



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

## **Finance, Performance & Workforce Committee Meeting**

**'Confirmed' Minutes of the meeting held on  
23 May 2019  
Ynysmeurig House, Abercynon**

### **Present**

|                 |                            |
|-----------------|----------------------------|
| Mel Jehu        | Independent Member (Chair) |
| Paul Griffiths  | Independent Member         |
| Keiron Montague | Independent Member         |
| Dilys Jouvenat  | Independent Member         |

### **In attendance**

|                     |   |
|---------------------|---|
| Ruth Treharne       | Deputy Chief Executive/Director of Planning & Performance |
| John Palmer         | Chief Operating Officer (in part)                         |
| Steve Webster       | Director of Finance                                       |
| David Jenkins       | Independent Advisor                                       |
| Emma Walters        | Corporate Governance/Committee Secretariat                |
| Wendy Penrhyn-Jones | Head of Corporate Administration                          |
| Nathan Couch        | Wales Audit Office  |
| Donna Hill          | Medical Engagement Officer                                |
| Paul Dalton         | Internal Audit  |
| Elaine Williams     | Head of Performance and Clinical Information.             |

### FPW/19/61 **WELCOME AND INTRODUCTIONS**

Mel Jehu **WELCOMED** everyone to the meeting, particularly David Jenkins, who has been appointed by Welsh Government as the Independent Advisor to the Board.

Mel Jehu paid tribute to Cllr Robert Smith, who had sadly recently passed away. Mel Jehu advised that he had spoken to Robert's wife who wished to pass on her thanks to the Board for all the support which had been provided to the family. Mel Jehu paid tribute to Robert as a man of integrity who had been an exemplary public servant and Member of the Board.

### FPW/19/62 **APOLOGIES FOR ABSENCE**

Apologies for absence were **RECEIVED** from Alan Lawrie, Anne Phillimore and Paul Dalton.

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### DECLARATIONS OF INTERESTS

There were no additional declarations of interest declared other than those stated previously.

FPW/19/64

### MINUTES OF THE LAST MEETING

The minutes of the meeting held on 18 April 2019, were **RECEIVED** and **APPROVED** as a true and accurate record, subject to the following amendment:

- Page 1 – Keiron Montague’s apologies to be noted.

FPW/19/65

### ACTION LOG

Members **RECEIVED** and **REVIEWED** the Finance, Performance & Workforce Committee Action Log.

Members **NOTED** that the update report on the urology deep dive had been received at the April meeting and could now be removed from the action log (**removed from the action log**).

Members **NOTED** that the update on CAMHS would be presented at a future meeting.

Keiron Montague advised that there were a number of items that were marked as ‘in progress’ and requested that dates were identified against each action.

FPW/19/66

### MATTERS ARISING

Page 3, Unscheduled Care – Paul Griffiths highlighted that the performance at Princess of Wales Hospital had been poor which would need to be addressed within the next year. Paul Griffiths asked whether focus could be placed on areas where poor performance had been identified such as at the Princess of Wales Hospital. Ruth Treharne advised that this could be undertaken and advised that it would be helpful to know what areas Members would wish to look at. Ruth Treharne advised that a schedule of the performance at Bridgend would be developed and included in the next performance dashboard report. Members **NOTED** that this approach would also be adopted for the Workforce and Finance Dashboards.

Members **NOTED** that the full schedule would be presented to the June meeting.

FPW/19/67

### ADDRESSING THE IMPACT OF NHS WALES MEDICAL AND DENTAL AGENCY AND LOCUM DEPLOYMENT IN WALES – WELSH HEALTH CIRCULAR WHC/2017/042

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Donna Hill presented the report which was seeking retrospective approval as the report had been submitted to the Welsh Government.

Members were advised that this was the fourth report to be presented to the Committee and that the report excluded data from the Bridgend area. Members **NOTED** that Bridgend data would be included within future reports and **NOTED** that Retinue was now fully active in the Princess of Wales Hospital.

Members were advised of the success in bringing all Doctors through the neutral vendor achieving 100% compliance. Members **NOTED** that difficult rate negotiations were continuing particularly in Medicine and for staff in Accident and Emergency.

Donna Hill advised Members of the concerns in relation to staff not attending ('no shows') and late cancellations from Medical Staff being booked through Retinue, particularly on weekends within Medicine and Accident and Emergency. Members **NOTED** that the Health Board was working with Retinue to address this.

Members were advised that the All Wales Medical Workforce Efficiency Group had not identified a new Chair to replace Joanna Davies. Members **NOTED** that an All Wales meeting was being planned for July to discuss the procurement of an e-rostering platform and the inclusion of agency and locum bank. Members **NOTED** that once the platform was in place then consideration could be given to regional/cluster bank. Members were advised that data collection was quite intensive and the Health Board were working with Welsh Government to look at revising the process for data collection.

Dilys Jouvenat made reference to the resignation of three Doctors at the Royal Glamorgan Hospital with a further Doctor advising of their intention to resign. Members **NOTED** that the Health Board were actively trying to fill vacancies.

John Palmer advised that two medical staff were leaving for a number of reasons, however plans were in place to secure replacements. Members **NOTED** that there was adequate cover in place for the rest of the week, however, there could be cover issues during the weekend given a number of late cancellations. Members **NOTED** that work would continue to be undertaken to ensure sufficient cover was in place at all times.

Members **NOTED** that discussions were being held with Emergency Department Consultants of future provision of service at the Royal Glamorgan Hospital within the next 6-12 months and that discussions were also being held as to how to prepare for change. Members **NOTED** that there had been fragility in the service for the past five years and the service was becoming increasingly challenging.

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Dilys Jouvenat made reference to the issues being experienced in relation to Directorates not supplying information on long term rota vacancies within Accident and Emergency and questioned whether the Committee could do anything to help improve the position.

Members **NOTED** that the Team were working very closely with rota co-ordinates who were being asked to provide as much notice as possible regarding rota vacancies so that shifts could be provided to Retinue quickly.

Keiron Montague advised that there seemed to be an escalation of pressure and questioned whether this would need to be referred to the Quality, Safety and Risk Committee, so that further assurance could be provided that medical staffing vacancies were not having an impact on patient care. Members **AGREED** to refer this matter to Quality, Safety & Risk Committee.

Mel Jehu queried whether the Health Board was seeing any changes to sickness levels within Accident & Emergency, Donna Hill advised that A&E was not a specific outlier and that sickness was low in medical and dental compared to other staff groups. Members were advised that the winter period had been better than expected and there may be an opportunity to recruit some middle grades into the service. Members **NOTED** that the agreed sustainable model would have a positive impact on recruitment.

Paul Griffiths requested that Members of the Committee be made aware of any worsening position with A&E as soon as identified. Paul Griffiths also questioned how staff could withdraw from shifts from a moral and contractual perspective at short notice. Members **NOTED** that the reasons for staff withdrawing from shifts was as a result of sickness.

Steve Webster advised that compared to the rest of the UK, the Health Board's direct engagement was very high and advised that there would be a need to determine processes and the risks. Members **NOTED** that the Health Board now had more visibility on this matter. Members **NOTED** that the recruitment and retention dynamic would need to be considered alongside this work.

Members **RESOLVED** to:

- **NOTE** the programme of work implemented within the Health Board to reduce agency locum expenditure in line with the Welsh Government 35% reduction target.
- Retrospectively **APPROVE** the attached performance report for Quarter 4 (January – March 2019), submitted to the Welsh Government.
- **REFER** the concerns raised in relation to medical staffing within the Accident & Emergency Department at Royal Glamorgan Hospital to Quality, Safety & Risk Committee.

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Steve Webster presented the report which provided Members with the key messages in relation to the Month 1 financial position of Cwm Taf Morgannwg (CTM) Health Board.

Steve Webster advised that it was the view of the Health Board that Bridgend had a recurrent deficit of £6.7m and that an assumption had been made that this allocation would be transferred to Cwm Taf Morgannwg. Members **NOTED** that the Welsh Government had been made aware of this and that this would be a risk until the outcome had been received by Welsh Government.

Members **NOTED** that planning for the year as a whole had been undertaken which would need to be discussed by the Executive Team prior to being presented to the Committee. Members **NOTED** that financial support would be sought from Welsh Government to assist with the current escalation status and the issues being experienced within Maternity.

Members **NOTED** that in relation to budget setting, then output of this had been assumed in Month 1 reporting and it was **NOTED** that there would be a lower in year savings target, which broadly related to the position the Health Board was currently in, with gaps in management and issues relating to maternity and escalation. Members **NOTED** that a significant amount of work would need to be undertaken to address the shortfall against the savings target.

Members **NOTED** that in relation to delegated overspends, there had been operational overspends, the main area being Princess of Wales medical pay which would need to be addressed.

Members **NOTED** that the other area related to additional resources within obstetrics and gynaecology which had been agreed, but had not yet been included in the budget. Members **NOTED** that permanent appointments were being made which would help address the medical pay position.

Steve Webster advised that he was content with the balances at Month 1 and advised that more work would need to be undertaken to achieve a sustainable balance.

Paul Griffiths questioned the savings issue and advised that the earlier detailed savings plans were in place, the more likely it would be that these would be achieved. Steve Webster advised that there were two to three areas where plans were in place, but were not yet at the stage of implementation. Members **NOTED** that these related to Medical staff, Planned Care Productivity, Community and Hospital Pathway Reviews.

Members **NOTED** that there were other areas which needed further developed plans, which included Getting it Right First Time (GIRFT). Members **NOTED** that there had been a rollover of improvement from last year's cross cutting themes and there had been a reconstitution of themes

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this year. Members **NOTED** that the Executive Team would need to undertake a prioritisation exercise of schemes for the next year.

John Palmer advised that quality was the key issue being discussed at Clinical Business Meetings and that the quality dashboard was also being incrementally improved.

Keiron Montague questioned whether there was confidence that the savings relating to Bridgend would be delivered. Steve Webster advised that this was a risk to the plan.

Members **RESOLVED** to:

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

FPW/19/69

### PERFORMANCE DASHBOARD

Ruth Treharne presented the first report produced for the Cwm Taf Morgannwg University Health Board. Members **NOTED** that the report tried to identify the Bridgend element and former Cwm Taf element for clarity. Members **NOTED** that a correction needed to be made to page 7 of the report in relation to Elective Bed Cancellations and Members **NOTED** that the cancellations for Princess of Wales Hospital should read 19 cancellations.

Members **NOTED** that some targets had been set for the former Cwm Taf CTUHB and the Health Board had been informed that as a result of complexities with IT systems in Swansea Bay SBUHB, targets for Bridgend could not be set as the data for Bridgend patients could not be released. Members **NOTED** that the Health Board were working closely with Welsh Government, Delivery Unit and SBUHB to ensure data was correct.

Members were advised that the Health Board would be setting out their IMTP as CTM for the next two years in the Autumn and would need to plan and set targets with confidence to understand key areas of service.

An update was provided on the following key areas:

#### Referral to Treatment Targets (RTT)

The provisional reporting position for patients waiting over 52 weeks for April 2019 was 335. All 335 patients were those with resident addresses within the Bridgend area. The provisional reporting position for patients waiting over 36 weeks was 1,132. Of these, 171 patients were patients with resident addresses within the former Cwm Taf and 961 within the Bridgend area (this figure of 961 includes the 335 patients waiting over 52 weeks).

Following approval to secure outsourced capacity early in 2019-20, to support delivery, discussions were now underway with providers and

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contracts were being put in place for commencement of outsourcing in June 2019. This additional activity will focus on the management of patients within General Surgery, Orthopaedics, Urology, Gynaecology and Ophthalmology. Activity levels will be closely monitored month on month at the weekly RTT meetings at which there will be representation from across the CTMUHB.

It should be noted that RTT trajectories have been agreed as part of the IMTP for the former Cwm Taf footprint but not yet on a monthly basis for the combined Cwm Taf Morgannwg organisation. Proposals are being discussed at the May 2019 Executive Board and an update will be provided at the meeting.

For patients waiting over 26 weeks, the provisional position for April was 85.7% for the Bridgend area and 88.7% for the former Cwm Taf area, giving a provisional Cwm Taf Morgannwg compliance of 87.6%. The reported 26 week position for the corresponding month last year i.e. April 2018 was 85.88% for the Bridgend area and for the former Cwm Taf area 92.40%, giving a combined compliance of 90.19%.

### **Unscheduled Care – April**

The combined performance for CTMUHB for the four hour target for April was 74.2%. Individual departmental performance was 73.9% at Prince Charles Hospital (PCH), 78.2% at Royal Glamorgan Hospital (RGH) and 66.2% at Princess of Wales (PoW). Compliance for Ysbyty Cwm Cynon (YCC) was 99.2% and Ysbyty Cwm Rhondda (YCR) was 100%. Members were advised that for reference, the former Cwm Taf University Health Board compliance in April 2018 was 89.1%.

Members were advised that the April combined performance for the twelve hour target showed that 944 patient had breached the target. There were 355 breaches at PCH, 171 at RGH and 418 at PoW.

John Palmer advised that there had been a very challenging start to the year with 1,100 more attendances across the system which had impacted on elective capacity. In order to mitigate the effect plans were now in place to procure early and agree outsourcing to other Health Boards. However, the numbers would not start to be affected until June/July.

Members were advised that the Health Board was losing a far higher number of anaesthetic sessions as a result of the HMRC tax changes and pension changes. Anaesthetists were cutting their sessions and this had been escalated to Chief Executive level and national discussions were ongoing. However, this was going to be a risk against the trajectory. A report was being prepared and this should be completed by the end of the week in order to make a decision on this.

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Following discussion, Members **AGREED** that a deep dive into the impact of the HMRC changes should be received at the July Committee meeting (Added to the forward look). Members **AGREED** that this matter should also be highlighted to the Workforce and Finance teams.

John Palmer advised that in relation to unscheduled care Simon Dean had noted the position and they would be meeting in June to go through all site positions. April had been very challenging, however RGH has had excellent performance over the last couple of weeks with a very strong nursing team in place.

Members were advised that a workshop would be held in the next 4-6 weeks which would be looking at the position regarding ambulance handovers across all the three DGH sites.

Members discussed the variability in performance across sites. Ruth Treharne advised that progress was continuing with the integration work with some areas being prioritised, i.e. Unscheduled Care, Maternity and Neonatal services.

### **Diagnostic Waits**

The provisional position for April was 62 patients waiting over 8 weeks for diagnostic services. There were 10 patients within the Bridgend area and 52 within the former Cwm Taf area. The majority of the 52 patients within the former Cwm Taf area were awaiting treatment in three areas – diagnostic angiography, endoscopy and cardiac heart rhythm. All 10 patients within CTM were awaiting cystoscopy.

### **Follow Up Appointments Not Booked (FUNB)**

Members were advised that the follow-ups not booked (FUNB) data provided was for March 2019 and was currently provided for the former Cwm Taf area only.

Further information for the Bridgend area, to provide a new consolidated Health Board position would be provided in future and was part of the current work programme under development.

The number of patients waiting for an outpatient follow-up (not booked) who were currently delayed past their agreed target date as at the end of March was 19,586 (the February figure was 18,918).

The FUNB Task and Finish Group continue to meet on a fortnightly basis to review the FUNB Dashboard and to review progress against individual specialty action plans. Work was also ongoing to validate the list of patients recorded as 'see on symptom'.

John Palmer advised that in regard to outsourcing of patients in the FUNB position that were reported to the last meeting, the figures had not started

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to come through as yet, but improvements were expected in the next round of data when presented to the Committee.

### Cancer

Members were advised that for the former Cwm Taf area, the 31 day target (Not Urgent Suspected Cancer - NUSC) of 100% was attained in March 2019 and the 62 day target (Urgent Suspected Cancer -USC) performance was 90.57%. This was the third month in succession where a compliance greater than 90% had been attained and was the target set in the Integrated Medium Term Plan (IMTP).

In total, there were five patients whose care had breached the target, with reasons for non-achievement being delays awaiting diagnostic investigations and delays awaiting surgery, both in local and tertiary centres.

Members **NOTED** that there were operational concerns with regard to referral numbers and capacity within some diagnostic services. There were currently issues with endoscopy capacity as a result of clinical staff shortages and also challenges with regards to throughput of colorectal patients as a result of capacity. The Directorate continued to scrutinise and escalate as appropriate all patient pathways, in particular Urology pathways. John Palmer advised that preparations would need to be made for a single cancer pathway.

Members **RESOLVED** to:

- **NOTE** the report
- **AGREED** to receive a deep dive report into HMRC issues at the July meeting.

FPW/19/70

### WORKFORCE DASHBOARD

Donna Hill presented the report which provided Members with an update on the key workforce metrics for March/April, with historic trends shown as appropriate. Members **NOTED** that the report detailed the key workforce related metrics, including narrative and actions underway as appropriate. Occupational Health information was now being included in the report and where Bridgend services data impacted on the performance reported, this was noted in the relevant section accordingly.

Members **NOTED** the key highlights contained in the report:

#### Sickness levels

- Sickness in month had decreased from 6.31% to 5.69%. The continued roll-out of the new Managing Attendance Policy and associated training was being positively received and a refreshed Attendance Management Plan was in the process of being produced.

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Members **NOTED** that a deep dive was currently underway in regards to sickness levels.

Paul Griffiths commented that the graph on page 9 was showing a similar monthly pattern of sickness absence for previous years although the overall level of sickness absence in 2018/19 was significantly higher.

### **International recruitment**

- The tender to recommence international nurse recruitment had been released, with returns to be shortlisted/reviewed in late May.

### **Time to Hire**

- The time to hire for non-Medical/Dental staff was currently 69 days against a target of 71 days.

### **Job Planning**

- The number of expired job plans had dropped from 200 to 164, and 7 Directorates had increased the number of signed off plans.

Members also **NOTED** the following key areas of concern:

### **Occupational Health**

- The current waiting time for a Psychologist was 16 weeks.

### **Retention**

- Turnover for the year-to-date had increased slightly to 10.20% (from 9.81%). The staff groups reporting the highest turnover were Nursing and Midwifery; Additional Professional Scientific and Technical and Medical and Dental.

### **Nursing Vacancy Levels**

- Nursing vacancies on acute and community wards and A&E units remained a concern, with an increase in the deficit on acute wards.

### **Temporary Staffing Utilisation**

- Demand for, and use of temporary nursing resource remained high, linked to the vacancy position, with an additional increase in April as a result of the inclusion of the Bridgend area services.

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Members were advised that the current occupational health waiting times for the counselling service was 16 weeks which was an area of concern and were looking at whether referrals had been appropriately made.

Keiron Montague commented on the slight increase with retention in regards to turnover and suggested that the Committee may want to look at a deep dive in the retention strategy at a future meeting. Donna Hill advised that an exit questionnaire had been developed to look at the reason for people leaving and discussions were being held with the Director of Nursing, Midwifery and Patient Care, regarding nursing retention. The Chair requested if the Committee could see the results of the questionnaires that had been completed.

Members **NOTED** the good work undertaken on tackling bullying, harassment and abuse and noted that a Steering Group, chaired by Dilys Jouvenat, was being established to ensure correct governance of this work and to ensure meaningful and decisive action was taken and monitored. This would work in conjunction with the wider Staff Survey Steering Group and associated work streams.

Members **RESOLVED** to:

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

FPW/19/71

### ITEMS FOR INFORMATION

Members **RECEIVED** and **NOTED** the Internal Audit Report on Commissioning that had been referred from the May Audit Committee.

Members **RESOLVED** to:-

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

FPW/19/72

### ANY OTHER BUSINESS

There was no other business to report.

FPW/19/73

### DATE OF THE NEXT MEETING

The next meeting of the Finance, Performance & Workforce Committee was scheduled to be held on Thursday, 20 June 2019 at 2 pm, in Ynysmeurig House, Navigation Park, Abercynon.

Signed .....

**Mel Jehu, Independent Member**

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Date .....