

CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

**'UNCONFIRMED' MINUTES OF THE MEETING OF THE EXTRA
ORDINARY PLANNING, PERFORMANCE & FINANCE
COMMITTEE HELD ON 22 MARCH 2023, AS A VIRTUAL
MEETING**

PRESENT

Mel Jehu	-	Independent Member (Chair)
Jayne Sadgrove	-	Health Board Vice-Chair
Carolyn Donoghue	-	Independent Member
Nicola Milligan	-	Independent Member
Ian Wells	-	Independent Member
Patsy Roseblade	-	Independent Member
Dilys Jouvenat	-	Independent Member
James Hehir	-	Independent Member
Geraint Hopkins	-	Independent Member

IN ATTENDANCE

Paul Mears	-	Chief Executive
Linda Prosser	-	Director of Strategy & Transformation
Sally May	-	Director of Finance & Procurement
Gethin Hughes	-	Chief Operating Officer
Hywel Daniel	-	Director for People
Stuart Morris	-	Director of Digital
Lauren Edwards	-	Director of Therapies & Health Sciences
Elizabeth Beadle	-	Assistant Director of Transformation
Matthew Butt	-	Chief of Staff
Wendy Penrhyn-Jones	-	Head of Corporate Governance
Emma Walters	-	Corporate Governance Manager (Meeting Secretariat)

PART 1. PRELIMINARY MATTERS

1.1.0 WELCOME AND INTRODUCTIONS

The Chair **welcomed** everyone to the meeting.

1.2.0 APOLOGIES FOR ABSENCE

Apologies for absence had been received from Cally Hamblyn,
Assistant Director of Governance & Risk.

1.3.0 DECLARATIONS OF INTERESTS

There were no declarations received.

PART 2. MAIN AGENDA

2.1.0 NEW VELINDRE CANCER CENTRE FULL BUSINESS CASE (FBC)

L Prosser presented the report and advised the Committee that the Commercial Case had not been presented as that was solely a matter for Velindre University NHS Trust rather than Health Boards

Resolution:

- The Committee:
 - **NOTED** that the process to develop the FBC from the previously agreed Outline Business Case (OBC) had followed Treasury Green Book Guidance;
 - **NOTED** the updates made from OBC to FBC and the assurance provided by the Collective Commissioning Group (CCG);
 - **NOTED** the movement in recurrent revenue funding, from the uplifted OBC approved sum, for CTMUHB was £301,000 which represented an ongoing annual commitment. This figure represented the annual commitment set at a 2022-23 price base.
 - **ENDORSED FOR BOARD APPROVAL** the additional investment of £1.449m from the Health Board by Velindre University NHS Trust; noting that this figure represented the ongoing annual commitment set at a 2022-23 price base.
 - **ENDORSED FOR BOARD APPROVAL** the FBC, (excluding the Commercial Case.

2.2.0 INTEGRATED MEDIUM TERM PLAN 2023-2026

L. Prosser presented the report and provided a presentation to the Committee.

The presentation set out the challenges for the 2023-2026 planning round and described the approach taken to date to balance quality and performance requirements against statutory financial duties.

The Committee were advised that a final version would be considered at the Board Meeting taking place on 30th March 2023. The Board would not be in a position to approve the IMTP submission to Welsh Government by 31st March 2023 as it had not been possible for CTM to meet the required financial duty as regards achieving financial balance over a three-year period. In order to advise on the content of that final version, the Committee was asked to note the following:

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- The overall financial position should be no worse than a £86.9m deficit as described in the Accountable Officer letter, but addressing key performance and quality pressures meant that this had not improved either.
- Only limited investments in key areas – planned care, digital and overseas recruitment.
- Resultant quality and performance profiles (deficits) were understood.
- Impact of not investing in certain areas were understood (stroke).
- Residual risks to delivery of the plan (quality, performance & financial) were understood.

N. Milligan referred to the deficit and the shortfall in nurses and the recruitment of overseas nurses and queried whether they should build in the work that was being undertaken with regard to retention of staff, which was cost neutral. L. Prosser advised that this had been captured in the IMTP and was critical to decreasing costs.

S. May advised that an Accountable Officer letter was submitted to Welsh Government on 28 February 2023 setting out CTM's position at that time. This, together with the response had been shared with Board Members.

G. Hughes advised that within the base plan, they had assumed some significant improvements in productivity and had made an assumption in relation to significant compliance with regard to 'treat in turn' which presented far reaching operational challenges.

L. Prosser advised that Option 3 proposed investment of £8.5m and that Option 4 would see an investment of £10.7m but the latter would further worsen the overall financial position. It was noted that there was no indication from Welsh Government that any additional funding would be available.

P. Mears commented that the Minister expected to see real improvements in terms of CTM's planned and unscheduled care positions. He added that there were a number of clinical service areas that had been put forward for investment which it had not been possible to support due to the financial challenges that existed. P. Mears stated that given the level of deficit CTM had, it would take between three to five years to work towards a solution. He added that any actions would need to be balanced, in terms of maintaining quality of services and improving performance whilst at the same time delivering the required savings.

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P. Roseblade acknowledged the challenges that the position presented but was surprised not to see investment in stroke services given the poor level of performance in this regard.

P. Roseblade queried whether a risk assessment had been undertaken in terms of prioritisation of investments. G. Hughes advised that a number of the very long waiting patients also had other significant conditions that increased their risks. He added that part of the challenge in relation to stroke was linked to service capacity.

P. Mears stated that CTM was in a similar position to other health boards in Wales in terms of its financial deficit. He added that the expectation from Welsh Government was that waiting times were improved for cancer service delivery as well as for planned care, which meant that such areas needed to be prioritised in terms of investment. P. Mears stated that it would also be necessary to review savings targets along with service efficiency.

N. Milligan indicated that she would support Option 4. J. Hehir concurred. S. May, indicated her preference for Option 3 and set out her rationale in this respect. L. Prosser advised that selection of Option 3 would mean that that it would not be possible to allocate any investment for stroke services whereas Option 4 could provide for this.

P. Mears advised that it would be helpful if the Committee could confirm its support for investment of £6m into planned care with further discussions required to determine how the remaining £2.2m would be deployed.

P. Mears advised that the Board would need to approve the final proposed investments and today's discussion had been helpful in shaping the final proposals.

Whilst endorsing the position set out by the Chief Executive, J. Sadgrove took the opportunity to highlight that it was important to acknowledge the efficiencies that could be achieved from digital investments.

M. Jehu thanked the teams for the preparation of the report and Board colleagues for their helpful contributions.

Resolution: The Committee:

- **NOTED** the report and presentation.
- **NOTED** the work that would be undertaken before the next Board Meeting.
- **ENDORSED FOR BOARD APPROVAL** the investment of £6m into planned care on the basis that there would be a review the remaining gap to ascertain whether any investment could be made into other areas, such as stroke services.

3.0.0 OTHER MATTERS

3.1.0 ANY OTHER URGENT BUSINESS

3.1.2 CLOSE OF THE MEETING – DATE AND TIME OF NEXT MEETING:

The next full meeting of the Committee was noted to be scheduled for 26 April 2023 at 2:00 pm.

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