

## Bundle Public Board 26 November 2020

2.3

Report of the Chair / Adroddiad y Cadeirydd

*Presenter: Chair*

Chair's Report November 2020

Appendix 1 - BAME Advisory Group Minutes 01 10 20

Appendix 1 - BAME Advisory Group Minutes 05 11 20

Appendix 2 - Chair's Actions November 2020

Appendix 2 - Field Hospital at Parc y Scarlets Barn (Annex A)



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	26 November 2020
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Report of the Chair
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Miss Maria Battle, Chairman
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Miss Maria Battle, Chairman

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA**

**SBAR REPORT**

**Sefyllfa / Situation**

To provide an update to the Board on relevant matters undertaken by the Chair of Hywel Dda University Health Board (the UHB) since the previous Board meeting.

**Cefndir / Background**

This overarching report highlights the key areas of activity and strategic issues engaged in by the Chair and also details topical areas of interest to the Board.

**Asesiad / Assessment**

As a Health Board we have been totally focused on preparing for the winter challenges, the second wave of COVID-19 and restarting our more routine surgery. Everyone is naturally tired and weary after the most challenging nine months in all our professional and personal lives. We have radically changed the way we provide many of our services so that they are as safe as possible and we have worked hard to stay ahead of the pandemic since its onset. Our communities have made great sacrifices to keep us all safe. This is a great testimony to everyone's dedication, resilience and determination. I would particularly like to thank the Chief Executive for his leadership and all his Executive team as well as our whole workforce and our partners. Together we have been doing everything we can to care for people safely.

It is even more remarkable, therefore, that in these challenging times the Welsh Government moved us out of targeted intervention into enhanced monitoring. This was in recognition of the strong foundations which had already been laid, and the proactive and effective measures taken by the Health Board during the Pandemic, including learning from the transformation. The intervention process is there to support organisations and we are grateful to the Welsh Government, Audit Wales and Healthcare Inspectorate Wales for their contributions and their continued input. This is a tribute to all in Hywel Dda University Health Board.

Our hospital sites are now busier than we were in the spring. In view of the increase in activity the Board is asked today to approve streamlining our governance in order to release teams to concentrate on the challenges. At the same time, we will ensure that governance is transparent

and open and focuses on the priorities. Audit Wales' inspection of our governance during the first wave of the pandemic found that, overall, the Health Board had maintained good governance throughout; we intend to replicate that in the second wave.

### **Flu Vaccine 2020**

This winter, more than ever, protecting ourselves and those we care for against flu is very important as we may experience both flu and COVID-19 circulating together. Flu can be serious and having a flu vaccine is one of the best ways of protecting ourselves from catching or spreading flu. Peer vaccinators are known colleagues who are delivering the flu vaccine this year in hospital and community locations across the three counties. I am pleased to be able to report that the figures for staff and people in the community who have had their flu jab is much greater this year than in previous years. Let's #BeatFlu together to keep Wales safe.

### **Penally Army Training Camp**

An unexpected additional challenge during the pandemic has been the Home Office decision to place a large number of men seeking asylum in the Penally Army Training Camp. This was without consultation with the Health Board. We are not designated as a dispersal area to receive people seeking asylum and we were not therefore prepared and experienced in asylum healthcare for large numbers of people who may have experienced trafficking, trauma, torture and deprivation.

As a Health Board we requested that health assessments were undertaken on everyone seeking asylum before being brought to Penally and that they self-isolate for 14 days beforehand. Unfortunately, the Home Office has not followed our advice. We immediately undertook a health assessment of the site with our partners in Pembrokeshire County Council and Public Health Wales and made recommendations to ensure the site was as safe as possible to prevent the spread of COVID-19 and other infectious diseases. We also, with our partners, made clear to the Home Office that in our professional opinion this site is unsuitable for this purpose. At the time of writing this report, we are not assured that all our recommendations have been implemented.

Our Directors of Public Health and Primary Care, Community & Long Term Care and our teams on the ground have, at great speed and expertise, put in place core and enhanced health services and I thank them all for making this happen at such pace and with such care. As a Health Board, we are committed to provide the best healthcare we can to the local community and to the men placed at this site.

### **Ethics Committee**

As the Board is aware, we established an Ethics Committee at the onset of the pandemic to advise Gold Command when requested. We recently met to consider and advise one of our local authority partners on end of life visits in a care home where residents and staff have been infected with COVID-19. We have opened the Ethics Committee to all our partners, should they need to seek advice on ethical issues.

### **Gorwelion Community Mental Health Centre – Aberystwyth**

We are pleased to announce that Gorwelion Community Mental Health Centre will now be available to people for longer, thanks to new opening hours, with plans to open a full service 24/7 next year. The new service provides timely and effective support in the local community for those in crisis and is the first major service delivery change to mental health in three

decades. The centre also houses a place of safety for those in mental distress who have been detained by the police under the Mental Health Act. Previously, those in need of this type of facility have been taken from the Ceredigion area to either Haverfordwest or Llanelli, leading to increased distress for the patient and extra demand on the police. Following the Transforming Mental Health Services Consultation in 2017, this service is the one of the first projects from this programme to launch.

### **Black, Asian and Minority Ethnic (BAME) Advisory Group Meetings on 1<sup>st</sup> October and 5<sup>th</sup> November 2020**

The BAME Advisory Group has held two meetings (full minutes attached as Appendix 1) since the previous Public Board, and will continue to meet on a monthly basis to maintain momentum. I have written to all staff who have identified their ethnicity as BAME, inviting them to participate in a wider BAME network, and have been encouraged to receive over 60 responses from staff working across our organisation and from different professional groups.

Actions emanating from the Advisory Group have been:

- Progressing the development of a charter for Specialty and Associate Specialist (SAS) doctors and the establishment of a reverse mentoring scheme for Board members who will become “mentees” mentored by BAME staff
- Signed off a Faith and Diversity Calendar which celebrates the diversity of our workforce promoting key dates and celebrations throughout the year. This will be gifted to all staff in December 2020
- Supported a Community Development Outreach Team to support BAME communities who have been disproportionately affected by COVID-19. It is anticipated that staff will commence early in 2021. This important initiative will be overseen by the Executive Director of Public Health, through the Regional Test, Trace, Protect Oversight Group, in collaboration with local authority partners
- A Task and Finish Group will consider the effectiveness of Bullying and Harassment Policies for BAME staff following the Ministerial statement on NHS anti-bullying policies
- Filmed members of staff as part of our Active Bystander Video
- Invited the Board and leaders to attend the Race in the Workplace event on 7<sup>th</sup> December 2020
- Developing a Charter to be launched in 2021
- Considering the data currently available on the Electronic Service Record (ESR) to inform future action. The number of staff who have not recorded their ethnicity is reducing.

### **Board Seminar 15<sup>th</sup> October 2020**

#### **Healthcare Inspectorate Wales Annual Report**

Members received a presentation entitled ‘HIW Annual Findings 2019-2020, Hywel Dda University Health Board’. Members were advised that HIW’s Annual Report would be published within the next few weeks, and will reflect HIW’s activity during the previous year. Whilst 2020 has been dominated by the COVID-19 pandemic, this had not affected HIW’s work during the 2019/20 period, on which the report focuses. However, a decision had been made in mid-March 2020 to pause routine HIW inspections due to the pandemic. Members welcomed the positive and reassuring message provided by HIW’s presentation, in particular the positive findings around maternity services.

#### **Update on Transformation Steering Group**

Members received a presentation on the Transformation Steering Group (TSG), providing a comprehensive overview of the UHB’s current position, stressing the commitment to align the

TSG to the Board structure. The TSG is intended to take the UHB's Strategy forward at pace and maintain the beneficial changes seen as part of the response to COVID-19. Whilst the loss of momentum subsequent to agreeing the Strategy was also acknowledged, the 6 new Strategic Objectives will drive the UHB's long-term direction. Furthermore, Members noted the intention for the Planning Objectives to be defined with measurable achievements over the next 3 years. Members recognised the reality of the UHB's position, stating that there is a collective ambition to perform as well in response to the second wave of COVID-19 as in response to the first. It is also vital to pursue the Transformation agenda, to provide hope and optimism for the future.

### **Operational Framework Quarter 3/4**

Members received the Operational Framework Quarters 3 and 4 presentation, noting that following correspondence from Welsh Government a change in scope and focus was required. Members were advised that the 'four pillars of harm' remain central to plans, as does the requirement to maintain essential services, with the gradual reintroduction of other services for the remainder of the year. Given that Welsh Government did not want a new plan, Members noted that the UHB's Q3/4 submission builds on previous iterations and 'signposts' back to these. Members received an update in relation to the UHB's Local Response and Prevention Plans, which will form the key messages for inclusion in the UHB's Q3/4 submission. Health Boards had also been issued with Welsh Government's winter protection plan requirements, which necessitate Regional Partnership Board co-ordination. It has been important to ensure that there is alignment between the UPB's Q3/4 plans and the winter plan, which is due for ratification under the COVID-19 report at today's meeting.

### **Chairs Action**

There may be circumstances where decisions which would normally be made by the Board need to be taken between scheduled meetings, and it is not practicable to call a meeting of the Board. In these circumstances the Chair, supported by the Board Secretary as appropriate, may deal with these matters on behalf of the Board.

There have been two such actions to report since the previous meeting of the Board (attached as Appendix 2). The first relates to the decision to recommence urgent elective inpatient orthopaedic treatment and the second relates to the Parc Y Scarlets lease extension.

### **Key Meetings**

I have attended the following meetings, however in light of COVID-19, these have been held via MS Teams:

- Ceredigion Public Services Board
- Carmarthenshire Public Services Board
- Pembrokeshire Public Services Board
- Together for Change
- South Wales Sexual Assault Referral Centres Programme Board
- Community Health Council Executive Committee and fortnightly meetings with the Chair and CEO
- Local Authority Leaders weekly meetings
- Meeting with the Chair and CEO of Swansea Bay University Health Board
- Monthly Chair Peer Group Meeting
- NHS Confederation NHS Reset Chair's meeting
- Swansea Bay City Region Meeting
- Regular meetings with all MSs and MPs

- Welsh Government meeting - COVID-19
- West Wales Regional Partnership Board Meeting and Development Session
- Meeting with Public Health Wales
- Meeting with the Vice-Chancellor of Aberystwyth University
- Meeting with the Helen Bamber Association
- Meeting with the Home Office

## **Celebrating Success/Awards**

### **Advancing Healthcare Awards 2020**

I would like to congratulate the Early Intervention in Psychosis (EIP) team who have been nominated for their work on the Employment Support Project, in 'The Guardian award for allied health professionals working with people who have mental health problems' category, being 1 of 3 UK finalists for the award at the Advancing Healthcare Awards 2020. The Employment Support Project is integrated within the EIP team and is an evidence-based approach that aims to help people find and retain work, education or training and is followed by time unlimited support for both the employee and employer.

### **Investors in Care Awards**

I would like to congratulate several teams in our counties for their recent success in obtaining their Investors in Carers awards. The Investors in Carers scheme is designed to help health, social care, third sector and other organisations focus on, and improve, their carer awareness and the help and support they give to carers. The scheme is delivered by Hywel Dda University Health Board and is supported by its local authority and third sector partners in Carmarthenshire, Ceredigion and Pembrokeshire.

- Shalom House, palliative care home in St David's, Pembrokeshire has been recognised for their commitment to carers. The Health Board recognises the significant role our third sector partners play in supporting carers across Pembrokeshire. "Shalom House is the first such organisation to attain this recognition and this demonstrates their dedication and commitment."
- Carmarthenshire County Council's Team around the Family (TAF) has been awarded the bronze Investors in Carers award. By participating in the scheme, the team developed their carer awareness and approaches of support for families.
- Carmarthenshire County Council's Family Information Services has been awarded their bronze award in recognition of the support the Family Information Service provide to carers.
- Morlais Ward in Glangwili General Hospital has been awarded their bronze award in recognition of their work across the multi-disciplinary team to ensure that carers and their families are supported and aim to carry this forward to maintain care that is truly patient and family centred.

### **Employee or Team of the Month**

Members of staff, patients, service users and the public can nominate staff who have gone above and beyond the call of duty and for their excellent work. Since the Board was last updated at its September 2020 meeting, the following employees/teams have received the Employee or Team of the Month award. I have been privileged to meet many of them personally to present them with their award, listen to their experiences and to thank them on behalf of the Board.

<b>Employee or Team</b>	<b>Reason for Nomination</b>
Catrin Davies Community/Neuro Physiotherapist	Nominated by Band 4 Physiotherapy Technicians in recognition of the dedication

<p>Physiotherapy Department Priory Day Hospital Glangwili General Hospital</p>	<p>displayed in providing consistent support to staff in their development for the Agroed level 3 Diploma in Physiotherapy Support. As a result of the constant mentoring and supervision, many staff members have successfully completed their diploma.</p>
<p>Sian Hopkins Head of Quality Improvement Quality Improvement and Service Transformation Ty Tudor – COVID Command Ordinarily Withybush General Hospital</p>	<p>Nominated by Mandy Davies (Assistant Director of Nursing &amp; Quality Improvement) In recognition of the commitment to leadership in the development and coordination of the command centre. Ms Hopkins demonstrated a positive and level-headed approach to problem solving and a continual focus on effective processes and quality outcomes.</p>
<p>Debra Paine, Paul Hughes and Rosemary Woodhouse Domestics Aberaeron Integrated Health Care Centre</p>	<p>Nominated by Anwen Jones (Community Diabetes Specialist Nurse) in recognition of the dedication and commitment to their role. Their efforts have resulted in a safe, clean and professional environment. They embraced the new challenges and maintained the same high standards throughout.</p>
<p>Gaenor Evans &amp; Emma Pugh Switchboard Operators (Bank) Informatics Bronglais General Hospital</p>	<p>Nominated by Roy Holman (Acting Switchboard Manager) in recognition of the professionalism and commitment in dealing with a major incident whereby patients were required to be brought to Bronglais General Hospital after being recovered from the sea by the RNLI. Their assistance with staff logistics as well as communication with press and family members was of great benefit to the organisation.</p>
<p>Ceredig and Rhiannon Ward All Staff Bronglais General Hospital</p>	<p>Nominated by the Ward Sisters in recognition of the excellent teamwork displayed since the merging of the two wards. The staff have proceeded to meet challenges by adapting to change and supporting each other in order to provide an excellent service to patients. One example being the support given to patients to assist them in using video technology to contact their family and friends.</p>
<p>Claire Grehan Care at Home Team Leader Community South Pembrokeshire Hospital</p>	<p>Nominated by Aelwen Lee (HCSW/Student Nurse) in recognition of the hard work to provide consistent high quality patient care whilst also providing support to colleagues. She has maintained these standards throughout the growth of the team as well as taking on new projects aimed at improving the support structure across the county.</p>

<p>Akler Asibey- Berko Registrar Accident &amp; Emergency Department Glangwili General Hospital</p>	<p>Nominated by Dr Mani Dharmalingham in recognition of a consistent professionalism and strong work ethic and her positive attitude and the willingness to go above and beyond to help both patients and staff.</p>
<p>Dylan Eynon Electrician Maintenance Department Glangwili General Hospital</p>	<p>Nominated by Clair Price, Service Lead in recognition of the tireless dedication and commitment in raising funds and showing appreciation to services. It is an exceptional achievement to have raised over £45,000 in two years.</p>
<p>Junior doctors Medical Rota Glangwili General Hospital</p>	<p>Nominated by Jolyon Bending (Medical Registrar) in recognition of the hard work and flexibility in adapting to the new demands and challenges incurred by the start of the pandemic. The commitment enabled a new rota to be successfully implemented. Furthermore, the willingness to work in new environments and treating new patients as part of a cover system have been pivotal in providing a successful response to the issues we faced.</p>
<p>Katrina Williams and Rachel Codd CBT Therapist and High Intensity Practitioner Integrated Psychological Therapies Services Waldo Suite Bro Cerwyn Haverfordwest</p>	<p>Nominated by Andrew Homfray (Service Manager) in recognition of the dedication and commitment to developing and then maintaining the 'Attend Anywhere' platform, which has provided a much-needed solution to the difficulties faced by some patients accessing services during the COVID-19 pandemic situation. They have given great support to both staff and patients and, as a result of this, there has been a successful outcome.</p>
<p>Suzanne Tarrant Head of Staff Psychological Well-Being Service Staff Psychological Well-being Service Withybush General Hospital</p>	<p>Nominated by Anna Bird (Assistant Director – Strategic Partnership, Diversity and Inclusion) in recognition of the dedication to learning, sharing knowledge and promoting environmental awareness and nature based well-being. Also, for the effective development of partnership arrangements. Furthermore, her leadership and dedication in supporting emotional and mental health wellbeing during this pandemic and her wise advice.</p>
<p>Ysbyty Enfys Caerfyrddin Glangwili General Hospital</p>	<p>Nominated by Dr Meinir Jones in recognition of the hard work, dedication and camaraderie which has resulted in a positive culture and successful operation. It is evident that there has been good leadership together with a team that has incorporated a progressive learning approach.</p>



### **Independent Member Vacancies**

A number of our Independent Members are coming to the end of their tenures, namely in the Finance, Local Authority, Community and Third Sector positions. Independent Members are pivotal to supporting and contributing to the work of the Board, based upon their independence, past experience and knowledge, whilst standing back from the day-to-day operational management. Whilst the Finance and Local Authority vacancies have now closed, the Community and Third Sector vacancies are open until 4pm on Friday 27<sup>th</sup> November 2020, and the full details of these vacancies can be accessed [here](#).

### **Regional Partnership Board Update**

Mrs Judith Hardisty has been appointed as Chair of the Regional Partnership Board at their last meeting on 29<sup>th</sup> October 2020.

### **Advisory Groups Update**

The Stakeholder Reference Group approved Hazel Lloyd-Lubran as their new Chair at their most recent meeting on 5<sup>th</sup> October 2020.

### **Argymhelliad / Recommendation**

The Board is asked to:

- Support the work engaged in by the Chair since the previous meeting and to note the topical areas of interest;
- Ratify the action undertaken by the Chair on behalf of the Board, detailed in Appendix 2.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): <a href="#">Hyperlink to NHS Wales Health &amp; Care Standards</a>	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives: <a href="#">Hyperlink to HDdUHB Strategic Objectives</a>	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Statement</a>	Improve efficiency and quality of services through collaboration with people, communities and partners

### **Gwybodaeth Ychwanegol:**

#### **Further Information:**

Ar sail tystiolaeth: Evidence Base:	Chairman's Diary & Correspondence
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Rhestr Termau: Glossary of Terms:	Included within the body of the Report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Chairman

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	No impact
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Ensuring the Board and its Committees makes fully informed decisions is dependent upon the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.
<b>Gweithlu: Workforce:</b>	No impact
<b>Risg: Risk:</b>	No impact
<b>Cyfreithiol: Legal:</b>	No impact
<b>Enw Da: Reputational:</b>	No impact
<b>Gyfrinachedd: Privacy:</b>	No impact
<b>Cydraddoldeb: Equality:</b>	No EqIA is considered necessary for a paper of this type.

## Cofnodion y cyfarfod pwyllgor Grŵp Cynghori Pobl Dduon, Asiaidd a Lleiafrifoedd Ethnig Minutes of the Black and Minority Ethnic (BAME) Advisory Group

Date and Time of Meeting:	<b>Thursday 1<sup>st</sup> October 2020; 4pm-5pm</b>
Venue:	<b>On-line meeting via "Teams"</b>

Present:	<p>Maria Battle, (Chair) Baba Gana, Consultant Urological Surgeon (Vice Chair) Hashim Samir, Consultant Radiologist (Vice Chair) Euryl Howells, Senior Chaplain Islam Abdelraham, Consultant Roopam Goel, Consultant - Obs and Gynaecology Samy Mohamed, Consultant Surgeon Sharmila Edekar, Associate Chronic Pain Specialist Sujatha Udayasankar - Speciality Doctor Anna Bird, Assistant Director, Strategic Partnerships, Diversity and Inclusion Annmarie Thomas, Head of Workforce Resourcing and Utilisation Christine Davies, Assistant Director of OD Helen Sullivan, Strategic Partnership and Inclusion Manager Lisa Gostling, Director of Workforce and OD Ros Jervis – Director of Public Health</p> <p>Claire Evans, Support Officer, Strategic Partnerships, Diversity and Inclusion (Notes)</p>
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Agenda Item	Action
<b>1. Introductions and Apologies for Absence</b>	
The Chair welcomed everyone to the meeting.	
Apologies for Absence were received from Heidi Abelardo	
<b>2. Declarations of Interests</b>	
No conflicts of interest were declared.	
<b>3. Minutes of Meeting Held on 3<sup>rd</sup> September 2020</b>	
The minutes of the meeting held on 3 <sup>rd</sup> September 2020 were confirmed as an accurate record of discussions.	
<b>4. Matters Arising Not On The Agenda</b>	
<p><b>Nomination of junior doctor representatives</b> – Samy Mohamed asked to clarify that the Group was looking for one junior doctor representative rather than plugging into the junior doctor network. Maria Battle clarified that was correct.</p> <p>Samy would send out an email to his staff, asking for a representative.</p>	SM
<p><b>Update to Action Log Item 10: Exit Interviews</b> – Christine Davies' team were tasked with looking at ways to increase participation rates at exit interviews. There had now been 70 face-to-face interviews and nearly 200 survey responses received.</p> <p>However, ethnicity questions were not included in the surveys and Christine confirmed that these would now be revised to include that information.</p>	

<p>Exit interviews are currently encouraged in a variety of ways including through the Global Email. When staff receive their P45, they also receive an email from with a link to Survey Monkey to enable them to complete the exit survey anonymously. Christine's team are looking at other proactive methods including sending a letter directly to staff to explore the reasons why they are leaving.</p> <p>In response to a request about the emerging themes, Christine commented that she had not yet seen this data, but will be able to look into this for future meetings.</p> <p>Christine agreed to circulate a list of questions from the exit interview to the Group.</p> <p>Members expressed concerns that staff may be reluctant to give any negative feedback at exit interviews. It was clarified that staff can currently chose to have the interview with their line manager, or meet with an independent representative from the Workforce and OD Team.</p> <p>Christine noted that the missing element from this exercise was drawing out any learning and bringing it back to the organisation. Christine would continue to feed back to the Group as this work develops.</p>	<p>CD</p>
<p><b>5. Bullying &amp; Harassment</b></p>	
<p>Lisa Gostling met with Baba Gana, Islam Abdelrahman and Christine Davies to discuss specific issues of bullying/harassment in more detail. Sharmila Edekar was unable to attend, however Lisa would arrange to meet with Sharmila separately.</p> <p>The meeting included discussions on the following issues:</p> <ul style="list-style-type: none"> <li>• Hurdles staff have to go through to sit their exams.</li> <li>• Ensuring staff can use their skills and qualifications.</li> <li>• Opportunities for Locums to get experience to support career progression.</li> <li>• Concerns regarding job planning blockages and lengthy delays in this process.</li> <li>• SAS doctors are resigning due to the treatment they are receiving. Need to look at how Champions/relationship managers can help.</li> <li>• Reports from exit interviews and the need to understand why staff leave.</li> </ul> <p>Lisa and her team would look into these issues and schedule a follow-up meeting of this sub-group.</p> <p>Christine Davies confirmed that a meeting on the SAS Development Programme had taken place. There is a national SAS charter that organisations in Wales can aspire to. Following discussion with the Medical Director, Mark Henwood has been nominated as the lead clinician to provide sponsorship for a flagship programme.</p> <p>There had also been discussions on the importance of good news stories. Baba Gana had agreed to undertake a blog of good news stories to show Hywel Dda as an attractive employer.</p> <p>Group members raised concerns that some colleague might not feel comfortable speaking openly with Mark Henwood present and felt that he should be made aware of these issues. It was also felt that there are SAS doctors waiting to secure leadership roles, and putting a consultant as the lead may undermine those opportunities.</p>	<p>LG</p> <p>LG</p>

<p>It was also noted that different specialities had different issues, and whilst it would not be possible to have representative from every area attending, it was suggested that an SAS staff member attend the meetings in order to harness leadership from within the SAS doctor group, in the same way as has been achieved with the BAME group. There was also a recommendation that a non-medical member of staff from management leadership also attend the meetings and it was acknowledged that having a medical leader involved may increase knowledge and understanding</p> <p>Lisa responded to the concerns highlighting that it was important to get the right balance of medical leadership to influence change, as well as allowing staff the space to be comfortable speaking openly.</p> <p>Christine agreed to circulate the new version of the SAS Charter to the Group.</p> <p>Maria Battle thanked members for the valuable insights and opinions which had been shared. It was agreed that Maria, Lisa Gostling and Christine Davies would meet to discuss the views of the Group in more detail and bring back a proposal to the group of how to move forward.</p>	<p>CD</p> <p>MB/LG /CD</p>
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<b>Understanding Our Demographic Profile:</b>	
<b>6. Update on recording of ethnicity data on ESR</b>	
<p>Annmarie Thomas introduced the agenda item, reminding members of the discussions about alternative ways of reporting ESR data. Annmarie and her team have produced 5 additional analysis reports which were presented in an Excel spreadsheet.</p> <p>At the last meeting 761 staff members had not completed the ethnicity section on ESR. This number has improved and reduced to 550 and work would continue to reduce this number further.</p> <p>Discussion took place about how the group and organisation would use this data.</p> <p>Hashim Samir commented that the figures showed that just one member of his team were registered as BAME, however he knew that figure was higher. Annmarie commented that this was an example of the 550 members of staff who had not completed their ethnicity on ESR, and how important it was to obtain this data. Hashim said he would encourage his colleagues to update their ESR. Annmarie asked all members of the Group to do the same.</p> <p>Annmarie explained that in the letters which had been sent to staff for who there was no recorded ethnicity, they tried to emphasise the importance of the information which is sought in order to make right decisions and to be able to contact the right people. Annmarie agreed to circulate a copy of the letter to the Group. Employees can update ESR themselves or her team can update centrally if staff complete the form and return to them by email.</p>	<p>ALL</p> <p>AT</p>

<b>Raising Awareness of Diversity &amp; Inclusion:</b>	
<b>7. Raising awareness of the Advisory Group.</b>	
<p>Maria confirmed that she had drafted a letter to all BAME employees inviting them to participate in a wider BAME network. This is due to be sent by email and letter during the next 24 hours via Anna Bird's team. Anna commented that a number of</p>	

staff hadn't included an email address on ESR profile, therefore a compliment slip would be added to hard copy letters encouraging staff to update their contact information with an email address.	
<b>8. Equality Champions</b>	
Anna Bird advised that progress on equality champions had not been possible due to staff being heavily involved in Penally work, but a meeting had been arranged with Cathie Steele to discuss how the champion roles as part of the Speaking up Safely process could support the work of the BAME group.	
<b>9. Celebrating diversity calendar</b>	
Helen Sullivan provided an update on the work to finalise the Celebrating Faith and Diversity calendar. It is expected that the calendars would be printed by the end of November in order to distribute them to staff before Christmas.	
Maria Battle had approached Royal Mail to seek support with postage costs but had received a response indicating that this was not possible. Maria agreed to contact Mandy Rayani to explore the possibility of obtaining postage costs from Charitable Funds. Christine Davies offered to speak to Helen regarding the opportunity to make use of Health Board volunteers to support the process of distributing the calendars, or preparing them for postage.	
It was agreed that a Christmas message from the BAME Advisory Group would be included on the calendar. Helen would advise Maria on the available word count. Maria agreed to draft a message and forward to Baba Gana and Hashim Samir. Helen would share the final version of the calendar with bilingual wording with the Group for agreement by the end of October, before this goes to print.	HS/MB
<b>Supporting our staff – mentoring, training and development:</b>	
<b>10. Development support for staff</b>	
Communications on setting up a mentoring network had been sent out. A virtual workshop is being planned for early November.	
<b>11. Developing a charter, unconscious bias training and “active bystander” video development</b>	
Anna Bird suggested that staff members who wished to become part of the BAME Network (following the invitation letter from Maria), could be invited to work on developing a charter with the aim of completing this by March 2021.	
Anna advised that the Recruitment Team are supporting the development of a “This is Hywel Dda” video and had commissioned a company in Aberystwyth to produce this. The video would build on the “active bystander” example from Cardiff and emphasise that Hywel Dda values diversity within the workforce. Anna reported that the team hope to launch the video in time with World Kindness Day on 13 <sup>th</sup> November.	
Volunteers are sought to contribute to the filming which due to COVID restrictions will take place at Bronglais Hospital. If Group members would like to volunteer, or know of colleagues who would, they should contact Anna or Annamarie.	ALL
Anna's team were looking into developing unconscious bias training, and are working with corporate induction colleagues. Further updates will be provided in future meetings.	AB

<b>12. BAME outreach to support TTP</b>	
<p>Ros Jervis provided an update on the development of this proposal and thanked the BAME group members for the comments and suggestions which had been received and considered as this work developed. Anna Bird and her team have worked with all 3 Local Authorities and with the community cohesion co-ordinators to develop a regional proposal. The proposal has been very positively received at a meeting of the Regional TTP Oversight Group on 25<sup>th</sup> September, and a final version was due to be presented for sign off on Friday 2<sup>nd</sup> October before being submitted to Welsh Government.</p> <p>Ros Jervis highlighted a particular issue in relation to funding. The directive from Welsh Government implied that the TTP funding pot would be utilised to resource the BAME outreach workers. However, that funding is only confirmed until March 2021. Anna Bird was working with the charities team to find match funding from the stage 2 NHS Charities Together grants.</p> <p>Ros indicated that discussions will be required with Executive colleagues about taking the risk of funding not being extended and going ahead with advertising vacancies as soon as possible. The posts need to be advertised on at least 18-month contracts. Ros asked members to utilise their networks to promote the vacancies when they are advertised.</p>	
<b>13. Any Other Business</b>	
Ministerial statement – Maria invited group members to bring any comments on the ministerial statement to the next meeting	ALL
Board Vacancies – Maria confirmed that vacancies for finance and third sector board members will be advertised during the week of 5 <sup>th</sup> October and asked members to promote and share the adverts.	ALL
<p>Black History month – Helen Sullivan confirmed that during October information will be shared on Global emails about Black History Month in order to support awareness raising.</p> <p>Hate Crime Awareness – Helen advised that sessions will be held in mid-October, to coincide with Hate Crime Awareness week. Information about how to register are being issued via Global emails.</p>	
Diversity Leadership - Sujatha Udayasankar offered to share information on the Independent Review of Diversity Leadership with the Group. Sujatha would send a link to Helen to circulate to SAS doctors.	SU/HS
<p>COVID risk assessments – Sharmila Edekar raised an issue about the use of the COVID risk assessments and commented that staff should not be asked to complete the Risk Assessment again and should not have to return to work because a manager asked.</p> <p>Hashim Samir asked if there was statistical information on how many staff members had completed the Risk Assessment. Annmarie agreed to ask her colleague Kim Warlow as the lead for this work to share information.</p> <p>Further pro-active work was needed with managers who recorded on ESR that they have staff shielding. Analysis is being undertaken on staff back in work, on restricted duties, still shielding etc.</p> <p>Annmarie agreed to ask Kim Warlow to liaise with Dr Edekar re her concerns and Maria asked Annmarie to link in with Lisa as Director of Workforce and OD.</p> <p>COVID Risk Assessments would be added to the agenda for the next meeting for further discussion.</p>	<p>AT</p> <p>AT/SE AT CE</p>

<b>Date and Time of Next Meeting</b>	
Future meetings will take place on: <ul style="list-style-type: none"><li data-bbox="177 174 671 215">• 5<sup>th</sup> November 2020 – 4pm-5pm</li><li data-bbox="177 215 759 253">• 4<sup>th</sup> December 2020 – 3.30pm-4.30pm</li></ul>	



## Cofnodion y cyfarfod pwyllgor Grŵp Cyngori Pobl Dduon, Asiaidd a Lleiafrifoedd Ethnig Minutes of the Black and Minority Ethnic (BAME) Advisory Group

Date and Time of Meeting:	<b>Thursday 5<sup>th</sup> November 2020; 4pm-5pm</b>
Venue:	<b>On-line meeting via "Teams"</b>

Present:	<p>Maria Battle, (Chair)          Baba Gana, Consultant Urological Surgeon (Vice Chair)          Hashim Samir, Consultant Radiologist (Vice Chair)          Augusta Umughele - Education Liaison Nurse          Euryl Howells, Senior Chaplain          Heidi Abelardo, Staff Nurse          Pam Singh - CAMHS Crisis Team CPN          Said Awad, Consultant Obs &amp; Gyn/Hospital Director          Sharmila Edekar, Associate Chronic Pain Specialist          Sujatha Udayasankar - Speciality Doctor          Anna Bird, Assistant Director, Strategic Partnerships, Diversity and Inclusion          Annmarie Thomas, Head of Workforce Resourcing and Utilisation          Christine Davies, Assistant Director of OD          Helen Sullivan, Strategic Partnership and Inclusion Manager          Ros Jervis – Director of Public Health</p> <p>Claire Evans, Support Officer, Strategic Partnerships, Diversity and Inclusion (Notes)</p>
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Agenda Item	Action
<b>1. Introductions and Apologies for Absence</b>	
The Chair welcomed everyone to the meeting.	
Apologies for Absence were received from Lisa Gostling and Samy Mohamed.	
<b>2. Declarations of Interests</b>	
No conflicts of interest were declared.	
<b>3. Minutes of Meeting Held on 1<sup>st</sup> October 2020</b>	
The content of the minutes of the meeting held on 1 <sup>st</sup> October 2020 were agreed and Anna Bird agreed to double-check the attendees' details to ensure this was accurate.	
<b>4. Matters Arising Not On The Agenda</b>	
<b>Junior Doctor Representative</b> – Samy Mohamed was unable to attend the meeting due to clinical commitments but offered to provide a separate update on this item.	
<b>Feedback on Ministerial Statement on NHS Anti-Bullying Policies</b> – The First Minister's statement had been circulated for information. Baba Gana welcomed the statement and the opportunities that this offered for the Health Board to take action against bullying in the NHS. It was noted that the Active Bystander video would be released during November and Baba suggested the Group preview the video before it goes live.	
Baba recommended that champions and guardian roles are established so staff know who they can go to if they experience bullying. Christine Davies commented	

<p>that she had met with Swansea Bay Health Board and Swansea University to see what work they are doing to tackle bullying, and further meetings are being arranged which will also involve Anna Bird and Annmarie Thomas.</p> <p>Augusta Umughele advised that she had been in touch with Brian Chiyesu who is a Lead Chaplain, Workforce Race Equality Standard (WRES) Expert and Co-Chair of the BAME Network currently working with the Mid Yorks Hospitals NHS Trust. Augusta offered to link Brian into the work in Hywel Dda.</p> <p>The group supported the proposal that a BAME member of staff should be an anti-bullying champion and Maria Battle asked Christine Davies to develop Terms of Reference for a Task &amp; Finish Group to take this forward.</p>	CD
<p><b>SAS Charter</b> – Maria Battle advised that she had met with Deputy Medical Director, Mark Henwood and the Advisory Group Vice-Chairs. Following discussion, it was agreed that Mark would lead on the SAS Charter and feedback on progress at the next BAME Advisory Group meeting.</p>	

<b>Raising Awareness of Diversity &amp; Inclusion:</b>	
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<b>5. Celebrating Diversity Calendar</b>	
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<p>Maria and Anna Bird thanked Helen Sullivan and everyone who worked on the development of the calendar which had now been completed and sent to the printer.</p> <p>Members of the group reiterated their thanks and gave positive feedback commenting that they felt this would be well received by staff.</p> <p>Helen Sullivan thanked group members for their input and reiterated that the changes proposed by Sharmila Edekar had been made.</p> <p>It was noted that a team of volunteers would be involved in the distribution of the calendars to ensure that all staff members on each Hywel Dda site and community venues receive this gift.</p>	
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<b>6. Establishing a BAME Network</b>	
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<p>Anna Bird introduced the paper noting that a letter from Maria inviting BAME employees to participate in a BAME Network had been circulated. Currently 63 members of staff have agreed to join the Network. Anna referred to the paper showing a breakdown of those members by location and job role to the Group and commented that it was encouraging to see staff from additional professional groups coming forward. The Group commented that it was positive to see the message getting to staff at smaller sites and agreed that it was important to now build on that momentum and get the Network started. Discussion took place about how best to engage with network members and whether a traditional network forum approach as outlined in the paper was needed. Anna suggested drawing advice from Nicola O’Sullivan about what the Engagement HQ platform could offer.</p> <p>Maria reported that she had met with Professor Keir Lewis who had many great ideas about how to create research opportunities but wanted to ensure the Network takes action rather than becoming a “talking shop”.</p> <p>Hashim Samir suggested holding a virtual conference and volunteered to take part in planning this. Following discussion it was agreed that Maria would meet with Anna Bird and Annemarie Thomas to look getting the Network started and link subsequently with Hashim to discuss the virtual conference.</p>	MB/AB/ AT/ HS
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Group members who wish to volunteer to be involved should email Maria directly.	ALL
Maria proposed that she would send a thank you message and an update to the Network members who have got in touch.	MB
<b>7. “Active Bystander” Video Development</b>	
Anna Bird advised the group that the active bystander video had been completed and will be launched on Friday 13 <sup>th</sup> November; World Kindness Day. Anna thanked Sally Owen and the Recruitment Team for all their hard work to achieve this in such a short space of time. The video would be complemented by additional short videos from Maria Battle and the Chief Executive.	
Anna agreed to arrange for the Group to preview the video before it is launched.	AB
<b>8. Race in the Workplace Event 7<sup>th</sup> December</b>	
Helen Sullivan advised the group that the Diversity and Inclusion Team had purchased 2 places at a “Race in the Workplace” forum event run by Knowledge Exchange to take place virtually on 7 <sup>th</sup> December. Maria’s office in Ystwyth and a meeting room in the Beacon Centre, Llanelli have been booked in order for one forum place per venue to be used, so that several people can participate, with social distancing measures in place.	
Helen provided an outline of the event which would take place between 9am-1.30pm. Topics include: <ul style="list-style-type: none"> <li>• Achieving success through diversity</li> <li>• Moving the Needle Forward: adapting the “Race at Work Charter”</li> <li>• Creating Diverse and Transformational Leadership Teams</li> <li>• Organisational Transformation: Creating an Inclusive Workplace and Culture</li> <li>• Achieving Bold Recruitment and Retention Targets</li> <li>• Attracting and Nurturing Young Diverse Talent</li> </ul>	
Members expressed interest in reviewing the details further and discussion took place regarding the purchase of additional tickets and the potential of booking additional venues. Helen agreed to check whether a video of the event would be available to watch later. Anna Bird and Ros Jervis to look at funding for any additional costs.	HS
Anna Bird agreed to arrange to circulate information on the event to the Group, and also to the BAME Network inviting members to indicate whether they would wish to participate.	AB
<b>9. Medical Director’s Newsletter</b>	
Christine Davies referred to the link which had been included to the Medical Director’s newsletter which included positive evidence of BAME members of staff in positions of leadership and also featured the work of the BAME Advisory Group. It was noted that Baba Gana had contributed to this along with Sujatha Udayasankar.	
<b>Understanding our Demographic Profile</b>	
<b>10. Update on Recording of Ethnicity Data on ESR</b>	
Annmarie Thomas confirmed that 474 staff members had still not completed the ethnicity section on ESR. Annmarie would continue to encourage completion of this information in December and welcomed any suggestions on how to move forward with this. Members were invited to contact Annmarie outside the meeting with suggestions.	ALL

<p>In response to concerns that not all staff know how to access ESR or have daily use of computers, Annmarie confirmed that staff can update ESR themselves or her team can update the information centrally. It was also noted that it would be beneficial to include training on utilising ESR as part of staff induction.</p>	
<p><b>11. Approach to Covid-19 Risk Assessments</b></p>	
<p>Annmarie Thomas presented a paper which had been provided by Kim Warlow who is leading on this area of work. Following discussion it was agreed that Annmarie would provide a breakdown of staff information, by department areas for the next meeting. This would facilitate the Group's members to encourage staff in their areas to complete the Risk Assessment Tool on ESR</p>	AM
<p>Hashim enquired about the status of the Who's Who page. Anna Bird advised that the page was circulated to the Group on 22<sup>nd</sup> October and documents are being uploaded into the files section on Teams. The Who's Who page would be circulated to the Group again for information and further updates either from existing or new members. This would also be circulated to the BAME network when complete.</p>	CE
<p><b>Supporting our Staff – Mentoring, Training and Development:</b></p>	
<p><b>12. Development Support for Staff</b></p>	
<p><b>Virtual Mentoring</b> – Christine Davies updated members on her meeting with Dr Chris James regarding extending the mentoring network to SAS doctors who had also been trained in mentoring.  Christine also outlined a new “Reverse Mentoring” programme which is being established where Board members will be mentored by BAME staff. Professor Stacy Johnson from Nottingham University will be running workshops with Board members, i.e., the mentees and following this, a daylong programme with the mentors will be scheduled. Periodically Professor Johnson will undertake collective learning with both groups from January onwards. It was noted that reverse mentoring is very different to anything that has been run before and Maria commented that Hywel Dda is the first health board in Wales to offer it. If successful this will be rolled out to other leaders within Hywel Dda.</p>	
<p><b>13. Unconscious Bias Training</b></p>	
<p>Anna Bird advised that discussions are underway to connect with Swansea Bay Health Board and Swansea University to explore the work they are undertaking and develop a shared approach to implementing training across the organisations.</p>	
<p><b>Regional Work</b></p>	
<p><b>14. BAME Outreach to Support TTP</b></p>	
<p>Ros Jervis confirmed that the proposal which had been circulated previously, had been agreed by the Trace Track Protect Regional Oversight group and submitted to Welsh Government. Approval had been received from Welsh Government and the initiative will be funded using an allocation of the TTP Fund. However this funding was only confirmed until March 2021. Ros advised that agreement had been made to proceed to recruitment for a fixed term until March 2022 and to further funding streams being explored to cover the costs. Advertisements for 3 Community Outreach Workers will be shared with the Group once available and with the BAME network.</p>	RJ/AB

<b>15. Any Other Business</b>	
<b>Diwali</b> – Sharmila commented that the Diwali Festival of Light takes place from 13 <sup>th</sup> November and. asked if it was possible to put out a message to staff. Anna agreed to liaise with Sharmila to develop a global email.	SE/AB
<b>SAS Doctors</b> – Sharmila had emailed SAS doctors to invite them to become part of the SAS Charter Working Group. 3 people had currently shown interest. Baba and Sharmila offered to be part of implementing the SAS Charter. Christine agreed to pool all names she had received for suggested members.	
The Group discussed frequency of meeting and whether they should be held bi-monthly to allow time for work to be completed between meetings. Members felt that as the group was relatively new there was benefit to meeting on a monthly basis but this would be reviewed again in the new year.	
<b>Date and Time of Next Meeting</b>	
The next meeting will take place on: <ul style="list-style-type: none"> <li>4<sup>th</sup> December 2020 – 3.30pm-4.30pm</li> </ul>	

## Appendix 2 - Register of Chairman's Actions 2020/21

Serial No.	Requesting Department	Details of Request	Cost, where applicable	Date Issued	Date Signed by Chair
117	Operations Directorate	<p>Approval is sought following the decision made in the confines of Board Seminar on 15<sup>th</sup> October 2020, to recommence urgent elective inpatient orthopaedic treatment. An in-depth discussion took place at Board Seminar, with the recommencement of urgent elective inpatient orthopaedic treatment supported by the Board. Further discussions relating to the quality and safety implications of the decision took place at the extraordinary QSEAC meeting on 13<sup>th</sup> November 2020, (the report can be accessed <a href="#">here</a>) and following this review of the paper and the associated risk assessments, the recommendations in the paper were approved.</p> <p>The risk and implication of not restarting this service would be that the backlog of patients would continue to grow, with a recognition that the clinical risk to these patients is greater, on balance, if they do not have the procedure than if they do, and greater harm would be caused to the population and public by choosing not to restore Orthopaedic services.</p>	Not Applicable	15.10.2020	15.10.2020

Serial No.	Requesting Department	Details of Request	Cost, where applicable	Date Issued	Date Signed by Chair
118	Finance Directorate	<p>Approval is sought to support the decision made at a meeting on 6<sup>th</sup> November 2020, to extend the Head Lease and Underlease of Parc y Scarlets between Carmarthenshire County Council (1) Hywel Dda University Local Health Board (2) from 1 September 2020 until 30 May 2021. A challenging and robust discussion was held in relation to this matter with the Chair, the Chair of the Audit and Risk Assurance Committee, the Chair of the Finance Committee, the Chief Executive, the Director of Finance with support from the Board Secretary and key Health Board Officers. It was agreed that balancing all the risks the Health Board would enter into the lease on the terms set out above however recognising as soon as it is safe and practicable to do so the Barn would be returned to the Scarlets, therefore Chair's Action was taken on 6<sup>th</sup> November 2020. Full details of the meeting are attached for information as Annex A.</p>	N/A	06.11.2020	06.11.2020



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	26 November 2020
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Field Hospital at the Barn, Parc y Scarlets, Llanelli
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Huw Thomas, Director of Finance
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Huw Thomas, Director of Finance

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

To provide the Board with an update on Field Hospital at the Barn, Parc y Scarlets, Llanelli, and to seek ratification of the Underlease with Carmarthenshire County Council in the use of the facility.

**Cefndir / Background**

In March 2020, the University Health Board (UHB) was seeking additional bed capacity in Carmarthenshire to allow sufficient surge beds to respond to the COVID-19 pandemic. Carmarthenshire County Council (CCC) immediately supported the UHB by suggesting four sites in the county: Carmarthenshire Leisure Centre; Llanelli Leisure Centre; Parc y Scarlets; and Selwyn Samuel Centre, Llanelli.

On 1 May 2020, the UHB entered into an Underlease with Carmarthenshire County Council (CCC) from 22 April 2020 (terminating on 21 September 2020) at a 'peppercorn' rent. There was a Head Lease between Scarlets Regional Ltd (1) Carmarthenshire CCC (2). The Health Board has continued to remain in occupation of the Barn.

In accordance with a clear direction from Welsh Government (WG) (letter dated 24 June 2020), the UHB was required to ensure that it had sufficient bed capacity to meet a potential second wave of the virus; requirement of 613 acute beds. The Barn was essential to meet the UHB's capacity gap. At the time, there were no other viable options considered, as the issue of decommissioning the Parc y Scarlets site was a time and resource factor.

As the Underlease were due to terminate on 21 September 2020, the UHB needed to retain capacity based on the modelling projections relating to a second wave. Consequently, retaining the Barn was essential, as it is able to accommodate up to 212 beds.

CCC instigated the initial conversations with the Scarlets in early August 2020. On 17 August 2020, the UHB received a proposal from CCC that set out provisional terms for a new tenancy. The provisional terms stated that the Scarlets sought £100k per calendar month (pcm) for on-going usage and retention of the Barn.

The UHB requested a clear breakdown of how the £100k was quantified; this could not be provided, save for citing that the Scarlets were a commercial organisation. Moreover, they requested that this be dated from 1 September 2020 and this was non-negotiable.

The UHB entered into direct conversations with the Scarlets, who were unwilling to review the £100k pcm figure.

The UHB did highlight that the Barn as a going concern would only yield around £13,455 to £22,424 pcm based on a £3-5ft<sup>2</sup>, with the barn being roughly 5000m<sup>2</sup> (imperial equivalent 53,819.55 ft<sup>2</sup>). After a number of executive-led conversations, the Scarlets agreed to reduce the rent to £85k pcm (plus VAT). The Scarlets stated that the Barn was of strategic importance and anything less than £85k pcm (plus VAT) would require the UHB to return the Barn to the Scarlets at the end of the tenancy. Of the rental of £85k, around £70k pcm was classified as a consequential loss to the Scarlets, based on the rental return stipulated above.

Whilst demonstrating Value for Money at a commercial rental base rate inclusive of consequential losses is difficult, it should be noted that the UHB did occupy the Scarlets Stadium and Barn for nearly six months at a 'peppercorn' rent. Therefore, at an aggregate cost over the 15 months (March 2020 to May 2021) the rent would equate to £51k pcm, which is circa £11.37 per ft<sup>2</sup>. In addition, the cost of decommissioning the Barn is another factor, both in time and resources. Moreover, alternative premises would have to be identified which, given the size of the Barn, is problematic. If, however, another site had been identified, significant cost in commissioning the alternative site would have been incurred.

Upon the fee being agreed, there were a number of contractual points that proved challenging. For example, the UHB would only agree to replace the 3G pitch if the Scarlets could demonstrate that it fell below World Rugby standards. It was agreed that, as CCC had an existing relationship with the Scarlets, they would mediate between the parties. Furthermore, it was agreed that any new arrangements would reflect the previous position with the Head Lease being between the Scarlets and CCC and the Underlease between CCC and the UHB.

Therefore, at the end of September 2020, CCC commenced negotiations with the Scarlets. On 2 October 2020, NHS Wales Shared Services Partnership, Legal and Risk Services set out a number of material points to CCC in order to have an agreed Heads of Terms. On 29 October 2020, the UHB received the Head Lease and Underlease, informing the Health Board that these had been agreed and were not open to any further negotiation or re-drafting.

The UHB was under time pressure to complete the Underlease (as provided above) and this has resulted in only a headline review of the leases being possible. NHS Wales Shared Services Partnership, Specialist Estates Services (SES) were instructed to lead on the negotiations with the Scarlets at an early stage (August 2020) however, this was rejected; this is not the usual practice for property deals. The UHB considered that the Underlease should be a property document only and that all commercial/financial matters should be dealt with by a separate legal agreement; this was rejected by CCC.

The UHB highlighted a number of significant issues that needed to be addressed; some but not all of these have been accepted by CCC. The residual risks are articulated and set out below.



## Asesiad / Assessment

There are a number of liabilities, risks and mitigations, which need to be referenced.

### Head Lease

- The Head Lease between the Scarlets and CCC is from 1 September 2020 until 31 May 2021 (1 day longer than the Underlease) with CCC entitled to give 6 weeks' notice to evoke a Break Clause no earlier than 31 December 2021.
- The Underlease accepts all liabilities as set out in the Head Lease; this is a key reason the Health Board needed to revise and clarify a number of terms and conditions.
- There are concerns that some of the provisions in the Head Lease are considered to be unclear and lack clarity in parts. Clearly, this could create uncertainty at the end of the lease(s).
- For example, the UHB is responsible for keeping the interior of the building in repair and in a good decorative order. Given that CCC is to be responsible for reinstatement, it was suggested that the UHB should only be required to keep the Barn in a clean and tidy condition. As drafted, the obligation is to hand back the Property to CCC in this condition being "in repair and good decorative order". This is a higher burden on the UHB than would normally be placed, given that CCC are ultimately responsible for the reinstatement and indemnified by the Health Board.
- However, in mitigation, it is considered that the collaborative relationship between CCC and the UHB should broadly negate any issues arising. This, coupled with the fact CCC are undertaking the reinstatement work, means it is unlikely CCC would argue around the decorative order in which it is returned to them. But clearly, the term is more onerous than anticipated.
- There is a further obligation for CCC to pay the Scarlets any costs incurred. This liability is transferred to the UHB through the Underlease. To note, these are restricted to costs associated with occupied areas and will include rates, utilities, telecommunications and other services consumed recharges.
- Whilst the above may seem onerous, it is not unusual for the Underlease to incorporate the terms and conditions as set out in the Head Lease.
- Any Conflict of Interest that may arise will be mitigated by having a Costing Adviser in place.

### Underlease

- Landlord & Tenant Act 1954: the Head Lease and Underlease include a provision to exclude s.24-28 of the Landlord & Tenant Act 1954 (LTA 1954) (not in the original documents). This means that the UHB will not be entitled to an Underlease on substantively the same terms at the end of the term and any further occupation will be by way of open negotiation. Members are advised that leases granted for a fixed term of six months or less do not benefit from security of tenure under Part II of the LTA 1954, which meant that the UHB did not have any lease renewal rights at the end of the original term.
- Term: the UHB renegotiated the term to end on 30 May 2021, which effectively means that the UHB can remain in occupation of the property until 19 April 2021 (to allow CCC to reinstate the property during the term of the Underlease/Head Lease). In a Landlord and Tenant situation, the UHB should have the right to exclusive occupation for the term (up to 30 May 2021), however the Underlease states that the UHB give up the exclusive possession on 19 April 2021 and continue to pay rent until 30 May 2021. In usual Landlord and Tenant situations, this could be considered as a derogation of grant as the UHB will not remain in occupation for the whole term. In mitigation, the UHB would be expected to cover all costs incurred by CCC (including any additional rent for the period of reinstatement) so although this is not the best legal vehicle, the liability to pay the cost and reinstate would fall on the HB in any event. CCC has inserted a clause that requires the UHB to pay rent for the additional day (31 May 2021), which was accepted.

- Reinstatement: CCC will undertake the decommissioning of the Barn and reinstatement on behalf of the UHB. The UHB has agreed to reimburse CCC for all costs incurred for this work. Whilst there is no agreement on what the full costs are likely to be for reinstatement, the biggest risk (liability) will be the 3G pitch, which is capped at £134.2k (inclusive of VAT). Any claim for dilapidations will be pursued via the normal legal route.
- Repair: the repair clause refers to the state of repair and condition of the Property at the date of commencement of the Underlease (as agreed between the parties acting reasonably) but there is no formal documentation to support this. In mitigation, the UHB has secured some photographs from CCC that show the condition of the Barn in March/April 2020. This has the potential for disagreement in relation to responsibility for these minor repair works.

### Liabilities

- The drafting of the Head Lease and Underlease mean that the full extent of the UHB's financial liabilities are unknown and outside our control; this is particularly in relation to the reinstatement costs referred to above.
- In mitigation, the UHB has sent a Letter of Comfort to CCC confirming that they have agreed with CCC, albeit not legally, to support the UHB in any issues with the Scarlets.
- There is further mitigation in that the most significant liability, namely the 3G pitch, is capped at circa £134.2k (including VAT). Furthermore, the Health Board has also appointed an Independent Cost Advisor to oversee that any and all costs submitted are reasonable in nature.

### Roof

- The roof remains a concern and was leaking until it was repaired on Monday 2 November 2020.
- This has been raised with CCC and the Scarlets, and some minimal repair work has been undertaken, but there remain areas of concern.
- The Head Lease and Underlease state that the Scarlets must repair the roof by 16 November 2020 to the reasonable satisfaction of CCC. If this is not completed, CCC can serve 7 days' notice on the Scarlets to repair the roof
- In mitigation, if the problems remain, CCC can undertake the work with costs claimed against the Scarlets (to be deducted from the rent, if necessary).

### Pitch

- The Scarlets have stated that in commissioning the works to the Barn (March 2020), CCC has likely damaged the indoor pitch laid by the Scarlets in the autumn of 2019.
- The Underlease is drafted in such a way that the UHB could be liable to pay for a new 3G Rugby Pitch regardless of damage.
- There is no obligation to mitigate, or consider partial repair (if only some of the pitch is untenable), and no clarity on who would decide if the pitch meets or does not meet the required standard.
- In mitigation, both the Head Lease and the Underlease include a clause that reimbursement of this pitch is limited to £111,798.78 plus VAT (£134,200.00).

### Deducing Legal Title

- In usual landlord and tenant transactions, the UHB would expect to have sight of the Superior Landlord's legal title.
- Due to timescales, this was accepted in April 2020 as there was less liability on the UHB as we were paying a 'peppercorn' rent.

- Again, due to the enforced time pressures this has not taken place and therefore there could be Restrictions on the Title that the UHB is not aware of; for example, consent that should have been obtained which has not been obtained.
- This is mitigated by the fact that the UHB is already in occupation of the Barn, so would be subject to these Restrictions in any event.

Whilst there are remaining risks, the Underlease is between two public sector bodies, where our relationship and partnership working is strong.

Therefore, based on the timescales and the need to ensure all arrangements are underpinned with agreements and good governance, together with the fact that the UHB is on site and would be subject to all reinstatement costs, it was considered that the Underlease should be completed.

In light of the above and due to time constraints, Chair's action were sought on Friday 6th November to request approval of the Head Lease and Underlease. A challenging and robust discussion was held in relation to this matter with the Chair, the Chair of the Audit and Risk Assurance Committee, the Chair of the Finance Committee, the Chief Executive, the Director of Finance with support from the Board Secretary and key Health Board Officers. It was agreed that balancing all the risks, the Health Board would enter into the Underlease on the terms set out above; however, recognising as soon as it is safe and practicable to do so the Barn would be returned to the Scarlets. Therefore, Chair's Action was taken on 6<sup>th</sup> November 2020.

#### Argymhelliad / Recommendation

Members are asked to ratify the Chair's Action Serial Number 118.

#### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A not a corporate risk
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): <a href="#">Hyperlink to NHS Wales Health &amp; Care Standards</a>	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives: <a href="#">Hyperlink to HDdUHB Strategic Objectives</a>	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	10. Not Applicable

#### **Gwybodaeth Ychwanegol:**

#### **Further Information:**

Ar sail tystiolaeth: Evidence Base:	N/A
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Rhestr Termiau: Glossary of Terms:	In the body of the paper.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Referred to in the body of the paper.
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	The Field Hospital provision is important to ensure sufficient contingency beds during the winter period.
<b>Gweithlu:</b> <b>Workforce:</b>	N/A
<b>Risg:</b> <b>Risk:</b>	Contained within the body of the paper
<b>Cyfreithiol:</b> <b>Legal:</b>	Legal advice was provided by NHS Shared Services Legal & Risk Services
<b>Enw Da:</b> <b>Reputational:</b>	N/A
<b>Gyfrinachedd:</b> <b>Privacy:</b>	N/A
<b>Cydraddoldeb:</b> <b>Equality:</b>	Has EqIA screening been undertaken? No Has a full EqIA been undertaken? No