

**POWYS TEACHING HEALTH BOARD  
PLANNING, PARTNERSHIPS AND POPULATION HEALTH COMMITTEE**

**CONFIRMED**

**MINUTES OF THE MEETING HELD ON THURSDAY 16 MAY 2024  
VIA MICROSOFT TEAMS**

**Present:**

Ian Phillips (IP)	Independent Member (Committee Chair)
Ronnie Alexander (RA)	Independent Member
Jennifer Owen-Adams (JO-A)	Independent Member

**In Attendance:**

Mererid Bowley (MB)	Director of Public Health
Claire Madsen (CM)	Executive Director of Therapies and Health Sciences
Stephen Powell (SP)	Executive Director of Planning, Performance and Commissioning
Helen Bushell (HB)	Director of Corporate Governance
Claire Roche (CR)	Executive Director of Nursing and Midwifery
Luke Jones (LJ)	Designated Education Clinical Lead Officer
Jayne Lawrence (JL)	Assistant Director of Primary Care
Owen Hughes (OH)	Head of Powys Living Well Service
Alison Merry (AM)	Consultant in Public Health
Adrian Osborne (AO)	Deputy Director of Engagement and Communications
Mick Giannasi (MG)	Independent Member
Andrea Blayney (AB)	Llais
Tracey Deacon (TD)	Head of Service Public Health Programme

**Apologies for absence:**

Rhobert Lewis (RL)	Independent Member (Committee Chair)
Kirsty Williams (KW)	Independent Member
Hayley Thomas (HT)	PTHB Chief Executive Officer
Pete Hopgood (PH)	Deputy Chief Executive and Director of Finance, Information & IT

**Committee Support:**

Beth Powell (BP)	Interim Corporate Governance Business Officer
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PPPH/24/001

**WELCOME AND APOLOGIES FOR ABSENCE**

	The Committee Chair welcomed Members and attendees to the meeting and <b>CONFIRMED</b> a quorum was present. Apologies for absence were <b>NOTED</b> as recorded above.
PPPH/24/002	<b>DECLARATIONS OF INTERESTS</b> No interests were declared in addition to those already declared in the published register.
PPPH/24/003	<b>UNCONFIRMED MINUTES OF THE PLANNING, PARTNERSHIPS AND POPULATION HEALTH COMMITTEE HELD 20 FEBRUARY 2024</b> The Committee <b>APPROVED</b> the minutes of the meeting held on 20 February 2024, as being a true and accurate record subject to the following amendment. <b>PPPH/23/46</b> <i>Does the diabetic screening complement the additional testing service offered by opticians?</i> This service is offered to patient's direct family members who have glaucoma, this is at no cost.
PPPH/24/004	<b>COMMITTEE ACTION LOG</b> The Committee Action Log was received, and ongoing actions were discussed. Four items were recommended for closure:  <b>PPPH/23/40</b> – HB highlighted that the Additional Learning Needs Update was an agenda item for this meeting.  <b>PPPH/23/45</b> – HB confirmed that a change to the format of the Regional Partnership Board update for Age Well had been implemented across all reporting mechanisms, providing more information to enable an assessment of whether the agreed objectives are being achieved.  <b>PPPH/IC/23/55</b> – HB advised that ongoing discussions were in place internally and with external colleagues regarding future funding for the North Powys Wellbeing Programme. An update was due to be presented to the Board on 22 May 2024.  <b>PPPH/23/24-</b> HB confirmed that minutes of the Primary Care Cluster meetings had been circulated to all Committee members for information.  The Committee <b>AGREED</b> all actions discussed for closure.
<b>ITEMS FOR APPROVAL/RATIFICATION/DECISION</b>	
PPPH/24/005	<b>COMMITTEE ANNUAL REPORT</b> HB introduced the report which summarised the 2023/24 key areas of business and activity. It was noted that the Terms of Reference requirements had not been met for the year 2023/24 due to the Committee only meeting three times instead of four. The language utilised within the Terms of Reference was under review to ensure consistency and transparency. The report was due to be presented to The Board on 22 May 2024.

	<p>Independent Members sought assurance by asking the following questions:</p> <p><i>Is there opportunity for the Board to undertake a review of all Committees' performance and effectiveness to understand the Health Board's position?</i></p> <p>This had been scheduled as part of a Board Development session in Quarter 2 for the Board to discuss the implications to meet Committee Terms of Reference, review Committee effectiveness surveys and the importance of flexibility as part of the governance compliance.</p> <p><i>What are the implications if compliance has not been met against the Committee Terms of Reference?</i></p> <p>It was confirmed that no concerns had been raised, however it must be recognised that the Board understood the implications of the Committee meeting rules and impact of not meeting the Terms of Reference.</p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>CONSIDERED</b> the Planning, Partnerships and Population Health Committee Annual Report for 2023/24 summarising the key areas of business activity undertaken; and</li> <li>• welcomed the Annual Report as a review of the totality of committee work undertaken.</li> </ul> <p><i>Andrea Blayney joined the meeting.</i></p>
<p><b>ITEMS FOR ASSURANCE</b></p>	
<p>PPPH/24/006</p>	<p><b>STRATEGIC CHANGE REPORT</b></p> <p>SP presented the item and highlighted the importance of the updated stocktake of Strategic Change programmes which may impact on Powys Teaching Health Board services and patients.</p> <p>The report provided a whole system view of all service areas' strategic change ambitions as recently submitted to Welsh Government in March 2024. It was highlighted that the engagement and delivery environment remained challenging across the transformation programmes, and this was an evolving picture.</p> <p>Independent Members asked the following questions for assurance:</p> <p><i>When can we expect the next iteration of plans and is there an expectation of challenge?</i></p> <p>SP advised that all revised financial and performance plans were due to be submitted to Welsh Government at the end of May 2024. An updated plan would then be presented to the</p>

Committee to show the impact of the next stage of revised plans.

*Does the service require data earlier than the scheduled deadline in order to inform the Health Boards plans?*

The service receives updates through the monthly Clinical Quality Performance meetings to review neighbouring Health Board plans that effect Powys residents. Local plans were updated in light of the revised challenges provided by Welsh Government.

It was also highlighted that progress on the regionalisation agenda across Wales is slow-moving and this posed a challenge. All Health Boards were asked to work together to improve capacity across Planned Care. It had been recognised that the expansion of cataract services to improve capacity across the South region at Nevill Hall has been well received.

A review had been undertaken of the feedback provided by Welsh Government which is featured within the Integrated Medium-Term Plan (IMTP) and Annual Plan. NHS England had been asked to review current plans in order to improve the financial system and the potential impact to Powys residents. This would enable Powys to understand the challenges and targets set by NHS England. An update would be provided at the next meeting.

**Action: Director of Planning, Performance and Commissioning**

*What more can be done to ensure the regionalisation agenda delivers plans for residents across Wales?*

It was noted that regular monthly meetings were held with Welsh Government to discuss the regionalisation agenda which was a priority scheme for NHS Wales. It was expected that performance would improve given additional capacity and be kept under review.

*Why has the number of children waiting for Specialised Hearing services shown little improvement?*

AO confirmed that the process as designated provider had been complex, however, positive signs of movement were underway as work continued in partnership with Llais. Work had progressed with engagement leads network and following the review, would help to understand the level of expectation and areas of potential development.

*Why have Powys residents had to travel long distances to access Hepato-Pancreato-Biliary (HPB) services?*

A programme of work was underway across Wales to agree a future sustainable model, recognising the level of unmet need for pancreatitis services. Powys expect to implement a three-

	<p>step phased plan of a shared delivery network with the expectation of a fully integrated service over a two–three year period in the Autumn.</p> <p><i>Alison Merry joined the meeting.</i></p> <p>The Committee:</p> <p><b>RECEIVED</b> the report and <b>ASSURANCE</b> was provided that the organisation has the appropriate processes in place to monitor and review Strategic Change programmes across Wales.</p> <p><b>SERVICE CHANGE ENGAGEMENT REPORT</b></p> <p>AO presented the item and provided an overview of current and forthcoming NHS Service Change engagement and consultation activity with a potential impact for Powys residents, patients, and services. Key highlights were:</p> <ul style="list-style-type: none"> <li>• Joint engagement workshops across 13 Powys localities to capture views on the Health Board's Accelerated Sustainable Model "Better Together" and Powys County Council's Sustainable Powys programme. A report to summarise the key themes was being prepared.</li> <li>• The Emergency Medical Retrieval and Transfer Service (EMRTS) Phase three engagement exercise closed on 29 February 2024. Updated recommendations were considered by all seven Health Boards and was approved.</li> </ul> <p>AO thanked Llais colleagues for their support to the Health Board and ongoing work across all service change programmes.</p> <p>The Committee <b>RECEIVED</b> the report and <b>ASSURANCE</b> was provided in terms of the delivery of engagement/consultation programmes for which the Health Board is directly responsible and the contribution to partnership programmes.</p> <p><i>Alison Merry left the meeting.</i></p>
PPPH/24/007	<p><b>NWSSP PERFORMANCE REPORT – YEAR END</b></p> <p>HB presented the item in the absence of the PH. An overview was provided in summary of the performance data in respect of the services provided by NHS Wales Shared Services Partnership (NWSSP) for the quarter ended 31 March 2024.</p> <p><i>What is the reasoning for the procurement savings target being £400,000 against the current position of £95,000?</i></p> <p>HB advised that this would be picked up with PH with an update provided at the next meeting.</p> <p><b>Action: Director of Corporate Governance/Director of Finance, Capital, and Support Services.</b></p>

	<p><i>Who is the overriding body who monitors the programme of work?</i></p> <p>HB confirmed that an Executive Shared Services Management Committee was in place, where Powys is represented by the Director of Finance, Capital and Support Services and the Director of People and Culture. The Committee provides greater scrutiny assisted by a series of deep dives on particular concerns across the system. In addition, a number of internal meetings were held monthly to discuss local concerns from a financial and workforce procurement perspective.</p> <p><i>Does Powys have a role to influence service improvement where concerns are being raised across services provided by NHS Wales Shared Services Partnership?</i></p> <p>The Committee was advised that Powys had an opportunity to influence the management committee, however a number of systems were All Wales based and not Powys specific. HB agreed to link with the PH for consideration with an update provided to Committee members at a future meeting.</p> <p><b>Action: Director of Corporate Governance/Director of Finance, IT and Primary Care</b></p> <p>The Committee <b>RECEIVED</b> the report and <b>NOTED</b> the summary of the performance data in respect of the services provided by NHS Wales Shared Services Partnership (NWSSP) for the quarter ended 31st March 2024.</p> <p><i>Owen Hughes and Claire Roche joined the meeting.</i></p>
PPPH/24/008	<p><b>WHOLE SYSTEMS APPROACH TO PREVENTION OF OBESITY</b></p> <p>The Chair thanked AM for their service to Powys ahead of her retirement from Powys Teaching Health Board (PTHB) in the Summer. MB echoed her thanks for the contributions across the Public Health Service in Powys.</p> <p>AM presented the report and provided an overview on the Whole System Approach to the Healthy Weight programme in Powys and highlighted the progress made on delivery during 2023/24. Since the previous briefing to the Planning, Partnerships and Public Health Committee on 11 May 2023, the delivery of this programme had continued to progress well.</p> <p>Delivery in 2023/24 has included:</p> <ul style="list-style-type: none"> <li>• Further stakeholder engagement including stakeholder events in November and December 2023</li> <li>• Identification of four themes of focus within the identified priority sub-system of “children (aged 0-5), families and access to healthy food”</li> </ul>

	<ul style="list-style-type: none"> <li>• Establishment of a Strategic Steering Group to develop and oversee the delivery of a Strategic Delivery Plan</li> <li>• Completion of Strategic Delivery Plan and commencement of delivery</li> <li>• Establishment of Task and Finish Groups for specific areas of work within the four themes and;</li> <li>• Formal adoption of this work by the Public Service Board as one of its three priorities for the period 2023/24 to 2027/28.</li> </ul> <p><i>Can the Committee expect to see performance indicator targets within the smart actions developed to ensure an improved data set for the future?</i></p> <p>The Committee was advised that Early Years convey robust data, specifically across breast feeding and for Children entering school. This remained a ministerial priority and as part of surveillance, all Children are weighed from the age of 4, where the data set forms part of the performance indicators in order to develop a Powys specific smart action plan.</p> <p><i>Given budget challenges, is this a ministerial priority to ensure work is not vulnerable?</i></p> <p>It was confirmed that the grant funding is available until March 2025 which is allocated to 1.5 members of staff. Discussions with Welsh Government had taken place around the systems approach and the Healthy Weights, Healthy Wales strategy would pose a risk across Powys should the grant funding not continue next year.</p> <p><i>How does Powys plan to improve traction across deprived areas within Powys?</i></p> <p>It was highlighted that free school meals had been made available across Wales, in addition to the Healthy Start scheme which supports deprived families. Discussions had taken place with local Councils to review internal plans to help support these schemes.</p> <p>The Committee recognised the need for the Public Service Board (PSB) Scrutiny Committee to support this work and to utilise the project to demonstrate across statutory services and within the voluntary sector.</p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>NOTED</b> the contents of the report and;</li> <li>• took <b>ASSURANCE</b> on the progress made on implementing a whole system approach to the prevention of overweight and obesity in Powys.</li> </ul>
PPPH/24/009	<b>WEIGHT MANAGEMENT PATHWAY (to include Healthy Wales Assurance Report)</b>

	<p>CM introduced the report and provided assurance on the development of weight management services across Powys. The service had been allocated a small budget for a level 3 service and contained multi-disciplinary working Powys wide to ensure a deliverable service.</p> <p>The Head of the Powys Living Well Services provided the committee with an overview of the National developments for Weight Management, the forthcoming introduction of a national minimum data set for weight management services and publication of a review of weight management pathways in Wales.</p> <p>It was noted that further work is required by the services, particularly level 3, in order to establish and implement processes to monitor key service delivery data including activity and outcome data. Powys sought to deliver an increase in local promotion of the national online level one offer as part of moving the services to a business-as-usual model.</p> <p><i>Is it anticipated to see a growth in demand of weight loss medication given the opportunity to increase supply?</i> It was confirmed that growth was anticipated. The Health Board received a large volume of referrals for medication only, requiring no additional support. The service planned to review the supply of medication to develop a support package of lifestyle changes, alongside medication to influence longer term solutions.</p> <p><i>Are the Slimming World scheme vouchers fully utilised for weight management?</i> Slimming World Vouchers were available; however, the current trend was that patients had often experienced the scheme prior to contacting the Weight Management Service for support. Therefore, the vouchers are not fully utilised. Vouchers were not time limited, and the current challenge remained offering a support service of Weight Management beyond a 9am to 5pm working timeframe. An introduction to further access remains under review.</p> <p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the report and was <b>ASSURED</b> that work continued to develop Weight Management Pathways in Powys as per the Integrated Plan. <i>Owen Hughes left the meeting.</i></p>
PPPH/24/010	<p><b>HEALTHY CHILD WALES PROGRAMME EVALUATION HEALTH VISITING PROGRAMME</b></p> <p>CR provided the Committee with an overview of the Healthy Child Wales Programme (HCWP) which set out what planned contacts children and their families could expect from their</p>

Health Boards from maternity service handover to the first years of schooling (0-7 years). It was highlighted that the service aimed to build on the existing Healthy Child Programme and set out to expand the current model to 16 years of age as opposed to 7 years.

The School Nurse Service offer screening and surveillance for Vision, Hearing, and the Child Measurement Programme in Q4 and Q1. As the programme was an opt out programme the uptake was usually high, with an opt out of less than 5% therefore achieving 95-100% uptake.

It was highlighted that all screening and surveillance programmes for this academic year in Powys were planned and resourced for delivery.

*Given the background of national staffing challenges nationally, does Powys experience staffing challenges across Nursing and Health Care staff?*

CR stated that challenges remained across Health Visiting and School Nursing staff, locally and nationally. The service had undertaken a review of the fragility across Nursing staff which had been successful in creating and offering development roles across the service.

It had been recognised that School Nursing staff were required to undertake an intense one year post graduate course which posed a challenge for both recruitment and how Powys supported staff to undertake the course. CR confirmed that as the transition of Executive Director portfolios change, this was an area of focus, and an assessment would take place to review the workforce challenges to identify the need going forwards. It was explained that this was not localised to Powys but remained a national challenge.

*Are Childrens periodic weight testing always adhered to?*

Indicators of weight testing for children begin from birth and periodically thereafter as well as when they begin school at four years of age. Powys aimed to improve data collection to help understand weight trends. There was a gap for implementation locally to understand how the challenges were cascaded across the Health Board and would be an implementation period for evaluation to support the priorities for improvement going forward.

The Committee **RECEIVED** the report and were **ASSURED** in relation to:

- progress of the Healthy Child Wales Programme
- the governance and reporting arrangements in place locally and nationally for the programme.

*Claire Roche left the meeting.*

	<i>Tracey Deacon joined the meeting.</i>
PPPH/24/011	<p><b>DEEP DIVE- DIABETES PART 2</b></p> <p>The Chair of the Committee highlighted the update of progress in developing the Deep Dive into Diabetes as a statement report which was taken as read. The Committee <b>AGREED</b> that the content provided had produced modelling for three scenarios of projections of prevalence of diabetes for the Powys population over the next 15 years.</p> <p>The deep dive work would be progressed as planned between May and August 2024 with an update reported to the Committee in August 2024.</p> <p><b>Action: Director of Public Health.</b></p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>RECEIVED</b> the preliminary report on diabetes and were assured that work has progressed in line with the deep dive plan;</li> <li>• <b>NOTED</b> the key findings of the scenarios within the report and;</li> <li>• <b>NOTED</b> the plan to receive an update at the August Committee meeting.</li> </ul> <p><i>Jayne Lawrence joined the meeting.</i></p>
<b>ITEMS FOR DISCUSSION</b>	
PPPH/24/012	<p><b>ANNUAL REPORT OF DIRECTOR OF PUBLIC HEALTH</b></p> <p>MB presented the independent report and noted this was the first report produced as Director of Public Health. The paper set out the key health challenges facing the Powys population alongside opportunities to improve population health. The report set out calls for action for individuals and organisations and</p> <p>Committee members commended the Public Health Team on the presentation of the report which clearly articulated the Health Board’s current position and welcomed the ‘call to action’ statement which encouraged ownership and action.</p> <p><i>What is the next stage for Powys and how can a call for action be mobilised to help people understand individual health responsibility?</i></p> <p>MB confirmed the report was expected to be presented to the Board the following week and will need to be incorporated into Health Board’s planning documents. It had been identified that the key themes presented were; prevention of ill health, early intervention to support the ageing population to stay as they aged, as well as focusing on giving children the best start in life. It is planned to develop a prevention framework to outline population level interventions to improve population health as part of the Health Board’s Annual Plan.</p>

	<p><i>Would an Easy Read version of the presentation be available?</i> The Public Health team has not intended to produce an easy read version as the report is aimed at organisations to take a action, however consideration would be given to this.</p> <p><i>What is the current position regarding antibiotic resistance?</i> CR was a member of the National Health Group and reported on work being developed with the Chief Pharmacist to produce a local action plan for Powys. It was noted that England was expected to publish a delivery plan which would be linked locally to support planning. An update would be scheduled for Committee members assurance at a future meeting. <b>Action: Director of Nursing and Midwifery</b></p> <p><i>What is the Health Boards current position against the measles vaccination?</i> There is ongoing measles outbreak in England across the Midlands and also in London. Between October 2023 and May 2024, 1,374 cases have been confirmed across England with recent increase in cases in London. In Wales, there is an outbreak of measles in the Gwent area. Work continues in Powys to promote and increase MMR rates with targeted work contacting children and young people with undocumented MMR vaccination on Health Board records to proactively offer and encourage MMR vaccination. A working group is in place with wide representation including school nursing and education department of the Local Authority. Work continues to increase rates in healthcare staff through General Practices, Occupational Health and vaccination service.</p> <p>The Committee <b>RECEIVED</b> the Annual Report of Director of Public Health and <b>NOTED</b> the key findings for implementation.</p> <p><i>Luke Jones joined the meeting.</i></p>
PPPH/24/013	<p><b>PRIMARY CARE CLUSTER PLANS</b> JL provided the Committee with an update on progress against Cluster Plan Delivery during 2023/24 and an overview of the Primary Care Cluster Plans for 2024/25.</p> <p>A total of £870k recurrent funding was available to clusters. 2023/24 Cluster plans correlated to the recurrent individual cluster allocation and were inclusive of reflecting on ministerial priorities and supporting capacity and sustainability across primary and community care. Successful projects were being scaled up where applicable and mainstreamed or are planned to be mainstreamed into core funding across the Health Board footprint.</p> <p>The plans for 2024/25 continued to build on the priorities and projects from 2023/24 and as Clusters continued to become more established there was a strengthening alignment with Start Well, Live Well and Age well priorities.</p>

	<p>The three key priority areas of Frailty, Urgent and Emergency Care, and Mental Health continued as Pan Powys priorities for 2024/25. It was also noted that several new Cluster frailty pilot projects were in development across the Clusters along with other projects including supporting the delivery of local pathways.</p> <p>Further work continued to look at what further projects could be mainstreamed, and the outcomes and benefits of each project were being reviewed to form future cluster planning.</p> <p><i>Does Powys have a Mid Custer lead?</i></p> <p>Historically the Cluster Plans had a General Medical Service (GMS) focus, however this was currently much wider to ensure equal representation across all clusters. The Mid Powys Cluster does not currently have a specific lead which presented a lack of continuity of leadership. It was recognised that this did not affect the Health Board’s priorities as demonstrated within the report.</p> <p>HB provided assurance to the Committee and highlighted that components of Primary Care plans were included within a series of Board Development and Board Briefing sessions to review the baseline and current roles across the Clusters.</p> <p>The Chair asked Committee members to consider thought around the challenges with implementation of embedding new ways of working across the planning process.</p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>RECEIVED</b> the updates on 2023/24 plans taking <b>ASSURANCE</b> against the progress made on delivery and;</li> <li>• <b>RECEIVED</b> an overview of Cluster plans for 2024/2025.</li> </ul>
PPPH/24/014	<p><b>ADDITIONAL LEARNING NEEDS (ALN) UPDATE</b></p> <p>CM highlighted that the Additional Learning Needs (ALN) service would now form part of a new portfolio going forwards under the Director of Nursing, Quality, Women and Family Health.</p> <p>It was highlighted that the ALN service was non-funded and had limited resource for delivery. Powys was fulfilling key legal requirements under the ALN and Education Tribunal (Wales) Act and had new operational processes in place, supported by a digital infrastructure which would ensure accurate information regarding the Health Board’s compliance with legal duties moving forward.</p> <p>LJ stated that activity was progressing between the Health Board and Powys County Council to establish a joint strategic approach to meeting the requirements of the ALN Act moving forward.</p>

	<p><i>How do Committee members understand the remit and roles between Powys County Council and Powys Teaching Health Board?</i></p> <p>HB provided assurance to members that this remained a key item for discussion at the Joint Leadership Team Meetings with the Council and continued to be a standard agenda item.</p> <p>CM highlighted that challenges remained across Health and ALN delivery due to differing times. Discussions were ongoing with the lead president education tribunal to understand the roles and responsibilities for the needs of the service. Discussions with the Local Authority had taken place and engagement with Welsh Government and the Tribunal president continued to ensure clarity of expectations. The Board would be sighted on any changes to legislation accordingly.</p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>RECEIVED</b> the Additional Learning Needs (ALN) report and supported the recent activity from the Health Board to fulfil the requirements of the ALN Act;</li> <li>• <b>NOTED</b> the increased demand across ALN and;</li> <li>• Were <b>ASSURED</b> of the progress made to date and the plans moving forward to meet the requirements of the ALN Act.</li> </ul> <p><i>Luke Jones left the meeting.</i></p>
<p><b>ITEMS FOR DISCUSSION</b></p>	
<p>There were no items for discussion.</p>	
<p><b>ITEMS FOR INFORMATION</b></p>	
<p>PPPH/24/015</p>	<p><b>INTERNAL AUDIT REPORT – WINTER RESPIRATORY VACCINATION PROGRAMME</b></p> <p>The Winter Respiratory Vaccination Report was shared for information only. The Chair asked the following question: <i>Has the requirement of offering dual vaccination for the population of Powys been met in reference to the Audit report?</i></p> <p>MB stated that the audit reviewed how the Health Board had implemented the Winter Respiratory Programme against the Welsh Health Circular requirements. General Practices and pharmacies offer flu vaccination, and main delivery of covid vaccination is through Vaccination Centres. The aspiration of offering dual vaccination is therefore practically challenging across the system other than to eligible health board employees. In addition, the All-Wales database system has not been developed to record dual vaccination for this to be rolled out. It was noted that 'The Vaccine Saves Lives' Awards had been recently held where Powys were awarded 'Best performance of vaccination delivery for Winter Respiratory Campaign'.</p>
<p><b>OTHER MATTERS</b></p>	

PPPH/24/016	<p><b>COMMITTEE RISK REGISTER</b></p> <p>HB noted that there are two risks that fell within the Committee’s remit and were reported to Board in March 2024. It was highlighted that the Committee Risk Register had been in development and will convey a different framing and action base at the next meeting.</p> <ul style="list-style-type: none"> <li>• CRR 007 - Ineffective partnership working including service change and reconfiguration results in poorer outcomes, that is a strategic risk is owned by Director of Performance and Commissioning.</li> <li>• CRR 008 - Demanding capacity pressures that within the primary care system leading to unsustainability. This is led by the Director of Finance, Information, and IT, as the risk owner. At present, there is no change in the risk rating.</li> </ul> <p>All corporate risks continued to be reviewed by the relevant lead Directors prior to the next iteration of updates.</p> <p>The Committee <b>CONSIDERED</b> the February 2024 version of the Committee Risk Register, which reflects the risks identified as requiring oversight by this Lead Committee.</p>
PPPH/24/017	<p><b>COMMITTEE ANNUAL WORK PROGRAMME</b></p> <p>HB presented the 2024/2025 work programme based upon the scope with the Terms of Reference. An agile approach would be followed to respond to changes as required and the programme adapted throughout the year as required.</p> <p>The Committee <b>NOTED</b> the Work programme and took <b>ASSURANCE</b> the relevant items would be available.</p>
PPPH/24/018	<p><b>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND/OR OTHER COMMITTEES</b></p> <p>HB confirmed a verbal update would be provided by the Committee Chair to Board the following week based on the discussions at this meeting.</p> <p>It was noted that given the escalation to the Board of the Additional Learning Needs (ALN) in November 2023 due to noncompliance, work had been undertaken to ensure compliance with the legislation and therefore can be de-escalated accordingly.</p>
PPPH/24/019	<p><b>ANY OTHER URGENT BUSINESS</b></p> <p>There was no urgent business.</p>
PPPH/24/020	<p><b>DATE OF THE NEXT MEETING</b></p> <p>13 August 2024 at 10:00, via Microsoft Teams.</p>
PPPH IC/24/001	<p>The following motion was passed:</p> <p><i>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.</i></p>

PPPH  
IC/24/002

**MINUTES OF THE IN-COMMITTEE MEETING HELD ON  
20 FEBRUARY 2024**

The Committee **APPROVED** the In-Committee minutes of the meeting held on 20 February 2024, as being a true and accurate record.