

**CYFARFOD BWRDD IECHYD PRIFYSGOL
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

AGENDA

Date and Time	Wednesday 27th March 2024 at 9.30am	
Venue	Conference Centre, Headquarters, St Cadoc's Hospital	
PRESENT	<p>Ann Lloyd Nicola Prygodzicz James Calvert Peter Carr</p> <p>Sarah Simmonds Jennifer Winslade Hannah Evans</p> <p>Robert Holcombe Paul Solloway Leanne Watkins Paul Deneen Dafydd Vaughan Philip Robson Iwan Jones Prof Helen Sweetland Shelley Bosson Penny Jones Pippa Britton</p>	<p>Chair Chief Executive Medical Director Director of Therapies and Health Science Director of Workforce and OD Director of Nursing Director of Strategy, Planning and Partnerships Director of Finance & Procurement Director of Digital Chief Operating Officer Independent Member (Community) Independent Member (Digital) Special Advisor to the Board Independent Member (Finance) Independent Member (University) Independent Member (Community) Independent Member (Community) Vice Chair</p>
ALSO IN ATTENDANCE	<p>Rani Dash Michelle Jones Jemma Morgan Tanya Strange Kathryn Thomas Letitia Hawkins Fern Cook</p>	<p>Director of Corporate Governance Head of Board Business Regional Director, Llais Cymru Deputy Director of Nursing Volunteer Co-ordinator Volunteer Governance Support Officer</p>
• APOLOGIES	<p>Louise Wright</p> <p>Martin Blakebrough Richard Clark</p>	<p>Independent Member (Trade Union) Independent Member (Third Sector) Independent Member (Local Authority)</p>

ABUHB 2703/01	<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 2703/02	<p>Declarations of Interest for Noting</p> <p>There were no declarations for noting.</p>
ABUHB 2703/03	<p>Draft Minutes of the Health Board Meeting, held on 24th January 2024, for Approval</p> <p>The minutes of the meeting held on 24th January 2024 were agreed as a true and accurate record.</p>
ABUHB 2703/04	<p>Board Action Log for Review</p> <p>It was noted that all actions within the Board’s action log had been completed or were in progress as outlined within the paper.</p>
ABUHB 2703/05	<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 3rd January 2024 to 4th March 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 2703/06	<p>Report from the Chair</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>

- Chaired two Regional Partnership Board (RPB) meetings and a workshop to explore cost effectiveness and to ensure that the themes were aligned to the work of the RPB; reorganisation of the governance arrangements of the RPB and the determination of strategic aims and noted that this was a valuable exercise with children identified as a key priority within this work.
- Chaired five meetings of the Ministerial Advisory Group that was reviewing the accountability of Health Boards in Wales. The Board noted that the report was nearing completion prior to submission to the Minister.
- Chaired the Health Board Chairs peer group and noted that the focus of the work had been on resources and the ability to meet the ever-rising demand and the associated pressures that this places on the system staff and patients.
- Attended a Ministerial Away Day with Health Board Chairs where concerns were shared as to the challenges that all Health Boards face.
- Attended a meeting with Minister and CEOs and the interfaces with social care. The Chair noted that all attendees were of the same mind in relation to concerns and noted the enthusiasm that exists to collectively resolve the issues which exist between Health and Social Care.

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

**ABUHB
2703/07**

Report from the Chief Executive

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

- A substantial amount of work in the development of the annual and financial plan in the context of increasing demands and concluded that the balance between ambition and deliverability had been a key consideration.
- The impact of industrial action at a challenging time over the Easter holiday period and thanks were extended to all staff involved.
- The breast unit at Ysbyty Ystrad Fawr had opened and noted that cancer continued to be a top priority for the Health Board.
- Attended the SEEN project that had been developed with Race Council Cymru, Welsh Government and celebrated art through multi-ethnic groups
- Received a visit from the Children's Commissioner for Wales to the CAHMS team and noted the complimentary work that was ongoing amongst the challenges faced.

- Attended the Women’s Health Network launch that builds on the challenges around women’s health and associated inequalities.
- Noted the significant amount of national work ongoing, which included the joint commissioning agenda, EMRTS and the work of the Value and Sustainability Board.
- Noted that the staff workforce survey had been completed and the Executive Team were due to look at the findings.
- Strengthened the communication strategy internally and advised that the Executive team was now undertaking drop-in sessions every month across the health board.
- Noted that a record number of nominations for the staff recognition awards were being received which recognised the excellent work that was ongoing by staff.

The Board **NOTED** the CEO’s Report.

**ABUHB
2703/08**

Patient Story – Volunteer to Career

Tanya Strange (TS), Deputy Head of Nursing, supported by Kathryn Thomas (KT), Volunteer Co-ordinator, introduced the item and presented the volunteer to career story.

Kathryn Thomas (KT), Volunteer Co-ordinator, advised that the process of providing opportunities for volunteer to career was embedded practice within the Health Board. An explanation of the process was provided that supported the exploration of options personal to individuals’ needs. KB noted that the majority of roles have a befriending focus and advised that to date 12 volunteers had gained employment with several others signposted to work experience.

Leticia Hawkins (LH), Volunteer, provided an overview of her background and advised that the opportunity that she had been provided was significant, and concluded that the volunteer to career approach had changed her life outcomes. LH advised that the skills that she had developed had been beneficial in both her personal and professional life and was appreciative of the opportunity provided.

The Chair thanked the individual for attending and extended her best wishes on behalf of the Board for the future.

Sarah Simmonds, (SS), Director of Workforce and OD, extended her congratulation and advised that there was a need to turn such opportunities into meaningful employment opportunities and acknowledged that feedback had been received in terms of the volunteer policy and the widening opportunities for employment.

Pippa Britton (PB), Vice Chair, sought confirmation as to how volunteers may be able to assist with difficulties encountered by those with physical limitations and was advised that the lived experience framework needed to be reviewed to reflect how issues raised may be better addressed.

Nicola Prygodzicz (NP), Chief Executive, sought clarification as to how an individual finds out about such opportunities and whether more could be done to improve this. The Board was advised that the individual had been signposted to the opportunity by a support group and acknowledged that more could be done through improved communication including the use of leaflets. The Board noted that the team visited careers fairs to raise the profile of the opportunities which exist and that the Charitable Funds Committee may be able to assist in supporting the work of volunteers.

The Chair thanked all for attending and noted the excellent work of volunteers.

**ABUHB
2703/09**

Report from Llais, Gwent Region

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 also advised of a new matter that wasn't included in the report which was in relation to the EMRTS engagement on a national level. Nicola Prygodzicz (NP), Chief Executive, advised that the letter from Llais had been included in the Board papers for today's meeting under the EASC update.

Paul Deneen (PD), Independent Member, sought clarification as to whether Llais had learnt any lessons following their 12 months of existence. JM reflected that the remit of social care with five local authorities was a challenge and noted that there was a need to rebalance the work of Llais to move forward in a strategic way with its strategy being launched in April.

PD acknowledged that there was also a need to strengthen the Llais report to include the voice of children and young people and was advised that Llais was exploring opportunities to better engage the voice of children and young people in its work.

The Board **NOTED** the report.

**ABUHB
2703/10**

**Strategic Planning for 2024/25:
a. IMTP and Annual Plan 2024/25**

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided an overview of the report and noted that the Health Board had a statutory responsibility to submit an approved Integrated Medium-Term Plan (IMTP) that could financially balance over a three period to Welsh Government.

HE advised that on 16th February 2024 the Health Board issued an Accountable Officer letter to Welsh Government confirming that, due to the ongoing financial challenges, the Health Board would submit an Annual Plan with a three-year intent to balance the immediate system sustainability challenges with the population health and care needs. The Board noted that the stated ambition of the plan was for the health board to be in financial balance by 2026/27.

HE acknowledged that the plan had been developed with high level engagement across all teams and provided an overview of the engagement that had taken place. HE provided an overview of the documents appended to the plan and noted that the plan was framed around shorter-term priorities and longer-term priorities and that the life-course approach was applied to the longer term. The Board noted that the plan had been strengthened in terms of deliverables and outcomes as a result, to aid understanding.

HE noted that the plan outlined the priorities and system changes required under the five priority areas:

1. Embedding Prevention and Population Health in all that we do;
2. Improving patient experience and timeliness of care in our urgent and emergency care system focusing on access and discharge pathways;
3. Continuing to prioritise cancer, urgent and the longest waiting patients for planned care;
4. Progressing our place-based models of care in primary and community services;
5. Improving our Mental health services.

HE advised that there had been a greater focus upon children and the work with partners on the best start in life, a focus on long waiting patients, a commitment to sustain no patient waiting over 156 weeks and to reduce the number of specialities not waiting over 104 weeks.

HE noted that to sustain this improvement this would take a significant effort . Within the plan there were quarterly ambitions articulated which would aid accountabilities within the plan. HE noted that certain elements of the plan were dependent upon capital investment and the capacity to deliver the plan in year whilst working on future years.

Paul Deneen (PD), Independent Member, acknowledged the work that was ongoing around children and young people.

Nicola Prygodzicz (NP), Chief Executive, advised that a key message to impart was the need to deliver improved outcomes whilst developing a sustainable plan that achieves financial balance. NP advised that the plan was ambitious given the financial savings for the coming year of up to £50m in addition to significant savings in 2023/24 and acknowledged that more work needed to be done to demonstrate the improved efficiencies.

The Chair asked if the targeted intervention from Welsh Government had commenced. NP advised that a meeting was scheduled for 9th April to determine the approach and the associated de-escalation arrangements.

Pippa Britton (PB), Independent Member, acknowledged the significant amount of work in developing the plan and sought confirmation as to whether the plan was ambitious enough in terms of timescales. PB also queried whether the plan was clear enough for the lay person, and asked whether further clarification could be provided to the reader. HE advised that the specifics on a page would be reviewed following today's feedback. In terms of timescales, HE noted that there had been a conscious balance to deliver within year and over the longer term. HE acknowledged that there was a balance between ambition and realism and noted that some of the processes that were required to be followed had determined the timescales for delivery.

Robert Holcombe (RH), Director of Finance and Procurement, acknowledged that the challenge for the Health Board was to live within the parameters provided and that the ambition was to achieve financial balance within 3-years. RH advised that to identify headroom to improve there was a need to determine the priorities for delivery and the approach to delivery.

Iwan Jones (IW), Independent Member sought assurance as to how the financial plan would be realised through the provision of greater detail to the Board and in doing so reduce the risks associated with delivery of the plan.

HE advised that the route map to delivery remained a key consideration and the detail on more significant changes need to be regularly reported to Board.

NP advised that by July 2024 further granularity would be provided around the three-year route map to sustainability and that a report would be submitted to the Board with this detail. NP reflected upon the size and scope of the ask and confirmed that a reflection on this year's financial performance would be undertaken to test the assumptions within the plan. NP concluded that there was a delivery framework in place, with efficiency being a key consideration.

Action: Chief Executive, Director of Strategy, Planning and Partnerships & Director of Finance and Procurement, to provide a more detailed report on the three-year route map to sustainability to the Board in July 2024

Dafydd Vaughan (DV), Independent Member, reflected that those aspects that could make the biggest difference were dependent upon substantial capital investment and acknowledged that the level of investment was limited although essential.

The Board:

- **APPROVED** the annual plan 2024/25 and appendices which include the capital prioritisation for submission to Welsh Government.
- **NOTED** the ongoing action to develop a more detailed report on the 3-year route map to sustainability.
- **NOTED** the ongoing actions to further improve delivery of the 104 weeks planned care target.

b. Financial Plan 2024/25

Rob Holcombe (RH), Director of Finance and Procurement, presented the report which outlined that the Health Board had two statutory financial duties.

RH advised that to achieve the duties the Health Board is required to set a financial plan as part of the annual plan for 2024/25. RH noted that in view of the deficit in 2022/23 and forecast deficit in 2023/24 as well as the associated levels of risk there had been increased oversight by the Board, the Executive Committee and the Finance and Performance Committee. RH advised that these arrangements would continue in 2024/25 and acknowledged that it was anticipated that there would be further financial scrutiny through Welsh Government arrangements as part of 'targeted intervention' arrangements.

RH advised that whilst developing the draft financial plan, which had been supported by the Finance and Performance Committee, it was identified that the Health Board would be unlikely to deliver a balanced financial plan for 2024/25 or on a rolling 3- year basis. As a result, an Accountable Officer letter had been sent to Welsh Government.

The Board noted that when developing the financial plan the following had been included:

- Allocation & income funding of £1.7bn that included an uplift of 3.67% for all of Wales
- Assumption that conditional funding of £65m was retained.

RH noted that the approach to development of the financial plan focused on ensuring safe service provision to patients and improved efficiency, whilst minimising new investments.

RH reported that in respect of the plan for 2024/25 a best-case position of a deficit of £48.9M would be reported which included an underlying deficit of £81m. This had been discussed and supported by the Finance and Performance Committee. RH advised that the report also identified those items which drive the deficit which included, investments in safe staffing, nursing pressures, beds remaining open, CHC inflation, medicines both prescribing and NICE high-cost drugs and specialised services commissioning.

Iwan Jones (IJ), Independent Member, reflected that within the deficit reported there were a number of variables that could impact further upon the level of deficit being forecast. RH confirmed that the plan, was the best-case forecast, was ambitious and risks would need mitigating. Phil Robson (PR), Special Advisor recognised the proposed ambition and supported the plan.

The Board **APPROVED** the annual financial plan for the 2024/25 financial year as a forecast deficit of £48.9m, recognising the risks of savings delivery and opportunities for further mitigation and **REQUESTED** further updates on the progress of the work to be completed in developing and achieving the road map to sustainability over the three-year period.

c. Delegation of Revenue Budgets 2024/25

Rob Holcombe (RH), Director of Finance and Procurement, presented the report and advised that the Health Board was required to set budgets prior to the beginning of the financial year, which were in accordance with the aims and objectives of the annual plan for 2024/25. Specifically,

the Board was advised that this means preparing and setting budgets within available funds. RH noted that the final Financial Plan identified a forecast deficit for the Health Board of £48.9m for 2024/25 and that an Accountability letter had been submitted to Welsh Government recognising the need to develop a longer-term financial plan to balance the budget.

RH advised the Board that the 2024/25 Health Board financial plan assumed the following:

- Baseline allocation 2023/24 £1,480m
- Allocation letter funding uplift of £156m
- Anticipated allocation income of £65m
- Additional confirmed GMS allocation £4m
- Other income of £11m

RH advised that the report detailed the principles and proposed approach to delegating funding at the start of the 2024/25 financial year from the total available resources of £1.716bn.

RH commented that the proposed approach involved 2-part budget setting plan which initially delegated the proposed levels and then for a second delegation to be performed during quarter 1 of 2024/25. This would be part of finalising the 2024/25 financial savings and cost pressure plans at a divisional/budget holder level.

The Board noted that the annual financial plan was underpinned by a focus on developing a budget strategy that:

- Ensures budget delegation plan reconciles with Allocation funding.
- Budget allocations were in line with WG allocative planning therefore prioritised to 2024/25 pressures.
- Budget delegation includes recurrently approved budgets, 3.67% NHS Wales LTA's pass through (£8.8m) and regional planned recovery monies (£3.9m) where applicable.
- Reserves were established pending finalisation of some anticipated allocations
- Budget holders should operate & deliver within delegated budgets noting that some areas forecast to be overspent.
- An innovation reserve had been established for a number of key priorities (£3m)
- No contingency reserves were established
- All other risks & pressures will need to be pro-actively managed & mitigated.

The Board **APPROVED** the proposed budget delegations, including:

- Initial revenue budgets to be delegated for the 2024/25 financial year, and
- Those budgets to be held in reserve – both in terms of planned commitments and any contingency (uncommitted reserve).

**ABUHB
2703/11**

Corporate Parenting Charter

Jennifer Winslade (JW), Director of Nursing, advised that the report outlined the responsibilities upon public sector bodies such as the Health Board to safeguard and promote the rights and life chances of care-experienced children and young people.

JW noted that the proposed charter for adoption was closely aligned with the UN Convention for the Rights of the Child (UNCRC) and the paper sought to develop the understanding of this work for children in care.

Phil Robson (PR), Independent Member, advised that corporate parenting was a key challenge for those young people in care and acknowledged that there were opportunities for further work and asked whether the Public Services Board (PSB) could assist in this field. The Chair and Chief Executive agreed to consider this through the PSB as members.

The Board **AGREED** to the signing of the Pledge to become a corporate parent.

**ABUHB
2703/12**

Strategic Equality

a. Annual Report

Sarah Simmonds (SS), Director of Workforce and OD, advised that the report provided the background and context to the Annual Equality Report 2023-24 and the associated improvements made. SS noted that the annual report was required to be published by the 31 March 2024 in line with the requirements set out in the Public Sector Equality Duty (PSED) 2011. The Board noted that the annual report was a useful tool in communicating information about the work the Health Board was undertaking on Equality, Diversity and Inclusion (EDI). SS acknowledged that within the last 12 months there had been improvements in the gender pay gap, staff diversity networks had been supported and the anti-racist action plan had progressed.

The Board **APPROVED** the Strategic Equality Report.

b. Strategic Plan

Sarah Simmonds (SS), Director of Workforce and OD, introduced the report which provided the background context to the Strategic Equality Plan (SEP) and Equality Objectives for 2024 – 2028 following the public consultation and feedback that had been received. SS advised that the revised SEP was due to be published by the 31 March 2024, to comply with the requirements set out in the Public Sector Equality Duty 2011.

The Board was advised that the SEP had been developed following extensive engagement to ensure that the objectives that were set were realistic and relevant. From the engagement several themes emerged that were:

- Meaningfully engaging and actively listening to our people and patients
- Co-production and design
- Access to our services and environment
- Culture and leadership
- Data and systems
- Equal opportunities

SS advised that in developing the plan the context post covid had changed and three core objectives had emerged that were:

- Patients – access to services
- People -Diversity of workforce
- Population - Addressing health inequalities

SS advised that an action plan had been developed and that work was ongoing to identify appropriate measures to track the progress and impact of the plan.

Pippa Britton (PB), Independent Member, recalled an example of accessibility matters across the estate and asked whether this could be linked with the volunteer programme to assist those with physical limitations when accessing services.

The Board discussed the accessibility of accessing certain sites and heard that some sites require improvement and noted that the front of house services were key and that the inclusion of the work of volunteers may further assist.

Action: Director of Workforce and OD to meet with Director of Nursing to explore the use of volunteers in better managing access considerations.

	<p>In response to a question the Board was advised that sufficient resources existed to deliver the SEP and noted that a network was being established to support the better delivery of the equalities agenda and positive steps had been made including the use of protected time to grow staff networks.</p> <p>The Board APPROVED the updated SEP.</p>
<p>ABUHB 2703/13</p>	<p>Major Incident Plan</p> <p>Hannah Evans (HE), Director of Strategy, Planning and Partnerships, advised that the Health Board has a statutory responsibility under the Civil Contingencies Act 2004, to plan for and respond to a wide range of incidents and emergencies that could impact on health or patient care. HE advised that the plan had been considered by the Partnerships, Population Health and Planning Committee prior to submission to Board. HE noted that the Major Incident Plan outlines the roles and responsibilities of ABUHB in an emergency response, including its activation and deactivation arrangements, command and control structures and recovery arrangements. The Board was advised that a Major Incident exercise was planned for later this year to test the plan across a wide range of response services.</p> <p>Helen Sweetland (HS), Independent Member, sought assurance as to the effectiveness of communication to those delivering services and was advised that rigorous governance arrangements were in place to ensure that regular communication around the plan and its detail were in place.</p> <p>The Board was also provided feedback on some of the details within the plan and noted that the helipad was now open and queried whether a further option should be included as the Grange was now operational and whether the plan could be further enhanced through the inclusion of operational organisations that could also assist when dealing with a major incident.</p> <p>Action : Director of Strategy, Planning and Partnerships to reflect the comments of the Board within the final plan.</p> <p>The Board APPROVED the revised Major Incident plan for immediate implementation.</p>
<p>ABUHB 2703/14</p>	<p>Establishment of the NHS Wales Joint Commissioning Committee</p> <p>Nicola Prygodzicz (NP), Chief Executive, presented the report that detailed the proposed implementation and governance arrangements of the NHS Wales Joint Commissioning Committee that was scheduled to</p>

come into effect on 1st April 2024. The Board was advised that the proposal was for Health Boards to establish a Joint Committee that would be operational from 1 April 2024, which would supersede the Welsh Health Specialised Services Committee and the Emergency Ambulance Services Committee and National Collaborative Commissioning Unit (NCCU). The Board noted that the new Joint Committee would be hosted by Cwm Taf Morgannwg University Health Board.

NP advised that the Director of Corporate Governance had provided significant support to this workstream and the proposal when implemented would also include the 111 programme that the Health Board presently hosts.

In response to a question regarding efficiency savings generated as a result of the establishment of the Joint Committee, NP advised that the reorganisation would not cost any more than that of EASC and WHSSC combined and acknowledged that further work was to be undertaken to achieve efficiencies.

The Board:

- a. NOTED** the establishment of the NHS Wales Joint Commissioning Committee (JCC) from 1st April 2024, as directed by Welsh Ministers;
- b. NOTED** that the JCC would supersede the Board's current joint committees, Welsh Health Specialised Services Committee (WHSSC) and Emergency Ambulance Services Committee (EASC) with effect from 1st April 2024;
- c. NOTED** the development of the JCC's governance framework, as a key component of the Health Board's governance framework;
- d. ADOPTED** the amendments to Model Standing Orders and Reservation and Delegation of Powers for Local Health Boards; and the Standing Orders and Scheme of Delegation and Reservation of Powers for the NHS Wales Joint Commissioning Committee, as issued by the Minister for Health and Social Services on 18th March 2024 (Appendix A);
- e. ADOPTED** the Standing Financial Instructions for the NHS Wales Joint Commissioning Committee, as issued by the Minister for Health and Social Services on 19th March 2024 (Appendix B); and
- f. NOTED** the JCC's Accountability Map for information (Appendix C).

Director of Public Health Annual Report 2023/24: Our Future, Our Voice - Babies, Children and Young People of Gwent

Tracy Daszkiewicz (TD), Director of Public Health, informed the Board that the Director of Public Health (DPH) holds a statutory requirement to produce an annual report. The Board noted that the Annual Report was a vehicle for informing local people about the health of their communities, as well as providing necessary information for decision-makers in local health services and authorities on health gaps and priorities that need to be addressed.

TD advised that this year's report, had been informed by families, children, and young people across Gwent, with the intention of producing a report written by those who had informed the report about their experiences. TD provided examples of the findings from the engagement and noted that individuals had shared their stories and experiences of living through and coming out of the Covid-19 pandemic. The Board noted that the report concludes with an open letter to all asking that their voices and instructions on how services could be better delivered were listened to and in turn would enable the outcomes for children and young people in Gwent to improve.

In particular the following was noted as key priorities:

- Vaccination and how children would be kept safe
- Challenging the word gap and the difference in language development across the population by area of deprivation
- Infant mortality
- Obesity and healthy weight and the influences of trauma on weight to remove the stigma associated with this.

TD noted that when engaging with older children it was identified that there was a need to better understand what a healthy relationship was and also the giving and hearing of consent. TD also noted that more work was required in order to address the following themes:

- teenage pregnancies were higher than the Welsh average
- Vape use.
- Children's perspective of safety and contextual safeguarding

TD reflected that all children and young people were very knowledgeable about climate change and the impact upon specific health conditions, such as asthma. In terms of next steps the Board were informed that further engagement with children and young people on the development a babies and children young people's strategy would take place.

The Board provided helpful feedback on the report and advocated that the report be shared with partners and wider groups through various fora.

The Board **NOTED** the report.

**ABUHB
2703/16**

Cancer Services Annual Report 2023

James Calvert, (JC), Medical Director, reminded the Board that within the Integrated Medium-Term Plan 2023-26, the Board had set out a priority to progress an action to maximise cancer outcomes for the population of Gwent . JC noted that whilst progress has been made in recent years, the Health Board was committed to accelerating the rate of improvement and that this year's annual report described the key achievements, challenges and progress over the past 12 months of a key strategic priority of the Health Board.

In particular the following points were noted:

- Public health plan had been developed to improve the updates in respect of cancer screening and addressing harmful behaviours
- Patient steering group had been established and was informing the design of cancer pathways
- Cancer self-optimisation tool was in use
- Integrated support workers to support patients through their treatment were in place
- Significant challenges for some cancer pathways and the requirement for cancer treatment to start within 62 days against a backdrop of increased cancer referrals
- Reduction in the backlog of patients on the single cancer pathway
- Corporate Cancer team had moved to core clinical services and this has eradicated urgent pathology waits.
- YYF Breast Unit has opened and the satellite radiotherapy unit at Nevill Hall was progressing well.

The Board **NOTED** the report and welcomed the update on work progressed to-date.

**ABUHB
2703/17**

Quarter 3 - Performance and Outcomes Report

Hannah Evans (HE), Director of Strategy, Planning and Partnerships provided the Board with a progress report against the Integrated Medium-Term Plan (IMTP) 2023/26. HE advised that the report summarised the progress during Quarter 3, through the following:

- Outcomes Framework through Life Course approach
- Clinical Futures Priority Programme progress
- Ministerial priorities progress
- A review of the planning scenario

In particular, the following points were noted:

- Improvement against the best start in life priority 1, particularly notable increase in breastfeeding uptake
- Cancer pathway improvements
- Good progress in eliminating waits over 156 weeks as of the of end January 2024, with 11 patients waiting for treatment compared to 500 at the same time last year

In terms of the challenges the following was noted:

- Waiting lists for planned care continue to grow in 3 speciality areas
- ND pathway for under 5-year-olds and a 600% increase of referrals in the past few years
- Adult Mental Health Service part 1a and 1b measures
- Urgent and Emergency Care System

In terms of broader performance the Board noted that:

- Endoscopy Unit has resulted improvements in cancer performance
- Bed reconfiguration implemented
- Establishment of the YYF Breast Unit
- Phase 1 of Tredegar development had been completed with Phase 2 commenced
- Regional cataracts provision in place
- Launch of the joint strategic needs assessment
- Acute frailty model within urgent and emergency care progressed

Nicola Prygodzicz (NP), Chief Executive, advised that despite work being undertaken across the CAMHS service there remained specific challenges around part A and noted that a proposal to address this was being developed for the ND pathway. The Chair requested that an update be provided to a future Board on the ND action plan.

Action Chief Operating Officer to provide an update on the ND Action plan at a future Board meeting.

The Board **NOTED** the report and the performance position across the IMTP.

Jennifer Winslade (JW), Director of Nursing, provided the Board with a progress report during Quarter 3. JW advised that public and transparent reporting was a key consideration and a quality outcomes framework had been developed and would be shared with Improvement Cymru.

JW advised that areas of escalation for the Mental Health & LD Division and the Urgent Care Division had been included and noted that in respect of the Mental Health & LD Division, whilst the completion of the 30-60-90 day action plan was complete further work was required to embed actions within sustained working practices.

The Chair expressed concern around the increase of violence and aggression against staff and noted the work that had been ongoing including the need for mandatory training to be prescribed from April. Peter Carr, Director of Therapies and Health Sciences, advised that from a staff viewpoint there was an improved understanding that such incidents were taken seriously and would be a key focus for the future.

The Board **NOTED** the report.

**ABUHB
2703/19**

Finance Performance Report – Month 10, 2023/24

Rob Holcombe (RH), Director of Finance and Procurement, presented the paper outlining the financial performance at the end of January 2024. (Month 10)

RH noted the following:

- Deficit of £48.2 m which was an improvement to the forecast of £52.9 m as at month 10
- Capital budget was breakeven
- Public sector performance was above minimum level of 95%
- Assumptions included :
 - £88m would be retained and includes the conditional funding assumptions
 - Full funding of pay awards
- An improvement in the level of deficit since month 9 that resulted in an overall reduction of £3.5m to the deficit.

In terms of month 11, RH provided a verbal update and advised that additional funding had been received from Welsh Government that had reduced the deficit to £49m.

The Board **NOTED** the Month 10 Financial Performance.

ABUHB 2703/20	<p>Decarbonisation Update</p> <p>Rob Holcombe (RH), Director of Finance and Procurement, presented the report that provided an update on the Decarbonisation Programme, including progress against the Decarbonisation Action Plan and progress made in achieving the National Programme goal of Net Zero emissions by 2050 and for the public sector to be Net Zero by 2030 .</p> <p>The Board NOTED the progress update.</p>
ABUHB 2703/21	<p>Strategic Risk Report, March 2024</p> <p>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. The Board noted that two risks had been deescalated in the period and would be managed at a divisional level, with a further two risk scores being reduced but maintained on the corporate risk register. The Board noted that new strategic risks had been introduced on the corporate register in respect of performance and financial planning.</p> <p>The Board NOTED the Strategic Risk Report for March 2024.</p>
ABUHB 2703/22	<p>Strategic Partnership Updates: -</p> <p>a. Public Services Board</p> <p>Tracy Daszkiewicz (TD), Director of Public Health, provided a verbal update on the Public Service Board activities. TD advised that a learning event had been held last month and that the Health Board was the only representative from the Gwent PSB. The Board advised that discussions continue regarding achieving cohesion across the strategic partners to better serve the population.</p> <p>The Board NOTED the update.</p> <p>b. Regional Partnership Board</p> <p>Hannah Evans (HE), Director of Strategy, Planning and Partnerships, provided a verbal update on Regional Partnership Board activities with the latest meeting being held on 19th March 2024. HE advised that the RPB had received a detailed update on the governance review and that further work was to be completed in determining priorities and how strategically these matters were progressed. From the data it was noted that the following themes were emerging; prevention, longer term, early years and citizen needs.</p>

	<p>The Board noted the utilisation of the RIF had been discussed and that tapering wouldn't be applied until 2027 and that the RPB had endorsed a staged evaluation approach. HE advised that there was a small element of RIF funding that had not been deployed and the Children's Partnership would address this.</p> <p>The Board NOTED the update.</p>
<p>ABUHB 2703/23</p>	<p>Executive Committee Chair's 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 18th January 2024 – 15th March 2024. From the report the Board attention was drawn to the following areas:</p> <ul style="list-style-type: none"> • Diabetes • CAhMS / ND additional capacity • MS Business case to be considered at a future board • Maternity and neonatal services • Cardio vascular prevention programme being developed • Electronic prescribing medicines programme <p>The Board NOTED the report.</p>
<p>ABUHB 2703/24</p>	<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- 22nd January 2024 • Partnerships, Population Health and Planning Committee – 31st January 2024 • Audit, Risk and Assurance Committee – 8th February 2024 • Mental Health Act Monitoring Committee -21st February 2024 • People and Culture Committee – 22nd February 2024 • Patient Quality, Safety and Outcomes Committee – 23rd February 2024 • Shared Services Partnership Committee: 18th January 2024.
<p>ABUHB 2703/25</p>	<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>

NP advised of the WHSCC cost pressures and that further work was ongoing as to how costs could be further reduced given the financial context

In terms of EASC, NP advised of the work in respect of the EMRTS service and noted that at present there was an unmet need in Wales and the current base configuration for the service did not meet demand. NP provided an overview of the matter and the three phases of engagement. The Board noted that Llais had raised concerns in relation to the engagement approach and that strong representations had been made by a range of stakeholders including the Powys community. NP advised that discussions continue with a view to reaching a decision by the end of April, noting that the decision would need to be agreed by the Joint Committee and individual Health Boards. NP noted that an extra ordinary meeting may be required prior to the end of April to receive the outcome of the consultation.

In response to a question, clarification was sought on the thrombectomy rate and was advised that the rate across Wales was low and the aspiration was for a more sustainable plan with discussions continuing regarding Cardiff & Vale UHB becoming a thrombectomy centre for South Wales.

The Board **NOTED** the report.

ABUHB
2703/26

Date of the Next Meeting:

- Wednesday 22nd May 2024