

**CONFIRMED MINUTES OF A MEETING OF CARDIFF AND VALE
UNIVERSITY HEALTH BOARD HELD AT 13.00 ON 26 JULY 2018
CONFERENCE ROOM 2, CIVIC OFFICES, BARRY**

Present:

Maria Battle	Chair
Abigail Harris	Director of Planning
Akmal Hanuk	Independent Member – Community
Charles Janczewski	Vice Chair
Dawn Ward	Independent Member – Trade Unions
Eileen Brandreth	Independent Member – ICT
Dr Fiona Jenkins	Director of Therapies and Health Sciences
Dr Graham Shortland (part)	Medical Director
John Union	Independent Member – Finance
Len Richards	Chief Executive
Martin Driscoll	Director of Workforce and OD
Robert Chadwick	Director of Finance
Ruth Walker	Executive Nurse Director
Sara Moseley	Independent Member – Third Sector
Dr Sharon Hopkins	Director of Public Health and Deputy Chief Executive
Steve Curry	Chief Operating Officer

In Attendance:

Joanne Brandon	Director of Communications
Nicola Foreman	Director of Corporate Governance/Board Secretary
Peter Welsh	General Manager Llandough
Urvisha Perez	Observer, Wales Audit Office

Secretariat

Julia Harper

Apologies:

Prof Gary Baxter	Independent Member – Cardiff University
John Antoniazzi	Independent Member – Estates
Michael Imperato	Independent Member – Legal
Cllr Susan Elsmore	Independent Member – Local Authority
Paula Martyn	Associate Member – Chair, SRG
Lance Carver	Associate Member – Director of Social Services
Sue Bailey	Associate Member – Chair, HPF
Indu Deglurkar	Chair, SMSC
Stephen Allen	Chief Officer, Cardiff and Vale of Glamorgan CHC

UHB 18/108

PATIENT STORY – MR RICE

The UHB Chair, Miss Maria Battle, introduced Mr Paul Rice who shared his patient experience of treatment for shoulder tendonitis and his frustrations and observations at the waiting times and lack of communication between each part of the treatment. Throughout the whole process, Mr Rice felt his condition was worsening and required more medication.

Mr Rice told the Board that he felt that the service design of patient handover from one specialty team to another was not working well and contributed to further delays in treatment. He was particularly concerned that he found it difficult to identify who was responsible for his care at each stage of the process other than himself, and didn't know who to contact to make enquiries about waiting times – there appeared to be no one “owning” his care.

Whilst targets appeared reasonable on paper, the actual experience whilst being in pain and constantly calling and writing letters to chase appointments and expedite treatment was frustrating and for some people, may even be impossible.

Mr Rice suggested that service redesign would bring several benefits: a reduced workload for staff, reduced costs (or greater productivity within the same resource), lower overall waiting times and better patient outcomes. Mr Rice told the Board that he would be more than happy help the UHB improve the process.

The Chair invited comments and questions:

- The UHB was already working on patient pathways and Mr Rice's input would be welcomed.
- Sometimes targets were not meaningful.
- The UHB was trying to get physiotherapy into GP practices to improve access to that service.
- It was clear there was more work to be done to make services seamless.
- There was still too much variation in practice including care navigation and ownership of the journey. Lessons could be learned from the work being done on the cancer pathway.
- LEAN thinking was being used to streamline the process.
- There were probably many patients feeling the same way but were uneasy or unable to articulate their feelings.

The Chair thanked Mr Rice for sharing his story with the Board and said the UHB would welcome his input going forward on orthopaedics service redesign.

Action – Mr Steve Curry

UHB 18/109

WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting of the Board, in particular, Ms Nicola Foreman the Board's new Director of Corporate Governance/Board Secretary and Ms Urvisha Perez from Wales Audit Office who was observing the meeting as part of the annual audit work.

UHB 18/110 APOLOGIES FOR ABSENCE

Apologies for absence were noted.

UHB 18/111 DECLARATIONS OF INTEREST

The Chair invited Members to declare any interests in the proceedings on the agenda. Mr Janczewski declared an interest in WHSSC.

UHB 18/112 MINUTES OF THE BOARD MEETING HELD ON 31st MAY 2018

The Board **RECEIVED** and **APPROVED** the minutes of the meeting held on 31st May 2018.

UHB 18/113 MINUTES OF THE SPECIAL BOARD MEETING HELD ON 28th JUNE 2018

The Board **RECEIVED** and **APPROVED** the minutes of the meeting held on 28th June 2018.

UHB 18/114 ACTION LOG FOLLOWING THE LAST MEETING

The Board **RECEIVED** the Action Log from the May meeting and **NOTED** the following:

UHB 18/081 Performance Report – The new cancer pathway would be shared at the October Board Development Day. There would also be consideration of Transformation in October.

Action – Mr Steve Curry and Dr Sharon Hopkins

UHB18/087Capital Programme – The risk was being shared through the Capital Management Group, the Clinical Boards and was reported and monitored through the Strategy and Engagement Committee (SEC). It was also discussed with Welsh Government. **CLOSED**

UHB18/105Thoracic Surgery Consultation – The actions (with the exception of CHC feedback) were complete.

UHB 18/115 CHAIR'S REPORT

The Board **RECEIVED** the written report of the Chair, Miss Maria Battle. Miss Battle highlighted a couple of items: the 70th Anniversary celebrations had been uplifting, the Regional Planning and Delivery Forum work was making progress and collaboration between the Health Boards had improved and the

Chief Executive was congratulated on completion of his Offa's Dyke challenge. Miss Battle also recommended attendance at one of National Theatre Wales' performances at the paediatric hydrotherapy pool. Finally Miss Battle thanked Mr Welsh for his work and support as Board Secretary as he was stepping down to concentrate on work as the General Manager of Llandough and Barry Hospitals.

ASSURANCE was provided by:

- Discussions with the Director of Corporate Governance

The Board:

- **NOTED** the report
- **RATIFIED** the Chair's Action
- **ENDORSED** the affixing of the Common Seal

UHB 18/116 CHIEF EXECUTIVE'S REPORT

The Board **RECEIVED** the written report of the Chief Executive, Mr Len Richards. Mr Richards highlighted thoracic surgery consultation and the need for WHSSC to keep the frequently asked questions up to date on the website. Two public consultation meetings had recently been held though attendance had been poor. However, as expected, comments had been made about increased travel times, proximity to the major trauma centre and the process in general with emphasis on the role of the independent panel. WHSSC would be undertaking a mid-point review and so far the greatest number of comments had been received from the UHB's area. At the recent meeting of the Stakeholder Reference Group, the lack of detail around the impact on research of the proposal was raised as well as the practicality of travelling with a relative with dementia. Consultation would close on 27th August, with two further public meetings arranged at the CHC's request.

In terms of targeted intervention and joint meetings with Welsh Government, Mr Richards reported that Welsh Government feedback was positive. The UHB needed to meet the planned deficit of £19.9m and have to plan to break even before targeted intervention would be lifted. Regarding the underlying deficit, Welsh Government now included details relating to all Health Boards in its finance report. The challenge was to produce a balanced budget.

Mr Richards also advised that he had been nominated as the Chief Executives' representative on the new National Transformation Board.

ASSURANCE was provided by:

- The Executive Team contributed to the development of information contained in this report.

The Board **NOTED** the report.

UHB 18/117 **PATIENT SAFETY, QUALITY AND EXPERIENCE REPORT**

The Executive Nurse Director, Mrs Ruth Walker, answered the questions raised by Independent Members prior to the Board meeting covering pressure damage, “never” events in Dental, PRUDICS, prevention of falls and the model ward.

The Chair invited comments and questions:

- As the Falls Strategy was a key to transformation it should be received at Board rather than Committee.

Action – Director of Therapies and Health Sciences

- A common theme from inspections and visits was maintenance of the environment with wards reporting delays in repairs. The identification of a “handyman” in one Clinical Board was working well but required resource to be replicated in other areas. As this was an ongoing issue, the Estates Department was trying to batch work in each area. On a positive note, ward refurbishments had helped considerably.
- There was an urgent need to improve awareness and make information governance training mandatory as personal identifiable information was still being left unattended. This would be discussed further outside the meeting.

Action – Ms Eileen Brandreth

- Better use of bed-side technology was required in order to reduce the huge volume of paper records and the UHB needed a cultural shift to develop a digitally enabled workforce.

In order to gain assurance that risks were being addressed, Dr Hopkins agreed to undertake further work with colleagues.

Action – Dr Sharon Hopkins

ASSURANCE was provided by:

- The current position on all key indicators relating to Quality, Safety and Patient Experience presented in the Board Report.
- Comparison with peers across Wales where available.
- Evidence of the action being taken to address key outcomes that were not meeting the standards required.
- A culture of openness and transparency within the UHB to examine all available sources of information to provide assurance on the quality, safety and experience of services.

The Board:

- **CONSIDERED** the content of this report.
- **NOTED** the areas of current concern.
- **AGREED** that the current actions being taken were sufficient.

The Deputy Chief Executive and Director of Public Health, Dr Sharon Hopkins introduced the report and suggested colleagues had a stretch and stand for this particular item. The good news was that more targets had been met and most were now moving in the right direction.

The Chief Operating Officer addressed questions raised by Independent Members prior to the Board meeting covering cancer and diagnostics. It was noted that there had been a huge rise in demand for diagnostics, possibly influenced by high profile cases in the media. This, together with a temporary loss of radiology capacity had impacted on waiting times. Whilst mobile units were being used to increase capacity, it was more difficult to increase endoscopy capacity.

The Chair invited questions and comments:

- Consideration needed to be given to the whole pathway and not just the front end of diagnostics as there were knock-on effects.
 - Currently 4% of GI patients tested positive for cancer so 96% were clear.
 - NICE recommended earlier cancer diagnosis in order to improve patient outcomes.
 - It was important to establish at what point tests were needed to reduce waste, harm and variation.
 - The improvement in unscheduled care performance was welcomed.
 - Planned care was now being delivered on a monthly rather than quarterly basis and other Health Boards were interested in this approach. This was commended and the Chair would write to staff.
- Action – Miss Maria Battle**
- Discussions were ongoing with Welsh Government about improving Mental Health Measure targets.
 - Finance – the UHB was around £600k off target at month 3 due to nursing costs in three Clinical Boards. This needed to be addressed urgently in order to get a balanced plan next year. However, this year's cost improvements had been identified.

REASONABLE ASSURANCE was provided by:

- The fact that the UHB was making progress in delivering its Delivery Plan for 2018/19 by achieving compliance with 22 of the 66 performance measures.

The Board:

- **CONSIDERED** the UHB's current level of performance and the actions being taken where the level of performance was either below the expected standard or progress had not been made sufficiently quickly to ensure delivery by the requisite timescale.

The Chair welcomed Mr Alun Jones, Deputy Chief Executive of HIW and Nia Roberts, Head of Policy and Engagement to the meeting to present the annual summary of findings of the UHB that had recently been published. To begin, Mr Jones provided the all Wales picture where HIW had undertaken 266 visits, received 349 concerns (including whistleblowing) about health services and received 3,230 patient feedback questionnaires. Overall comments were very positive. Consistently across Wales HIW had identified three areas to be addressed: medicines management, staffing levels and the care environment but also found that high standards of dignified care were being delivered.

As few concerns had been raised about the UHB, only one hospital visit was undertaken in the last year in addition to the GP, dental practices, Mental Health Act and Ionising Radiation work. There had also been two death in custody reviews. Two areas were also included as part national thematic reviews: community mental health team and detoxification unit inspection.

Whilst inspections were mainly positive, Mr Jones urged the UHB to tackle the issues identified around medicines management as it had been found that where staff were stretched, some fundamental processes were not happening. HIW noted that the mental health visits were very positive, though mandatory training remained a challenge. In terms of General Practice, patients demonstrated a high tolerance of stretched services and the governance of quality systems required improvement. In Dental practices, issues of record keeping, audit, quality systems, safeguarding and the complaints process were identified. HIW had received improvement plans for all areas identified.

Two areas specifically drawn to the attention of the Board were the environment in the Links CMHT and the high case load in psychiatry. It was noted that psychiatry case load was impacted by the inability to discharge and the UHB would discuss this with the CMHT and seek independent advice if necessary.

The Chair invited comments and questions:

- Offender healthcare in Cardiff was good.
- HIW had a constructive relationship with the UHB and this was appreciated by both parties.
- HIW had not issued any immediate assurance letters to the UHB in the last year.
- Mr Jones had attended the UHB's Quality, Safety and Experience Committee and had been impressed with its maturity.
- There were plans to move the Links Centre, though a temporary move would be required in the first instance. A date for this would be provided.

Action – Mrs Abigail Harris

- The UHB had embraced the all Wales Medicines Code and prescribing chart and acknowledged there was more work to be done.
- UHB staff had been trained to undertake HIW inspections in other Health Boards and therefore had the skills to perform the same within the UHB.

The Board **NOTED** the findings and the Chair thanked Mr Jones for attending the meeting and assured him that the Board would continue to focus efforts in areas requiring improvement.

UHB 18/120 ANNUAL QUALITY STATEMENT (AQS)

The Executive Nurse Director, Mrs Ruth Walker thanked Ms Alex Scott for her work on the AQS and reported that it had been well received at the Quality, Safety and Experience Committee in June. The Chair praised the report which had been written through the eyes of service users. In future years it was hoped that more information could be gathered from primary care. The CHC and Stakeholder Reference Group were also thanked for their critique during the production of the report.

ASSURANCE was provided by:

- The provision of the Annual Quality Statement 2017/18
- The draft AQS was considered at Management Executive in June 2018 and was approved at Quality Safety and Experience Committee in June 2018.

The Board:

- **ENDORSED** the Annual Quality Statement for 2017 / 2018.

UHB 18/121 REVISED BOARD AND COMMITTEE ARRANGEMENTS

The former Director of Corporate Governance, Mr Peter Welsh, reiterated the views expressed in Board Development sessions and the need to produce less paper by concentrating on exception reporting.

ASSURANCE was provided by:

- Discussion at the Board Development Days in February and April.

The Board:

- **NOTED** the report and progress made
- **ENDORSED** the proposed report template.

UHB 18/122

TRANSFORMATION UPDATE

The Deputy Chief Executive and Director of Public Health, Dr Sharon Hopkins introduced the report and the developing programme of work. Work on the dashboard was almost complete and should be available for the next meeting. It was important to identify how to scale up the critical enablers and not to be afraid to stop something if it was not working. In addition there was a need to formalise the learning alliance with partners and more details on this would be brought to the next meeting. It was noted that the Alliance approach was the “Cardiff and Vale Way”.

Action – Dr Sharon Hopkins

The Chair invited comments and questions:

- Work was underway to identify costs and benefits against of the work areas in the report.
- It was important to involve partners and the Third Sector at the earliest opportunity as they would be crucial in scaling up.
- It was also important to encourage and involve staff in the transformation process and leadership was crucial in this respect.
- Digitalisation was also one of the key enablers.
- Transformation required a big HR/OD change and HR issues would be considered at the October Board Development Day.

Action – Mr Martin Driscoll

ASSURANCE was provided by:

- HSMB signed off projects included in the Transformation Programme
- Progress was monitored through a programme board structure
- Highlight reports were in place for projects
- Expertise in improvement and project management approaches had been applied to the projects.

The Board **NOTED** the progress made on the Transformation Programme.

UHB 18/123

ANNUAL REPORT

The Board acknowledged that the Annual Report of the UHB had been presented at the AGM held earlier in the day.

UHB 18/124

ANNUAL SUMMARY PLAN

The Director of Planning, Mrs Abigail Harris, advised the Board that the UHB had been required to produce an Annual Plan as Welsh Government had been unable to approve the Integrated Medium Term Plan.

ASSURANCE was provided by:

- Scrutiny through Targeted Intervention and Joint Executive Team Meetings.

The Board **AGREED** the Annual Plan for 2018/19.

PART 2 – ITEMS FOR INFORMATION ONLY

UHB 18/125 HEALTH AND SAFETY ANNUAL REPORT

ASSURANCE was provided by:

- Health and Safety aspects being appropriately monitored and progressed as detailed within the report
- The report had been considered at the July Health and Safety Committee meeting.

The Board **RECEIVED** and **NOTED** the contents of this report.

UHB 18/126 REGIONAL PARTNERSHIP BOARD ANNUAL REPORT

ASSURANCE was provided that the Regional Partnership Board had met its obligations in delivering requirements of the Social Services and Well-being (Wales) Act 2014 for 2017-18.

The Board **NOTED** the Annual Report of the Regional Partnership Board for information.

UHB 18/127 MINUTES FROM OTHER BOARDS / COMMITTEES

The Board **RECEIVED** the following Minutes and the Chair invited any comments:

1. **Quality Safety and Experience Committee** - June
2. **Stakeholder Reference Group** – May
3. **Finance Committee** – April and May
4. **Health and Safety Committee** - April
5. **Local Partnership Forum** – June
6. **Strategy and Delivery Committee** – June
3 items from the Information Technology and Governance sub Committee were brought to the Board's attention:
 - Development of the national solution for social care and mental health
 - Delays in the provision of the blood transfusion module in the national solution for laboratory results
 - Discretionary capital allowance for IT

The Chief Executive agreed to provide a response to the Committee.

Action – Mr Len Richards

7. **Mental Health and Capacity Legislation Committee** - February
8. **Audit Committee** – April, May and Special Meeting in May

- 9. Charitable Funds Committee – March
- 10. Health Professionals' Forum – *no meeting since January*
- 11. Collaborative Leadership Forum - February
- 12. Emergency Ambulance Services Committee – May

The minutes were **NOTED**.

UHB 18/128 AGENDA OF THE PRIVATE BOARD MEETING

In terms of openness, the agenda for the Private meeting was published and **NOTED**.

UHB 18/129 DATE OF THE NEXT BOARD MEETING

The next scheduled meeting would be held at 1pm on 27th September in a venue to be confirmed.