# CONFIRMED MINUTES OF A SPECIAL MEETING OF CARDIFF AND VALE UNIVERSITY HEALTH BOARD HELD ON THURSDAY 28<sup>TH</sup> JUNE 2018 BOARD ROOM, UNIVERSITY HOSPITAL LLANDOUGH

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

John Antoniazzi Independent Member – Estates
John Union Independent Member – Finance
Martin Driscoll Director of Workforce and OD
Michael Imperato Independent Member – Legal

Robert Chadwick Director of Finance

Ruth Walker Executive Nurse Director
Dr Sharon Hopkins Director of Public Health
Steve Curry Chief Operating Officer

In Attendance:

Indu Deglurkar Chair, SMSC

Stephen Allen Chief Officer, Cardiff and Vale of Glamorgan CHC

Secretariat: Sian Rowlands, Head of Corporate Governance

**Apologies:** 

Len Richards Chief Executive Dr Graham Shortland Medical Director

Cllr Susan Elsmore Independent Member – Local Authority
Peter Welsh Director of Corporate Governance

UHB 18/102 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the Special meeting.

UHB 18/103 APOLOGIES FOR ABSENCE

Apologies for absence were noted.

UHB 18/104 DECLARATIONS OF INTEREST

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



#### UHB 18/105 THORACIC SURGERY CONSULTATION

The Chair introduced the Public Consultation Proposal and explained how the Boards of all the Health Boards were meeting simultaneously to consider the proposal to undertake a public consultation and the related documentation.

Following a period of engagement, the proposal is to have a single adult thoracic surgery centre and the public consultation is around the location of that site.

The Chair confirmed that following the March Board meeting, the Chair and Chief Executive had written to WHSCC to request that there be a public consultation.

The draft consultation plan and draft core public consultation document had been signed off by the Joint Committee of WHSSC.

Independent Member – Legal, Michael Imperato expressed concern that the consultation period is one of 8 weeks duration rather than the usual 12 weeks, and that the same would fall over the summer period. Mr Imperato also highlighted that in his opinion the questions were of a closed nature and that the Equality Impact Assessment, though well written, could say more regarding transport mitigation. In the circumstances he would have expected a catch all question to enable the public to respond more broadly.

The Director of Planning, Ms Abigail Harris explained that the consultation process had been shortened on the back of a lengthy engagement process. Ms Harris added that the way the questions are framed is unlikely to restrict individuals fully expressing their views in the public meeting. Ms Harris confirmed that the point relating to transport could be fed back to WHSCC.

Chief Officer, Cardiff and Vale of Glamorgan CHC, Stephen Allen reported that there had been intense prior engagement and that it was open to have a mid-point review whereby the consultation could be extended. The CHC was also disappointed with the closed questions and had made representations to WHSSC about this, offering an alternative form of questioning which would better enable the public to have its say. The CHC agreed there should have been a catch all question. The CHC had not been part of the independent panel as incorrectly referenced in the documentation. The CHC pointed out that patient representation had been all England based and also raised concern regarding the transport links.

Chair, SMSC, Indu Deglurkar commented that a consultation period of 8 weeks during summer was seen to be designed to elicit a poor response. Miss Deglurkar challenged the accuracy of the statements regarding lung cancer survival rates in Wales. She said there were excellent surgical outcomes at both centres, Morriston and UHW. The consultation only made reference to the outcomes of the whole pathway which was influenced by people presenting late for treatment. She was of the opinion this was misleading and that as the consultation was on thoracic surgery it should



include a statement about the excellent surgical outcomes for patients at both sites.

She raised concerns that the document did not clearly state the distances and travelling times between the centres where thoracic surgery and major trauma was not co located. Of the 11 centres that were not co-located 10 were within 2 to 5 miles apart and one within approximately 15 miles. What is being proposed in this consultation is much further apart.

Director of Public Health, Dr Sharon Hopkins stated that the factual accuracy of the points raised by Miss Deglurkar needed to be checked and fed back to WHSSC. Dr Hopkins added that it is important that our excellent outcomes are properly reflected.

Mr Janczewski commented that the reasons behind the 30 minute time duration need to be clear for members of the public.

Ms Harris confirmed that the additional supporting documentation would answer some questions, particularly around travel, but these are not yet uploaded.

The Chair emphasised that all the information should be easily available to the public.

Executive Nurse Director, Ruth Walker added that it is difficult to support the draft consultation without the entire document being available, and agreed that it is important to put forward those areas we wish to ensure are included in the documentation to WHSSC so that the public have complete understanding.

Independent Member – Community, Akmal Hanuk commented that the legal and medical aspects of the debate need to be clearly identified so that the public can fully understand.

Ms Walker queried the steps that had been taken to make UHB staff fully aware of the consultation, given the considerable interest they had displayed in it.

Ms Harris confirmed that a great deal had been done to advertise the consultation and that it would also be picked up via social media. Ms Harris emphasised the importance of having multi-disciplinary teams engaged in the consultation.

Mr Allen added that the CHC had been working with the UHB Director of Communications and Engagement in order to widely advertise through social media.

The Chair brought the discussion to a close concluding that despite the level of prior engagement, and acceptance of the 8 week consultation period, the UHB would feed back to WHSSC disappointment at the holding of the



consultation during the summer period. The importance of a catchall question would also be raised. Factual inaccuracies within the document needed to be changed, particularly in relation to surgical outcomes, and the facts about the distance and travelling times between centres where thoracic surgery and major trauma are not co located. All other issues needed to be discussed during the consultation period and representations made.

Mr Janczewski supported this approach and the feeding back of these points to WHSSC.

## Action - Miss Maria Battle and Dr Sharon Hopkins

Given the concerns regarding factual accuracy, the Chair asked that this be discussed and validated outside the meeting to enable us to effectively feed back to WHSSC.

# **Action – Dr Sharon Hopkins and Miss Deglurkar**

In view of the strong representations from all regarding the length of the consultation period, the Chair asked for CHC feedback after the first 4 weeks of the consultation.

# Action - Mr Stephen Allen

#### The Board

- **SUPPORTED** the recommendation to the 6 affected Health Boards to undertake public consultation in line with the proposals outlined in the draft public consultation Plan.
- SUPPORTED the draft Consultation Plan and the draft core public Consultation Document for use by the six affected Health Boards in the public consultation save for feeding back to WHSSC the need to:
  - Include a catchall question;
  - Ensure factual accuracy regarding survival rates; and
  - Reference the number of centres and distances and travelling times in the body of the document.
- NOTED the Equality Impact Assessment.

# UHB 18/106 SHAPING OUR FUTURE WELLBEING: IN OUR COMMUNITY PROGRAMME BUSINESS CASE

Ms Harris advised Board that the formation of the Business Case had been a lengthy and challenging process necessitating close adherence to the Welsh Government Guidance.

The document had been presented to the Management Executive, Capital Management Group and Shaping Our Future Wellbeing Programme Team.

The Chair thanked the Service Planning Project Lead, Alex Evans on behalf of the Board for her hard work in producing the Business Case.



**ASSURANCE** was provided by the SOFW: IOC Programme and Project governance structure.

### The Board:

- **ACKNOWLEDGED** the role of the SOFW: IOC Programme as a critical enabler for a number of key UHB strategies and objectives:
  - Delivery of Shaping Our Future Wellbeing Strategy;
  - Transformation Programme;
  - Clinical Services Strategy; and
  - Sustainability of GMS.
- **NOTED** the constituent projects that would make up the programme and their proposed implementation across a number of tranches.
- ACKNOWLEDGED the indicative timescales for the implementation of the projects, and the associated requirement for clarity around proposed changes to service delivery models and the supporting workforce and revenue models.
- AGREED the submission of the SOFW: IOC Programme Business Case to Welsh Government for approval as part of the process to access funding from the All Wales Capital Programme and Primary Care Pipeline Fund.

### UHB 18/107 DATE OF THE NEXT MEETING OF THE BOARD

The next meeting would be held at 1pm on Thursday 26<sup>th</sup> July 2018.