



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
MINUTES OF ANEURIN BEVAN UNIVERSITY
HEALTH BOARD MEETING**

DATE OF MEETING	Wednesday 24 th January 2024
VENUE	Conference Centre, St Cadoc's Hospital and via Microsoft Teams

PRESENT	Ann Lloyd	Chair
	Nicola Prygodzicz	Chief Executive
	James Calvert	Medical Director
	Peter Carr	Director of Therapies and Health Science
	Sarah Simmonds	Director of Workforce and OD
	Jennifer Winslade	Director of Nursing
	Hannah Evans	Director of Strategy, Planning and Partnerships
	Robert Holcombe	Director of Finance & Procurement
	Paul Solloway	Director of Digital
	Leanne Watkins	Chief Operating Officer
	Paul Deneen	Independent Member (Community)
Dafydd Vaughan	Independent Member (Digital)	
Philip Robson	Special Advisor to the Board	
Iwan Jones	Independent Member (Finance)	
Prof Helen Sweetland	Independent Member (University)	
Shelley Bosson	Independent Member (Community)	
Richard Clark	Independent Member (Third Sector)	
Penny Jones	Independent Member (Third Sector)	
IN ATTENDANCE	Rani Dash	Director of Corporate Governance
	Bryony Codd	Head of Corporate Governance
	Karen Newman	Assistant Director Communication and Engagement
	Mark Ross	Assistant Finance Director
	Nathan Couch	Audit Wales
	Andrew Doughton	Audit Wales
	Jemma Morgan	Regional Director, Llais Cymru
	Tanya Strange	Head of Nursing, Patient Centred Care
	Anne May	Strategic Lead Cancer Nurse
	Gail Hatherill	Patient
Emma Guscott	Governance Support Officer	
APOLOGIES	Louise Wright	Independent Member (Trade Union)
	Martin Blakebrough	Independent Member (Third Sector)
	Michelle Jones	Head of Board Business

ABUHB 2401/01	<p>Welcome and Introductions</p> <p>The Chair welcomed members to the meeting, in particular members of the public who were able to join the meeting to observe in person and on line. It was noted that the meeting would be recorded and published on the Health Board’s website following the meeting.</p>
ABUHB 2401/02	<p>Declarations of Interest</p> <p>In relation to item <i>3.3 Outcome of Engagement, NHH Minor Injuries Unit</i>, Penny Jones, Independent Member, declared an interest due to being a Member of a Scrutiny Committee of Monmouthshire County Council.</p>
ABUHB 2401/03	<p>Minutes of the previous meeting</p> <p>The minutes of the meeting held on 22nd of November 2023 were agreed as a true and accurate record.</p>
ABUHB 2401/04	<p>Summary of Board Business, held In-Committee, on 22nd of November 2023</p> <p>The Board NOTED an overview of the formal discussions held by the Board at its private meeting held on the 22nd of November 2023.</p>
ABUHB 2401/05	<p>Action Log and Matters Arising</p> <p>It was noted that all actions within the Board’s action log had been completed or were in progress.</p>
ABUHB 2401/06	<p>Report on Sealed Documents and Chair’s Actions</p> <p>Rani Dash (RD), Director of Corporate Governance, provided an overview of the use of the Health Board’s Seal and Chair’s Actions that had been undertaken during the period 31st of October 2023 and the 2nd of January 2024.</p> <p>The Board NOTED and RATIFIED the use of the common seal and Chair’s Actions in line with Standing Orders, as set out within the paper.</p>
ABUHB 2401/07	<p>Chair’s Report</p> <p>The Chair provided her verbal report, with an overview of the activities she had undertaken, outside of her routine meetings and visits, as follows:</p> <ul style="list-style-type: none"> • Undertaken a number of unannounced visits throughout the organisation during a very pressurised time for staff; noting the positive feedback from both staff and patients. • The Chair had been appointed as the Chair of the Ministerial Advisory Group on Governance and Accountability and had attended a number of meetings TO DATE.

- Attended and chaired the Regional Partnership Board (RPB) and attended the RPB chairs leadership meeting; continued discussions around the Regional Integration Fund (RIF) and whether or not it could be evidenced to provide value for money, providing sustainable services that meet the needs of the population. Further discussions were to take place with the Minister on the tapering arrangements, noting the significant impact this may have on statutory bodies depending on the decision made, given the present financial position.
- Attended the Public Service Board (PSB) meeting; the PSB continued with its collective efforts to lead on the development of Gwent as a Marmot Region.
- The Chair discussed the current individual needs assessments and area plans for both the RPB and PSB, stating that one shared plan for both the RPB and PSB may better suit the needs of the population.
- Chaired the meetings with Chairs of Health Boards, and advised that discussions focused on the huge challenge to deliver care within the resources available, and the rise in infections and the collective plan to addressing this with Public Health Wales with a view to improving public understanding.
- Attended a meeting with the Minister for Health and Social Care together with the lead CEO regarding the financial concerns in relation to Health Boards.
- Attended a meeting of the Care Action Committee that had been established by the Minister to consider the issues in relation to delayed transfers of care, community support and nursing services, and trusted assessors and noted that further work is ongoing.

The Chair highlighted her gratitude to staff for coping with the demands placed on their services and the care that they provide at this challenging time.

The Board **NOTED** the Chair's Report.

**ABUHB
2401/08**

Chief Executive's Report

Nicola Prygodzicz (NP, Chief Executive, provided her verbal report, with a focus on the following areas:

- Significant pressures across sites remained as a result of winter pressures and noted the impact that this places upon the system and staff;
- the need for balancing the demands of spikes in respiratory disease coupled with balancing demand of workforce challenges, system pressures and the current financial situation, which continue to be exceptional;
- A mid-winter review of the winter plan had been undertaken, with the impact of actions being assessed. NP noted that there had been notable areas of improvement across the partnership agenda;
- however, the Health Board continued to be under increased system pressures;

- NP highlighted her concern for staff wellbeing under sustained pressures and noted that the Health Board continues to work hard to address this as a priority;
- NP noted the breadth of the Board's meeting agenda which reflected the extent of work being undertaken by the organisation to respond to the challenges it faces;
- NP informed the Board that Welsh Government had increased the Health Board's escalation status under the NHS Wales Performance and Escalation Framework. The Health Board was now under Targeted Intervention for Planning and Finance and Enhanced Monitoring for performance and outcomes related to urgent and emergency care pathways resulting in extended waits for patients in ambulances and emergency department clinical assessment at the Grange University Hospital. NP noted that these areas had already been a focus of the Health Board to address as a priority and work would continue as planned to ensure sustained improvements. It was noted that the Health Board Would hopefully benefit from this increased level of focus and support from Welsh Government;
- NP noted the Health Board's continued commitment to improvements in Planned Care and to eliminate waits over 156 weeks. It was noted that as at 31 December 2023, there were 44 patients waiting longer than 156 weeks for treatment within Trauma and Orthopaedic Services.
- In respect of Industrial Action, NP thanked staff for the significant efforts that went into arrangements for planning, operational management, and to those clinicians providing cover during this period.

NP shared with Members the following good news:

- The extension of the Emergency Department in GUH had been supported and funded by Welsh Government and this would lead to an improvement in the experience and outcomes for patients.
- The Health Board had officially opened the Tredegar Health and Wellbeing Centre as part of Phase 1. It was noted that this was a key project to provide improved integrated primary care in the area and Phase 2 was underway.
- The Health Board's new Breast Care Unit was scheduled to open during the week commencing the 29th of January 2024, providing breast care in one place for patients.

The Board **NOTED** the CEO's Report.

**ABUHB
2401/09**

Report from Llais

Jemma Morgan (JM), Regional Director, Llais, presented Llais' report to the Board, which provided an overview of the current issues of concern and positive observations, being addressed by the Llais Gwent Region in relation to the planning and delivery of health services.

JM noted a correction at the top of page 6 of the report, dates should read the 1st to the 30th of December 2023 and not 1st November as cited in the report.

The Board noted the following key issues:

- Llais had increased its community engagement through both the staff and volunteer portfolio, feeding back to the Health Board through community voice. Feedback indicated positive experiences from patients regarding care they received in the Health Board, however, concerns were raised around staffing at GUH, Mental Health Services and Planned Care waiting times, in particular orthopaedics.
- As a result of feedback from the community, a survey on hip and knee waiting times had been launched and a report would come back to the Health Board outlining feedback. JM noted that a key issue that had been raised was the psychological impact of individuals being in pain whilst waiting for treatment.
- Early feedback from the Llais Winter Patient Experience Programme in the minor injuries and emergency departments highlighted the excellent care provided to patients.
- Feedback on site security at Ysbty Ystrad Fawr had been raised with the Chief Executive Officer; a response was awaited.

In response to a query regarding a focus on children's experience, JM informed the Board of the current work through the Childrens Board of the Regional Partnership Board, to review services for Children and Young People. It was noted that further updates would come back to the Health Board. Jennifer Winslade (JW), Director of Nursing, requested that Llais also ensure that the focus of their engagement work with Children and Young People extends beyond that of Mental Health Services and focusses upon the experience of those children and their families in physical health services.

Pippa Britton (PB), Vice Chair, reflected that the report was focused upon Health as opposed to Local Authorities and social care provision and the transition from hospital to social care. JM confirmed that Llais was working to ensure a more even distribution of reporting on both health and social care areas of responsibility.

The Chair thanked Llais for its work in highlighting important issues through community voice.

The Board **NOTED** the report.

**ABUHB
2401/10**

Patient Story – Psychological Recovery in Cancer Services

Tanya Strange (TS), Head of Nursing, Patient Centred Care, supported by Anne May (AM), Strategic Lead Cancer Nurse, introduced the patient story and presented the progress made to improve psychological recovery in cancer services.

The Board heard that Gail Hatherills' (GH) story outlined the lack of psychological support during the pandemic. The Board heard that her initial story had been shared with Board in July 2021. At that time the Board acknowledged that, although the patients physical and medical needs were met, her psychological distress was not supported adequately. The Board was informed that the story provided an update on improvements made to better meet the psychological recovery needs for those impacted by cancer had been made.

TS advised that following the July 2021 Board meeting, and the evidence outlined in the results of the Welsh Experience Survey 2021, a successful bid had been made to NHS Charities Together, enabling the Health Board to provide psychological support through the introduction of the Cancer Enhanced Psychological Programme. TS paid tribute to Gail having had the courage to share her story. Gail commented that she was proud that by having shared her story it had resulted in such a positive outcome for all impacted by cancer had been achieved.

The Board heard from Anne May (AM), Strategic Cancer Nurse, that as part of the research that had been undertaken as a result of Gail's experience, they had established that only 23% of cancer patients from across the Health Board during 2020/21 had been offered psychological support.

AM advised that a psychological model had been developed that would include the provision of staff training to better recognise psychological distress. Clinical supervision, pathway of cancer services, peer and voluntary support with differentiated provision for vulnerable groups had been developed. It was noted that the programme had three areas of support routes that accessed a broader offer of provision:

- Patient holistic assessment by the nursing team
- Enhanced psychological support for people with cancer
- Patient self-referral or referral from another provider

The Board heard how the service had been reconfigured to meet the needs of cancer patients and advised that, for example, a digital device loan system had been established and a digital officer employed to work with patients in enabling them to access support through digital means. Another example involved the recruitment of volunteers to be-friend cancer patients via the telephone. A cancer café had also been established with positive attendance.

AM provided assurance to the Board about the effectiveness of the programme through sharing examples of personal statements of patients who had benefited as a result of the change and how different needs had been met. The Board was advised that an application to continue to fund the programme manager had been made to MacMillan for a further two years.

Jennifer Winslade (JW), Director of Nursing, highlighted this as an excellent example of how patient experience had driven positive change and extended her personal thanks to GH for working with the Health Board.

Nicola Prygodzicz (NP), Chief Executive, thanked GH for sharing her story and the team for working to improve the psychological support for patients. NP highlighted that the learning from this would be utilised across the Health Board to support innovation and learning.

The Chair thanked Gail again for sharing her story, and thanked AM and TS for their drive in taking forward such positive developments. The Chair queried what considerations were in place for the psychological support for main carers. AM advised that support for carers and the main support for patients would be considered within the programme and through the Cancer Board.

It was noted that the presentation would be shared with Board members.
Action: Secretariat (complete)

The Board **NOTED** the patient story and actions to improve services as a result and thanked GH for her bravery in sharing her experience to bring about change.

**ABUHB
2401/11**

Charitable Funds Annual Accounts 2022-23

Rob Holcombe (RH), Director of Finance and Procurement, supported by Mark Ross (MR), Assistant Director of Finance, presented the Charitable Funds Annual Accounts 2022-23 for approval, noting that the Charitable Funds Committee had met on Monday 22nd of January 2024, recommending approval of the annual accounts and report to the Board.

MR advised the Board that Audit Wales would issue an *unqualified audit opinion*, with no further recommendations made, as referenced in the Audit Wales report.

Robert Holcombe, (RH), Director of Finance and Procurement, extended his thanks to staff for their work in providing the accounts within the prescribed timeframe and provided the Board with a high-level overview of expenditure.

Paul Deneen (PD), Chair of the Charitable Funds Committee, thanked all those involved in the development of the annual accounts and report which set out the key achievements during the year. PD also reminded the Board of the opportunities that existed for accessing Charitable Funds for the benefit of staff and patients.

The Chair queried the increase in support costs at 14%. The Board was informed that Benchmarking data indicated that this was the same across Wales, but comparably the Health Board compared favourably with others. The Board noted that the increase in Audit fees was included in the support costs, over which the Health Board had no control.

The Chair thanked the Charitable Funds Teams, and the generous donors who had donated to the charitable funds.

The Board **APPROVED** the Charitable Funds Annual Accounts 2022-23 and **NOTED** that these would be filed with the Charities Commission by the end of January 2024.

**ABUHB
2401/12**

St Woolos Hospital Consolidation

Leanne Watkins (LW), Chief Operating Officer, presented a report for endorsement, outlining the consolidation of services at St Woolos Hospital (SWH).

LW advised that under the eLGH workstream the proposal would involve the following:

- Repurpose of Ruperra ward in the Casnewydd Unit at St Woolos Hospital (SWH) and staff to move to D6E under a Ready to Go ward model
- Relocation of Penhow and Gwanwyn wards also located in the Casnewydd Unit to the Royal Gwent Hospital (RGH) in the first week of February 2024
- Reducing medical bed base as a result of the changes through improved flow and reduced length of stay

LW highlighted the following key points as a result of the proposed consolidation:

- The relocated wards would remain under the management of the Primary Care and Community Division aligned to the community hospital model of care;
- Community inpatient wards at SWH had experienced significant workforce challenges over a prolonged period of time;
- The proposal was aligned with the Health Board's Clinical Futures Model and Estates Strategy;
- Staff and patient benefits and improved patient safety as a result of the relocation of wards from St Woolos to the Royal Gwent Hospital;
- Potential cost reductions, due to closure of a medical ward, review of the model of care and reduction in ambulance conveyances between SWH and the Royal Gwent Hospital (RGH);
- Reduction across the system of 24 beds. Staff concerns were addressed, noting that beds were a core component of health care but not in isolation and there would be increased additional community support. Increased multidisciplinary teams on wards would support reduced lengths of stay and provide safe patient care;

As a result of this opportunity, collaboration with the staff side, direct staff discussions and weekly staff support meetings had taken place with Executive Directors in attendance which had been beneficial. As a result, LW noted that the relocation of the wards would commence on the 19th of February 2024. LW noted that as a result of the change there was an estimated £1.7M efficiency saving for a full year and acknowledged that further work was ongoing to capture other financial benefits that can be

identified as a result of broader support services that would likely increase this saving.

Pippa Britton (PB), Independent Member, queried future plans for other wards in St Woolos. Hannah Evans (HE), Director of Strategy, Planning and Partnerships, informed the Board that, subject to today's approval, a workshop would take place to review other opportunities as part of the Health Board's Estates Strategy. It was agreed that an update from this workshop would be presented to the Partnerships, Population Health, and Planning Committee (PPHPC) at the end of next month. **Action: Director of Strategy, Planning and Partnerships**

Jennifer Winslade (JW), Director of Nursing, provided the Board with her clinical support for the decision. She advised that the positive consolidation of beds allowed for the development of staff skills, sharing skills across acute and community care, resulting in improved patient care.

Iwan Jones (IJ), Independent Member, referred to the Health Boards Estates Strategy and queried when this would be refreshed. Nicola Prygodzicz (NP), Chief Executive Officer, informed the Board that the refresh of the Clinical Services model would inform a refreshed Estates Strategy and would take place over the next 12 months.

Hannah Evans, (HE), Director of Strategy, Planning and Partnerships, informed the Board that components of the Estates Strategy had been refreshed as work had progressed. HE committed to providing the Board's Partnerships, Population Health and Planning Committee, with an underpinning implementation plan for the current Estates Strategy.

Action: Director of Strategy, Planning and Partnerships

Phil Robson (PB), Independent Member, reflected that given the challenging context in which the Health Board was operating, there was a need to balance implementation of change with proportionate engagement and consultation (where required). Sarah Simmonds (SS), Director of OD and Workforce, advised that an Organisational Change policy and process was in place to support this work in an effective manner.

NP highlighted the importance of staff engagement and involvement, and informed the Board that further work was underway with the communications team to strengthen the way in which the Health Board communicated with staff.

NP thanked staff for the work undertaken associated with the relocation of services.

The Chair thanked teams for the work undertaken to facilitate such an important change. The Chair requested that an overview of the impact of Patient Safety events, be presented to the Board for awareness. **Action: Director of Nursing**

The Board **NOTED** the key points made and **ENDORSED** the following:

- the repurposing of Ruperra ward in the Casnewydd Unit at SWH by the beginning of February 2024 as a 'Ready to Go Ward';
- the relocation of Penhow and Gwanwyn wards, also located in the Casnewydd Unit, to the RGH by the end of January 2024;
- the creation of a 'Ready to Go' ward in RGH under the leadership of the Primary Care and Community Division;
- the potential cost reduction of £318,000 in 2023/2024 and £1,744,000 in 2024/25 delivered through the closure of a medical ward;
- a further potential cost reduction delivered through a review of the medical and nursing model of care across both wards relocated to RGH and ambulance conveyances.

**ABUHB
2401/13**

Outcome of Engagement- Nevil Hall Hospital Minor Injury Unit

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided an overview of the outcome of the engagement for the MIU provision across Gwent, to consolidate and formalise the reduction in opening hours at Ysbyty Ystrad Fawr, mirroring the hours initiated as a temporary measure during COVID, and Nevil Hall Hospital on a permanent basis.

The Board was reminded of the engagement process, which had originally for 8 weeks, and had been extended to 12 weeks. During this process data was gathered through surveys and engagement events with staff, local communities, and external stakeholders, to seek their views as to how resources could be organised against demand and provide a service that meets the needs of the population.

HE thanked the Health Board's teams for their work in delivering the proposal and to those who engaged in the process, including thanks to the stakeholder partners, other Health Boards such as Powys, and members of the public. She offered her thanks to Llais Cymru for their involvement and feedback.

HE noted that the main concerns raised through the feedback involved concerns in relation to access, disproportionate impact on vulnerable groups, concerns in relation to the future of Neville Hall and more broadly the general understanding of the emergency care system and how this may be simplified for the population.

The Board noted the extensive work that had been undertaken in bringing forward this proposal. The Board requested improved communications for the public on where to go and for which service, in response to the feedback received. The Chair advised of the importance of the 111 system and discussed the requirement to evaluate this, ensuring it was timely and effective in advising patients of the most appropriate care pathway.

Peter Carr (PC), Director of Therapies and Health Sciences stressed the importance of working with communities to inform future service developments.

The Board:

- **NOTED** the outcome of the MIU public engagement and the final report.
- **NOTED** the response of Llais, which confirmed that it was content with the engagement process and that there were no further representations to make prior to the Health Board making a final decision.
- **APPROVED** the implementation of the preferred option for future MIU service opening hours as follows:
 - to close the NHH minor injury unit between 1.00am and 7.00am each night
 - Make permanent the current closure of the YYF minor injury unit between 1.00am and 7.00am each night.

**ABUHB
2401/14**

Long Term Strategy - Design Principles

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the 10 Design Principles to inform development of the Long-Term Strategy for approval. It was noted that the 10 Design Principles had emerged as a result of feedback at engagement sessions with senior leaders and Board members.

The Board was advised that a budget had been identified from existing resources within the organisation to support the associated engagement events; independent Member involvement was also welcomed.

The Board discussed the importance of the design principles being led by the needs of the population, whilst being open, clear, and transparent around service changes and the need for these to evolve.

Rob Holcombe (RH), Director of Finance and Procurement, suggested inclusion of a principle regarding 'providing sustainable, high-quality care within funding available to the Health Board'. The Chair endorsed this addition. It was noted that the principles would be amended to reflect the request.

The Board **APPROVED** the Design Principles to inform the development of the Long-Term Strategy, subject to, the agreed amendment as outlined above.

**ABUHB
2401/15**

Capital Plan 2024-25

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the report of the draft opening Capital Programme for 2024/25 for both the All-Wales Capital Funding and the Discretionary Capital Allocation. HE sought Board approval of the Plan, albeit earlier than usual, and advised that if approved this would enable the Health Board to access any end of year slippage opportunities that may emerge.

It was noted that the Capital Plan provided a framework, which would be changeable based upon emerging risks and opportunities throughout 2024-2025.

HE discussed the All-Wales Capital Funding and advised that in December 2023, Welsh Government triggered a prioritisation exercise for All-Wales Capital, which was currently with all Health Boards to assess funding priorities against a set criteria. The scope of the exercise did not pick up funding associated with the Regional Partnership Board and some nationally funded Digital programmes. HE noted that the detail of the exercise would be presented to the Partnerships, Population Health, and Planning Committee in January 2024.

The Board was informed that since the publication of the papers, the Health Board had received confirmation from Welsh Government that the discretionary capital funding allocation had increased to pre-Covid levels of £2.8m. The Board noted that a large proportion of this funding was already allocated.

In terms of the remaining £9.8m funding, HE sought approval to fund the projects as set out in Appendix 1 of the report which included Divisional priorities.

HE assured the Board of the following key points:

- Health and Safety funding allocation was included in the Estates Funding Advisory Board (EFAB) and statutory allocation, noting that it was outlined as '0' in the report.
- Additional EFAB and partnership funding had been allocated to support Mental Health services.

Pippa Britton (PB), Independent Member, discussed the current RAAC issue at Nevill Hall Hospital (NHH) and the outlined investment into fire safety at NHH. PB asked whether the Health Board was investing in any areas in the short term where there may be the potential of future estates changes. HE informed the Board that the areas put forward were prioritised based upon current risk. The Health Board capital planning, Fire and Health and Safety teams were currently reviewing areas of NHH and would avoid abortive costs wherever possible, although there was a possibility of new risks emerging which would need to be mitigated.

Iwan Jones (IJ), Independent Member, asked about the revenue impact of the areas outlined in the Capital Plan 2024-25. HE assured the Board that the Discretionary Capital process followed a detailed business case development and scrutiny process, and that agreeing to the current discretionary plan would not incur additional revenue costs for the Health Board at this point.

The Board noted that the benefits realisation of capital programmes would be reported through the Finance and Performance Committee.

Dafydd Vaughan (DV), Independent Member, noted the risks associated with the funding of some Digital programmes not being prioritised, noting that

Wales was the lowest funded country for Digital technology in the United Kingdom.

The Board:

- **NOTED** the significant demands on the Capital Programme for 2024/25.
- **APPROVED** the 'Draft Opening Capital Programme 2024/25' and acceleration of any of the approved bids to balance off end of year slippage.
- **APPROVED** the reserve schemes, subject to funding becoming available.

**ABUHB
2401/16**

Risk Management Framework

Rani Dash (RD), Director of Corporate Governance, presented an updated risk management framework to the Board for approval, noting that this had been shared with the Audit, Risk and Assurance Committee for comment. The Risk management Framework was supported by the new Risk Management policy.

RD noted that the framework built upon the previous risk strategy approved by the board in September 2021, and set the content for embedding and developing risk management throughout the Health Board.

The Board welcomed the work undertaken to develop the revised Framework. During discussion, it was suggested the word 'reputational' within the Risk Appetite Statement be reworded to define what was meant, for example public confidence, staff protection, integrity and doing the right thing. RD agreed to make this amendment and present a final version to the Audit, Risk and Assurance Committee for final endorsement. **Action: Director of Corporate Governance**

The Chair thanked RD and the corporate governance team for the work undertaken in the area of risk management.

The Board **APPROVED** the Risk Management Framework, subject to rewording within the Risk Appetite Statement, as set out above.

**ABUHB
2401/17**

All Wales Individual Patient Funding Request (IPFR) Policy

Rani Dash (RD), presented the IPFR policy for approval, noting that it had been considered through the Welsh Health Specialised Services Joint Committee (WHSSC).

WHSSC had updated the policy, with support from legal teams and had incorporated learning from a judicial review. WHSSC recommended the policy for approval by the Board.

The Chair requested a short report on the Individual Patient Funding Request policy, including numbers and outcomes, to come back to the Board in May 2024. **Action: Medical Director**

The Board **APPROVED** the All-Wales Individual Patient Funding request Policy as recommended by WHSSC.

**ABUHB
2401/18**

External Audit Reports

a. Annual Audit Report

Andrew Doughton (AD), Audit Wales, presented the Annual Audit report to the Board, providing a summary of the audits completed in 2023 calendar year that are already passed through clearance. The Board was informed that:

- an unqualified opinion had been provided on the Health Board's annual accounts 2022/23.
- in terms of the regulatory opinion there was a qualified opinion provided as the Health Board had not contained spending within its allocation for the period.
- The Workforce Planning review and the review of Primary Care Services would both be presented to the Audit, Risk and Assurance Committee in February 2024.

AD thanked the Health Board for their support and engagement during the audit process for 2023, noting the significant pressures that the Health Board was under.

b. Structured Assessment

Nathan Couch (NC), Audit Wales, presented the Annual Structured Assessment to the Board, noting that the outcome of the report was positive and highlighted progress in key areas with some further opportunities for improvement identified within the seven recommendations.

The Board was reminded of the purpose of the annual Structured Assessment, noting that it examined the Health Board's Corporate arrangements for planning, systems of assurance and governance. NC noted that the 2023 structured assessment did not include a focus on the use of resources, noting that individual audit reviews would take place on resource utilisation throughout the year.

NC discussed the key conclusions and opportunities for improvement, as outlined in the report. NC noted that, overall, despite the significant challenges faced by the Health Board, it was deemed to be making good progress against the development of corporate arrangements.

NC gave special thanks to the Director of Corporate Governance and the teams for their support.

Nicola Prygodzicz (NP), Chief Executive Officer, thanked Audit Wales for their work, recognising the issues and key areas of work and improvement.

The Chair gave special thanks to Nathan Couch of Audit Wales, noting it was his last meeting representing Audit Wales at the Board.

The Chair requested a brief overview of the tracking of the recommendations and actions from the structured assessment report be included in future reports from the Audit, Risk and Assurance Committee (ARAC). **Action: Director of Corporate Governance**

The Board **NOTED** the Annual Audit Report 2023 and the Structured Assessment 2023.

**ABUHB
2401/19**

Financial Management

Financial Management Month 9

Rob Holcombe (RH), Director of Finance and Procurement, presented the paper outlining the financial performance at the end of December 2023. (Month 9)

RH noted that:

- A reported year to date position of £47.7m deficit,
- The reported forecast was a £56.4m deficit, after assuming WG funding of £88.4m; however, there remained risks to achievement given the level of savings and actions required.
- Income included anticipated funding for the 2023/24 A4C pay award (£26.5m), the 2023/24 medical pay award (£6.4m) and estimated revenue charges related to Capital accounting.
- Pay Spend (excluding the notional pension adjustment from March 2023), had decreased compared with month 8 by c.£1.2m.
- Non-Pay Spend (excluding capital adjustments) had decreased by c.£1.8m, due to recognition of WHSSC funding, and funding and spend for RIF, community pharmacy and dispensing doctors incurred in month 8 therefore providing a reduction in month 9.
- An overall forecast achievement of savings was £42.5m, against the IMTP savings plan of £51.5m
- As at Month 09, ABUHB was reporting a deficit of £47.7m with a forecast deficit of £56.4m.
- There remained risks associated with maintaining the forecast position, particularly the full receipt of all anticipated income, identification and achievement of mitigation of savings plans, prescribing cost growth, CHC cost growth and workforce pressures. The estimated risk range was between a £51m and £61m deficit.
- As at month 9 the reported capital position was break-even with a balanced forecast; however there was a deficit risk of £0.02m which was expected to be managed by year end.

The Chair acknowledged the positive position in respect of the level of with savings that had been achieved, notwithstanding the serious financial position the Health Board faced.

RH advised that the Health Board had submitted a request to Welsh Government for additional strategic cash to cover the deficit position. The outcome of this would be announced before the end of January 2024. The

Board held a short discussion on the actions that may need to be taken if funding was not available, such as debt recovery and income solutions.

Shelley Bosson (SB), Independent Member, queried the increase in paediatric CHC placements in December 2023 and actions being taken to assess cost effectiveness. RH confirmed that these placements would be assessed, although often the nature of the placements were very specialist and high-cost.

The Chair queried the consequences to the Health Board if it did not meet the Welsh Government's control target. RH noted the recent escalation to targeted intervention by Welsh Government and the Health Board's statutory duty to breakeven on a rolling three-year basis.

Nicola Prygodzicz (NP), Chief Executive Officer, reflected on recent discussions held with NHS Wales chief executives and advised that there was a requirement for organisations to have a clear roadmap to financial sustainability. NP referred to targeted intervention and noted that the arrangements with Welsh Government in respect of this were not yet known, including the criteria for de-escalation.

The Chair stated that it was imperative for the Health Board to manage its services within the finances available to best meet the needs of the population and a plan for financial sustainability was therefore essential.

2024/25 Allocation Funding

Rob Holcombe (RH), Director of Finance and Procurement, advised that the Allocation letter had been received from Welsh Government in late December 2023, which provided clarity on the allocation of resources available for 2024/25.

The Board noted that:

- the baseline funding for 2024/25 had increased by £156.1m, a significant element of which related to recurrent 2023/24 expenditure;
- Additional 'new' funding to the Health Board, excluding committed and directed funding, was £40.0m and this would need to cover commitments and inflationary pressures;
- There was a requirement to identify a CIP plan of at least 2%, £33-£42M
- £20M of funding had been removed for 111 and transferred to the NHS Executive as part of the agreed NHS Executive Phase 2 realignment of activities.

In summary it was noted that, the total assumed income and allocations for planning purposes were:

- Confirmed allocations £1,636.6m
- Anticipated Allocations £64.7m
- Income assumed £11.7m
- Total assumed revenue funding available for 2024/25 is £1,713m.

The Chair discussed the continuation of ring-fencing, noting that the Health Board had requested that this approach be reconsidered by WG.

The Board **NOTED** the Month 9 Financial Performance and the 2024/25 Allocation of Funding.

**ABUHB
2401/20**

Performance Report - IMTP 2023-26 December 2023

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented a report which provided the Board with an overview of performance against the key Ministerial Priorities. This report complemented the IMTP Quarterly Outcomes Report.

HE noted that the report was in a new format which had been developed to provide assurance on key performance deliverables in the intervening months between the full Quarterly Outcomes report.

HE highlighted the following:

- **Planned Care:** good progress had been made in eliminating waits of over 156 weeks with a reduction to 44 patients in December 2023 (best in Wales). A positive impact had been noted as a result of the opening of the Cataract Centre, with a 4-week waiting time reduction in one week.
- **Cancer Services:** the single Cancer pathway performance data had improved from 58.4% to 60.4% in October 2023, and from 53% to 59.1% in November 2023. There had been a reduction in the backlog of patients despite the increase in referrals.
- **Children and Young People Services:** good progress had been made in reducing long waits.
- The recent inclusion of Primary Care data within the report showed improvement in access to Primary Care Services.

HE outlined the key performance challenges for the Health Board, which included:

- Maintaining planned care reduction in waiting times.
- Responding to an increase in referrals in Children and Young Peoples Services, which was being monitored through actions, and tracked through divisional assurance reviews.
- Urgent and Emergency Care systems remained challenged, with significant pressures.
- Challenges in performance in relation to Mental Health services, noting that there was an improvement plan in place.

The Board requested that a report on Mental Health Services performance be presented to the Regional Partnership Board, noting that some mental health services are multi-agency with local authority partners. **Action: Chief Operating Officer**

The Chair queried why variable costs in Mental Health were increasing when the Health Board was not meeting its targets. Leanne Watkins (LW), Chief Operating Officer, informed the Board that there had been an increase in

enhanced care vacancies, so additional staffing had been required. Further work was underway to produce a strategy for mental health services, noting that the recruitment process had commenced for a Divisional Director for Mental Health and Learning Disabilities.

The Chair welcomed the increase in the use of Primary Care services. The Board discussed the positive impact of the Urgent Primary Care Centre on the reduction of call flows through to 999 and 111 services.

The Board **NOTED** the Performance Report for December 2023.

**ABUHB
2401/21**

Health and Safety Improvement Plan

Peter Carr (PC), Director of Therapies and Health Sciences, supported by Scott Taylor (ST), Head of Health, Safety and Fire, presented a detailed update of the Health and Safety Improvement Plan to the Board.

The update of the 30/60/90-day improvement plan provided progress, oversight, and an update on the governance arrangements. Implementation of the improvement plan enabled the Health Board to achieve and sustain compliance with Health and Safety legislation and reduce the associated risks. PC noted that the risks had been quantified and informed the strategic risks and a longer-term improvement plan would be considered through the Health and Safety Committee. PC noted the work that was ongoing regarding fire safety to improve the governance arrangements for fire safety and advised that a level of enhanced monitoring had been implemented which included a weekly progress meeting with the service lead.

The 7 areas of risk previously reported to the Board were discussed, noting that Manual Handling training compliance had not yet reached the 85% target. External providers had been commissioned to support staff to reach compliance levels, and further work would be undertaken with Divisions to directly monitor compliance. Sarah Simmonds (SS), Director of Workforce and OD, informed the Board that simplified routes to training for staff were a focus of the newly established Core Learning Committee.

PC confirmed that monthly reports were presented to the Executive Committee on progress of the Health and Safety Improvement Plan. To further strengthen governance and accountability arrangements, plans were in place to review the Terms of Reference for the Health and Safety Committee.

The Board **NOTED** the Health and Safety Improvement Plan and progress as contained within the report.

**ABUHB
2401/22**

Strategic Risk Report

Nicola Prygodzicz (NP), Chief Executive, presented the report which provided an assessment of strategic risks associated with achieving the Board's strategic priorities for assurance.

	<p>The Board NOTED the Strategic Risk Report for January 2024.</p>
<p>ABUHB 2401/23</p>	<p>Vacant GP Practice- Health Boards Managed Practice</p> <p>Leanne Watkins (LW), Chief Operating Officer, presented the report, providing the Board with the outcome of a recent recruitment process, aligned to the Vacant Practice Policy. This was in relation to the Health Board’s directly managed GP Practices returning to Independent Contractor status.</p> <p>The Chair noted the importance of monitoring outcomes for patients and requested future evaluation of care and services provided. LW confirmed that early feedback from Llais indicated positive experiences in the newly managed practices for patients.</p> <p>The Board NOTED the content of the report and the successful awarding of the GMS contracts, returning Tredegar Health Centre, Aberbeeg Medical Practice, Brynmawr Medical Practice, Bryntirion Surgery and Blaenavon Medical Practice to independent Contractor status.</p>
<p>ABUHB 2401/24</p>	<p>Regional Partnership Board Update</p> <p>Hannah Evans (HE), Director of Strategy, Planning and Partnerships provided an update on Regional Partnership Board activities.</p> <p>HE confirmed that the RPB governance review recommendations continued to be implemented. Work was also progressing on the alignment of the RPB and PSB priorities.</p> <p>HE noted that the RPB had discussed the requirements for an evaluation and impact assessment on RIF funded schemes.</p> <p>The Board NOTED the update.</p>
<p>ABUHB 2401/25</p>	<p>Executive Committee Chairs Report</p> <p>Nicola Prygodzicz (NP), Chief Executive, presented an overview of a range of issues discussed by the Executive Committee at meetings held between 7th of December 2023 and 18th of January 2024.</p> <p>NP highlighted:</p> <ul style="list-style-type: none"> • WCCIS and its strategic direction of travel nationally; this would be discussed at a Board Development session over the next few weeks. • Stroke Improvement Plan; key focus on stroke pathway improvement, with the centralisation of stroke rehabilitation services and opportunities for improvement at the front door. • An overview of sample data from the Gwent Joint Needs Assessment, outlining population needs and issues, was presented to the Executive Team. This was scheduled for presentation at a future Board development session. <p>The Board NOTED the report.</p>

ABUHB 2401/26	<p>An overview of Joint Committee Activity</p> <p>Nicola Prygodzicz (NP), Chief Executive, provided an update on the issues discussed and agreed at recent meetings of Welsh Health Specialised Services Committee (WHSSC) and Emergency Ambulance Services Committee (EASC), as joint committees of the Board.</p> <p>NP advised that, in respect of ambulance services, discussions between WAST and the Health Board had been held with a view to agreeing a way forward, better managing the issues faced by both organisations and the identification and better planning of the key areas for improvement .</p> <p>The Board NOTED the report.</p>
ABUHB 2401/27	<p>Key Matters from Committees of the Board</p> <p>The Board RECEIVED Assurance Reports from the following Committees:</p> <ul style="list-style-type: none"> • Charitable Funds Committee- 9th November 2023 • Audit, Risk and Assurance Committee – 28th November 2023 • Mental Health Act Monitoring Committee – 6th December 2023 • Patient Quality, Safety and Outcomes Committee – 13th December 2023 • Finance and Performance Committee – 21st December 2023
ABUHB 2401/28	<p>Date of the Next Meeting: Wednesday 27th March 2024</p>