Confirmed Minutes of the Board Meeting Held on Thursday, 24th June 2021 at 14:30 – 15:00 Via MS Teams Live Event

	VIA IVIC	Teams Live Event		
Present:				
Charles Janczewski	CJ	UHB Chair		
Abigail Harris	AH	Executive Director of Strategic Planning		
Akmal Hanuk	AH	Independent Member - Community		
Catherine Phillips	CP	Executive Director of Finance		
Ceri Phillips	CP	UHB Vice Chair		
David Edwards	DE	Independent Member - ICT		
Fiona Jenkins	FJ	Executive Director of Therapies & Health Sciences		
Fiona Kinghorn	FK	Executive Director of Public Health		
Gary Baxter	GB	Independent Member - University		
John Union	JU	Independent Member - Finance		
Len Richards	LR	Chief Executive Officer		
Michael Imperato	MI	Independent Member - Legal		
Mike Jones	MJ	Independent Member – Trade Union		
Rachel Gidman	RG	Executive Director of People & Culture		
Rhian Thomas	RT	Independent Member – Capital and Estates		
Ruth Walker	RW	Executive Nurse Director		
Steve Curry	SC	Chief Operating Officer		
Stuart Walker	SW	Executive Medical Director		
Susan Elsmore	SE	Independent Member – Local Authority		
In Attendance:				
Sam Austin	SA	Chair of the Stakeholder Reference Group		
David Thomas	DT	Director of Digital Health & Intelligence		
Nicola Foreman	NF	Director of Corporate Governance		
Malcolm Latham	ML	CHC		
Observing:				
Aaron Fowler	AF	Head of Risk and Regulation		
lan Virgil	IV	Head of Internal Audit		
Mark Jones	MJ	Audit Wales		
Joanne Brandon	JB	Director of Communications		
Wendy Wright	WW	Deputy Head of Internal Audit		
Secretariat				
Raj Khan	RK	Corporate Governance Officer		
Apologies:				
Sara Moseley	SM	Independent Member – Third Sector		
Lance Carver	LC	Director of Social Services, Vale of Glamorgan Council		

UHB 21/06/24/001	Welcome & Introductions	
	The UHB Chair welcomed everyone to the Public Meeting in English and Welsh.	
UHB	Apologies for Absence	
21/06/24/002	Apologies for absence were noted.	
	Independent Member – Legal (IM-L) notified the board that he would be late attending the meeting	
UHB	Declarations of Interest	
21/06/24/003		
	The Executive Director of Therapies & Health Sciences declared an interest as a Board Member of Cwm Taf Morgannwg UHB	
UHB 21/06/24/004	Annual Plan 2021 / 2022	
	The UHB Chair informed the Board that the item would be presented in two parts. Firstly the Executive Director of Strategic Planning (EDSP) would position the Annual plan and the timetable for the 2022/23 planning process. The Second part would be presented by the Chief Operating Officer (COO) who would talk about the overall approach to recovery.	
	The EDSP informed the Board that final plan was shared for approval and reminded Members that a draft was brought to the board in March 2021.	
	The EDSP advised that the feedback on the draft received from Welsh Government had been addressed in the final plan which had a strong alignment between service planning, workforce, and finance.	
	The EDSP informed the Board although the Plan shared was a final document there were some things that has not been finalised and were being worked on, including the format and style of the Plan which the Directors Of Planning and Assistant Directors Of Planning were working on. It was hoped that a consistent style would be adopted across all Health Boards that would appeal to Welsh Government.	
	The EDSP advised that the Health Board was required to supplement the plan with a detailed minimal dataset which had been populated but Welsh Government had requested further information. She added that the data set would be submitted with the plan as a live document which would be updated regularly.	

The EDSP highlighted that much of the work the Health Board undertaken could not be done without their partners and the plan makes reference to the work undertaken through the Regional Partnership Board, Public Service Boards and others, particularly on the prevention agenda.

The EDSP advised that there was an expectation that a winter plan would be needed as indications suggested that the NHS could face a challenging winter period. She reminded the Board that a partnership winter plan had been prepared in 2020 under the leadership of the Regional Partnership Board and it was likely that this would be what was expected for 2021/22.

Independent Member – Finance (IM-F) queried what communications plan was in place to inform people within the organisation about the plan.

The EDSP responded that a number of mechanisms would be used

- A Plan on a page to help people easily understand what would be focused on as the priorities for the year
- The Deputy Director of Strategic Planning Chaired a group which included all Corporate Department and Clinical Board leads so there was wide oversight of the plans delivery.
- The plan was and woould continue to be shared at Health Systems
 Management Board meetings to highlight what it contained and
 how it would be delivered.

She added that the Strategy and Delivery Committee also maintained oversight of the plan and its delivery to provide assurance to the board.

The Director of Communications (DOC) added that from a leadership perspective updates would also be shared through the CEO Connects Q&A sessions.

The Executive Director of Finance (EDF) added that the Finance Committee had also had the opportunity to review the plan in detail and that she had also reviewed the draft in previous Board Meetings.

The EDF highlighted that the Health Board had an underlying deficit of £21.3 Million and £25 Million had been requested from Welsh Government recurrently. Welsh Government had also been asked to confirm that Covid costs would be fully funded but were yet to agree the allocations. She stated that this moved the plan from a deficit in this year to a break-even position on the assumption that Covid costs would funded and added that the funding is only for that year and there would



be a need to maintain a dialogue with Welsh Government on funding moving forward.

The Executive Director of People & Culture (EDPC) commented that the report was explicit in what the Health Board was looking at in terms of numbers and also the culture and inclusion of the workforce. For the following year the plan would be about designing new curriculums for a new workforce as they would not be able to work in the same ways they had done in the past.

The EDPC confirmed that the Health Board had strengthened its inclusive recruitment by going out into the community to diversify the workforce. She informed the board that there was a workforce hub which ensured that workforce plans were in-line with operational and financial plans.

The UHB Chair commented that a huge amount of effort had been put into staff wellbeing as well as recruitment and to look after staff who have been through a tough 15 months

The Board Resolved that:

 The Annual Plan 2021/22 be approved for submission to Welsh Government subject to further minor amendments highlighted by the EDSP.

UHB 21/06/24/005

Annual Plan 2022 / 2023 Timetable

The EDSP stated that her team had begun planning for 2022/23 on the assumption that they would plan for a 3 year IMTP. The EDSP reminded the Board that the planning process was paused in light of the pandemic so they had moved into a quarterly, six monthly and an annual planning cycle but there was a desire from Welsh Government to move into a 3 year integrated planning framework, provided that circumstances allowed.

The EDSP mentioned that her intention was to have the 2022/23 plan ready for Board approval in December to submit to Welsh Government.

She emphasised that there was a need to reflect on feedback from Audit with any observations and comments on how they can further improve plans as part of their works.

The EDSP highlighted the timetable at Annex 1 of her report which highlighted the following dates:

September – set out commissioning intentions via the



HSMB (02/09/2021) and Strategy and Delivery Committee (14/09/2021)

December – Special Board meeting to approve the final plan.

The UHB Chair commented that if there was to be a return to a 3-year planning cycle then there would be a need to progress through milestones and to make those smarter and easier to monitor to enable the Board to understand progress made against the plan.

The CEO welcomed the return to a 3-year planning cycle as it was a helpful reminder that the 2022-25 plan would be the last 3 years of the 10-year strategy and would be about consolidating the Health Board's drive on care in the community and population health. He added that there was a need to focus on GP cluster development plans and how they feed through into the IMTP to drive and connect Primary, Secondary, and Tertiary level services which would be in line with the Shaping our Future Wellbeing strategy.

The EDSP advised her team were working with PCIC as the national lead on cluster plans and that she would bring an update to the next Strategy Review meeting.

AH

The Board Resolved that:

The Annual Plan 2022/23 Timetable be noted.

UHB 21/06/24/006

Annual Plan 2021 / 2022 (Cont.) – Chief Operating Officer Presentation

The UHB Chair shared that he had recently met with the Health Minister who highlighted a number of priorities including:

- 1. Recovery
- 2. Transformation
- 3. Prevention

The UHB Chair informed the Board that the Health Minister was very keen to move all Health & Care provision in those directions.

The COO provided a presentation on the Recovery and Design aspects of the Annual Plan.

He reminded the Board that the Health Board's approach to recovery & design would be:

- Clinically led
- Risk orientated



- Data driven
- Progressed on the basis that the Health Board would remain Covid ready.

He advised that remaining Covid ready was one of the first principles considered in recovery plans. He highlighted the Covid ready operating model and the changes which adopted in relation to triggering events which were previously linked to community prevalence but had shifted to activity levels. He gave an example of the new Early Warning System which had three trigger levels:

- Level 1 Community prevalence
- Level 2 EU attendance
- Level 3 Admissions

The COO informed the Board of the Programme approach adopted in 5 areas:

- Mental Health Strategy
- Planned Care Recovery
- Primary Care Strategy
- USC/Medicine Model
- Diagnostics

The COO also shared a timeline of how the 2021/22 annual plan had developed.

March 2021:

- Longlist Submission of Schemes by clinical boards which were Planned Care focused as per Welsh Government instruction.
- Plan submitted on 31st March 2021
- Due to clinical urgency with some schemes, plans were adopted at risk in anticipation of funding being provided with a value of up to £6M.

April 2021:

 Funding approval for £13.6M which covered the areas adopted at risk.

May 2021:

• Longlist submitted for broader programmes.

June 2021

Finalisation of schemes and submission to Welsh Government.

The COO highlighted that:

- 140 Schemes had been submitted
- 50% were in planned care
- 60% represented cost in planned care
- Initial bids from the organisation had a cost of £60M+



The COO advised that a framework was needed to ensure that the Schemes being put forward were congruent with the organisations intentions and Welsh Government requirements. The qualifying guidance that schemes needed to comply with for were:

- Risk & Urgency
- Sustainability
- Transformation

The COO shared detail of the spread of the bids that had been submitted to Welsh Government:

- £13.3M planned care bids;
- £23.5M in relation to new schemes;
- The Cost for 2022-23 is estimated at £39.8M of which £13M would be recurrent with the remainder for fixed terms of 1-3 years

The COO demonstrated that over the following year, if the plan was supported, 30% of the funds received in 2021-22 would go into Primary care and Mental health and that the following year this would rise to 36% to provide a more balance portfolio and progressive agenda. This would that operationally his team would be delivering transformational and process changes alongside their operational delivery.

The COO highlighted that there were several moving parts which could significantly affect delivery of the plan and that a programmed approach would be taken to head off potential issues. He highlighted that the key issues his team had identified were:

- Still working under IP&C covid safe conditions
- A potential 3rd wave
- Wellbeing of staff
- Recruitment
- Expediency of Welsh Government Decisions
- Reconfiguring the Health Board's estate to make it fit for purpose

The COO concluded that his team:

- Would take a programme approach
- Had appointed a Programmes Delivery Director
- Would develop a formal programme with partners
- Would progress Welsh Government approved schemes
- Would undertake some new schemes at risk

The UHB Vice Chair queried how the team could ensure the plan and the financial underpinning of it would move in a whole system direction with resource being allocated where it was needed to ensure transformation and prevention aims were achieved.



The COO responded that delivery would be a challenge and he and his team would work through contingencies. His team would also organise themselves to ensure that surprises were minimised. The COO added that funding would allocated as discussed once it became available. IM-University (IM-U) expressed his concern over the level of resourcing as the money detailed by the COO related to Covid recovery money that would needed to be supported by digital enablers. He added that aligning digital aspirations and associated resources should play a large part in re-design plans otherwise key aspects of the redesign ambitions could fail.

The Director of Digital Health Intelligence (DDHI) advised that digital transformation was an enabler of all of the UHB's transformation work and a digital transformation strategy, which would be refreshed to reflect the short and long term plans of the UHB, had been prepared.

The UHB Chair queried resourcing in the digital area and whether staffing would be an issue.

The DDHI advised that this would be addressed and that the digital enablers mentioned by the COO were specifically for the programmes detailed and that a number of wider business cases, if approved, would be used to provide additional resource.

The CEO commented that the funding detailed in the plan was to deliver on recovery and had to be focussed to highlight what was being requested and what could be delivered.

The Board resolved that:

a) the final Annual 2021 / 2022 was approved.

UHB 21/06/24/007

Date and time of next meeting:

Thursday, 29th July 2021 at 12:30pm Via MS Team