

**CYFARFOD BWRDD IECHYD PRIFYSGOL
ANEURIN BEVAN/ANEURIN BEVAN UNIVERSITY
HEALTH BOARD MEETING
MINUTES OF THE FINANCE AND PERFORMANCE
COMMITTEE**

DATE OF MEETING	09 September 2024
VENUE	Microsoft Teams

PRESENT	Richard Clarke, Chair Iwan Jones, Vice Chair Neil Patrick, Independent Member
IN ATTENDANCE	Robert Holcombe, Director of Finance and Procurement Hannah Evans, Director of Strategy, Planning and Partnerships Paul Solloway, Director of Digital Jennifer Winslade, Director of Nursing Rani Dash, Director of Corporate Governance Nicola Prygodzicz, Chief Executive Officer Leanne Watkins, Chief Operating Officer Linda Alexandre, Associate Director of Clinical Operations Huw Pullen, Consultants FOU, Clinical Director Kate Bradley, Directorate Manager Tracy Morgan, General Manager Sarah Wilson, Directorate Manager Catherine Pugh, Management Trainee Megan Frampton, Governance Support Officer
APOLOGIES	Helen Sweetland, Independent Member Dafydd Vaughan, Independent Member

FPC/0909/01	Welcome and Introductions The Chair welcomed everyone to the meeting.
FPC/0909/02	Apologies for Absence The Chair acknowledged the apologies of: <ul style="list-style-type: none"> • Helen Sweetland, Independent Member • Dafydd Vaughan, Independent Member.
FPC/0909/03	Declarations of Interest There were no declarations of interest raised to record.

<p>FPC/0909/04</p>	<p>Draft Minutes of the meeting held on the 17th of June 2024.</p> <p>Iwan Jones (IJ) Independent Member sought assurance regarding responsibility and accountability for the Health Boards digital staff records.</p> <p>Paul Solloway (PS) Director of Digital reassured the Committee that the new digital system being introduced to the Health Board would go through the internal governance process, even if it falls outside digital services. PS noted that the reporting of these systems would be incorporated into the digital delivery progress report which is presented Cas part of the Committee’s Forward Work Plan.</p> <p>The minutes of the meeting held on Monday 17th June 2024 were AGREED as a true and accurate record.</p>
<p>FPC/0909/05</p>	<p>Committee Action Log</p> <p>The Committee received the action log and was content with the progress made in relation to completed actions and against any outstanding actions, as set out within the paper.</p>
<p>FPC/0909/06</p>	<p>Focused Performance Report – Discharge Programme and Delays</p> <p>Jennifer Winslade (JW) Director of Nursing, with the support of Linda Alexander (LA) Associate Director of Clinical Operations, outlined the improvement programme which had been aimed at reducing health inequalities and improving population health in-line with the Health Board’s Clinical Futures Strategy.</p> <p>The Committee also received an update in regards to the 2023 revised hospital discharge guidance under pathways of Care Delays (POCD). This guidance is utilised alongside the All-Wales Optimal Hospital Flow Framework.</p> <p>It was highlighted that there were approximately between 250 and 260 validated discharge delays on the system. Two-thirds of discharge delays were listed under local authorities, waiting for social care, with one-third listed as a health-delay. The areas with the highest delays were Caerphilly and Monmouthshire.</p> <p>Ongoing work to tackle the number of discharge delays included a discharge hub in Newport, pilot the Hospital to Home</p>



scheme in Monmouthshire, and Recovery To Go Ward which mirrors the care a patient would receive at home.

JW highlighted the need to introduce a standardised discharge model across the Health Board.

It was highlighted to the Committee that reporting to Welsh Government was due to start from September 2024, although the Health Board reported a delay in the submission of their report.

The committee sought assurance that Local Authority partners were motivated to enable the progression of these pathways. Reassurance was provided but variation between each authority had been noted. The Health Board would work with the local authorities in order to establish an escalation service which would match the one already in place within the Health Board.

The Committee discussed whether there had been a link between delays and social care demand and budget restrictions within the local authorities. It was highlighted that there was no evidence to suggest a connection.

Leanne Watkins (LW) Chief Operating Officer highlighted that current spending was at £8 million in this area, without considering local authorities individual offers. LW raised the need to simplify the offer provided to local authorities to ensure maximum spend utilisation, and to create a target the local authorities could achieve. More data and evidence would need to be collated to present a considered offer to local authorities across Gwent.

It was highlighted that this report had already been raised with the Regional Partnership Board.

The Chair requested for the report to return to the Committee for update in 12 months.

ACTION: Director of Nursing

The Committee:

- **NOTED** the summary of the POCD data and reasons for discharge delays across Health and Social Care.
- **NOTED** the draft action plan to address the issues highlighted through the data/reasons for discharge delays.



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- **SUPPORTED** the proposal to scope and establish a joint escalation and governance framework with the five local authorities.
- **NOTED** the risk escalated regarding the D2RA (CWS2) digital solution and roll out and the full briefing submitted to the Executive Committee on 8th August 2024.
- **NOTED** the update on the Discharge Improvement programme, Six Goals, goals 5&6.

Jennifer Winslade and Linda Alexander left the meeting.

Update on application of Health Board's Performance Management Framework

Hannah Evans (HE) Director of Strategy, Planning and Partnerships, provided an overview of the Performance and Accountability Framework 6 monthly reviews for all nine directorates. The reviews were held and completed between April and June 2024.

HE outlined changes to escalation levels as decided by the Executive Committee and provided a summary and rationale for changes made. These included:

- Urgent Care division remaining in enhanced monitoring
- Mental Health Division was de-escalated from special measures.

It was highlighted that as of September 2024, the Performance and Accountability Framework would have completed a full 12-month cycle and would be reviewed with an update to come back to the Committee in December. The committee was assured that they would have the opportunity to provide feedback on the framework review at the next Board meeting.

The committee was informed that the accountability letters from the Executives would be reviewed to increase clarity on accountability requirements within the divisions.

The Committee discussed the potential for periodically calling in divisions for monitoring. However, it was highlighted that special subject reviews were already held with the five divisions of the Health Board. Rani Dash (RD) Director of Corporate Governance advised the Committee that its role in performance oversight, as outlined in its Terms of Reference, would focus on performance management for the Health Board as a whole.

The Committee **NOTED** the actions and recommendations.



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Performance Report in respect of Welsh Government's Escalation Status (Targeted Intervention and Enhanced Monitoring)

Hannah Evans (HE) Director of Strategy, Planning and Partnerships, updated the Committee on the actions taken to deescalate the Health Board's current level of escalation.

The Committee noted that a document issued by Welsh Government outlined the requirements for de-escalation, which had been shared with the Committee for the purpose of transparency.

A review conducted by Welsh Government in July 2024, determined that the escalation levels for the Health Board would remain at the same level agreed in February 2024. Nicola Prygodzicz (NP), Chief Executive Officer had written back outlining the Health Boards approach in response to the escalation; and highlighted that a comprehensive review of the Health Board's financial situation had already been submitted to Welsh Government; the Health Board was awaiting return and feedback.

The Committee discussed the expected completion date for de-escalation, which remained uncertain due to ongoing changes in the system processes within Welsh Government. However, reassurance was given that Welsh Government had shared best practice principles for the Health Board to implement in the interim, although these principles did not include a financial model.

The Committee **NOTED** the update.

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Performance Report at Quarter 1, 2024/25

Hannah Evans (HE) Director of Strategy, Planning and Partnerships provided a brief overview and explained that the report contained a high-level summary, as it included the annual report.

Some of the highlights within the report included:

- Important milestone for the best start in life as the health visitor's improvement plan saw benefits.
- There had been an increase in the number of people going to their pharmacy for advice regarding colds and coughs rather than straight to their GP surgery,



- Continued improvements on long waits for services, noting there had been improvement in the number of people waiting over 156 weeks for services.

It was highlighted that there was a large focus on urgent and emergency care due to a need to reconcile the metrics to track and acknowledge the improvements, and recognise areas for further improvement, and enable them to be embedded into practice.

The Committee noted that Planned Care was on track with its trajectories and had improved total waiting lists. However, it was highlighted that the eight-week diagnostic and single cancer pathway statistics were subject to fluctuation due to increasing demand.

The Committee **NOTED** the position against Annual Plan 2024/25 commitments as at Quarter 1 and the mitigating and improvement actions in place

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Information Governance and SIRO Report

Paul Solloway (PS) Director of Digital, provided assurance on Cyber Security and Clinical Governance report. It was stated that in relation to data protection impact assessments, 26 were completed in the last quarter, which identified some risks which were being worked through.

The Committee noted the following updates:

- Compliance rates for Subject Access Requests had achieved 100% for action and response within the one-month target.
- Mandatory compliance had stagnated at around 74-75%, noting the length of time it took for individuals to complete the national mandatory training for information governance and cyber security was a key factor. If there was no improvement in the next quarter, they would look to implement a revised approach.
- 80 information governance incidents were recorded during Quarter one, none of which were reportable to the commissioner's office.
- Security patches had been rolled out to 16,000 devices, which resulted in 85% compliance for installing them in a timely manner. The main obstacle to further compliance was highlighted as the need for homeworkers to connect



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to the Health Board network for the patch to be administered.

- The Health Board was performing ahead of others across Wales for decommissioning the old server operating system,
- The Health Board completion rate for clinical coding had improved from 77% to 85%, however, the accuracy rate had reduced from 96% to 82%.

Neil Patrick (NP), Independent Member, noted that Dafydd Vaughn had raised questions regarding the report. PS agreed to respond directly to Dafydd Vaughn and to include all other independent members in the response.

ACTION: Director of Digital

The Committee **NOTED** the content of the report.

Digital, Data and Technology Group Report

Paul Solloway (PS) Director of Digital, provided assurance on the Health Board's performance of the Digital Service Delivery and progress made against the Digital Operational Plan.

Highlights included:

- Implementation of an electronic patient record for Ophthalmology Services,
- Appraisal into digital dictation and speech recognition
- Implementation of a standardised communication method was highlighted, to improve cross-divisional engagement.

PS highlighted successful projects over the last period, which included:

- Completion and instillation support of Body Cam security solution,
- All Fuji Software had been successful replaced.

Projects ongoing from the last period included:

- Radiology information system was working on a local plan to complete contractual documentation;
- Cancer system, Carness, had been extended until March 2025;
- A Business case had been received in relation to Digital Cell Path from the NHS Executive, which had gone through the Health Board's local business case pre-investment panel.



The Committee discussed whether there had been an update on cyber security threats in terms of actions and activities that had been recognised and minimised. PS advised that he provide a summary report outside the meeting due to sensitive content not suitable for public disclosure.

ACTION: Director of Digital

PS acknowledged that the recent internal audit, which provided reasonable assurance on IT infrastructure, should assure the Committee that the digital team is confident in their ability to mitigate any risks.

The Committee **NOTED** the progress made to date.

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Committee Risk Report

Rani Dash (RD) Director of Corporate Governance presented the report to the Committee for assurance. It was highlighted that there had been no changes since the last report to the Committee.

The Committee:

- **NOTED** the delegated Committee risks as detailed within the Strategic Risk Register, ensuring alignment with the Board's risk management priorities.
- **NOTED** the ongoing efforts to enhance the Committee Risk Report by including all risks monitored by the Committee, thereby improving transparency and oversight.

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Finance Report and Monitoring Returns for Month 04

Robert Holcombe (RH) Director of Finance and Procurement highlighted a year-to-date deficit of 18.2 million, with a forecasted deficit of 47.8 million, which was a £1 million improvement from the annual plan.

The Committee received an overview into spending allocations, such as, Capital spend was at 39% of total budget, which RH assured the Committee was positive for this time of year.

It was highlighted that the most significant spend for the current financial year was prescribing and drugs costs.

The Committee **NOTED:**



- The financial performance at the end of July 2024 and forecast position against the statutory revenue and capital resource limits,
- The savings position for 2024/25,
- The revenue reserve position on the 31st of July 2024,
- The Health Board's underlying financial position,
- The cash position,
- Public sector payment policy performance, and
- The capital position.

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Value and Sustainability Assurance Reporting

Robert Holcombe (RH) Director of Finance and Procurement highlighted that the saving reporting was forecast for £2.3 million. The savings were structured through themed groups, of which seven were established, each headed by the relevant executive lead, to consider and progress both national and local opportunities.

RH highlighted that progress against the Welsh Government checklist, included the growth in performance from 83% to 93%, and emphasised that to maintain this growth, the Health Board would need to keep in line with the annual and 3-year plans.

The Committee discussed potential unplanned costs that could jeopardise progress and considered factors like fluctuating drug costs that might affect forecast predictions. However, there was general confidence that the plan would be achieved.

The Committee **NOTED** the report for assurance.

FPC/0909/15. A

Efficiency Opportunities Update - Orthopaedics

Robert Holcombe (RH) Director of Finance and Procurement presented with the support of Kate Bradley (KB) Directorate Manager, and Huw Pullen (HW) Consultants FOU, Clinical Director.

KB and HW presented the implementation of the short stay Orthopaedic Unit, influenced by units established in Northumbria and Exeter. The unit was established in October 2023, and since its implementation, the average length of stay (LoS) post-procedure went from 3 days to 1.8 days, which was a 51% reduction in LoS.

The Committee discussed how the data could be used to determine the impact on service throughput and waiting lists. It was highlighted that service throughput remained unchanged;



the data represented the decreased length of time that a patient stayed in hospital.

Leanne Watkins (LW) Chief Operating Officer, raised that funding from Welsh Government would mean bed management would not be an ongoing issue, due to the target for improvements set by Welsh Government for planned care.

FPC/0909/15. B **Efficiency Opportunities Update – Endoscopy**

RH with the support of Tracy Morgan (TM) General Manager and Sarah Wilson (SW) Directorate Manager provided an update on efficiency opportunities within Endoscopy.

It was highlighted that the backfill rates within the service had slowed due to two consultant vacancies, interruptions due to industrial action and staff absence.

Steps taken to address these included;

- Forecasting plans developed to inform capacity.
- Senior oversight at 6-4-2-1 meetings to ensure efficient use of available capacity.
- Pre-assessment nurse to concentrate on booked USC appointments to reduce cancellation rate.

Leanne Watkins (LW) Chief Operating Officer, highlighted that the Endoscopy service was a good example of service wanting to maximise and ensure patient care, with a clinical team driving the performance agenda.

The Committee **NOTED** the update.

FPC/0909/16 **Review of Committee Programme of Business 2024/25**

The Committee Programme of Business 2024/25 was provided to the committee for information.

The Committee **NOTED** the updated Finance and Performance Committee Forward Work Plan as provided in **Appendix A**.

FPC/0909/17 **Overview of Audit Recommendations Tracking**

The overview of audit recommendations tracker was provided to the committee for information.

The Committee **NOTED** the closing position of the audit recommendations for Q1 April – June 2024 overseen by the Audit, Risk and Assurance Committee.



FPC/0909/18	Items to be Brought to the Attention of the Board and Other Committees Nothing Reported
FPC/0909/19	Any Other Urgent Business Nothing Raised
FPC/0909/20	Date of the Next Meeting: 16 th December 2024.

