CYFARFOD BWRDD IECHYD PRIFYSGOLN ANEURIN BEVAN/ANEURIN BEVAN UNIVERSITY HEALTH BOARD MEETING

MINUTES OF THE PARTNERSHIPS, POPULATION HEALTH AND PLANNING COMMITTEE

DATE OF MEETING	**Tuesday 16th April 2024 10.00-12.30**
VENUE	**Microsoft Teams**

PRESENT	Ann Lloyd – Chair
	Richard Clark – Independent Member
	Dafydd Vaughan – Independent Member
IN ATTENDANCE	Nicola Prygodzicz - Chief Executive
	Phillip Robson – Special Advisor
	Hannah Evans – Director of Strategy, Planning and Partnerships
	Tracy Daszkiewicz – Director of Public Health
	Rani Dash – Director of Corporate Governance
	Lucy Windsor – Head of Corporate Risk and Assurance
	Michelle Jones – Head of Board Business
	Emma Guscott– Governance Support Officer
	Thomas Jaynes – Governance Support Officer
APOLOGIES	No apologies received

	Preliminary Matters
PPHPC1604/ 1.1	**Welcome and Introductions** The Chair welcomed everyone to the meeting.
PPHPC1604/ 1.2	**Apologies for Absence** There were no apologies for absence received.
PPHPC1604/ 1.3	**Declarations of Interest** There were no declarations of interest raised to record.
PPHPC1604/1.4	**Draft Minutes of the meeting held on Wednesday 31st January 2024** The minutes of the meeting held on Wednesday 31st January were ***AGREED*** as a true and accurate record.
PPHPC1604/1.5	**Committee Action Log**

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	The Committee **RECEIVED** the action log with updates contained within the paper. Hannah Evans (HE), Director of Strategy, Planning and Partnerships, advised that no update had yet been provided in respect of the Major Trauma review. In respect of the Monmouth Health and Wellbeing Centre, HE noted that Tilbury Douglas had been appointed as a design partner and that the Centre would provide additional services not currently available in Monnow Vale. **Action:** • ***Director of Strategy, Planning and Partnerships to email update note to Committee members on verbal update given on the Monmouth Health and Wellbeing Centre.*** • ***Director of Strategy, Planning and Partnerships to seek an update from WHSSC on Major Trauma Review.***
PPHPC 1604/2.0	**Items for Approval/Ratification/Decision**
	There were no items included in this section.
PPHPC 1604/3.0	**Items for Discussion**
PPHPC 1604/3.1	**Committee Risk Report** Lucy Windsor (LW), Head of Corporate Risk and Assurance, presented the Committee Risk Report. LW noted that as at April 2024, the Committee Risk Register included four high-level strategic risks including nine sub-risks. LW advised that the Committee had accepted responsibility for overseeing two new sub-risks under SRR 001 and SRR 007, which were approved by the Board at its meeting on 24 January 2024. The Committee noted that SR007 had been expanded to include the financial landscape namely, that there was a risk that the Health Board would be unable to deliver truly integrated health and care services for the population; due to the likelihood of further austerity measures impacting effective collaboration with strategic partners across the Health Board footprint. LW advised that since January 2024, SR009 had been de-escalated from a strategic to a directorate risk and a new sub risk SR001I had been added. The Committee noted that this risk was co-owned by the Chief Operating Officer and the Director of Partnerships, Planning, and Strategy.

	The Committee was assured that work was being progressed in respect of the 4 risks which were presently managed outside of the agreed risk appetite *The Committee **NOTED** the report.*
PPHPC1604/3.2	**Public Service Board (PSB) Update and Action Plan** Tracy Daszkiewicz (TD), Director of Public Health, provided an oral update of the work of the PSB and noted that an action plan had been produced to ensure alignment of PSB priorities with Marmot principles and actions, with a focus on four key areas. TD advised that the Public Health Team would support these improvements in conjunction with the Strategic Well-Being Action Group. The Committee noted that two stakeholder workshops had taken place with a focus upon on the best start in life, with appropriate actions being identified by key stakeholders; and that PSBs in Wales had been approached to join three national learning cohorts as part of the agenda to shape places for wellbeing in Wales. The Committee noted that this was a three-year programme funded by the Health Foundation to enable cross PSB learning and create evidence informed approaches to influence wider detriments of health with specific focus on economic regeneration, housing and transport networks, climate and nature. *The Committee **NOTED** the oral update.*
PPHPC 1604/3.3	**Regional Partnership Board (RPB) Update** Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided an update in respect of the work on the RPB and the progress made during the last reporting period. In particular the Committee noted that progress was being made against actions arising from its Governance Review. The Committee was assured that an overarching Governance Framework was in development and was being informed by a series of workshops. HE noted that the second workshop was held in March, and this focussed on the sub structures of the RPB, considering the role, purpose and function of each group. It was noted that further work was required to achieve greater clarity to these arrangements. HE advised that in terms of the financial allocation, the tapering of Regional Integrated Funding would not be applied

	for the remainder of the funded programme (to 2027) which had removed the requirement to taper down direct partnership funding. The Committee was advised that although tapering had been removed the RPB remained committed to undertaking an evaluation of all programmes and noted that the RPB was in receipt of a number of revenue grant funding streams to a value of £27m, with £26m allocated to existing projects and a further £1m available for allocation. HE provided an update in respect of the Market Stability Report and noted that whilst stability and sufficiency had improved there were new challenges as a result of the financial position. HE highlighted that increased collaboration was vital given ongoing austerity but noted that relationships and productivity across all market segments remained strong. HE advised that the elimination of profit from social care provided significant challenges and provider uncertainty for local authority Children Services and noted that good progress continued to be made on regional working in many areas. The Committee was informed that work was scheduled to commence on a contract addendum for the provision of equipment in care homes; a joined-up approach to fees for 2024-25 had been secured and providers had highlighted challenges with implementing the real living wage during current financial cuts. Ann Lloyd (AL), Chair, noted her concerns on the Care Collective actions and activities, and the recent insolvency of a care provider and cited the need for intelligence from partnerships to be shared. *The Committee **NOTED** the report.*
PPHPC 1604/3.4	**Regional Planning Update** Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided an update on progress of a number of ongoing regional and South Wales service planning programmes. The Committee noted that Health Boards in South Wales remain committed on an ongoing basis to active collaboration where this delivers added value and advised that planning teams continue to meet on a regular basis to agree common approaches to strategic challenges, progress ongoing regional collaborative programmes, share

	experience / best practice and to consider future opportunities. HE advised that the collaborative programmes include formalised arrangements for prescribed services within the southeast, together with the wider review and reconfiguration of specialist services across south Wales where Aneurin Bevan University Health Board was a stakeholder with the Health Board overseeing ophthalmology and cancer. The Committee noted that a Regional Executive Planning Workshop had been held and a number of work streams and actions were progressed that included a second regional planning session arranged for June 2024, to which Health Board Chairs would be invited. The Committee noted that the first phase of the cataract programme continues to progress to schedule, with additional interim service capacity established in Cardiff, Abergavenny and via private sector facilities in Swansea. Work was also progressing in respect of the next specialist areas to be reviewed that included glaucoma and vitreoretinal surgery and a business case for longer term cataract development was being developed. Whilst public engagement in respect of the programme's second phase had concluded with positive and constructive feedback being received with the final report being shared with Llais for comment. HE reported that the Diagnostics Business case development was ongoing and focussed on solutions around a managed service approach for a diagnostics hub and endoscopy service in Heath Park. The Committee was advised that the final Business Case would be presented to all Health Boards; and, the progression of the Digital Self Path Business Case continues to be progressed. The Committee was assured that a spinal surgery Operational Delivery Network for south Wales was established last September, with the provision hosted by Swansea Bay University Health Board. The Committee noted that the governance arrangements include a Network Board, reporting to a Delivery Assurance Group and then to the Joint Committee and was assured to note that initial progress had been made to establish two key pathways.

	HE confirmed that within south-west Wales, Swansea was the tertiary centre for Interventional Radiology and there was an acknowledgement that the existing arrangements were not sustainable, and an emergency short-term arrangement was put in place last autumn for service provision to be maintained by some of the clinical team from the south east. HE advised that options for delivering longer-term sustainability were currently under urgent consideration and that the support provided by the south-east clinical team had ceased in February, other than out of hours. The Committee was advised that discussions with a view to establishing more sustainable long-term services were ongoing. Dafydd Vaughan (DV), Independent Member, noted that there was a need to ensure business cases for regional services needed to be financially viable given the financial pressures faced by the Health Board. *The Committee **NOTED** the report.*
PPHPC 1604/3.5	**Vaccination Programme Update** Tracy Daszkiewicz (TD), Director of Public Health, provided an oral update in respect of the vaccination programme and advised the Committee that the Winter period had been focussed on Covid and Influenza with the uptake for vaccinations variable. TD noted that flu uptake was the best in Wales at 75%, whilst for the younger age group had an uptake of 42%. TD assured the Committee that work continued in respect of ongoing delivery of vaccinations. TD advised that the uptake for Covid focussed on eligibility groups and involved the vaccine being delivered through a blended approach, with a move away from vaccination centres. The Committee was also appraised of an outbreak of MMR which had been reported and noted that work was ongoing to ensure that staff were vaccinated, supplemented by a focus on Vaccine Equity, supported by the Health Protection Team. *The Committee **NOTED** the oral update.*
PPHPC 1604/3.6	**IMTP Update, Consequence of Board Discussions and Next Steps** Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided a verbal update following the Board's discussion in March 2024. The Committee discussed next

	steps in the delivery of the IMTP and the focus of work to be undertaken in developing the detailed delivery plan for the Board to receive in July 2024. Ann Lloyd (AL), Chair, commented that the Board would expect a clear line of sight as to how financial balance and breakeven would be achieved within two years, whilst ensuring sustainable and high-quality services. *The Committee **NOTED** the oral update.*
PPHPC 1604/3.6	**Clinical Futures Programme Update** Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided an update on the progress to date in respect of the Clinical Futures priority programmes. The Committee noted that the Acute Frailty Response Service commenced in January 2024, with performance identified as positive. The etriage system that had recently been launched was paused due to technical issues and would be relaunched in the first quarter of 2024/25. Whilst in terms of Planned Care, Health Pathways Clinical Editors continue to develop pathways with subject matter experts. The Committee noted that the launch date was scheduled for mid- April 2024 with 40-50 pathways ready to go live, with a number in draft or in development; with Phase 2 discussions continuing. The Committee was assured that the implementation of this approach would be key in the management of demand as it ensures that advice and guidance was in place for primary care clinicians and removes the need for referral to secondary care that in turn would positively impact upon patients. HE advised that the line management of Theatres into Clinical Support Services Directorate had been reviewed and an improvement plan developed for the current financial year. HE noted thatthe Satellite Radiotherapy Unit development was on track for opening in February 2025 with joint operational groups working through reviews and gap analysis of the clinical and service models. The Committee was advised that a joint workshop had been held with Velindre University NHS Trust to explore opportunities to increase levels of Systematic Anti- Cancer Therapy (SACT).

	It was also noted that a workshop had taken place on the medical model and outputs of service models of Enhanced Local and General Hospital Configuration. Ann Lloyd (AL), Chair, commented that Independent Members of the Board were unaware of the Health Pathways Programme and requested an overview at a future Board Briefing. ***Action:*** • ***Director of Strategy, Planning and Partnerships, to schedule with the Director of Corporate Governance a Board Briefing on the Health Pathways Programme*** *The Committee **NOTED** the report.*
PPHPC 1604/4.0	**ITEMS FOR INFORMATION**
PPHPC 1604/5.0	**OTHER MATTERS**
PPHPC 1604/5.1	**Items to be brought to the Attention of the Board and Other Committees** No items were raised to be brought to the attention of the Board.
PPHPC 1604/5.2	**Any Other Urgent Business** No urgent business was raised.
PPHPC 1604/5.3	**Date of Next Meeting:** 17th June 2024 09:30 – 12:30

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