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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Annual Report of the Local Partnership Forum 2022/23

1.0 INTRODUCTION

In accordance with best practice and good governance, this Annual Report sets out how the Local Partnership Forum (LPF) has met its Terms of Reference during the financial year 2022-23.

2.0 MEMBERSHIP

LPF is co-chaired by the Chair of Staff Representatives and the Executive Director of People and Culture. Members are Staff Representatives from accredited Trade Unions recognised as part of the Partnership and Recognition Agreement, the Executive Team and Chief Executive, senior members of the People and Culture team, and the General Manager for UHL and Barry. The Independent Member for Trade Unions has a standing invitation to attend, as does the Chair of the Board.

3.0 MEETINGS AND ATTENDANCE

The Local Partnership Forum met six times during the period 1 April 2022 to 31 March 2023. This is in line with its Terms of Reference.

Attendance is fluid compared to Board and Committees as it is often dependant on the release of staff representatives from their substantive roles and while there are regular attendees from the staff side there is a degree of variation from meeting to meeting. Quoracy is determined by the number of management and staff representatives present, not specific individuals, as set out in the Terms of Reference.

Members of the Forum who are unable to attend a meeting may send a suitable deputy who will contribute to the meeting being quorate.

Current Executive / Management attendance is as follows (n.b.* denotes that a deputy attended in their place):

	13/04	16/06	10/08	20/10	08/12	08/02
Director of People and Culture (co-Chair)	Y	Y	Y	Y	Y	Y
Chief Executive	*	Y	Y	Y	Y	*
ED of Finance	*	*				*
ED Nurse Director	Y			Y	Y	
Medical Director					Y	Y
ED of Strategy and Planning	*				Y	*
ED of Therapies and Health Science		*			Y	
Chief Operating Officer	Y	*	*	*	Y	Y
ED of Public Health	Y	Y	Y	Y	Y	Y
Director of Corporate Governance	Y					Y
Director of Communications and Engagement	Y		Y	Y	Y	Y
Deputy Director of People and Culture (previously AD of Workforce)	Y	Y		Y	Y	Y

AD of OD, Wellbeing and Culture (previously AD of Organisational Development)					Y	
AD of People Resourcing	Y		Y	Y	Y	Y
Head of People Assurance and Experience (previously Head of Workforce Governance)			*	*	*	Y
Head of People Services		Y		Y	Y	Y
General Manager, UHL and Barry		Y	Y	Y	Y	Y
Head of Corporate Business		Y	Y	Y	Y	Y

Note:

Executive Nurse Director: Ruth Walker April 202, Jason Roberts June 2022 – February 2023
(interim June 2022)

Chief Operating Officer: Caroline Bird (Interim) April – June 2022, Paul Bostock August 2022
– February 2023

Head of Corporate Business – Timothy Davies, new post from June 2022

Director of Corporate Governance: Nicola Foreman April – December, James Quance
(interim) February 2023

4.0 TERMS OF REFERENCE

The Terms of Reference are incorporated into the Partnership and Recognition Agreement. This was reviewed by the Local Partnership Forum on 17 June 2021 and was approved by the Board on 29th July 2021.

5.0 WORK UNDERTAKEN

LPF is the formal mechanism for the Health Board and Trade Union/Professional Organisation Representatives to work together to improve health services. Its purpose, as set out in the Terms of Reference, fall into four overarching themes: communicate, consider, consult and negotiate, and appraise.

Key topics considered during the period April 2022 – March 2023 are set out below.

5.1 13 April 2022

The Deputy Director of Planning advised the Forum that a draft IMTP had been presented to the Board and submitted to Welsh Government. While it was acknowledged as robust in many areas, there was a financial deficit. Opportunities to address this were being worked up and a revised and final plan would be submitted at the end of quarter one.

The Interim COO delivered a presentation on the recovery delivery commitments for 2022/23, highlighting key points for each of the 5 programmes.

The Local Partnership Forum received the annual report from the Clinical Board Partnership Forums. The purpose of these Forums is to establish ongoing dialogue, communication and consultation on service and operational management issues specific to the Clinical Board areas.

5.2 16 June 2022

The Forum received a presentation describing the current operational position. This was supplemented by information about some of the work taking place within Therapies to support the operational position. Staff representatives raised the issue of the operational footprint and getting back to business as usual while transforming

services, and in the context of another possible covid wave. They asked if principles could be agreed in partnership in readiness for the future.

The Equality, Diversity and Inclusion Manager described the actions being taken around the Race Equality Action Plan (REAP) (now referred to as the Anti Racist Wales Action Plan). The Plan includes 5 goals for health (leadership, accountability, workforce data, access to services and tackling health inequalities) and the Forum was advised that a working group would be established to develop a local action plan. At the beginning of the year the UHB launched the One Voice Network to support our diverse communities, help shape our organisation through collaboration and really help us become an anti racist Health Board.

The Forum received a presentation on progress of the Move More, Eat Well (MMEW) plan and was asked to consider four questions on how to support and enable staff to move more as part of the working day: How do we best engage staff to gain insight into their experiences? How can we support and enable staff to move more? How can we embed moving more into the working day? What opportunities are there already for staff, and what is working well? It was noted that one of the real challenges is maintaining weight loss and addressing behavioural patterns and that staff should be encouraged to come forward with their own ideas and commitments rather than have them set by the leadership team.

The Forum was introduced the concept of the TrAMs (Transforming Access to Medicines) Programme which is being developed on an all Wales basis with a proposal to create three hubs across Wales and which will be hosted by Shared Services. The creation of the hubs would mean approx. 240 wte staff in Wales transferring to Shared Services under a TUPE arrangement, however, more staff could be affected if part of their role was in scope. A consultation was taking place around these proposals.

Staff representative members requested further conversation around three topics: staff with long covid, staff retention and turnover, and queries being raised around shift patterns through the implementation of the new e-rostering system. These matters were referred to the Workforce Partnership Group (a sub Group of LPF) for more detailed discussions.

5.3 10 August 2022

The Head of Equity and Inclusion was in attendance to present the Strategic Equality Plan. We were just over half way through the plan, and some of the work that was taking place, as well as future planned work, was highlighted. This included the OneVoice network, Inclusion Ambassadors, and a campaign to improve our staff equality data. Forum members were asked for their support in taking these initiatives forward and for their feedback.

It was agreed that a discussion between the Executive Nurse Director and staff representatives would take place outside the meeting around safe staffing and the Nursing Staff Act Annual Assurance Report previously received by Board.

5.4 20 October 2022

The Managing Director/Deputy COO (Acute Services) was in attendance to discuss the Winter Plan. Key points noted included:

- There would be a series of staff roadshows, with 30 sessions planned around UHB over the next few weeks – the aim of the roadshows was to engage staff and allow conversations as well as generally raising awareness and understanding of the winter plan
- LPF were advised that modelling had taken place to determine that the worst case scenario was that we would be 152 beds short. The plans being put into place to create additional capacity were described
- The importance of the winter vaccine strategy was re-iterated
- The Executive Director of People and Culture noted that there had been an improved position in terms of nursing vacancy rates, but acknowledged that the workforce picture was not great. The People and Culture team were focussing on wellbeing, recruitment, retention as their 3 main priorities as part of the Main Effort. She also emphasised the importance of keeping our values and behaviours at the forefront of everything we do

The importance of engaging with staff representatives and working in partnership to deliver the Winter Plan was noted.

The Lead Staff Representative for Mental Health queried the planning and consultation processes for the deployment of staff, pointing out that many staff found the idea of being moved at short notice distressing and re-triggering in the context of the pandemic. The Chief Executive and Executive Nurse Director said that while it was likely staff would need to be moved around the organisation over the winter to cope with patient flow, the intent would always be that this is done with respect and consideration.

5.5 8 December 2022

The Chief Operating Officer gave an update on the Operational position. He committed to continuing to hold roadshows for staff over the winter and agreed to meet with Trade Union representatives every month/six weeks. He emphasized that staff were responding to the challenges brilliantly but he would not underplay how difficult it was and was going to continue to be. He noted that it was important to have hope that would get through it.

The Executive Director for Strategy and Planning provided an update on the IMTP process and priorities for this year. The draft plan would be shared with LPF members. It was noted that Lead Clinical Board Representatives from the Trade Unions had been invited to an engagement session on the Strategy refresh the previous day.

Concerns were raised by a Trade Union representative about the way managers were approaching staff to find out their intentions for the RCN strike days on 15 and 20 December. It was reported that staff in some areas felt harassed and vulnerable and that managers were demanding to know if they intended to strike or not. The Deputy Director for People and Culture, who is a co-Chair of the Industrial Action task and finish group, said she was sorry to hear these reports and that the communications issued had been clear that managers should not ask individuals if they would be striking but should ask if they intended to be in work on those days. The Chief Operating Officer stated that he was disappointed as the Health Board

respected individuals right to strike and was deliberately not asking for large numbers of derogations. He said that the message had been clear but he would raise it again with the Clinical Boards.

5.6 8 February 2023

The Deputy Director of Strategy and Planning shared the Shaping Our Future Wellbeing Refresh engagement presentation and asked the Forum to provide feedback on the proposals. Staff representatives raised concerns about equitable access to health services and asked what we were doing to address this. The Executive Director of Public Health advised that while there is a lot of work in place around preventative services, there is still more to do around equitable access to services particularly amongst our ethnic minority communities. She advised that work has begun around developing a framework that looks at the overlaps between equality, equity of access and patient safety led by the Public Health team

The Deputy Director of Strategy and Planning also provided an update on the Integrated MediumTerm Plan. She advised that it would be a fairly short, focused document outlining how our operational plan will be delivered against key strategic pillars like access to care and improving health inequalities. It will also set out how we will deliver against the 16 priorities set out by the Minister.

The Deputy Director of Therapies and Health Sciences delivered a presentation on the Rehabilitation Programme. The presentation showed how the Programme had developed to incorporate Covid rehabilitation and has been refreshed using digital resources to make virtual delivery more accessible. It consists of a four-tiered approach:

- Level 1 is around keeping people well using self-management community guidance
- Level 2 focusses on enabling people to live well, using brief interventions to allow them to move back quickly to Level 1.

- Level 3 supports people to live well through complex group-based interventions, delivered by people with lived experience to support behavioural changes.
- Level 4 is professionally led holistic support delivered on a one-to-one basis.

We have seen significant improvements in people's health and wellbeing from running these programmes, with 83.7% of service users reporting a clinically significant positive change.

The Assistant Director of Quality, Safety and Improvement and Head of Risk and Regulation were in attendance to give a presentation on the learning from Covid-19 and the UHB response to the Covid inquiry. Key points included:

- the process followed for hospital acquired Covid-19 and when it is subject to a proportionate investigation
- the significant changes over time in our knowledge, evidence and guidance, and an acknowledgement that in the early months, guidance was often changing on a daily basis
- a recognition that the movement of patients across our sites has been associated with increased COVID outbreaks
- The inquiry which launched last year involves 3 different modules – our involvement is with module 3 which is looking at the impact of the COVID-19 pandemic on healthcare systems in England, Wales and Scotland.

The Deputy Director for People and Culture provided a review of year one of the People and Culture Plan. Despite the challenging workforce position a lot has been achieved in year 1; in year 2 we need to continue to embed the People and Culture Plan across the organisation to ensure these actions and responsibilities are shared across the clinical boards and other departments. Though sickness and turnover remain high, we have seen some improvement in VBAs and statutory and mandatory training across the health board. With such a large organisation, progress is often hidden by the overall position and future reports will aim to break down this data to show the variance between our clinical boards. The Chair of Staff Representatives agreed that exploring the narrative behind this data would help with understanding

the impact of our improvement work, but re-iterated previous requests for staff representatives to be more involved in progressing the work set out in the Plan.

6.0 STANDARD AGENDA ITEMS

6.1 Chief Executives Report

At each meeting the Chief Executive, or a deputy, provides a verbal update to the LPF on key topics. Highlights noted at each meeting are described below.

6.1.1 13 April 2022

The Executive Director of People and Culture provided an update report on behalf of the Chief Executive, key points included:

- Staff were thanked for their efforts in light of the continuous pressure across the whole system. The Executive Director of People and Culture noted that they were being courageous and escalating concerns rather than accepting them as the norm
- The operational position remained challenging, predominantly because of staff attendance being impacted by the high Covid levels
- The end of year finance position was being accounted for, all the indications were that it would be in line with the UHB's forecast, which has been that the UHB will breakeven (third year in a row) and make full use of the capital funding provided to it. The financial outlook going into 2022/23 was challenging, as we dealt with the ongoing challenges and legacy of the pandemic. The draft IMTP submitted at the end of March had a £20.8m deficit.
- Phase one of Same Day Emergency Care (SDEC) assessment unit was now open to patients - The new assessment unit at UHW had been created to allow rapid access to surgical treatment through ambulatory care.
- The All-Wales Dementia Charter was launched on 6 April 2022 which aimed to enable hospitals to create the right environment for people with dementia, their families and carers in Wales. It focused on improvement and offered a short, accessible and visible statement of principles that contribute to a dementia-friendly hospital.
- Cardiff and Vale of Glamorgan Population Needs Assessment 2022-27 had been published by the Cardiff and Vale Regional Partnership Board

6.1.2 16 June 2022:

In June 2022 the key points discussed included:

- Thanking staff for continuing to work in such challenging circumstances;
- The forthcoming IHI (Institute for Health Improvement) visit;
- A recent visit by Health Minister Eluned Morgan to the Emergency Unit and to learn more about the Shaping Our Future Hospitals programme and our ambitions for transforming care in Wales;
- A piece of work taking place with CEOs across Wales around the impact of the social care crises and the need to create additional capacity; and
- The importance of taking up the offered flu and Covid-19 boosters later in the year, especially in light of rising Covid-19 numbers

6.1.3 10 August 2022:

In August 2022 the Chief Executive noted:

- The submission of a revised IMTP to Welsh Government, current pressure across our acute hospitals, as well as within mental health and primary care, and the impact this was having on our staff and patients;
- The rapid response domiciliary care framework issued by Cardiff Council and some of their current priorities;
- The submission of a business case for UHW2 to cabinet; and
- Initial feedback from the IHI (Institute for Health Improvement) visit.

Staff were thanked for continuing to work in such challenging circumstances, including the recent heat waves.

The Chief Executive also referred to the proposed industrial action by Trade Unions and she was offered assurances by the Chair of Staff Representatives that the approach adopted would be to work with the organisation with full transparency and sight around any planned activity.

6.1.4 20 October 2022:

Key points to note in October 2022 included:

- That the UHB had moved to enhanced monitoring as the IMTP was not balanced and regular meetings with WG had been arranged;
- An action plan had been submitted and approved following the HIW report into urgent and emergency care. The Minister had made a surprise visit to EU and had provided some useful feedback. The feedback from patients at the time had been largely positive and no ambulances had been waiting
- Operational pressures – the winter plan outlined how we intended to secure additional capacity. Staff were thanked for their continuing efforts to care for our patients;
- Staff were encouraged to get vaccinated as this is the best way of protecting ourselves and each other from Covid-19 and the flu;
- It was noted that several unions are balloting staff with a view to taking industrial action;
- The cost of living crisis and the impact of staff was acknowledged; and
- The Chief Executive described her '3 Ws' which set out the best way to look after our staff, they are: wellbeing, well led and helping to reduce workload.

6.1.5 8 December 2022:

The Chief Executive began her update by acknowledging the importance of a compassionate culture and requesting that staff were kind to themselves, each other and our patients especially during these challenging times. She advised that:

- We have not succeeded in holding the £17.7m deficit position. This has been reviewed and moved to a £27m deficit position for this year;
- Planning for the Annual Plan and IMTP is in progress. The ministerial priorities have been received and the Plan will be aligned to them;

- We were seeing some improvements in our ability to respond to demand, including Ambulance handover times but there was high seasonal demand as well as high demand for mental health and community care. Strep-A was having a big impact in paediatrics. The Chief Executive thanked staff for continuing to respond with compassion;
- The Covid vaccination programme was going well, though staff flu vaccine uptake was concerning;
- There had been detailed contingency planning for the forthcoming industrial action and negotiations around derogations had taken place. The Chief Executive stated our gratitude to the Trade Unions for working with us to ensure patient safety;
- The action plan developed in response to the HIW report in EU continued to be worked on. There had also been an unannounced inspection in Maternity Services and concerns were raised around staffing and wellbeing. Lots of work was taking place in the Clinical Boards to respond and develop action plans. It was also hoped that the situation would improve now that a number of newly qualified midwives had joined us.

6.1.6 8 February 2023

The Executive Director of Finance, deputising for the Chief Executive, provided an update report to the Forum. Key points included:

- Winter pressures – the organisation had experienced tough times in the autumn quarter and though these difficulties remained, we were starting to see some signs of better flow within our urgent care system and our ability to maintain planned care;
- Industrial action – this was ongoing around securing a pay award for 2023-24 that meets the needs of our staff. The operational implications were being handled in a systematic way though this in turn creates pressure on our services, staff and patients.
- Strategy refresh – we are renewing our strategy to address the long-term effects the pandemic has had on our services and population.

6.2 Integrated Performance Report

The Local Partnership Forum receives a copy of the Integrated Performance Report prepared for Board at each meeting. This report includes a summary position for the following areas:

- Population Health
- Quality and Safety
- People
- Operational Performance
- Finance

6.3 Reports from Sub Groups

The Local Partnership Forum has 3 sub-groups - the Workforce Partnership Group, the Employment Policies Sub Group and the Staff Benefits Group.

The Workforce Partnership Group (WPG) is co-chaired by the Chair of Staff Representatives and the Executive Director of People and Culture, who also chair LPF. The WPG generally meets 6 times a year and the items discussed tend to be more operational or detailed than those brought to the LPF. The LPF regularly refers matters to the WPG for follow up and further consideration. The Workforce Partnership Group reports to LPF annually, though matters can be escalated as required.

At a more local level, each Clinical Board also has monthly or bi-monthly Local Partnership Forums which enable the Clinical Board leadership team to engage with trade union representatives on local matters. The Clinical Board Partnership Forums also report annually to the UHB LPF.

The Employment Policy Sub Group (EPSG) is made up of representatives from People and Culture and Trade Unions and is co-chaired by the Deputy Head of People Assurance and Experience and a TU representative. EPSG is the primary forum for the development and review of employment policies, procedures and

guidelines. It usually meets 6 times a year and a copy of the minutes of each meeting are submitted to the Local Partnership Forum for noting.

The Staff Benefits Group explores and co-ordinates discounts and benefits offered by external organisations for UHB employees. The Staff Benefits Group meets quarterly and discusses and agrees 'best deals' for staff. Their work is reported to the Charitable Funds Committee and the Local Partnership Forum.

6.0 REPORTING RESPONSIBILITIES

The Local Partnership Forum has reported to the Board after each meeting by presenting a summary report of the key discussion items. Copies of the approved minutes are also provided.