

**MINUTES OF THE CWM TAF UNIVERSITY HEALTH BOARD MEETING  
HELD ON WEDNESDAY THURSDAY 26 SEPTEMBER 2019, IN  
YNYSMEURIG HOUSE, NAVIGATION PARK, ABERCYNON**

**MEMBERS PRESENT:**

Marcus Longley	– Chair
Sharon Hopkins	– Chief Executive (Interim)
Maria Thomas	– Vice Chair
Alan Lawrie	– Director of Primary, Community & Mental Health Services
Anne Phillimore	– Director of Workforce & Organisational Development (Interim)
Dilys Jouvenat	– Independent Member
Giovanni Isingrini	– Associate Member (In part)
Ian Wells	– Independent Member
James Hehir	– Independent Member
Jayne Sadgrove	– Independent Member
Kamal Asaad	– Medical Director
Keiron Montague	– Independent Member
Kelechi Nnoaham	– Director of Public Health
Nicola Milligan	– Independent Member
Paul Griffiths	– Independent Member
Phillip White	– Associate Member
Ruth Treharne	– Director of Planning & Performance
Steve Webster	– Director of Finance
Suzanne Scott-Thomas	– Associate Member

**OTHERS IN ATTENDANCE:**

John Palmer	– Chief Operating Officer
Nick Lyons	– Medical Director Designate
Georgina Galletly	– Director of Governance / Board Secretary (Interim)
David Jenkins	– Independent Support to CTMUHB Chair
Cathy Moss	– Chief Officer, Cwm Taf Morgannwg Community Health Council (In part)
Alison Davies	– Assistant Director Quality & Patient Experience
Rachel Burton	– Service Group General Manager (In part)
Felicity Waters	– Head of Communications & Media Management (In part)
Emma Walters	– Corporate Governance / Committee Secretariat

HB/19/113

**WELCOME AND INTRODUCTIONS**

The meeting commenced with a Patient Story which was warmly welcomed by Members.

The Chair extended his apologies to Members for the delayed distribution of papers which had caused some difficulties, particularly for Community Health Council colleagues. Georgina Galletly also apologised for the issues experienced and advised that further discussions would be held with the Executive Team to ensure the timely submission of papers.

The Chair **welcomed** everyone to the meeting including Nick Lyons, the new Medical Director, Georgina Galletly, Director of Governance / Board Secretary (Interim) and also welcomed Alison Davies and Cathy Moss to the meeting.

HB/19/114

**APOLOGIES FOR ABSENCE**

Apologies for absence were **received** from Greg Dix, Mel Jehu and John Beecher.

HB/19/115

**DECLARATIONS OF INTEREST**

There were none.

HB/19/116

**UNCONFIRMED MINUTES OF THE HEALTH BOARD MEETING HELD ON 30 MAY 2019**

Members **APPROVED** the minutes of the Health Board meeting held on 31 July 2019, as a true and accurate record.

HB/19/117

**ACTION LOG**

Members **RECEIVED** and **NOTED** the Action Log.

**Page 1, Concerns (Complaints, Claims & Patient Safety Incidents)**

Members **NOTED** that there had been no change to the Welsh Government position regarding Safer Storage of Medicines cabinets.

**Page 1, Paediatrics, Neonatal and Obstetric Service Change**

Members **NOTED** that the Obstetrics and Neonatal element of this programme of work had been completed with a programme of work in place for Paediatrics leading up to September 2020.

### **Page 2, Patient Experience Report**

Members **NOTED** that a full report would be presented at the November meeting.

### **Page 2, Update on Maternity Services**

Alison Davies advised that this action had been completed as a full explanation and breakdown of the Serious Untoward Incident cases had been provided to Board Members at the April Board Development Session.

### **Page 2, Board Development Session**

Georgina Galletly questioned whether Members felt that an additional Board Development Session was still required on the Bridgend Boundary Change. Following discussion, it was suggested and agreed that a session would be required on the new Cwm Taf Morgannwg in its entirety at the February Development Session. Members **NOTED** that the Legacy Log on Bridgend risks had been received and closed by the Quality, Safety & Risk Committee at its September meeting.

### **Page 3, Concerns (Complaints, Claims & Patient Safety Incidents)**

Alison Davies advised that work was being undertaken in relation to the review of 2018 serious incidents data with and without pressure ulcers. Alison Davies suggested that a report be presented to a future Board meeting so that the matter could be closed.

### **Page 3, Concerns (Complaints, Claims and Patient Safety Incidents)**

Alison Davies advised that in relation to the suggested review of incidents reported to determine whether any incidents had been reported for the Merthyr Tydfil & Cynon areas, the tables contained within the report had not been comparable and advised that this action had now been completed.

### **Page 3, Maternity Oversight Improvement Panel**

Sharon Hopkins advised that this action could be removed from the action log.

### **Page 3, Health Board Enhanced Escalation Status**

Members **NOTED** that this action had been completed and could be removed from the action log.

### **Page 4, Workforce Metrics**

Anne Phillimore advised that the review of mandatory training for staff would be a significant area of work with significant resources required to undertake the review. Members **NOTED** that a report would be presented to the Board in January.

**Page 4, Workforce & OD Metrics**

Anne Phillimore advised that reasons for staff leaving the organisation had been included in the Workforce Metrics report and following discussion it was **AGREED** that further discussion would take place at the Finance, Performance & Workforce Committee.

**Page 4, Patient Experience Report**

Alison Davies advised that an update on the proposal to roll out real time feedback across to other wards would be included in the report that would be presented to November Board.

**Page 4, Paediatric Service Moves**

Sharon Hopkins apologised for not distributing a formal note regarding the services highlighted within the South Wales Programme and advised that engagement was about to commence with staff regarding the work being undertaken on Paediatrics and A&E Services.

HB/19/118

**MATTERS ARISING**

There were no matters arising.

HB/19/119

**CHAIRS REPORT AND AFFIXING OF THE COMMON SEAL**

Marcus Longley presented the report and provided an update on the following key areas:

- Committee Membership - Marcus Longley advised that he had received no further feedback from Members regarding the proposed changes to Committees and Membership. Members **NOTED** that these changes would be implemented over the next few weeks
- Lectures and Board Suppers - Members **NOTED** that there would be two more lectures and Board suppers in October and November which all colleagues were welcome to attend.

Ian Wells made reference to the 'Let's Talk' sessions that had been held and asked whether any lessons had been learnt from the sessions. Marcus Longley advised that variation was found across sites with some examples of low staff morale.

Members **NOTED** that staff were working incredibly hard in challenging circumstances whilst receiving a lot of public attention and criticism. Sharon Hopkins advised that the first round of sessions had consisted of a staff briefing being given with some question and answer opportunities. Members **NOTED** that follow up discussions had been held with staff on specific issues raised.

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Members **NOTED** that drop in sessions would be held next and consideration was being given as to what briefings could be held on different sites to maximise staff engagement.

The Board **RESOLVED** to:

- **NOTE** the report
- **ENDORSE** the Affixing of the Common Seal.

HB/19/120

### CHIEF EXECUTIVES REPORT

The Chief Executive presented Members with the report and the Board NOTED the following key areas;

#### Key Reports and Documents to note:

Sharon Hopkins advised that there would be a number of reviews and reports that would shortly be published and advised that these reports would be made available to Board Members as soon as they had been released. The reports that were due to be published included:

Reports/reviews commissioned by Welsh Government - Intervention

- Delivery Unit Follow up Review – Board systems and processes for reporting, management and review of patient safety incidents and concerns
- Independent Maternity Services Oversight Panel Quarterly Report which would be launched by the Minister on 8 October 2019
- Healthcare Inspectorate Wales/Wales Audit Office Review of Governance Processes which would be published during November

Reports/reviews commissioned by Cwm Taf Morgannwg UHB

- Delivery Unit Review of Waiting List Reporting
- Delivery Unit Review of Accident & Emergency at Princess of Wales Hospital
- Delivery Unit Review of Prince Charles Hospital Emergency Department and Acute Care Unscheduled Care System
- Healthcare Inspectorate Wales Review into Mental Health Services at Royal Glamorgan Hospital
- Healthcare Inspectorate Wales Review CMHT Merthyr
- Healthcare Inspectorate Wales Review on the Tirion Birthing Centre
- Independent Review into the handling of the 2018 Consultant Midwife report into Maternity Services

Routine Reviews

- Community Health Council Visit to Obstetrics & Neonates Unit in Prince Charles Hospital
- Health Education Improvement Wales Review of Training in Obstetrics & Gynaecology

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- Deanery Peer Group Review of Appraisal & Revalidation

National Reviews resulting in local reports

- Delivery Unit All Wales Review of Progress Towards Delivery of Eye Care Measures

Dilys Jouvenat expressed the importance of the Board recognising the achievements of the staff who had been shortlisted for the NHS Wales awards and advised that they should be congratulated. Marcus Longley suggested that consideration could be given to inviting the staff concerned to meet with the Board to discuss their achievements.

Keiron Montague questioned whether Board Members needed to be made aware of any Brexit related updates. Kelechi Nnoaham advised that there had been risks identified for which contingency arrangements had been put into place. Members **NOTED** that a number of desktop rehearsals had been held to test scenario arrangements and that Welsh Government had put into place a Medicines Shortage group with messages being cascaded to staff and patients that there was no need to panic or hoard medicines.

The Board **RESOLVED** to:

- **NOTE** the update provided

HB/19/121

### **PROPOSAL FOR REGIONAL SEXUAL ASSAULT REFERRAL CENTRE (SARC) MODEL FOR SOUTH, MID AND WEST WALES**

Alison Davies presented the report which set out the context for the reconfiguration of SARC services across South, Mid and West Wales and provided an overview of the proposed service models and final recommendations from the Sexual Assault Referral Centre (SARC) Project Board together with the associated costs.

Members **NOTED** that the work was being led by the NHS Wales Health Collaborative and the proposal had been fully considered by the Management Board at its August meeting. Maria Thomas expressed her thanks to Alison Davies for presenting the report which was very detailed and advised that the Board had been sighted on this work previously. Steve Webster confirmed that the costs identified had been included in the Health Boards year end position.

The Board **RESOLVED** to:

- **APPROVE** the proposed Phase 1 of the Model to implement the SARC Hubs for children and adults and establishment of the Network and Commissioning roles.

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- **APPROVE** the financial allocation requested of the Health Board assuming split by population. The Cwm Taf Morgannwg contribution to phase 1 has been calculated at £106,222. This reflects a £62k unfunded cost pressure against the historic contribution of £44k (made up of historic £34k Cwm Taf and £10k of inherited Bridgend budgets through the boundary change). Only £45k was included as an original estimate of the cost pressure in the 2019/20 IMTP submission.
- **APPROVE** and support the ongoing work required to support the network and Commissioning teams to implement the models and support the ongoing work for phases 2 'Spokes' and 3 Forensic Medical Examination services.
- **NOTE** the work undertaken to date outlined within the supporting papers.
- **ENDORSE** the appropriate/required service development and associated pathways into local services to ensure compliance with the requirement of implementation of the SARC model and service.

HB/19/122

### **FRAMEWORK FOR DEVELOPING THE INTEGRATED MEDIUM TERM PLAN (IMTP) 2020 - 2023**

Ruth Treharne presented the report which provided an update on work which had been initiated to develop the local Planning Framework for the period 2020-2023, to ensure the development of the Health Board's Integrated Medium Term Plan (IMTP). In doing so, the report invited the Board to discuss and endorse a set of draft priorities for the Health Board and the approach being set out to develop the Health Board and local Business Unit IMTPs.

Members **NOTED** that the Health Board had now received the National Planning Framework alongside a National Planning IMTP, in which good practice examples had been included.

Members **NOTED** that a discussion had been held at Management Board in relation to the 9 draft priorities which had been outlined in the report and that Board approval was being sought of the priorities identified. Members **NOTED** the timeframe for producing the Corporate IMTP which was being operated in current structures and would need to be recast once the new operating model was in place.

Steve Webster provided Members with an update on the financial assumptions within the report and advised that the assumptions had been set out against a number of scenarios and uncertainties, with three possible routes to breakeven. Members **NOTED** that delivery of the plan depended on how well cost pressures would be managed and what transitional support would be received.

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Marcus Longley advised that he felt that there were some key priorities missing from the proposed list, for example Digital systems and Community Engagement. Members **NOTED** that these were within the main body of the plan as enablers underpinning all priorities and a Board discussion would need to be held as to whether these needed to be made more explicit within the 9 key priorities identified. Following discussion, Members **AGREED** that Digital and Engagement needed to be included more explicitly and **NOTED** that Ruth Treharne would consider how best to frame outside of the meeting.

Members **NOTED** of the need to ensure that the priorities were closely linked to the Future Generations Act and the 5 ways of working and that caution would need to be placed in relation to the levels of efficiency savings that needed to be made and the level they needed to be set. Members **NOTED** that Sharon Hopkins and Steve Webster had been discussing how to address with Directorate Teams. Sharon Hopkins advised that there would be a number of developing proposals which would require further discussion at the Finance, Performance & Workforce Committee.

In response to a question raised by Marcus Longley as to whether the 3.5% efficiency savings target could be achieved, Steve Webster advised that it may not be possible to deliver the upper end of the savings target and suggested that 1.5% was a more realistic target. Members **NOTED** that there were a number of key enablers sitting behind each priority, for example, Informatics.

A discussion was held as to what areas needed to be focussed on and it was suggested that there needed to be a strong emphasis on cluster plans being included in the IMTP and a stronger connection was required to regional priorities within the Regional Plan and Area plans. It was **NOTED** that there needed to be clarity on ensuring stakeholders were included in the process.

Jayne Sadgrove highlighted that this would be the first IMTP for the Health Board since being placed into Special Measures and Targeted Intervention and advised that this would create an opportunity to formally tell the story as to how the Health Board were addressing all of the issues. Jayne Sadgrove added that there was no specific reference made to Maternity Services within the report and questioned whether this needed to be expressed as a priority. Sharon Hopkins welcomed the comments made and advised that further reflection would be undertaken by the Executive Team on the content of the report.

The Board **RESOLVED** to:

- **NOTE** the draft 2020/21 priorities for the Health Board and the approach being set out to develop to the Health Board and local Business Unit IMTPs
- **NOTE** the draft financial planning assumptions, for inclusion in the 2020/21 HB Local Planning Framework
- **NOTE** that further discussion would be held outside of the meeting in relation to the priorities identified.

HB/19/123

### **ADULT THORACIC SURGERY FOR SOUTH WALES**

Sharon Hopkins presented the report which provided the Board with an update on the progress made with the Adult Thoracic Surgery plans for South Wales and the meeting held on 23 July 2019.

*Cathy Moss left the meeting at this point.*

Members **NOTED** a letter had now been received from the Chair of the Welsh Health Specialised Services Committee (WHSSC) confirming the outcome of the meeting as unanimous approval of all recommendations and asking the Board to confirm its unconditional approval for a single adult thoracic surgery centre based at Morriston Hospital, Swansea. Maria Thomas advised that she had been pleased to see that Medical colleagues had been engaged in the process and that the position would be monitored closely

The Board **RESOLVED** to:

- **APPROVE** (and ratify) the Welsh Health Specialised Services Joint Committee agreement for a single adult thoracic surgery centre based at Morriston Hospital, Swansea.

HB/19/124

### **CWM TAF MORGANNWG UHB – 'LET'S TALK CULTURE' #OurCTM**

Anne Phillimore presented the report which provided information to the Board on the development of the Cwm Taf Morgannwg UHBs values and behaviours, as part of the shaping of the new organisation's culture.

Members were reminded of the background and importance to this work which had been commissioned following the results of the staff survey which identified that there were issues within the organisation regarding bullying and harassment and leadership and culture. Members **NOTED** that the 'April Strategy' consultancy had been procured by the organisation to facilitate this work, which was being led by Sharon Hopkins.

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Members **NOTED** that a number of workshops had been arranged for November which would provide staff and patients with the opportunity to contribute to the development of a set of values and behaviours for the organisation.

*Rachel Burton arrived at 15.27pm.*

Members **NOTED** that the April Strategy had provided the Health Board with the evidence of previous commissions noting it was expected that there would be an immediate impact on culture. In relation to the proposed new staff survey, Nicola Milligan expressed concern at the length of the survey and potentially personal identifiable data that was being requested from staff. Anne Phillimore **AGREED** to ensure that staff side colleagues were engaged with the process.

Members **NOTED** that the whole organisation would be engaged in this work, including Members of the Board.

The Board **RESOLVED** to:

- **NOTE** the content of this report.

HB/19/125

### **SPECIAL MEASURES AND TARGETED INTERVENTION**

Sharon Hopkins talked the Board through the presentation and advised that the Health Board had made it clear with Welsh Government that it wanted to respond and learn from the issues that had been identified. Members **NOTED** that focus would be placed on supporting improvement and improving capability and capacity within the organisation.

Members **NOTED** that regular discussions were being held with Welsh Government in relation to work towards de-escalation and in support of this, a maturity matrix was being developed which would be presented to Board in due course.

Members **NOTED** that Georgina Galletly had taken the lead on the programme of work specifically related to Targeted Intervention and Special Measures with work being undertaken to determine the workstreams that sit underneath and a programme management approach had been introduced to take this forward.

The Board **RESOLVED** to:

- **NOTE** the update provided

**UPDATE ON MATERNITY SERVICES**

Marcus Longley **welcomed** Rachel Burton to the meeting who was in attendance for this agenda item. Alison Davies presented the report which provided the Board with an update on Maternity services, an update on actions taken since the last Board meeting and the known related implications of the special measures arrangements to date had been summarised in the report.

Members **NOTED** that the report contained an update on the Risk Register which had previously been requested by Board and the Risk Register included 9 risks. Members **NOTED** that the report identified that work continued in relation to Women's Experience and Engagement. There had also been an improvement in vacancy levels and sickness absence rates. Members **NOTED** that work was also being undertaken in relation to Regional Maternity patient flows.

Keiron Montague welcomed the improvement in sickness absence rates and asked when the Birth Rate Plus numbers would be made available to the Health Board. Members **NOTED** that it was expected that the information would be available in October and at present there remained confidence that staffing levels were correct which board members were aware had been based on professional judgement. Members **NOTED** that roster fill for day and night had significantly improved which had resulted in the improvement in staff being released to attend training sessions.

Members **NOTED** that work was being undertaken with the Team to ensure any changes being implemented were easy to sustain.

A discussion was held in relation to the risk regarding Complaints management within Maternity Services and the impact of this risk. Members **NOTED** that there would be a number of potential impacts to this risk, including complainants being caused uncertainty when they had received an untimely response to their complaint. Members **NOTED** that there were some situations where concerns had not been addressed at all and work was being undertaken with the IMSOP Panel and Welsh Government to address this.

In response to a question raised by Marcus Longley regarding whether there was sufficient capacity available within the Team to manage concerns, Rachel Burton advised that the risk had been identified as the Directorate felt unprepared to deal with the unprecedented increase in complaints, which had led to the poor experiences of women receiving timely responses.

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Marcus Longley made reference to the capacity of the unit and the perception raised that the Ward in particular was very busy, which seemed to be having an impact on patient experience. Members **NOTED** that real time feedback was now being received from service users showing positive improvements. Rachel Burton advised that a much calmer environment was now being experienced at Prince Charles Hospital. Members **NOTED** that as a Health Board there was sufficient capacity in the system but at present further work was required on managing flows.

A discussion was held in relation to Risk Management as it was felt that some of the risks identified were issues and there were inconsistencies in place regarding risk scoring. Sharon Hopkins advised that consideration would need to be given to introducing Risk Management training to the new Senior Management Group.

Marcus Longley extended his thanks to Alison Davies and Rachel Burton for presenting the report.

Members **RESOLVED** to:

- **NOTE** the report.

HB/19/127

### **PATIENT EXPERIENCE AND CONCERNS (PATIENT FEEDBACK, INCLUDING, COMPLAINTS, CLAIMS AND PATIENT SAFETY INCIDENTS) REPORT**

Alison Davies presented the report which provided the Board with a summary of Concerns and Patient Experience. This report had combined the Patient Experience and Concerns reports and related to the period since the last Concerns and Patient Experience report was received by the Board from 1 July 2019 up to 31 August 2019.

Members **NOTED** that Welsh Government had revised the requirements of the way in which concerns needed to be reported, which coincided with the Bridgend Boundary change, resulting in a significant increase in concerns reported around April 2019. Members **NOTED** that any concern that took longer than one day to resolve now needed to be treated as a formal complaint and that the Health Board were now achieving 90% compliance against the 30 day response target.

In relation to serious incidents, there had been an increase in reporting which again coincided with the Bridgend Boundary change, with the main contributor to serious incidents being patient falls. Alison Davies welcomed the support being provided by the Delivery Unit regarding the management of concerns.

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Keiron Montague made reference to the increase in no surprises reported in June which related to service related issues. Alison Davies provided assurance that the issues were not related and because of the nature of the event the no surprises tended to be unusual and unrelated.

A discussion was held in relation to the safer storage of Medicines which had been an issue for a significant period of time. Suzanne Scott-Thomas advised that Welsh Government had aspired to using a specific type of electronic cabinet which required significant investment and significant changes to the structure of the environments. Members **NOTED** that this was not being placed as a significant risk to the organisation. Following discussion it was suggested that an update report be presented to the Quality, Safety & Risk Committee next year.

Members **NOTED** that some of the data presented in the report raised further questions, for example, the difference in numbers of incidents being reported across the three sites. Sharon Hopkins advised that triangulation of the data would need to be undertaken and would need to be considered in line with the outcome of the review being undertaken by the Delivery Unit.

Members suggested that a further review would need to be undertaken of the data contained on page 8 of the report relating to the increase in the number of moderate and severe incidents reported since 1 April 2019. Members **NOTED** that this had been discussed at the Concerns and Complaints Scrutiny Panel where concerns had also been raised. Members **NOTED** that this would be further considered by the Executive Team. Members **NOTED** that there would be opportunities to share good practice across sites which could be undertaken through a variety of methods and models.

The Board **RESOLVED** to:

- **NOTE** the report.

HB/19/128

### **INTEGRATED PERFORMANCE DASHBOARD**

Ruth Treharne presented the report which provided the Board with a summary of current performance, by exception, across a range of indicators and key issues arising from the Performance Dashboard as reported to the Management Board and Finance Performance & Workforce Committee at their meetings in September 2019.

Members **NOTED** that following discussion with Sharon Hopkins, a much shorter summarised report was being presented. The following key updates were provided:

### Unscheduled Care

- Issues were still being experienced within Unscheduled Care which were having an impact on quality and safety for patients as well as performance. Members **NOTED** that a significant amount of work was being undertaken to address the position
- There had been an increase in delayed transfers of care patients which was in the process of being discussed with Local Authority colleagues
- Long ambulance waits had been experienced.

### Referral to Treatment Times Targets

- The Health Board was currently off target against the trajectory submitted to Welsh Government within the IMTP. Members **NOTED** that recovery plans had been put into place in some areas and revised trajectories were in the process of being developed and would be presented to the Finance, Performance & Workforce Committee for further discussion
- Members **NOTED** that the Delivery Unit was undertaking a review of Waiting Lists and there was now an understanding of the exact numbers of patients waiting.

Members **NOTED** that there had been improvements made in Endoscopy Surveillance backlog and Follow up Outpatients Not Booked.

In response to a question raised by Ian Wells regarding Theatre cancellations as a result of Consultant Anaesthetist availability, John Palmer advised that this had been as a result of difficulties experienced in response to the Tax and Pension changes with approximately 500 Anaesthetic cases lost as a result. Members **NOTED** that 4 new Anaesthetists had now been appointed into the Team.

A discussion was held regarding delayed discharges which was a concern moving into the winter period and would be a key priority which would need to be addressed. Members **NOTED** that active discussions would continue to be held with partners in relation to the management of delayed transfers of care patients.

In response to a question raised by Jayne Sadgrove regarding ambulance red calls performance, Members **NOTED** that a further review would be undertaken of the position to determine whether performance was improving as stated within the cover report, or declining as highlighted in the performance dashboard.

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Nick Lyons advised that behind the performance figures reported were actual patients and a review had now commenced in relation to what impact or harm was being caused to patients as a result of poor performance. John Palmer advised that in relation to Unscheduled Care, there had been an additional 500-600 attendances at A&E last month, with an additional 600-700 attendances this month. Members **NOTED** that the clinical body had raised concerns regarding the level of acuity of patients presenting.

The Board **RESOLVED** to:

- **NOTE** the report.

HB/19/129

### **WORKFORCE AND ORGANISATIONAL DEVELOPMENT METRICS**

Anne Phillimore presented the report which provided an update to the Board on the key workforce metrics for July/August, with historic trends shown. Members **NOTED** that the report had previously been discussed at the Finance, Performance & Workforce (FPW) Committee.

The following key points were **NOTED**:

- Consideration was being given to including workforce metrics information in to a combined performance dashboard
- Turnover rates remained static at 10.06%, with variations being seen of between 10% - 40%
- Concern remained in relation to the number of Registered Nurse vacancies and work was being undertaken corporately to address this
- Further work needed to be undertaken on workforce utilisation and staff pay costs.

In response to a question raised by Jayne Sadgrove in relation to job plans, Kamal Asaad confirmed that joint job plans were in place for those staff with honorary contracts.

Jayne Sadgrove made reference to the reasons as to why staff were leaving the organisation and highlighted that out of the 600 staff who had left the organisation, 200 were as a result of retirement. A discussion was held as to whether the Health Board were undertaking proactive workforce planning and it was **NOTED** that the Health Board recognised that further work was required in this area. Maria Thomas sought further assurance that the number of registered nurse vacancies was being addressed and suggested that this be discussed further at the Quality, Safety & Risk Committee as well as the FPW Committee. Anne Phillimore advised that she would provide an assurance report to the FPW Committee.

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Members **NOTED** that exit interviews were currently being undertaken by Line Managers and that further consideration would need to be given to the process to ensure openness in responses.

The Board **RESOLVED** to:

- **NOTE** the report.

HB/19/130

### **FINANCE UPDATE – MONTH 5 OF 2019/20**

Steve Webster presented the report which highlighted the key messages in relation to the Month 5 financial position. Members were reminded that the Month 4 position highlighted a 1.4m deficit for the first three months of the year, with an average deficit of £1.9m.

Members **NOTED** that there had been a £200k improvement in the Month 5 position as a result of more budgets being allocated out and it was **NOTED** that there had not been an improvement in the Princess of Wales Hospital financial position. The savings shortfall projection was now £9.8m against a £10m minimum target. Members **NOTED** that the Finance, Performance & Workforce Committee were now receiving a separate report on savings in addition to the standard Finance report.

Members **NOTED** that the forecast remained that the Health Board would breakeven at the end of the year and would be heavily dependent on recruitment of nursing staff, which would impact on the position. Members **NOTED** that the latest update on the Bridgend transition settlement was £7.1m which was expected to be deducted further. Steve Webster advised that discussions would continue with Welsh Government.

The Board **RESOLVED** to:

- **NOTE** the report.

HB/19/131

### **ORGANISATIONAL RISK REGISTER**

Georgina Galletly presented the report and advised that she understood that the Board received the risk register twice a year, with the specific risks also being received at the relevant Board Committees on a quarterly basis. Members **NOTED** that following discussion with Marcus Longley, it was felt that the Risk Register needed to be presented to Board more frequently. Members **NOTED** that the report presented had not been changed since the July Board meeting and further work was required on the content of the report, there was a need to assess the risk appetite of the Board and it was felt that a number of the items identified were issues and not risks, with a number of duplicated items also contained within the report.

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Members **NOTED** that a significant amount of work would be required to refine the report and work would need to be undertaken with the Executive Team to ensure the report was kept live. Following discussion it was **NOTED** that an immediate update would be undertaken to ensure all risks were being captured prior to the report being presented to the November Board. It was also **NOTED** that the report needed to be at the top of the agenda given its importance.

Ian Wells made reference to Risk 44 which related to the risk of information technology failures and cyber security. Members **NOTED** that that a discussion had been held at the Digital Strategy Group where it was **NOTED** that this risk was a national risk and outside of the Health Board's control. Georgina Galletly advised that there would always be some risks which would be out of the Health Board's control and advised that the Board would need to be satisfied that the organisation was doing all it could to ensure the risks were being mitigated wherever possible.

The Board **RESOLVED** to:

- **NOTE** the contents of the report.

HB/19/132

### **COMMITTEE CHAIRS REPORT**

The Board **received** the report, which provided an update on the business discussions held at meetings of the Board's Committees. The following key updates were **NOTED**:

#### **Primary and Community Care Committee**

Members **NOTED** that a refresh of the Committee would be undertaken to include Population Health and Partnership working.

#### **Quality, Safety & Risk Committee**

Members **NOTED** that the Committee had a very busy agenda with a number of key organisational issues being discussed. Members **NOTED** that the Quality Governance Framework was in the process of being embedded across the organisation.

#### **Healthcare Professionals Forum**

Suzanne Scott Thomas welcomed the reframing of the Forum and advised that the Forum had a busy agenda moving forward. Marcus Longley extended his thanks to Suzanne Scott-Thomas for agreeing to Chair the meeting.

**Mental Health Act Monitoring Committee**

Maria Thomas advised that she had met with Alan Lawrie to discuss the refresh of the Terms of Reference and membership of the Group. Members **NOTED** that a briefing session would be introduced following alternative meetings to address Mental Health issues which were not being discussed in other forums.

The Board **RESOLVED** to:

- **NOTE** the contents of this report;
- **APPROVE** the minutes of the Board committee meetings.

HB/19/133

**ANY OTHER URGENT BUSINESS**

Marcus Longley advised that he felt the meeting was positive with good discussions held. Jayne Sadgrove questioned whether the Board needed to be provided with the detailed information on SARC and Thoracic Surgery Services, or whether this could have been presented in a more focussed manner with the additional information provided in appendices on a location on IBABS that was accessible to all. Georgina Galletly **AGREED** to look into addressing this for future meetings.

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**DATE OF NEXT MEETING**

The next scheduled meeting of the University Health Board, would take place on Thursday 28 November 2019 at 2.00pm.

**SIGNED:**.....  
**Professor M Longley, Chair**

**DATE:**.....