

**COFNODION Y CYFARFOD PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD
CYMERADWYO / APPROVED MINUTES OF THE PEOPLE PLANNING &
PERFORMANCE ASSURANCE COMMITTEE MEETING**

Date and Time of Meeting:	29 th October 2020 at 9.00 a.m.
Venue:	Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

Present:	<p>Professor John Gammon, Independent Member (Committee Chair)</p> <p>Mr Owen Burt, Independent Member (VC) (part)</p> <p>Mr Maynard Davies, Independent Member (VC)</p> <p>Cllr. Simon Hancock, Independent Member (VC)</p> <p>Ms Anna Lewis, Independent Member (VC)</p> <p>Ms Ann Murphy, Independent Member (VC)</p>
In Attendance	<p>Mrs Lisa Gostling, Director of Workforce & OD (PPPAC Joint Executive Lead)</p> <p>Mr Huw Thomas, Director of Finance</p> <p>Mr Andrew Carruthers, Director of Operations (VC)</p> <p>Mrs Ros Jervis, Director of Public Health (VC)</p> <p>Mrs Joanne Wilson, Board Secretary (VC)</p> <p>Mr Rob Elliott, Director of Estates, Facilities & Capital Management (VC) (part)</p> <p>Mr Keith Jones, General Manager (VC)</p> <p>Mrs Libby Ryan-Davies, Transformation Director (VC) (part)</p> <p>Mr Anthony Tracey, Assistant Director of Digital Services (VC) (part)</p> <p>Mr Paul Williams, Assistant Director of Strategic Planning (VC) (part)</p> <p>Mr Paul Williams, Head of Property Performance (VC) (part)</p> <p>Mrs Claire Williams, Committee Services Officer (Secretariat)</p>

Agenda Item	Action
PPPAC (20)46	
<p>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</p> <p>Professor John Gammon welcomed all to the meeting. No apologies for absence were received.</p> <p>Prof. Gammon paid tribute to Mrs Karen Miles, Director of Planning, Performance & Commissioning, who had recently retired following eleven years services with Hywel Dda University Health Board at Executive Director level. Mrs Miles had been the Executive Lead for the People, Planning & Performance Assurance Committee (PPPAC) and formerly the Business, Planning & Performance Assurance Committee (BPPAC) since 2015, and during this time had been extremely committed to the work of both her portfolio and to her team, who held her in high regard. Mrs Miles always strived to meet the demands of various Independent Members in relation to performance, planning and financial reports. On behalf of PPPAC, Prof. Gammon wished Mrs Miles good health and a long and happy retirement.</p> <p>Prof. Gammon expressed concern regarding the substantial agenda for today's meeting and the challenge to scrutinise over 600 pages of significant paperwork within a 2.5 hour meeting. Members noted that a</p>	

	meeting has been arranged with the PPPAC Executive leads and Prof. Gammon on 04/11/20 to discuss the agenda and forward work plan. PPPAC's focus on people, planning and performance was emphasised, together with the importance of recognising the pressure staff are under. The commitment of staff to the work of PPPAC and the population that we serve was acknowledged. Mrs Joanne Wilson informed Members that a meeting would be held imminently between the Hywel Dda University Health Board (HDdUHB) Chair, and Committee Chairs to review the management of committees in light of the second wave of COVID-19.	
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PPPAC (20)47	DECLARATIONS OF INTEREST	
	Cllr. Simon Hancock declared an interest in Bluestone Resort, advising that should a discussion be undertaken in relation to field hospitals, he would withdraw from the meeting.	

PPPAC (20)48	MINUTES OF THE PREVIOUS MEETING HELD ON 27th AUGUST 2020	
	RESOLVED – that the minutes of the People, Planning & Performance Assurance Committee (PPPAC) meeting held on 27 th August 2020 be APPROVED as an accurate record.	

PPPAC (20)49	TABLE OF ACTIONS AND MATTERS ARISING FROM MEETING HELD ON 27th AUGUST 2020	
	<p>An update was provided on the Table of Actions from the meeting held on 27th August 2020, with confirmation received that all actions are complete or in progress. The following updates were provided:</p> <p>PPPAC 20(23) Capital Estates & IM&T Sub-Committee Update Report – Prof. Gammon reassured Members that he had discussed with the Chair of QSEAC an agreed way forward to understand how digital development will impact in terms of patient outcomes.</p> <p>PPPAC 20(29) Welsh Language Standards: Impact on Workforce Arrangements – Mrs Lisa Gostling confirmed that staff are in the process of identifying all of the 144 documents on the website and distinguishing those currently under translation. Mrs Gostling undertook to provide updated figures to Ms Anna Lewis w/c 02/11/20.</p>	LG

PPPAC (20)50	CAPITAL ESTATES & IM&T SUB-COMMITTEE UPDATE REPORT	
	<p>The Committee received the Capital Estates & IM&T Sub-Committee (CEIM&TSC) update report from its meeting held on 22nd September 2020, noting that the capital funding position is similarly reported to Finance Committee.</p> <p>Mr Paul Williams highlighted the following:</p>	

- Two additional All Wales Capital Programme allocations of funding have been received, £0.350m for advance fire compliance works at Worthybush General Hospital (WGH) and £0.192m for COVID-19 digital devices.
- Discussions regarding Penlan have been undertaken, with it recognised that this necessitates a review to ensure design proposals are fit for purpose. Audit recommendations are being addressed in a timely manner.
- The report of the Auditor General for Wales on lessons learnt following the conclusion of refurbishment work at Ysbyty Glan Clwyd, Betsi Cadwaladr UHB, had been discussed and will be considered at the Audit & Risk Assurance Committee (ARAC) in December 2020 to provide assurance that work around lessons learnt is being addressed.
- Three digital imaging schemes have been successfully completed despite the impact of COVID-19. However, risks remain regarding the four computerised tomography scanners, with further discussions with Welsh Government (WG) to be undertaken regarding the next possible allocation of funding.
- Revised CEIM&TSC Terms of Reference are due to be presented to the December 2020 PPPAC meeting.

Questions were invited and in response to Cllr. Hancock’s query relating to the backlog of laptops for staff and whether funding had now been received, Mr Williams confirmed that an additional sum of £200k had been received to enable the laptops to be purchased. Members were pleased to note that 1,000 laptops have been rolled out to staff since March 2020, and a bid submitted to WG in order to fund digital devices for health visitors and school nurses.

Whilst welcoming the additional funding, Prof. Gammon queried whether the increased demands relating to COVID-19 in addition to the discretionary capital programme (DCP) have been mapped. In response, Mr Williams confirmed that this matter is discussed regularly, and should the funding applications submitted to WG be successful, the impact of COVID-19 would be limited. However, should funding not be received, the effect on the DCP will be significant. Prof. Gammon emphasised that should any risks present from this, that PPPAC is made aware in order for these to be escalated.

Prof. Gammon requested clarity on whether the RAG rating status of projects are in a worsening or static position, and in response Mr Williams confirmed that these are in a static position.

The Committee noted the current constraints regarding All Wales capital, which has been further limited by the need to fund COVID-19 related issues, noted that mitigations are in place, and noted the capital projects included within the report currently reporting a high risk.

The Committee **RECEIVED** and **NOTED** the Capital, Estates and IM&T Sub Committee update report.

PW

(20)51	<p>The Committee received the Information Governance Sub-Committee (IGSC) update report from its meeting held on 2nd October 2020.</p> <p>Prof. Gammon highlighted, on page 1 of the report, reference to future meetings of the IGSC containing an In Committee section, which is not referenced within IGSC's Terms of Reference. It was agreed for Mrs Wilson and Mr Anthony Tracey to review these in light of the introduction of an In Committee session, either for approval under Chair's Action or for presentation to the December 2020 PPPAC meeting for ratification.</p>	JW/AT
	<p>The Committee RECEIVED and NOTED the Information Governance Sub-Committee (IGSC) update report.</p>	

PPPAC (20)52	<p>WORKFORCE & ORGANISATIONAL DEVELOPMENT UPDATE</p>	
	<p>The Committee received a report relating to the Workforce Plan, updating Members on a number of factors which have impacted on the Workforce Plan during 2020-21. Members noted that the Workforce Plan is generally developed by assessing the current workforce, the workforce required in the future and actions which need to be taken to secure longer term workforce sustainability.</p> <p>Mrs Gostling explained that the report attempts to highlight the factors which have contributed to this year's workforce plan and to highlight the worst case scenario which is linked to delivering on all demands and planning for the additional 501 beds required to support 613 COVID-19 inpatients, highlighting the three staffing areas where the greatest workforce deficits are understood i.e. registered nurses, health care support workers (HCSW) and hotel facilities staff. Work is underway to understand the Allied Health Professions and Medical workforce deficits and this will be reported on as patient acuity models are agreed for field hospitals. As HDdUHB is tracking the Swansea University COVID-19 model in terms of expected demand which indicates the worst case scenario for HDdUHB being the need for an additional 180 beds, the first part of the Workforce Plan will be to ensure we can safely staff these additional beds.</p> <p>In terms of the Workforce Demand Breakdown data contained within page 2 of the report, Members noted the workforce demand seeks actions to not only provide a workforce for additional COVID-19 beds, but also to fill recruitment gaps, some of which have been present for a number of years. Whilst recognising that to implement the Plan would require a platinum standard level of workforce, it has been agreed to focus on the additionalities that will be required rather than all the previous work that has been undertaken to date. All HCSW and facilities staff recruited to support the COVID-19 demand have been employed on bank contracts, thereby limiting financial implications. Conversations are being held regarding the introduction of Band 4 staff to work within clinical areas to release nursing staff to be deployed to surge beds. The workforce demand of the surge beds within the field hospitals is built upon a 1:10 ratio, however work is being undertaken to ascertain what a ratio of 1:15 would entail should there be a need to stretch the workforce. To support the stretch in the registered</p>	

nurse workforce, HCSW numbers would need to increase and figures indicate a shortage of 102.80 WTE. Discussions are also being held with Executive colleagues in regard to supporting the gap of 34.26 WTE registered nurses required to safely staff the additional 180 beds, who will each lead conversations about the impact on business if corporate departments were to close or reduce to enable staff to be deployed to patient care. However, it was noted that any decisions made would be presented to Board with Mrs Gostling, Mr Andrew Carruthers and Mrs Mandy Rayani considering the matter further before any decisions are made in regard to the ceasing of any services. County staff are identifying employees for wards and field hospitals to enable plans to be prepared and in place, following which a set of principles will be drawn up by Executive Directors.

Referring to the final section of the report, Mrs Gostling highlighted the impact should staff sickness levels and self-isolation requirements increase, and it was noted that each county is being presented with the information relating to their area in order to understand the potential shortfalls for each profession in order to be able to prepare a local solution.

It was noted that whilst agency workers within Ceredigion remain constant, there has been a reduction within Carmarthenshire and Pembrokeshire linked to partnership agreements in place. Work is being undertaken with agencies to put in place a similar model to that used within Ceredigion.

Ms Anna Lewis referred to the possible increase in sickness levels due to COVID-19, and queried the assumptions in place in terms of staff psychological support during the second wave. Mrs Gostling emphasised that staff wellbeing is at a critical point with staff feeling increasingly anxious and tired. However, additional capacity has been put in place within the Wellbeing Team to support staff, and discussions are being undertaken with both the Chair and Chief Executive regarding staff morale.

In response to any collaborative work being undertaken with other health boards who may be competing to employ staff, in particular nurses and clinicians, Mrs Gostling confirmed that HDdUHB is liaising with Swansea Bay UHB on a regular basis in relation to joint working and is exploring the re-introduction of the local agreement made at the start of COVID-19 that we would not approach each other's staff. Discussions are also being undertaken with the military in regard to a pilot scheme whereby medical technicians within the Territorial Army spend two weeks with HDdUHB as part of their training exercises; in addition, discussions are being undertaken with St John Ambulance. Members were also advised that following a discussion with Mrs Rayani, Prof. Gammon had raised the potential of placing student nurses within field hospitals.

Prof. Gammon commented that the data suggests the acuity of patients in the second wave differs to that of the first, therefore leading to a possible different impact upon staffing. Mrs Gostling concurred, advising that the

	<p>impact of patients having lower acuity, would be an expectation that field hospital requirement would reduce.</p> <p>Prof. Gammon thanked Mrs Gostling for the comprehensive overview and for providing assurance on the series of measures currently in place to reduce the level of risk, and with a clear pathway to ensure that HDdUHB can respond to the challenge in a planned way.</p> <p>The Committee was ASSURED by the Workforce Plan Report.</p>	
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<p>PPPAC (20)53</p>	<p>PSYCHOLOGICAL WELLBEING REPORT</p> <p>The Committee received the Psychological Wellbeing Service Report, providing an update on the service evaluation of the Staff Psychological Wellbeing Service (SPWBS). Phase one retrospectively analysed existing satisfaction and client outcome data from 1,818 referrals for one to one psychological support between 1st April 2014 and 31st March 2019. Phase two involved a cross-sectional online survey which explored the level of awareness and potential barriers to using the SPWBS across HDdUHB from 235 respondents between 9th October 2019 and 3rd February 2020.</p> <p>Cllr. Hancock referred to the demographic profile of clients contained within page 6 of the report, highlighting that less than 1% of clients who had accessed the service were reported as “all other ethnic groups” and suggested that this be referred to the Black, Asian & Minority Ethnic (BAME) Advisory Group. Mrs Gostling undertook to progress this to investigate what, if anything, is holding back this cohort of staff from utilising the service. Members noted that BAME nationally also provides their own support services, including a 24 hour care line, which staff may be using as an alternative.</p> <p>Noting that the report relates to the pre-COVID-19 period, Ms Lewis emphasised that the service should be sustained and forward planned to take into account the likely demand upon the SPWBS over the next few years.</p> <p><i>Mr Owen Burt joined the PPPAC meeting</i></p> <p>Mr Maynard Davies referred to the fifth recommendation on page 2 of the covering SBAR “To ensure that the service is adequately resourced to avoid waiting times and delayed access to support” and queried how the increase for counselling is being managed. Mrs Gostling confirmed that since publication of the report, the number of counsellors within the in-house team has increased and a care line introduced. In addition, clinical psychologists from within the mental health service have also been enlisted to support the SPWBS.</p> <p>The Committee RECEIVED and were ASSURED by the Psychological Wellbeing Service Report.</p>	<p>LG</p>
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<p>PPPAC</p>	<p>STAFF ATTENDANCE/ABSENCE DURING COVID-19</p>	
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(20)54	<p>The Committee received the Staff Attendance/Absence During COVID-19 Report, focusing upon staff absence during the COVID-19 pandemic and highlighting how the pandemic has impacted upon attendance and wellbeing between the period March to September 2020.</p> <p>Prof. Gammon expressed concern that in terms of risk assessment completion of BAME staff, only 44% have been completed, emphasising that managers have a responsibility to ensure risk assessments are completed. Mrs Gostling undertook to discuss this at the next BAME Advisory Group.</p> <p>Referring to the total number of staff that do not have their ethnicity listed on ESR being 585 contained within page 10 of the report, Ms Lewis emphasised that some of these may be BAME staff, therefore increasing the potential number of risk assessments outstanding for this cohort.</p>	LG
	<p>The Committee RECEIVED and NOTED the Staff Attendance/Absence During COVID-19 Report.</p>	

PPPAC (20)55	<p>REPORT ON THE DISCRETIONARY CAPITAL PROGRAMME 2020/21</p>	
	<p>The Committee received the Discretionary Capital Programme (DCP) 2020/21 & Capital Governance update report, setting out the position with regard to the approved split of the available discretionary capital funding for the financial year 2020/21. The report also sets out the risks which are emerging in relation to capital pressures which may begin to challenge the position and the mitigations being explored.</p> <p><i>Mr Rob Elliott joined the PPPAC meeting</i></p> <p>Mr Williams informed Members that the DCP is currently in limbo, with the non funded highest priority scheme being the emergency departments COVID-19 streaming scheme. A request has been submitted to WG to allow HDdUHB to retain the sale proceeds for Cardigan Hospital, Cardigan Health Centre and the underspends on schemes completed in 2019/20, which would enable the emergency department streaming work to be undertaken. Whilst remaining optimistic that this would be allowed, Mr Williams advised that should this not be the case, there will be difficult choices to make in relation to the prioritisation of works.</p> <p><i>Mrs Libby Ryan-Davies joined the PPPAC meeting</i></p> <p>Mr Huw Thomas emphasised that risks are limited and that the DCP would be managed with the resources in place.</p> <p>Prof. Gammon expressed concern with regard to the greater backlog of the DCP and the continuing escalation of risks including the Women & Children's Phase II and Pond Street Clinic/Penlan schemes. Prof. Gammon and Ms Lewis undertook to discuss outside of the PPPAC meeting, whether the shortfalls in the estate should be closer linked to the Quality, Safety & Experience Assurance Committee's (QSEAC) agenda.</p>	JG/AL

	<p>Noting the extended current anticipated completion date of February 2022 for the Women & Children’s Phase II scheme, and given in terms of safety and quality this is a critical programme of work, Prof. Gammon enquired whether the “red” RAG ratings are becoming a “darker red” position. In response, Mr Williams emphasised that the underlying RAG status relates to time as opposed to funding and the impact of COVID-19 and social distancing which have had an impact on the timescales. Assurance was provided that a Gantt chart and programme of works are in place.</p> <p>Members expressed their contentment with the actions in place relating to the schemes of works.</p>	
	<p>The Committee:</p> <ul style="list-style-type: none"> • NOTED the impact of £500k on the DCP of the need to fund the emergency departments COVID-19 streaming scheme and the bid to WG to fund this from All Wales Capital. • NOTED the request to WG to allow the HDdUHB to retain the sale proceeds for Cardigan Hospital, Cardigan Health Centre and the underspends on schemes completed in 2019/20. • NOTED that if the funding mentioned within the report is confirmed, the first call will be to support additional COVID-19 related schemes for ICU and ENT at c£600k. • NOTED that very significant backlog pressures remain which will need to be prioritised for any balance of funding received from WG. • NOTED the continued red rating schemes for which the underlying reasons for their status remains unchanged and will be the subject of further reporting to PPPAC. 	

<p>PPPAC (20)56</p>	<p>ESTATES MAJOR INFRASTRUCTURE PROGRAMME BUSINESS CASE</p> <p>The Committee was presented with the Business Continuity/Major Infrastructure – Programme Business Case (PBC), setting out the core elements of the PBC and seeking support for the document to be submitted to WG for endorsement. Members noted that this will allow HDdUHB to draw down the necessary resources to support the technical work needed to develop a portfolio of more detailed Business Justification Cases (BJC) or Outline Business Cases (OBC) dependent on the specific capital value of individual investment plans.</p> <p>Mr Elliott referred to the Committee’s previous discussion on the DCP, emphasising that the prioritised investment has been selectively reduced each year due to a lack of funding. The current approach to achieving compliance is that HDdUHB would continue in a circle of reduction in standards, however the PBC presented highlights how HDdUHB can move to a more strategic approach. Members noted that the first draft had been presented to WG in early 2019 and were pleased to note that whilst feedback from WG to date had been very supportive, it was requested that the strategy be aligned to “A Healthier Mid and West Wales”, and future estate changes, including the repurposing of Wthybush General Hospital (WGH) and Glangwili General Hospital (GGH). This strategic plan is now supported by the updated PBC developed and has been considered on a regular basis by CE&IM&TSC. The PBC highlights both current pressures</p>	
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and the pressures ahead, providing assurance of enabling continuity of services over the coming years.

Members noted that the prioritised schedule of work over the initial eight year implementation period plan totals circa £118m, and for WGH and GGH, this concludes the investment plan and aligns broadly with current programming for the repurposing of the two sites. For Prince Phillip Hospital (PPH) and Bronglais General Hospital (BGH), the investment plan will continue beyond the eight years in order to achieve Estate code condition B for both sites for the next 20-30 years.

Prof. Gammon thanked Mr Elliott for the significant reports in terms of the PBC for the major infrastructure projects.

In response to a query from Cllr. Hancock in regard to what would set HDdUHB apart from bids from other health boards, Mr Elliott advised that the HDdUHB estate is one of the oldest in Wales, with a backlog of required infrastructure works and that the associated risks have been shared openly and widely with WG.

Whilst commending Mr Elliott and his team on their work on the PBC, considering that the document is based on a submission to WG the previous March, Mr Maynard Davies enquired whether the dates within the documentation require a review. In response, Mr Elliott confirmed that whilst the costs are unchanged, WG may ask for this to be revisited in the future.

In response to a further query from Mr Davies in regard to the modernisation of the estate and whether this would result in any revenue savings relating to energy costs, etc., Mr Elliott confirmed that there will be benefits in terms of energy and ventilation, however these have not yet been calculated.

Prof. Gammon enquired to what extent the narrative is predicated on the success of the Healthier Mid & West Wales PBC and what is meant by the decisions relating to WGH and GGH, for example, “do minimum” and whether these are influenced by the long-term plan, i.e. the new hospital. In response, Mr Thomas confirmed that the PBC for the new build hospital is fundamental to what is spent on these two sites. Prof. Gammon highlighted the risk that should the PBC not proceed, there may be an impact on how services are delivered. Mr Elliott emphasised that during the first eight years, the investment on all four existing hospital sites would be to make the sites safe, i.e. boilers, lifts, drainage, etc. and the investment in PPH and BGH relates to the condition of the estate and ward refurbishment. Should matters not proceed or timelines change, Members were assured that the PBC and priorities for PPH and BGH would be revisited.

Mr Paul Williams, Assistant Director of Strategic Planning, Mr Owen Burt and Mr Anthony Tracey left the PPPAC meeting

	<p>Members supported the submission of the Business Continuity/Major Infrastructure Programme Business Case to WG seeking endorsement, and gained assurance from the report.</p> <p><i>Mr Rob Elliott left the PPPAC meeting</i></p>	
	<p>The Committee:</p> <ul style="list-style-type: none"> • SUPPORTED the submission of the PBC to WG seeking the endorsement necessary to allow HDdUHB to proceed. • NOTED that further formal reports would be developed for the Committee as this programme progresses. 	

PPPAC (20)57	A HEALTHIER MID & WEST WALES PROGRAMME BUSINESS CASE	
	<p>The Committee received the A Healthier Mid & West Wales Programme Business Case report, noting the work that has commenced on the PBC, in particular the programme start up activities for the following:</p> <ul style="list-style-type: none"> • The development and production of the PBC. • The process for the acquisition of the land for the new urgent and planned care hospital. • The work underway to establish the programme governance. • The headline risks. <p>Members noted that Prof. Gammon and Mr Thomas had discussed this matter outside of the Committee meeting and Prof. Gammon expressed contentment with what is planned. Mr Thomas requested that this matter be a standing agenda item for PPPAC between now and March 2021.</p>	CW
	<p>The Committee NOTED the A Healthier Mid & West Wales Programme Business Case update report.</p>	

PPPAC (20)58	WOMEN & CHILDREN'S DEVELOPMENT PHASE II	
	<p>The Committee received the Women & Children's Development Phase II report, providing an update on the scheme, noting that it is robustly monitored and scrutinised by CE&IM&TSC. Mr Keith Jones provided assurance that based on engagement work that is continuing to be undertaken with service users and staff, there is no evidence that the delays involved are having an adverse effect on patient or staff experience.</p> <p>Members noted that Phase 1 (labour ward) of the scheme is now complete, and that the temporary facility utilised by the Neonatal Team has been relocated whilst Phase 2 works are undertaken, representing a significant improvement from the previous facility. Mr Jones raised as a concern the consequential time delay of approximately six months to the overall scheme. However, this is monitored and reported monthly to the Project Team, bi-monthly to the Project Group and to the CE&IM&TSC via regular updates. The current anticipated completion date for the scheme is February 2022.</p> <p>Referring to the additional costs involved, Prof. Gammon enquired whether these would be funded by WG. Mr Jones responded that this remains an assumption and that confirmation from WG is awaited.</p>	

	<p>Given concerns of a second COVID-19 wave, Prof. Gammon enquired as to the realism of the anticipated completion date. In response, Mr Jones confirmed that the contractors (Interserve) have provided a realistic update in line with social distancing requirements, and that external advice has been sought which confirms that the timescales appear to be reasonable. Mr Jones reassured Members that the matter is being closely monitored.</p>	
	<p>The Committee NOTED the content of the project update including the:</p> <ul style="list-style-type: none"> • Changes to the scheme SRO and Project Director. • The management of time and cost risks within the project structure and the regular reporting on these issues for discussion at CE&IM&TSC. • The scheme completion timescale which will now be Quarter 4 (2021/22) including a project delay of approximately half a year associated with the impact of COVID-19 and social distancing restrictions. • The fact that risks remain to scheme delivery as nearly 18 months of construction and commissioning remain to be managed. • The improved patient and staff environment in the areas handed over to HDdUHB reflected in patient experience feedback. 	
PPPAC (20)59	<p>BREXIT PREPAREDNESS</p> <p>The Committee received a verbal update relating to Brexit preparedness, noting the 31/10/20 deadline for negotiations to conclude between the United Kingdom (UK) and the European Union (EU).</p> <p>Members were advised that the risk of a no deal has increased over the previous few weeks and that any delay would inhibit legal processes. The Brexit situation therefore remains a challenge. In terms of the supply chain, the focus has been on clinical supplies, in particular medicines and radioisotopes. While the stock levels held by Procurement would normally be sufficient for a four week period, these have now increased to twelve weeks, and there are further stock supplies held within the UK should a no deal occur. The request locally is to ensure stock levels are maintained at a high level, however there is likely to be a cost implication for this although a significant cost implication is not anticipated for this financial year. A process has been agreed within Wales, operating from a 24 hour call centre, where issues can be escalated if required.</p> <p>It was agreed for a report to be provided to the December 2020 PPPAC meeting to include proposals relating to mitigations and a planning response to the outcome of Brexit consequences.</p>	HT
	The Committee NOTED the BREXIT Preparedness verbal update.	
PPPAC (20)60	<p>DEVELOPING THE 3 YEAR PLAN FOR THE PERIOD 2021/22-2023/24</p> <p>The Committee received the Developing the 3 Year Plan for the Period 2021/22 – 2023/24 – Strategic and Planning Objectives Report.</p> <p>Mrs Ryan-Davies provided a brief introduction, emphasising that the report provides assurance relating to the process of dealing with 500 existing Board commitments and how these have been mapped into new planning</p>	

objectives. Following Board ratification of the Planning Objectives, the next phase will be to develop a single, integrated plan for their implementation. The first step will be to agree, with individual Executive Directors, the Planning Objectives required to be prioritised over the next year, following which collaborative working with individual teams will be undertaken to set out how the Planning Objectives will be delivered.

Prof. Gammon enquired whether there had been any indication as to when the official guidance determining WG’s expectations would be received, and in response, Mrs Ryan-Davies confirmed that the guidance is in development and is expected to be received imminently.

Referring to the two potential scenarios contained with the covering SBAR relating to how the plan will be presented i.e. ‘*In the first, we continue to live in the grip of the pandemic, In the second, we are in a recovery state following the pandemic*’, Ms Lewis queried the terminology used in the second scenario and whether the term “recovery” should be amended to take into account all matters learnt given that the residue of COVID-19 will be with us for a number of years. In response, Mrs Ryan-Davies referred to the on-going debate on the meaning of the term “recovery”, however emphasised that the content of the plan would use language which represents a “comfortable fit”.

In response to whether the 2021/22 Annual Plan would be managed and developed solely by the Transformation Team, or as a whole organisation approach including Planning colleagues, Mrs Ryan-Davies confirmed that a Planning Steering Group has been established which she leads and which provides an opportunity for both teams to work in collaboration.

The Committee supported the process whereby the Planning Objectives were agreed and noted the intention to develop an Annual Plan for 2021/22 for submission to WG.

*Mrs Libby Ryan-Davies left the PPPAC meeting
Mr Paul Williams, Head of Property Performance, joined the PPPAC meeting*

The Committee:

- **SUPPORTED** the process whereby the Planning Objectives were agreed, and that all previous commitments have been accounted for in the mapping exercise.
- **NOTED** the intention to develop an Annual Plan for 2021/22 for submission to Welsh Government by the end of January 2021, and the process to support its development.

PPPAC (20)61	WELSH GOVERNMENT GUIDANCE – NHS WALES COVID-19 OPERATING FRAMEWORK QUARTERS 3 AND 4	
	The Committee received the Hywel Dda University Health Board Response to Coronavirus (COVID-19): NHS Wales Operating Framework for Quarters 3 and 4 (2020/21) report, noting that this had been submitted in draft to WG	

	<p>on 19th October 2020 prior to formal submission to the Public Board of HDdUHB on 26th November 2020.</p> <p>Mr Carruthers expressed gratitude to Dr Daniel Warm and his team, and the Bronze Chairs Group for compiling the report, emphasising that this has been prepared in line with the Winter Protection Plan (WPP). Members noted that the WPP is being presented to the Regional Partnership Board on 29/10/20 where it is anticipated that it will be approved.</p> <p>The complexity and challenges associated with the planning and the re-establishment of services were recognised.</p> <p>Prof. Gammon highlighted the significant detail contained within the report and enquired whether, in terms of modelling, HDdUHB had been advised to adopt the Swansea University worst case scenario of 1.7 upper range figure. In response, Mr Carruthers confirmed that HDdUHB had not been told to adopt this figure, however WG are accepting this figure as the reasonable worst case scenario and as HDdUHB tracking is at a similar level, it therefore seemed the sensible model to adopt locally in order to provide a realistic view. Referring to the current firebreak in Wales with the intention of preventing a potential peak during Christmas week and a further peak in January 2021, it was noted that the impact would not be understood until the end of November 2020.</p> <p>Referring to community services and the worsening position of sickness levels relating to the GP out of hours service in Pembrokeshire, Mr Carruthers advised that certain changes had been made to the GMS contract during the first wave of COVID-19. Temporary changes implemented within the Carmarthenshire out of hours service in early 2020 added robustness to the service. However, this has been more challenging during the second wave, given the greater impact on staff sickness and also a reduction in staff available to cover the out of hours service since the re-introduction of routine work. Work is being undertaken across the three counties to ensure a robust system is in place for the winter period.</p> <p>Mr Carruthers reassured the Committee that the implementation of the plan would be tracked to provide assurance to Committees and Board in terms of timelines.</p>	
	<p>The Committee NOTED and were ASSURED by HDdUHB's response document to the Coronavirus (COVID-19): NHS Wales Operating Framework for Quarters 3 and 4 2020/21.</p> <p>The Committee NOTED that the Public Board of HDdUHB will be asked to formally endorse the document at their November 2020 meeting.</p>	
<p>PPPAC (20)62</p>	<p>INTEGRATED PERFORMANCE ASSURANCE REPORT</p> <p>The Committee received the Integrated Performance Assurance Report (IPAR) for Month 6 (2020/21). Mr Thomas highlighted the following matters:</p> <ul style="list-style-type: none"> • Unscheduled care continued to be a deteriorating trend in performance during September 2020. 	

- The target for stroke patients to be seen within 24 hours by a stroke consultant has been consistently met throughout the COVID-19 pandemic.
- During August 2020, 82.8% of urgent suspected cancer patients commenced treatment within 62 days which is below the 95% target. However, the 98% target was met for non-urgent suspected cancer patients (98.7%) and there was a 2% improvement in patients on the single cancer pathway being treated within 62 days of the point of suspicion.
- Improvements have continued to be made in September 2020 to reduce breaches for diagnostic and therapy waits.
- As at 30th September 2020, only 36% of consultants and SAS (staff grade, associate specialist and specialty) doctors had an up-to-date job plan.

Mr Davies referred to the deteriorating position relating to referral to treatment times (RTT) for planned care and enquired whether there is a timescale for its recovery. In response, Mr Jones referred to the Q3&4 Operating Framework, and whilst cognisant of the effort everyone has put into the plan, it has not been possible to deal with the significant number of routine or non-urgent pathways. Focus has been placed upon patients with the most urgent need and cancer related pathways. However, conversations have commenced in relation to a different way of thinking about how services are managed in the short to medium term, with the focus being about a different configuration to increase the volume of patients treated.

Prof. Gammon acknowledged the improvements relating to therapy waits and was pleased to note the on-going work relating to cancer care and pathways, however remained conscious of the immense pressures staff are under and reiterated the importance of supporting staff in order for performance to improve. Alternative options would be welcomed to manage this and to pursue the possibility of digital platforms to restart services, etc.

Ms Lewis highlighted to Members a useful report published on 28/10/20 by National Voices regarding supporting patients whom are awaiting care during these times (<https://www.nationalvoices.org.uk/publications/our-publications/patients-noun-adjective-understanding-experience-waiting-care>).

Due to the expectation to fully scrutinise the IPAR on behalf of the Board, it was agreed that more time would be focused upon the IPAR at the December 2020 PPPAC meeting.

The Committee **RECEIVED** the IPAR for Month 6 (2020/21) and **DISCUSSED** the revised report format in light of the current COVID-19 pandemic requirements.

PPPAC (20)63	CORPORATE & EMPLOYMENT POLICIES	
	The Committee was presented with the following reports:	

	<ul style="list-style-type: none"> • Written Control Documentation Approval of Policy 258 – Waste Management Policy report - Members approved the Waste Management Policy. • Extension of Review Dates of Employment and Corporate Written Control Documentation - Members approved the extension of the expiry dates of the written control documentation on the schedule presented, on the understanding that reviews would be completed within the stipulated timeframe. • Policy 124 – Retirement Policy - Members approved the minor amendment contained within the Retirement Policy concerning the minimum day break from 14 to 8. 	
	<p>The Committee:</p> <ul style="list-style-type: none"> • CONSIDERED and APPROVED the revised Policy 258 - Waste Management Policy. • APPROVED the extension of the expiry dates of the written control documentation on the schedule presented, on the understanding that the review will be completed within the stipulated timeframe. • APPROVED the minor amendment to Policy 124 - Retirement Policy. 	
PPPAC (20)64	BILINGUAL SKILLS POLICY	
	Item deferred to December 2020 meeting.	
PPPAC (20)65	OUTCOME OF ADVISORY APPOINTMENTS COMMITTEE	
	The Committee received the Advisory Appointments Committees Report, providing an update on the outcome of the Advisory Appointments Committees (AACs) held between 10 th August 2020 – 12 th October 2020, and approved the appointments on behalf of the Board.	
	The Committee APPROVED the outcome of the AAC appointments on behalf of the Board.	
PPPAC (20)66	MAJOR INCIDENT PLAN	
	Item deferred for six months as agreed by Board.	
PPPAC (20)67	A REGIONAL COLLABORATION FOR HEALTH (ARCH)	
	The Committee received and noted the A Regional Collaboration for Health (ARCH) Portfolio Update Report, providing an update on the activities of the ARCH portfolio for the period August to October 2020.	
	The Committee NOTED the Regional Collaboration for Health (ARCH) Portfolio Update Report.	
PPPAC (20)68	LLANELLI WELLNESS VILLAGE	
	Mr Thomas requested that the frequency of the Llanelli Wellness and Life Science Village (Pentre Awel) reporting be amended from every meeting to only when there is a significant update or matter requiring PPPAC approval. Members agreed to this request and Mrs Claire Williams undertook to amend the Committee work plan accordingly.	CW
	The Committee NOTED the Llanelli Wellness and Life Science Village (Pentre Awel) update and agreed to the revised frequency of reporting.	

PPPAC (20)69	PPPAC WORKPLAN 2020/21	
	The PPPAC work plan for 2020/21 was presented to Members for information.	
	The Committee NOTED the PPPAC work plan for 2020/21.	
PPPAC (20)70	REFLECTIVE SUMMARY OF MEETING	
	Mrs Gostling and Mr Thomas were requested to circulate to Members a reflective summary of the key decisions.	LG/HT
PPPAC (20)71	DATE AND TIME OF NEXT MEETING	
	Thursday, 17 th December 2020 at 9.00 a.m. – 11.30 a.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen	