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Bwrdd Iechyd Prifysgol
Cwm Taf Morgannwg
University Health Board

Finance, Performance & Workforce Committee Meeting

**'Confirmed' Minutes of the meeting held on
20 June 2019**

Ynysmeurig House, Abercynon

Present

Mel Jehu	Independent Member (Chair)
Paul Griffiths	Independent Member
Keiron Montague	Independent Member

In attendance

Ruth Treharne	Director of Planning & Performance
John Palmer	Chief Operating Officer (in part)
Steve Webster	Director of Finance
Anne Phillimore	Interim Director of Workforce & OD
Alan Lawrie	Director of Primary, Community & Mental Health
David Jenkins	Independent Advisor
Kathrine Davies	Corporate Governance Support/ Committee Secretariat
Gwenan Roberts	Head of Corporate Services
Paul Dalton	Internal Audit
Nathan Couch	Wales Audit Office
Elaine Williams	Head of Performance and Clinical Information.

FPW/19/74 **WELCOME AND INTRODUCTIONS**

Mel Jehu **WELCOMED** everyone to the meeting and advised that Alan Lawrie would be arriving late.

FPW/19/75 **APOLOGIES FOR ABSENCE**

Apologies for absence were **RECEIVED** from Dilys Jouvenat, Alan Roderick and Robert Williams.

FPW/19/76 **DECLARATIONS OF INTERESTS**

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

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MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 23 May 2019, were **RECEIVED** and **APPROVED** as a true and accurate record, subject to the following amendment:

- Page 5, Paragraph 7 – wording should be amended to read: *“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.”*
- Page 6 – performance narrative on unscheduled care has been inserted into wrong area. Need to remove and insert under performance.
- Page 6 – IMTP narrative needs to be inserted under opening narrative for performance.
- Page 9 – wording should be amended to read: *“similar pattern of sickness absence for previous years although the overall level of sickness absence in 2018/19 was significantly higher.”*

ACTION LOG

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

Members **NOTED** that the action on Deep Dives was to be closed with any point of principle being raised by members as was felt appropriate. Ruth Treharne and Mel Jehu agreed to review and prioritise the forward work programme for the next 12 months. **(Removed from Action log)**

Members **NOTED** that the action to refer the matter of addressing the Impact of NHS Wales Dental Agency and Locum Deployment in Wales to Quality, Safety and Risk Committee had been completed. **(Removed from Action log).**

MATTERS ARISING

Page 4, Keiron Montague asked for an update on performance for the Royal Glamorgan Hospital (RGH). John Palmer advised that performance was currently at the highest level between 85-86% and was providing support for Prince Charles Hospital (PCH) and Princess of Wales Hospital (POW) on a regular basis. Members were advised that some serious discussions around consultant availability would be held over the next six months. Members **NOTED** that at the recent initial ‘Targeted Intervention’ meeting with Welsh Government the Health Board were advised that they would also be focussing on Referral to Treatment Times (RTT) and Unscheduled Care. Members discussed backlogs at POW and **NOTED** that the Health Board would be submitting a bid to Welsh Government seeking performance funding amounting to around £8.7m.

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Members were advised that the plan was to get to zero target in relation to the waiting times for RTT by November 2019. Paul Griffiths queried whether this would be sustainable after November. John Palmer advised that was the plan, bearing in mind the other issue with HMRC tax and pension changes.

Members discussed the terms of reference and what Committee would be appropriate to discuss. Following discussion, Members **AGREED** that clarity would need to be sought from Welsh Government to confirm that RTT/USC would be included as part of Targeted Intervention. If this was the case then the terms of reference would need to come to Finance, Performance and Workforce Committee. Members **AGREED** that this matter would not be referred to Quality, Safety & Risk Committee and that Keiron Montague would need to feedback to the Committee.

FPW/19/80

FORWARD LOOK

Members **RECEIVED** and **NOTED** the Forward Look. The Chair thanked Ruth Treharne for the Committee Forward Look which had been revised in terms of its format. Members **AGREED** that with regard to Deep Dives, a discussion was needed to prioritise topics and Members discussed forthcoming items which needed to be included in the work plan moving forward.

David Jenkins entered the meeting at 1.30 pm

Members **RESOLVED** to:-

- **NOTE** the content of the report.
- **AGREED** that the work plan would be updated to include the following items:
 - Workforce & OD Strategy – towards the end of the financial year;
 - Efficiency Board – July or September;
 - Workforce Policies – as and when these were finalised for renewal.

FPW/19/81

FINANCE, PERFORMANCE & WORKFORCE COMMITTEE ANNUAL REPORT 2018/19 INCLUDING REVIEW OF TERMS OF REFERENCE AND SELF-ASSESSMENT

Members **RECEIVED** and **NOTED** the Annual Report which was presented by Gwenan Roberts. The Chair reminded Members of the requirement to receive an annual report looking back at the work of the Committee during 2018/19 which once agreed would need to be relayed to the Board for ratification.

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Members **NOTED**:

- The changes to the organisation's monitoring status which had been changed in January 2019 (to enhanced monitoring) and again in April 2019 (to targeted intervention for the whole organisation and special measures for the former Cwm Taf area maternity services);
- The range of issues discussed;
- Membership;
- Attendance at meetings which was generally good with all meetings having been quorate.

Mel Jehu asked members to confirm that they were happy with the content of the report and thanked everyone for the work that had been undertaken over the last year. Members **AGREED** that Councillor Robert Smith's passing should be included in the report and there was a "T" missing from Keiron Montague on page 5.

Members were advised that the terms of reference were previously reviewed on the 31 January 2018. Members **AGREED** that the terms of reference would be amended to reflect the following:

- Inclusion of Workforce policy approval;
- Move Data 'Quality/Information Technology' to the terms of reference being established for the new Board Committee with a remit in Information Communication and Technology.
- Remove the requirement for at least two Executive Directors to be in attendance for quoracy purposes;
- Amend the overall document to reflect the new organisational name - Cwm Taf Morgannwg.

Members discussed the Committee Annual Self-Assessment Checklist. Members **AGREED** that this would be updated following the discussion.

Members **RESOLVED** to:-

- **APPROVE** the Committee's Annual Report for 2018/19 for submission to the Health Board at **Appendix 1**.
- **APPROVE** the Committee's Terms of Reference, subject to the agreed changes at **Appendix 2**.
- The Annual Self-Assessment be **COMPLETED** following further discussions

FPW/19/82

PERFORMANCE REPORT FOR THE BRIDGEND AREA

Ruth Treharne presented the report which provided the Committee with a schedule of Bridgend locality performance across key indicators.

Ruth Treharne thanked Elaine Williams for collating the report.

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Members **NOTED** that in regard to POW performance for the 95% of A & E patients seen within four hours, 72.1% had been achieved in March 2019 which reduced to 66.1% in April 2019. Members **NOTED** that for the former Cwm Taf locality, performance had remained in the region of 85% until the final quarter of the year when it had reduced to winter pressures. Members **NOTED** that May 2019 had seen an improvement in Cwm Taf performance (81.6%) with the POW performance rising to 68.8%. The resultant impact was overall CTMUHB performance of 77.7%.

Members **NOTED** that POW performance for 12 hour target was comparable with that of the former CTUHB.

Members **NOTED** that POW performance in relation to 15 minute handovers stood at around 26.96% for May 2019 which had had an impact on CTMUHB's overall position which was 71.3%. The former CTUHB compliance had generally been around 15-20% higher. Members **NOTED** that POW one hour handovers had also resulted in lower overall organisational performance for CTMUHB.

In regard to Stroke Services, Members **NOTED** that former CTUHB performance for Stroke services was reported to be higher than the POW for all indicators with the exception of thrombolysis which was an area where POW performance had been higher. Members **NOTED** that the number of admissions to POW was approximately 50% of those to Prince Charles Hospital. Members were advised that the two individual stroke teams were continuing to work closely and share learning.

Members also **NOTED** that there was good practice in relation to diagnostics and timely responses to complaints.

John Palmer advised that the report was helpful and that the Health Board would now start to report month on month.

Members **NOTED** different systems were in use in the former Cwm Taf hospital sites to the POW as well as variance in levels of investment. Members were advised that Bridgend colleagues were now attending RTT meetings and that some work was being undertaken to reduce the backlog to achieve a zero target by January 2020. Members **NOTED** that there were problems in relation to orthopaedic capacity and outsourcing was planned. In relation to unscheduled care whilst there was robust Emergency Department staffing it was felt that there were issues with bed capacity and patient flow. Work therefore needed to be undertaken address these issues.

Members **NOTED** that with regard to Ambulance Handovers, work was going to be undertaken with more detail on handover and action plans.

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Members were advised that the Bridgend Out-of-Hospital Framework would require performance analysis. Members **NOTED** that the dynamics around Maesteg Hospital were important.

Members were advised that work would now begin to combine both the former CT with POW performance dashboards. Ruth Treharne **AGREED** to relay to Members details of comparative dashboards across Wales for information.

Members **RESOLVED** to:

- **NOTE** the report and performance actions outlined to support the achievement of targets
- **NOTE** work underway on the new integrated referral to treatment and diagnostic trajectories, building on those already agreed and set in the IMTP for the former Cwm Taf area.

FPW/19/83

UPDATE ON FOLLOW UP PATIENTS NOT BOOKED

John Palmer presented the report which updated the Committee on the actions being taken to address the Follow-Up Appointments Not Booked (FUNB) position in relation to all specialties.

Members were advised that a number of reports had been presented to the Board and its sub committees over the last two years, outlining the position in respect of follow-up appointments and delays with booking patients into clinics for review.

Members **NOTED** that the overall FUNB position (CTUHB), was now showing a significant improvement of circa 5,000 since December 2018, following a period of stabilisation as improved specialty performance was cancelled-out by consolidation of all validated FUNB and 'Seen on Symptoms' lists.

Members discussed the position with regards to ophthalmology and **NOTED** that out of the 5,645 patients reported from Eyecare Ltd, the following have been the outcomes:

- 3,390 of 5,645 patients had been discharged which was close to 60%;
- 8.6% (486 patients) had been referred back to the Health Board for urgent review;
- 8% (455) of patients had been discharged to diabetic screening;
- 21.9% (1,237 patients) were being seen by Eyecare in clinic, and it was likely that all those patients were for follow-up, as most had glaucoma.

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Members were advised that 28% of the 5,645 patients would remain within the hospital service. Members **NOTED** that the 486 patients referred back for urgent review were Age-Related Macular Degeneration (AMD) patients and would become part of the updates to Welsh Government and the Quality, Safety and Risk Committee.

Paul Griffiths queried why not all specialties were represented within the report. John Palmer advised that all the graphs would be included for all specialties in the future.

Paul Griffiths sought clarity on the issue of patients that had potentially suffered harm and whether there were going to be more cases. John Palmer advised that this was an issue that affected the whole of Wales and there was potential for there to be additional cases. However, he advised that every case was now reviewed individually by Quality, Safety & Risk Committee.

Ruth Treharne advised that the Diagnostic Hub Project Board were currently looking at demand and capacity for endoscopy theatre space as part of a business case development. As a result, it was felt useful that members were advised of current patient waiting times for endoscopy, specifically across a number of categories including surveillance numbers etc. It was **AGREED** that Ruth Treharne and John Palmer would discuss and bring back regular updates on numbers waiting, together with improvement actions, as part of the Integrated Dashboard report.

Keiron Montague thanked John Palmer and sought clarity as to how a similar situation would be avoided in the future. John Palmer advised that whilst clinical practice had changed, there were too many people put into the system inappropriately and this was being looked at across Wales. **MEMBERS** noted that work was currently being undertaken around integrated pathways and into community pathways. Keiron Montague suggested that a "What Next" be built into the programme.

Members **RESOLVED** to:

- **DISCUSS** and **NOTE** the actions being taken to address the FUNB position across all specialties, including the assurances given that there were programme arrangements in place to see this work through effectively.

FPW/19/84

EVALUATION OF THE WINTER PLAN 2018/19 IMPLEMENTATION

John Palmer presented the report which provided the Committee with an evaluation of the winter plan for 2018/19 and to set out the next steps to ensure that lessons were learned in readiness for 2019/20. Members were advised that this would be submitted to the Board for approval.

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Members **NOTED** that the end-of-year performance as a whole was positive with improved four-hour performance compared with the previous year. The 12 hour performance target had been well maintained and was showing a slight improvement on the previous year. April 2019 had however been a challenging month with a dramatic increase in demand and a high levels of admissions.

Members **NOTED** the Warwick chart on page 6 which outlined the Mortality rates during the winter. Members were advised that the chart was reviewed monthly and compared mortality rates against four-hour performance on the date of attendance at the Emergency Department (ED).

Members **NOTED** that in regard to POW there had been an increase in the number of major presentations at the ED in comparison with previous years. Members were advised that an additional 341 patients with major injuries had presented compared with the previous year. Members **NOTED** that these were "walk-ins" and not ambulance arrivals.

Members **NOTED** that during the winter period a total of 47 elective surgical cases were cancelled which whilst regrettable represented an improvement on the previous year and was the lowest number of cancelled operations in the last eight years.

Members were advised that the Delayed Transfers of Care (DToc) position stood at 24 at the end of March 2019 which had been the lowest for any regional system across Wales. Members **NOTED** that this reflected well on the operational joint working between the Health Board and local authority partners.

Members **NOTED** that with regard to Primary Care, work was underway to implement an escalation dashboard. Members were advised that it was hoped that this would be in place by the autumn in preparation for winter months.

Members were advised of the Winter Pressures Pilot that had been undertaken by Morlais GP Practice. Members discussed the low take-up which was inevitably linked to when this Welsh Government pilot became available during the financial year.

Members were advised that work was now commencing to develop a Winter Preparedness Plan for 2019/2020 which would focus on lessons learned and would further identify priorities for this year's plan.

Paul Griffiths commented that it was disappointing to see immunisation levels at 50%. John Palmer advised that there would be another review for which a robust engagement exercise would be key.

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Members were advised that in terms of planning for next year, the starting position would be to focus on resilience and partnerships with estates and staff-side and local authorities. Keiron Montague commented that it would be good to see the Bridgend element of the partnership and what had been achieved historically. John Palmer advised that a Workshop on Winter Planning for all health boards had been arranged and work was being undertaken by Sharon O'Brien over the three EDs following which a report would be brought back to the Committee.

Members **RESOLVED** to:

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

FPW/19/85

CHILD & ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) PERFORMANCE

Alan Lawrie presented the report which provided Members with a summary of the current performance across CAMHS Services and the actions being undertaken to address the position in Primary CAMHS.

Members were advised that there had been performance issues for some time and that additional activity had been undertaken through waiting list initiatives during 2018/19 which had resulted in achieving compliance with the target by the end of March 2019. For the former ABMU this stood at 90% and 92.5% for former Cwm Taf. Members **NOTED** that during April 2019 performance had dipped with a slight improvement during May 2019 with provisional performance to the end of May for CTM being 58.2% and Swansea Bay 75%. As of that day, Members **NOTED** performance for CTM was 64% and Swansea Bay was 61.4%.

Members were advised that in order to mitigate this, patients from the Rhondda Cynon Taf area that bordered Bridgend would be offered appointments in Bridgend which would help improve compliance within CTM.

Members **NOTED** that additional posts had been identified with a 3.3 whole time equivalent from the demand and capacity exercise. The posts had been advertised.

Members **NOTED** that a detailed analysis of job plans for clinicians in CTM supporting the delivery of CAPA (Choice and Partnership Approach) had been undertaken. Further work would be required to re-balance the capacity currently available for new patients and therapeutic interventions which had identified areas where additional capacity could be created. Members **AGREED** that it would be worthwhile carrying out an evaluation in due course.

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Members **NOTED** that performance for Adult Mental Health had dipped since January 2019. Members were advised that the Delivery Unit had provided a resource to look at the waiting lists due to 500 plus patients being added onto the list over the past year. Members **NOTED** that eight patients had been escalated into crisis services.

Members discussed a £2.2m allocation from Welsh Government and **NOTED** that 50% would be designated to CAMHS. Members were advised that an Integrated Care Fund (ICF) bid was being developed with the local authorities to pilot an early intervention emotional well-being service. The service would provide dedicated primary and secondary school-based Well-being Practitioners and a multi-agency partnership Early Intervention Well-being Team. The pilot was due to be rolled-out in the Gurnos area of Merthyr Tydfil and in Rhondda Fach. Funding was being provided on a non-recurrent basis.

Paul Griffiths queried whether the issue in relation to potential harm to a small number of patients had been reported to the Quality, Safety & Risk Committee. Alan Lawrie confirmed that it had been discussed at the previous meeting and a harm review for the 360 patients on the list was currently being undertaken.

Members **RESOLVED** to:-

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

FPW/19/86

IMPLICATIONS OF HMRC TAX AND PENSION CHANGES

Anne Phillimore and Steve Webster provided a verbal report.

Members **NOTED** that due to the tax and pension implications Consultants were no longer prepared to assist with waiting list initiatives and this was a potential high risk to the organisation. Members were advised that the Health Board had invited financial advisors to provide evening sessions on each of the sites to assist staff.

Members **NOTED** that a formal report on the impact of the changes would be brought back to the July 2019 meeting.

Members **RESOLVED** to:-

- **NOTE** the verbal report.

FPW/19/87

FINANCIAL PLAN FOR 2019/2020

Steve Webster presented the report which provided an update to Members on the proposed changes to the Financial Plan for 2019/2020.

Members **NOTED** the key changes flagged which were:-

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- The deficit assumed from the Bridgend transfer and its handling was similar to that assumed in the financial plan, but with an increased risk given it was subject to arbitration.
- There was slippage and projected shortfalls against the savings plan, a key driver for the level of focus having to be given to both the Bridgend transfer and the emerging issues in maternity services. The ability of the Health Board to regain focus and traction on savings was likely to be impacted to some extent by the necessary focus the organisation was giving to improving quality and safety in maternity services and more broadly.
- The actions to improve quality and safety in maternity and quality governance across the Health Board would have non-recurring and recurring cost implications.
- The outcome of demand and capacity plans to maintain planned care performance in the former Cwm Taf and to address the RTT backlogs in Bridgend had identified the need for greater investment than was included in the plan.
- The anticipated approval by Welsh Government of the Out-of-Hospital Transformation Plans need to be reflected in the budget

Members **NOTED** that due to both the Bridgend transfer and the emerging issues in maternity services there was slippage and projected shortfalls against the original savings plan. The recurrent savings target was **NOTED** to have reduced from £12.8m recurrent to £11.8m and £10.0m In year.

Members **NOTED** that with regard to the provision made for the Nurse Staffing Act, this had been reduced by £1.3m.

Members were advised that additional costs had been identified that were associated with the paediatrics, obstetrics and neonatal transfer for additional investment in anaesthetic support to obstetrics of £264k and in emergency gynaecology assessment services operating outside obstetric wards of £225k and that these would need to be included in the plan.

Members **NOTED** that a £1m non-recurring budget had been established for the additional transitional costs in 2019/20 following the Bridgend boundary change. The new budget would be funded on the basis of slippage from the planned investment in corporate teams following the boundary change.

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Members discussed the recurrent deficit associated with the Bridgend boundary change and that Welsh Government had been asked to arbitrate. Paul Griffiths queried whether the Health Board was confident that there would not be any further issues uncovered in relation to the Bridgend locality. Steve Webster confirmed the position would be clearer within the next few weeks. Keiron Montague queried whether conversations were being held with Welsh Government in relation to the additional £750k increase for staffing. Steve Webster confirmed that the full detail had not been received as yet but that the Executive Team would be discussing this further.

Members were advised that with regards to Targeted Intervention, the revised plan was assuming non-recurrent support from Welsh Government of circa £1.1m.

Members **RESOLVED** to:-

- **NOTE** the content of the report; and
- **APPROVE** the proposed changes to the Financial Plan for 2019/2020 on the basis that no other significant changes would be made.

FPW/19/88

ITEMS FOR INFORMATION

Members **RECEIVED** and **NOTED** the Month 2 Monitoring Returns which had been submitted to Welsh Government.

FPW/19/89

ANY OTHER BUSINESS

- Ruth Treharne drew Members attention to the waiting list for clinical neurophysiology which had been recently reported. The list was significant at 650 patients. Members were advised that a detailed report would be contained within the performance dashboard reported to the Delivery Unit. Members were advised that the service located in Bridgend was currently provided by Swansea Bay University Health Board.

FPW/19/90

DATE OF THE NEXT MEETING

The next meeting of the Finance, Performance & Workforce Committee was scheduled for Thursday, 25 July 2019 at 1 pm, in Ynysmeurig House, Navigation Park, Abercynon.

Signed

Mel Jehu, Independent Member

Date