a high-level summary of COVID-19 e.g. infection rates, mortality and vaccination progress. A brief update on Powys Teaching Health Board's (PTHB) performance, set against the four aims and their measures included a dashboard which showed the levels of compliance against the National Framework. Using that data, performance achievements were highlighted and challenges at a high level, as well as brief comparison to the All Wales performance benchmark where available.</p> <p>Updates to the report included, the timeliness of the first section around the COVID-19 update. The 7-day case incidence rate was now 5.29 per 100,000 of the population. Only 7 new cases were reported in the last 7 days. Powys was progressing in a positive direction. Contact tracing continued to perform. For mass vaccinations, 93,133, more than 83% of the population had received their first dose.</p>

Just over 33% of the population had received their second dose. PTHB was on track to administer all accepted first doses by 31 July 2021.

Work around planned care had been undertaken and the level of backlog was being dealt with. Work had been undertaken at pace with Welsh Government for the planned recovery of care. Waiting lists remained a significant issue. In the last Development & Performance meeting it was recognised an improvement discussion would be undertaken. One of the key actions was to ensure an improvement in compliance with personal development appraisals which would be tackled over the next few weeks.

The committee DISCUSSED and NOTED the report.

B) DRAFT ANNUAL PLAN MINIMUM DATA SET OVERVIEW

The Director of Planning and Performance presented the previously circulated paper which provided the Performance & Resources Committee with 16 individual work sheets covering all aspects of the Health Board, which included:

- Finance e.g. Revenue plan, income assumptions, capital, expenditure etc.
- Covid preparations e.g. TTP, vaccination, bed plans
- Workforce
- Screening activity – public health wales
- Core activity in both primary and secondary care.

With a focus on core activity, which is further subdivided by:

- Delivery of essential services in primary & community care
- Mental health
- Acute care – unscheduled care
- Elective care
- Outsourced activity – currently not applicable to PTHB
- Cancer care
- Diagnostics
- Ambulance – these have been set centrally by WAST

The Health Board submitted a draft for the time period April 2021 to March 2022, and would submit a final version in June 2021.

Had the authors been contacted and were they happy to submit the dataset in the Data Agreement? Would there be benchmarking for the datasets across Wales?

	<p>The Director of Planning and Performance responded that the Minimum Dataset had to be submitted to Welsh Government at the end of June 2021. Welsh Government recognised the minimum data set needed further revision. There was a risk of not being able to do comparative assessments due to the underdeveloped methodology. Benchmarking would be needed across Wales. The national data stream set was to be reviewed. An agile approach to reporting would be necessary moving forwards.</p> <p>The Director of Primary, Community Care and Mental Health added, in taking part in operational groups some measures had been identified as quite new to be involved in. Contact was to be made with other Health Boards regarding where they were sourcing the data presented in their datasets. Data needed to be consistent and reportable across Wales.</p> <p><i>It was inevitable that once the data was published comparisons would be made between Health Boards.</i></p> <p>The committee DISCUSSED and NOTED the report.</p>
P&R/21/08	<p>FINANCIAL PERFORMANCE REPORT</p> <p>The Director of Finance and IT presented the previously circulated paper which provided the Performance & Resources Committee with an overview of the 2020/21 Financial Position reflected in the completed draft Annual Accounts submitted to WG on 30 April 2021.</p> <p>The final year end position was an underspend against PTHB's Annual Revenue and Capital Spending. To deliver a breakeven position was a great achievement. The draft of the report brought to the committee would be subject to the audit process.</p> <p>Moving forward in 2021/22 performance would be monitored against the PTHB draft Financial Plan. Long term sustainability needed to be a focus. 2021/22 would be a challenging year, finances would need to be allocated in-line with the agreed plan.</p> <p><i>In terms of expenditure on COVID-19, the Welsh Assembly had offered to refund 100% of appropriate cost. Was PTHB confident the offer still stood?</i></p> <p>The Director of Finance and IT responded that for 2020/21 PTHB's level of additional funding was as anticipated in line with financial forecasting. For 2021/22 a discretionary</p>

	<p>allocation of 7.5million was assigned for the first half of the year. There had been a number of areas which included PPE, cleaning, additional costs in Health and Social Care that would be funded. PTHB was working on the basis that the funding for 2021/22 financial year was as expected.</p> <p>The Committee NOTED the Revenue position, Capital Position and PSPP position.</p>
P&R/21/09	<p>COMMISSIONING ASSURANCE FRAMEWORK</p> <p>The Director of Planning and Performance presented the previously circulated paper which highlighted providers in Special Measures or scored as Level 4 following the February 2021 PTHB Internal Commissioning Assurance Meeting (ICAM). At the time of the last meeting there were:</p> <ul style="list-style-type: none"> • 2 providers with services in Special Measures. • 1 provider at Level 4. <p>The report also provided:</p> <ul style="list-style-type: none"> • A high-level summary of key issues in relation to the two providers with services in special measures. • The current position in relation to Essential Services. • Referral to treatment times (RTT) times. <p>The report picked up the impact of unannounced inspections at the Shrewsbury and Telford Trust. A deep dive session was organised for the Board to discuss arrangements with Shrewsbury and Telford NHS Hospitals Trust. PTHB continued to work with Cwm Taf Morgannwg University Health Board in relation to maternity services.</p> <p>One issue around the CAF framework was around the terms of existing block financial arrangements, Long Term Agreements needed to be signed off by 7 June 2021.</p> <p><i>In terms of the Shrewsbury and Telford Trust CAMHS, alternative provision appears to have been identified. Was the alternative provision better? What was an age appropriate bed?</i></p> <p>The Director of Primary, Community Care and Mental Health responded, the age appropriate bed was discussed in Experience, Quality and Safety Committee in more detail. An age appropriate bed was for an individual less than 18 or less than 16. The bed would be more appropriate than the alternative options available but not a fully appropriate bed.</p> <p><i>When would the CAMHS section return to Board?</i></p>

The Director of Planning and Performance responded that Board continued to meet to ensure the obstetric flows were still going through. There would be a separate detailed report around the Cwm Taf obstetric flows issue.

Were more details available on referral to treatment time and block finance?

The Director of Planning and Performance responded, for referral to treatment times, recovery programmes were delivered through detail in the PTHB recovery proposals. A sense of the impact on the Powys population and recovery time scale would be gained. System discussions were being undertaken with English providers. It would be important to articulate what this would mean for Powys residents. PTHB's stand in a national or regional setting would provide a useful insight.

The Director of Finance and IT added that block arrangements were in place for the first quarter but it was unclear for the second quarter. PTHB would need to take the opportunity to make changes to its value approach.

In terms of referral to treatment times, PTHB is up to date in its position in Powys as a provider and commissioner. A proactive stance would be needed on informing the Powys population on the Health Boards progress.

The Director of Planning and Performance agreed and elaborated that engagement with the Powys population was among the points proposed to Welsh Government by PTHB. An aim was to establish a support contact line. In the areas of weight management and pain management prevention it would be key to ensure patients were not left without the availability of additional support.

Page 8 of the report outlines the percentage of Powys residents waiting for treatment. It appears that English providers are addressing waiting times well along with Powys providers and it will be interesting to see how Welsh providers respond to the challenges. Are changes to the waiting time figures a result of an increased access to surgery alongside an increase in delayed referrals which are now coming through?

The Director of Planning and Performance responded, there was national work to assess what worked well, why and how it could be rolled out across providers. There would be discussion around learning and the situation would be monitored throughout the year.

	<p>The Director of Primary, Community Care and Mental Health added that progress could be expected in 6 months but overall waiting times would be a longer-term challenge.</p> <p>The Chief Executive raised that there was pent up demand with continued capacity restrictions. PTHB aimed to increase capacity but were challenged on workforce availability. PTHB wanted to be transparent about the increasing issue. A specific intervention would be initiated to guide individuals on the list to the best treatment plans. General Q&A sessions were ongoing, the topic for May was mental health. The Chief Executive proposed 'let's talk about' sessions with potential subjects of 'your operation' and waiting times. The videos would be made available to be accessed online at any time.</p> <p>The Committee DISCUSSED and NOTED the report.</p>
P&R/21/10	<p>NURSE STAFFING LEVELS ACT REPORT</p> <p>The Deputy Director of Nursing presented the previously circulated paper which provided the Performance & Resources Committee with Powys Teaching Health Board's compliance with Nurse Staffing Levels (Wales) Act 2016. The paper also provided commentary on the status of nurse staffing in NHS Trusts in England, who are commissioned by Powys Teaching Health Board but not directly subject to Welsh legalisation and identified the areas of proposed extension of the Act which will influence the way in which nursing and health visiting services are developed and provide into the future.</p> <p>The Deputy Director of Nursing advised that Powys Teaching Health Board did not have any section 25B wards (surgical and medical) and therefore was not currently mandated to report (under section 25E of the Act) against this requirement.</p> <p>The Health Board had a commissioning responsibility to assure themselves that services which provided secondary care, adult inpatient, medical and surgical wards, did comply with the Nurse Staffing Act in Wales, and also that the requirements of Safe Staffing for trusts in England were met. The report set out the assurance from commissioned providers in meeting these requirements and in assuring general safety of patients resulting from adequate nurse staffing levels.</p> <p>The Care Quality Commission had applied an inadequate rating to staffing within Shrewsbury and Telford NHS Trust.</p>

	<p>The NHS Improvement National Lead for Safer Staffing was supporting the trust with the work.</p> <p>Within Powys, nursing sensitive quality indicators were regularly reported to the Experience Quality and Safety Committee. Following interrogation of the incident reporting system the Performance and Resource Committee could take a reasonable amount of assurance in relation to compliance with the Nurse Staffing levels (Wales) Act 2016 for commissioned services.</p> <p><i>The report presentation to the Committee should be included in the strategic context when the paper was taken to Board.</i></p> <p>The Committee DISCUSSED the paper.</p>
P&R/21/11	<p>WORKFORCE HIGHLIGHT REPORT</p> <p>The Director of Workforce and OD presented the previously circulated paper which provided the Performance & Resources Committee with an update on the Workforce data up until year end, 31 March 2021. The report focused on the generic workforce performance indicators of the Health Board and provided a year end position against those indicators.</p> <p>The Director of Workforce and OD advised the report provided an update on Powys Teaching Health Board's overall workforce performance, including data on statutory & mandatory training, PADRs, sickness absence, staff in post, turnover and volunteers. It provided a year end position across a range of workforce performance areas, identifying areas where performance would need a focused approach to ensure improved compliance against target over the next twelve months.</p> <p><i>On chart 6, the narrative did not connect with the paragraph below.</i></p> <p>The Director of Workforce and OD responded that the narrative was correct the graph was incorrect and would be updated accordingly.</p> <p>The Director of Primary, Community Care and Mental Health added that a large proportion of the workforce were under Primary, Community Care and Mental Health. All line managers understood the importance of PADRs, statutory and mandatory training. Womens and Childrens services had an over 80% training completion rate. The recovery on</p>

	<p>both PADR's and training would be undertaken as soon as possible.</p> <p>The Committee RECOGNISED areas where performance against the key performance metrics had been impacted by Covid-19 in the last 12 months. AGREED future reporting against these areas which provided assurance in relation to performance recovery.</p>
	<p>HEALTH & SAFETY REPORT: HAND ARM VIBRATION AT WORK</p> <p>The Director of Workforce and OD presented the previously circulated paper which provided the Performance & Resources Committee with assurance and overview in relation to the Health & Safety Executive (HSE) investigation to date, relating to compliance with the Control of Vibration at Work Regulations 2005 and the prevention of Hand Arm Vibration Syndrome (HAVS).</p> <p>An improvement Action Plan in response to the HSE Improvement Notices formed part of the paper. PTHB had to comply with the actions in the plan by 30 April 2021.</p> <p>The actions and interventions required, as part of the current Improvement Notices, some of which were likely to require financial investment as identified within this report.</p> <p>Further actions had been completed between the time of writing the report and the Performance and Resources Committee on 6 May 2021. An update detailing the additional actions completed between submission and 5 May 2021 was tabled at the Committee.</p> <p>The Director of Workforce and OD advised that during 2020 five employees in PTHB's Estates department were identified during routine health surveillance as displaying symptoms of Hand Arm Vibration Syndrome. This was due to exposure from the day to day use of vibratory tools and work equipment. These employees were referred to PTHB's Occupational Health Consultant, who after tests confirmed a diagnosis of HAVS, which resulted in the cases being reported to the HSE under RIDDOR.</p> <p>These cases related to vibration exposure through work over a number of years. There was currently one case proceeding to a Civil claim against the organisation.</p> <p>Following the RIDDOR submissions, HSE informed PTHB that they would be commencing an investigation into how</p>

	<p>the organisation has complied with the Control of Vibration at Work regulations, which came into being in 2005.</p> <p>Whilst the HSE continued their investigations, they issued a Notice of Contravention and two Improvement Notices on 2 March 2021, which identified material breaches of the regulations, which required compliance by 30 April 2021.</p> <p>The detailed Action Plan sets out a methodical approach to ensuring PTHB are able to comply with the regulations and assess the risk of vibration exposure.</p> <p>The HSE would seek to serve a fee for the two current Improvement Notices which was anticipated in range from £5k to in excess of £15k.</p> <p>All actions detailed in the plan had been COMPLETED including mop up training. HSE had reported back positively in regards to the improvements made in April. A positive outcome was expected from the letter to be received from HSE. A significant amount of the issues were of a historical nature.</p> <p>The Committee NOTED the paper.</p>
ITEMS FOR INFORMATION	
P&R/21/12	There were no items for information.
OTHER MATTERS	
P&R/21/13	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES</p> <p>No items were noted.</p>
P&R/21/14	<p>ANY OTHER URGENT BUSINESS</p> <p>No other urgent business was raised.</p>
P&R/21/15	<p>DATE OF THE NEXT MEETING: 24 June 2021</p> <p>NB. Performance and Resources Committee Members will also be invited to attend the Audit, Risk and Assurance Committee meeting on the 8 June 2021 to jointly consider the Annual Report 2020-21 (Annual Performance Report, Annual Accountability Report and Annual Financial Statements).</p>