

ANEURIN BEVAN UNIVERSITY HEALTH BOARD

Minutes of the Partnerships, Population Health, and Planning Committee (PPH&PC) held on Monday 25th April 2022 at 9.30 am via Microsoft Teams

Present:

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| Ann Lloyd | - Chair |
| Katija Dew | - Independent Member |
| Richard Clark | - Independent Member |
| Sarah Aitken | - Director of Public Health & Strategic Partnerships |
| Chris Dawson-Morris | - Deputy Director of Planning |
| Phil Robson | - Co-opted Member, Special Advisor |

In attendance:

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| Rani Mallison | - Director of Corporate Governance |
| Glyn Jones | - Interim Chief Executive Officer |
| Robert Holcombe | - Director of Finance Procurement and Value Based Health Care |
| Neil Miles | - Clinical Futures Programme Director |
| Stuart Bourne | - Consultant in Public Health |
| Mathew Lane | - Energy and Carbon Manager |
| Emma Guscott | - Secretariat |

Observers:

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| Arain Howells | - Management Graduate, Planning |
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Apologies:

- | | |
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| Nicola Prygodzicz | - Director of Planning and IT (Chris Dawson-Morris representing) |
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1	Preliminary Matters
PPHPC 2504/01	Apologies for Absence

	<p>The Chair welcomed everyone to the meeting. The Committee had not received any written questions prior to the meeting.</p> <p>Apologies for absence were noted.</p>
PPHPC 2504/02	<p>Declarations of Interest</p> <p>There were no Declarations of Interest raised to record.</p>
2	Committee Governance
PPHPC 2504/03	<p>Committee Terms of Reference & Operating Arrangements</p> <p>Rani Mallison, Director of Corporate Governance, presented the paper to the Committee. The Committee received and endorsed the Terms of Reference (ToR) and operating arrangements, following consideration by the Board in March 2022.</p>
PPHPC 2504/04	<p>Committee Priorities 2022/23</p> <p>Rani Mallison, Director of Corporate Governance, provided a high-level overview of the Committee's priorities. The priorities for the Committee for 2022/23 were outlined as, but not restricted to, the following:</p> <ul style="list-style-type: none"> • Evaluation of the Health Board's Clinical Futures Model. • IMTP priority programmes. • Strategic partnership planning, including regional planning. • Civil contingencies act and business continuity plan. • Engagement strategy refresh. • Any arising strategic risks and gaps in assurance, linking to the Board Assurance Framework (BAF). <p>The outlined priorities would inform the Committee's workplan, which would be presented to the Board in May 2022.</p> <p>Committee members requested that the governance of the Regional Partnership Board (RPB) be included in the ToR and Committee work plan. Rani Mallison informed members that there was an identified need for further development of the Partnership Governance Arrangements. Action: Governance of RPB to be included in Committee priorities for 2022/23. Rani Mallison</p> <p>The Chair discussed the importance of the Health Board, as a strategic partner of the RPB, being able to have visible oversight of the RPB's activities.</p> <p>The Committee approved the Priorities for 2022/23, with amendments as noted.</p>

3	Strategic Partnerships
PPHPC 2504/05	<p>Overview of Work of the Gwent Public Service Board (PSB), including an update in respect of Developing a Marmot Region</p> <p>Sarah Aitken, Director of Public Health and Strategic Partnerships, introduced the newly appointed Consultant in Public Health, Stuart Bourne. It was noted that Stuart Bourne would be taking a lead in delivering on the proposal that the Gwent area should become a Marmot Region.</p> <p>The proposal outlined the rationale for asking the PSB to become a Marmot region. The programme would focus on the wider determinations of health, and the focus of the Minister for Health and Social Services on the actions of the NHS to tackle health inequalities and health improvement. The aim of the programme would be to include the PSB work within the Health Board's Integrated Medium Term Plan (IMTP).</p> <p>The Committee noted that the PSB Wellbeing Assessment had been considered by Board members in January 2022. The PSB would complete an analysis based on the Wellbeing assessment, and this would inform the Wellbeing Plan and new collective PSB objectives. Once the objectives were finalised, the Health Board would use them to help inform its objectives.</p> <p>The PSB had recently agreed three priorities. These were as follows:</p> <ul style="list-style-type: none"> • Health and Wellbeing, and Inequalities, led by Sarah Aitken • Climate Change and Biodiversity, led by National Resources Wales (NRW) • Community Cohesion, including substance misuse, led by the Chief Constable. <p>The Chair queried the fourth priority that had been previously discussed. Sarah Aitken informed the Committee that discussions had taken place regarding the economy, and there was a view that the development of the economy sits with Cardiff City Deal region. Action: The Chair requested further discussions with the PSB regarding the development of the economy, as this was fundamental to the Health Board becoming part of the Foundational Economy as required by Ministers. The Health Board was not party to discussions about the City Deal. Sarah Aitken</p> <p>Sarah Aitken informed members that the Health Board's plan was to deliver a response analysis to the PSB in June 2022 and the Well-being Plan in September 2022, ensuring legal compliance with the Well Being of Future Generations Act. The planned proposal to be taken to the</p>

	<p>PSB in June was to develop a leadership group, to include members of the PSB with delegated responsibility to make decisions between meetings and oversee the implementation of projects outlined in the paper. The Health Board proposes that this Group be chaired by a Chief Executive of a Local Authority partner, with members including Sarah Aitken, Chief Executive of Gwent Association of Voluntary Organisations (GAVO), Chief Executive of Tai Calon and a Welsh Government (WG) PSB representative. The Chair of the Committee welcomed the idea of a leadership group. The Chair requested consideration of the role of the WG representative, suggesting that the representative be an 'observer'. The ability of the PSB to provide funding for the outlined proposal was questioned. Sarah Aitken informed the Chair that funding would be about core services and organisations being committed to provide what is agreed. Aligning core activity was one of the main aims.</p> <p>Katija Dew, Independent Member, supported the wider approach and noted she would be keen to observe further discussions between Sarah Aitken and Professor Michael Marmot. Sarah Aitken informed the Committee that a communications plan was being developed, to strengthen community involvement. The Chair stated that communications and engagement were important, and that the Committee would require an overview on how engagement will inform the next steps for the programme. Action: The Communications plan to be included in the paper being presented to the PSB in June. Any papers presented at the PSB to come to future meetings for discussion. Sarah Aitken</p> <p>The Chair requested information explaining the difference between the Foundational Economy programme, being an anchor institution and how this fitted with the Marmot proposal. Sarah Aitken</p> <p>Phil Robson, Independent Member, supported the initiative and queried what would be done differently through this proposal. Sarah Aitken informed members that there would be a Wellbeing plan with clear focus and commitments to doing things differently. The plan would include collective SMART objectives, clearly outlining each organisations required contribution.</p> <p>The Committee endorsed the approach outlined in the paper and thanked Sarah Aitken.</p>
4	Strategic Planning and Developments
PPHPC 2504/06	<p>Integrated Medium Term Plan, 2022-2025</p> <p>Chris Dawson-Morris, Deputy Director of Planning, supported by Neil Miles, Clinical Futures Programme Director, presented an overview of</p>

the Health Board's Integrated Medium Term Plan (IMTP). Members were informed of the Health Board's plans and intended delivery of the IMTP. The main pillars of delivery were discussed.

Action: Chris Dawson-Morris informed members that a paper on the Health Board's revised performance reporting, linking to the development of the Outcomes Framework, would be presented to the Committee in July. **Chris Dawson-Morris**

Action: An analysis of the 'first look' and implementation of the Outcomes Framework to come back to the Committee at the end of the first Quarter. **Chris Dawson-Morris**

Chris Dawson-Morris discussed the Health Board's Delivery Framework and Outcomes, informing members of the Health Board's mission to '*reduce the health inequality experienced by our communities through the improvement of population health*' and discussed how this linked to the development of Gwent becoming a Marmot region. The distinction between population, system and individual outcomes was discussed. This piece of work gave an overview of outcomes at a system level.

For each of the Health Board's 'life course priorities', the planning team intended to develop a series of proxy measures, linking to Welsh Government (WG) Outcomes Framework and other indicators, showing system performance against the Health Board's priorities. This report had been discussed with Executive team members. A point to note was the ability to analyse counterbalancing measurements, for example, analysing both discharge data and re-admission data. **Action:** A report would be presented to the Committee each quarter, linked to the Board Assurance Framework (BAF), updating members on progress against each priority area. An example of the report was displayed to members. **Chris Dawson-Morris** Chris Dawson-Morris welcomed feedback from members on the measures outlined in the presentation.

Phil Robson, Special Advisor, queried how the teams would ensure that this reporting was connected throughout the organisation, and how it would flag any potential issues, enabling a deep dive into potential cause. Chris Dawson-Morris informed members that the purpose of the Outcomes framework is to help the Health Board ask the important questions, be able to interpret data, drill down and enquire based on headline measures. This also links with Marmot work and working with partnership organisations.

The Chair discussed indicative measures and requested that the measures reflect the strategy; and when looking at the service delivery model, 'what is perfection?' and what makes the greatest difference to achieve perfection in terms of outcomes. A priority that required a

further look, was outlined as 'Priority 4 Older Adults'; this could be used to look to improve care for people in their own or housing association accommodation.

The Chair queried how the Health Board could influence WG, in terms of measuring performance against outcomes. Chris Dawson-Morris informed the committee that Health Board Planning team members were part of National Measures Groups with the intention to influence a strategic focus. Katija Dew, Independent Member, stated the importance of the Health Board measuring what is important for its outcomes and using it to influence system change.

Neil Miles, Clinical Futures Programme Director, presented an update on the Clinical Futures programme and the delivery of the IMTP to the Committee. The Clinical Futures identity had evolved, with slight changes to the branding to restrengthen messaging on how to access services. A huge communications drive had taken place, outlining both services provided and Health Board employment opportunities, through social media platforms and the 'Work with Us' roadshows.

Neil Miles discussed the Health Board's priority programmes, and the importance of governance and ability to influence when working alongside partnership organisations, helping achieve the key priorities. The Committee noted the redesigning of services for older people. Led by James Calvert, Medical Director, the previous COTE and Frailty programmes were being combined as one service for patient care in and out of hospital, aiming to deliver consistency of services across the Health Board area. **Action:** Further detail on the establishment of this programme of work to come back to the Committee. **Neil Miles**
The Committee was informed that the Clinical Futures Programme Board would oversee and ensure clear lines of communication between each priority, also establishing clear links with staff side and the Community Health Council (CHC). Further work was being undertaken by Rani Mallison, Director of Corporate Services, around the governance of other linked reporting groups. Rani Mallison informed members that the Clinical Futures Programme would be monitored through this Committee and the newly established Finance and Performance Committee, providing assurance to the Board. A proposal would be going to the Board in May for the establishment of an Executive Committee, as a further reporting mechanism to the Board.

Phil Robson requested a further look at the language used in the Clinical Futures programme, to replace 'cluster development' to the 'development of NCNs'. **Action:** Neil Miles to change the reference to the NCNs, with reference to WG language as a subtitle. **Neil Miles**

	<p>The Chair requested a formal report explaining Same Day Emergency Care (SDEC) and the consequences for the rest of the emergency workload to Board members. Action: A report on SDEC and its associated assumptions to come back to the Committee. Neil Miles</p> <p>Chris Dawson-Morris gave a special thanks to Jennifer Keyte, Planning and Service Development Manager, for her contribution to the work underpinning the report.</p> <p>The Chair thanked the teams for the update, the good work being undertaken, and welcomed regular updates from the team.</p>
<p>PPHPC 2504/07</p>	<p>Decarbonisation Strategy and Update of Progress to-date</p> <p>Chris Dawson-Morris introduced an overview of the Health Board's commitment to produce a strategy on decarbonisation. Members were informed that a draft Decarbonisation Framework was being developed and would be shared with the Health Board and Welsh Government (WG) on completion.</p> <p>Mathew Lane, Energy and Carbon Manager, discussed several key drivers to reducing energy and water consumption, wider organisational carbon emissions and their environmental impacts, which would influence the Health Board's Decarbonisation agenda. The key drivers include environmental and social, financial, and regulatory influences.</p> <p>The WG Decarbonisation Delivery Plan had been published in 2021, and the Health Board's Decarbonisation Framework aimed to address the objectives outlined in that document. Members were informed that the framework would be a collaboration between the energy and carbon and clinical futures teams, becoming a 'Live working document' with whole system responsibilities. The framework would be working towards the WG aspiration of a net zero position by 2030, with an NHS Wales requirement of a 34% reduction target. Aligning to the NHS Wales Decarbonisation Strategic Delivery Plan, that identifies 46 national objectives, there is a Health Board requirement for annual reporting of progress against objectives to WG.</p> <p>Members were informed that, excluding of the Grange University Hospital (GUH), over the last decade the Health Board had made consistent progress on the reduction of carbon emissions and energy consumption from its estate. GUH data would be included in 2022/23 analysis. Action: Presentation to be shared with members. Mathew Lane/Secretariat</p>

	<p>Subject to further consultation, draft plans suggested that progress against the Decarbonisation Framework be reported through a newly formed Decarbonisation Programme Board, providing governance of reporting through appropriate forums.</p> <p>Members were informed that from 2022/23 the Health Board's Estates Strategy would be superseded by the Decarbonisation Framework. A list of potential energy projects had been identified, with the Health Board's intention to deliver these through the Re:Fit Cymru Programme.</p> <p>Robert Holcombe, Director of Finance Procurement and Value Based Health Care and Executive lead for Decarbonisation, informed members of the Health Board's refreshed approach and how this would link to the Integrated Medium-Term Plan (IMTP).</p> <p>Katija Dew, Independent Member, queried whether the outlined metrics included the impact of agile working and the carbon emissions from shared home and office working. She also highlighting the cost-of-living crisis caused through increased energy and gas prices and the consequences for communities. Mathew Lane informed members that early discussions had taken place with WG to investigate how data could be captured from the move to agile/home working. The Health Board was aiming to refresh and invigorate its 'Going Green' information, with help and advice for staff members.</p> <p>The Chair requested an opinion on whether or not the targets outlined were achievable. Members were informed that the biggest challenge would be the Health Board's influence on procurement and the supply chains used.</p> <p>The Committee thanked Chris and Mathew for the presentation and the work undertaken.</p>
<p>PPHPC 2504/08</p>	<p>Regional Planning Update</p> <p>Chris Dawson-Morris gave an overview of the paper and an update to the Committee on the progress made in regional planning.</p> <p>Members were informed that there would be a possible delay on the 'go live' date of 14th of June 2022 for Vascular services reconfiguration due to current operational risk, based on bed availability and system pressures. A risk-based decision would be made closer to the 14th of June 2022.</p> <p>The Chair discussed the delay in Vascular Services. Chris Dawson-Morris informed the Committee that the commitment was to 'go live'</p>

	<p>over the next few months and that the Health Board would push for this commitment to go ahead. The Chair informed members that this would be raised for discussion at the upcoming meeting on regional working with Chairs of the other Health Board's.</p> <p>Good progress had been made on development of regional Ophthalmology service plans and development of a Regional Cataract Centre. Positive conversations had taken place between the Health Board, Cwm Taf Morgannwg University Health Board and Cardiff & Vale University Health Board.</p> <p>The Chair thanked the ABUHB Planning Team for their determination in implementing discussions and actions in respect of regional services and regional working for the population, a key priority for the Minister for Health and Social Services Wales.</p> <p>Glyn Jones, Interim Chief Executive Officer (CEO), echoed thanks to the planning teams and informed members that the CEO of each Health Board were meeting in the coming week to agree regional working priorities and to discuss progress on Vascular services, alongside the priorities on Ophthalmology and Orthopaedics.</p>
5	Other Matters
PPHPC 2504/09	<p>Any Other Urgent Business</p> <p>None noted.</p>
PPHPC 2504/10	<p>Date of the Next Meeting</p> <p>The date and time of the next meeting was noted as Thursday 7th July 2022, at 09:30am via Microsoft Teams.</p>