

Enw'r Pwyllgor / Name of Committee	Sustainable Resources Committee
Cadeirydd y Pwyllgor/ Chair of Committee:	Mr Winston Weir, Independent Member
Cyfnod Adrodd/ Reporting Period:	Meeting held on 28 February 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	

The Sustainable Resources Committee has a role to advise the Board on all aspects of Finance and the revenue implications of investment decisions. In addition, the Sustainable Resources Committee provides assurance on financial performance and delivery against Hywel Dda University Health Board (HDdUHB) financial plans and objectives, and receives assurance on progress against delivery of the Planning Objectives aligned to the Committee. With regard to financial control, the Committee provides early warning of potential financial performance issues and makes recommendations for action to improve the financial position of the organisation.

This report summarises the work of the Sustainable Resources Committee at its meeting held on 28 February 2023.

- Assurance over Delivery of the Strategic Programmes of Change the Committee received the Assurance over Delivery of the Strategic Programmes of Change report and an accompanying presentation, providing a high-level overview of the key programmes of work for the delivery of the Health Board's strategic programmes of change. The programmes are intended to address a multitude of pressures across the system. Consequently, each programme has been incepted to remedy specific challenges facing the Health Board. An update was provided on the current financial challenges requiring targeted approaches across the following domains:
 - Transforming Urgent and Emergency Care (TUEC): the Committee was advised that that the key performance indicators (KPIs) include conveyance, convergence and complexity. Conveyance rates demonstrate a reducing trend, however self- presentations are increasing, and conversion rates broadly continue to reduce across all populations. Complexity management remains the greatest challenge and is contributing to increasing lengths of stay (LoS) and bed occupancy. Furthermore, bed occupancy rates mirror the increasing demand for social care requirement on discharge. Although conversion rates are reducing, 0-1 day LoS/discharges within 72 hours are not optimal, particularly in the over 75 frail and elderly population, which consequently contributes to LoS over 21 days and the demand for social care that is not available at the pace or volume required to reduce handover delays and Emergency Department (ED) pressures. Referring to the urgent and emergency care fund received from Welsh Government (WG), which has been match funded by the Health Board, the Committee noted that this forms only a small proportion of the investment into urgent and emergency care. In terms of moving care into the community, the Committee was advised that, where there are efficiencies to be delivered, this will be difficult to forecast. The focus at this

stage is on efficiencies rather than cashing out, and there is further work to be undertaken with Welsh Ambulance Services NHS Trust (WAST) in terms of conveyance rates. Work is also ongoing to enhance community clinics. In terms of efficiency, the Committee noted that there are opportunities within EDs that are heavily reliant on agency and in releasing bed capacity; capacity and cash could then be released to invest in Planned Care activity.

- Building Community Care Capacity: the Committee was advised that the current position demonstrates an improvement in community beds across the three LA areas. Similarly, there have been improvements in the availability of domiciliary care. However, recruitment remains the main debilitating factor. Additionally, the signing of legal agreements with LAs has been slow. The Committee noted that the programme is a ministerial priority and concludes at the end of March 2023. WG will be meeting with Health Boards in April 2023 to provide learning opportunity from the final report.
- Long Term Care in Mental Health and Learning Disabilities (MHLD): the Committee was advised that the Clinical Director for Collaborative Commissioning at the National Collaborative Commissioning Unit (NCCU), spent two days with the MHLD team on 16/17 February 2023 to undertake a review of current MHLD commissioning arrangements and review the deliverable opportunity for next year. The Committee was also advised that the team carried out a validation exercise to update the current position in conjunction with the Local Authorities (LA). The Committee was advised that the Community Health Care (CHC) review findings were not fully accepted by the Directorate on the basis that the tool used was not evidence based and did not adequately consider risk. The efficiency identified was significant and relied on a change to the funding apportionment with the LAs, rather than reductions in placement costs. Potentially, the approach suggested would have a wider impact on established relationships with LAs or adverse effect on operational capacity and delayed transfers of care. The Committee noted that there is currently no consistent tool available.

The Committee received limited assurance that financial delivery can be received for this year and that the outcome for 2023/24 will be discussed in detail at the Board Seminar meeting on 1 March 2023. Concern was also raised regarding programme manager support for each of the programmes to ensure engagement outside of this Committee. The Committee recognised the complexity and scope of what is being done and requested continued reporting to the Committee as a standard agenda item.

• Deep Dive: Values Based Health Care – the Committee received the deep dive on Value Based Health Care (VBHC) report, outlining the progress of the VBHC Programme, the key risks to programme delivery and the scores assigned to them. As previously reported to the Committee, a clear plan for delivering VBHC for 2022-2025 has been developed, which places the population at the heart of service development. Focussing on the first goal of the plan, to work with operational teams to enable them to routinely use PROMs and resource utilisation data in planning, organising and delivering healthcare, the Committee received assurance that the VBHC programme has increased in scope and pace over the past 12 months, providing routine Patient Reported Outcome Measures (PROM) collection in a large range of service areas and that HDdUHB is the single biggest collector of PROM data across the UK. The Committee was advised that comprehensive data analytic reports have been developed for eight service areas to provide a cohort level summary of PROM data and to illustrate generalised trends and inequities in service delivery through the lens of patient reported outcomes. The Committee was advised that the VBHC Programme Plan describes the completion of nine Service Reviews by the end of March 2023 and received assurance that progress against the plan has been positive with six of the nine Service Reviews having already been completed and the remaining three to be completed before the end of the financial year. The Committee was advised of technical challenges that have delayed the development of some visualisation dashboards, noting however that these issues have now been largely resolved and a revised schedule of dashboard rollouts has been developed. The Committee was advised that the work on Heart Failure has led to a 50% reduction in heart failure admissions, a 51% reduction in readmission, and a 92% reduction in time from diagnosis to treatment. The Committee received assurance that there remains a realisable ambition to further expand the reach of VBHC routinely into Primary, Community and Social Care. The Committee also noted that HDdUHB is submitting two entries for the international VBHC prize 2023 for its work on Heart Failure and the digitisation within Trauma & Orthopaedics (Hips & Knees).

- NHS Wales Shared Services Partnership (NWSSP) Plan Briefing and • Feedback - the Committee received the NWSSP Plan Briefing and Feedback report, outlining the NWSSP Integrated Medium Term Plan 2023-26 and demonstrating how NWSSP will support Health Boards to deliver local plans. The Committee received an overview of the key objectives and the development of a more outcome based approach to measuring the impact of the work the NWSSP provides to the NHS. Key operational priorities, which include Decarbonisation and Climate Change, implementation of a new Digital Strategy, financial sustainability and good governance, and employee wellbeing. In relation to the Finance plan, the Committee was advised that robust conversations have been held with the Finance Delivery Unit and the Directors of Finance forum. It was noted that NWSPP had previously been able to deliver a certain level of nonrecurrent savings, which was distributed back to Health Boards. However, over the next 12 months, a first call may be required on any non-recurrent savings to support the delivery of the NWSSP plan. One of the biggest challenges for the NWSSP is the volatility relating to the energy crisis. The Committee received assurance that an internal Performance and Outcomes Group has been established to develop more outcome focussed measures. Furthermore, NWSSP is required to adhere to the Duty of Quality to demonstrate how NWSSP is improving services.
- **NWSSP Performance Report Quarter 3 2022/23 –** the Committee received assurance from the content of the NWSSP Performance Report for Quarter 3 2022/23.
- Finance Report Month 10, 2022/23 the Committee received the Month 10 (M10) 2022/23 Finance Report, outlining the Health Board's revised draft Financial Plan to deliver a deficit of £62.0m, after savings of £13.9m; this recognises the inadequate level of assurance around directorate overspend mitigation plans and the identification of a further £15.5m of savings schemes

deliverable within the current financial year against the initial £25.0m deficit Plan, combined with an operational variation due to system pressures and continuation of COVID-19 activities within HDdUHB's core services. The Committee was advised that the forecast deficit is £59.0m, after recognising a further £5.0m of operational variation offset by £8.0m Accountancy Gains. The in-month M10 financial position, excluding Accountancy Gains of £8.0m, is an overspend of £6.4m, which is made up of £4.1m operational variance and an original deficit plan of £2.1m; this is after recognising £0.3m of assumed Welsh Government (WG) transitional funding for COVID-19. The Committee was advised that £1.4m of savings schemes were delivered in line with identified plans. Of the £4.1m overspend in-month, £1.1m relates to undelivered savings plans against the original target and £3.0m relates to operational pressures. These pressures are mainly being experienced within Unscheduled Care teams, and in Medicines Management in relation to Primary Care Prescribing, and in Oncology due to increased activity.

- Finance Corporate Risks the Committee received the Finance Corporate Risks report, providing detail on the 3 risks scored against the Finance impact domain: 1432 Risk to the delivery of the Health Board's draft interim Financial Plan for 2022/23 (No change to Risk Score); 1352 Risk of business disruption and delays in patient care due to a cyber-attack (No change to Risk Score); 1335 Risk of being unable to access patient records, at the correct time and place in order to make the right clinical decisions (No change to Risk Score). The Committee received assurance that all planned actions will be implemented within the stated timescales and will reduce the risk further and/or mitigate the impact if the risk materialises.
- Finance Operational Risks the Committee received the Finance Operational Risks report, providing detail on the 8 risks scored against the Finance impact domain. The Committee received assurance that all relevant controls and mitigating actions are in place. Acknowledging that these operational risks are contributing to the overall corporate risk to the delivery of the Health Board's draft interim Financial Plan, the Committee recognised that the programmes of change will at least partly address these risks. In relation to the risks that have had no change to risk score for some time, the Committee received assurance that these are reviewed at the Improving Together meetings and the longstanding risks are reviewed by the Risk and Assurance Officers to challenge teams on their risks. The Committee received further assurance that the Director of Operations reviews these risks with the relevant Executive Lead prior to submission to Committees.
- **Plan Development** the Committee received the Plan Development report and was advised that the Plan will be discussed in depth at the Board Seminar on 1 March 2023.
- Long Term Agreement (LTA) Values and Process for 2023/24 The Committee received the report summarising the impact of the overall 1.5% uplift plus Investments contained within the LTAs. The Committee scrutinised the contract values ahead of signature by the Board at its meeting on 30 March 2023 and received assurance that a robust process has been undertaken with each provider.

- **NWSSP Procurement Services Energy Contract Ratification Report** the Committee received the report and considered the proposed approach to Energy procurement governance arrangements, prior to approval at a Chair's Action meeting on 28 February 2023 and ratification by the Board at its meeting on 30 March 2023, including the proposed new Energy procurement contractual arrangements with Crown Commercial Services.
- Planning Objectives Update Report the Committee received assurance from the Planning Objective Update Report, on the current position in regard to the progress of the Planning Objectives aligned to the Sustainable Resources Committee, in order to provide onward assurance to the Board where Planning Objectives are progressing and are on target, and to raise any concerns where Planning Objectives are identified as behind in their status and/or not achieving against their key deliverables.
- Planning Objective Deep Dive PO 5R Digital Inclusion the Committee • received assurance from the update regarding delivery of Planning Objective 5R to develop a digital inclusion programme which will provide a coordinated approach to digital inclusion across the Health Board and its wider partners for the local population. The Committee received assurance that the Health Board has signed the Digital Inclusion Charter for Wales and was accredited in September 2022 having successfully demonstrated its commitment to implementing the Digital Inclusion Charter principles. The Health Board has also been accepted onto the Digital Inclusion Alliance for Wales. The official launch for Digital Inclusion took place on 14 February 2023, which included attendees across all Health Board areas, and was positively received. The Committee received an overview of the progress of the Digital Inclusion programme, which consists of eight pillars of work, and includes the development of the regional Digital Inclusion Steering Group. This will determine the level of digital health literacy of the population through engagement with key stakeholders and services already in place to engage the population with digital health literacy development. The Committee received assurance that the response from the Chief Digital Officer for Wales, the Chief Executive of Digital Health and Care Wales (DHCW) and Delta has been positive and supportive of the direction of travel.
- Integrated Performance Assurance Report (IPAR) the Committee considered the measures from the Integrated Performance Assurance Report (IPAR), relating to Month 10 2022/23.
- Information Governance Sub-Committee Update Report the Committee received the Information Governance Sub-Committee (IGSC) Report. The Committee received assurance from the update on the clinical coding position for the Health Board, advising that performance has achieved the 95% target for the past thirteen months, with the latest performance for November 2022 provisionally at 97.6%. The current backlog position for 2022/23 activity shows that the Health Board has 98.5% of episodes from April to November 2022 coded and is therefore on track to achieve the 98% for the end of the financial year by continuing on this trajectory. The Committee received further assurance that work is commencing on reviewing the quality of coding, in addition to the quantitative

values. Future work will also enable the clinical coding of Emergency Department information. The Committee approved the following policies:

- 275 Secure Transfer of Personal Information Policy
- 193 Retention and Destruction of Records Policy
- o 174 Reuse of Public sector Information Procedure
- 282 Network Security Policy
- o 319 Disposal of Digital Equipment Policy
- 422 Consumer Device Policy
- Decarbonisation of Inhalers the Committee received the Decarbonisation of • Inhalers report, providing an overview of the key areas of work, including support to GPs to review and switch over to low carbon inhalers. The Committee was advised that Medicines Management teams across primary and secondary care have identified targeted work programmes, aligned to VBHC, to support practices to work towards achieving the targets. The Committee was assured that learning from other Health Boards across Wales is shared frequently through networks to ensure that the Health Board maximises opportunities as appropriate. The Committee noted the difficulty to truly understand the financial impact of the decarbonisation of inhalers work. It is accepted that, whilst making a reduction on the carbon footprint, and aligning with local and national targets, changing patients from MDIs (Metered Dose Inhalers) to DPIs (Dry Powder Inhalers), may come at an additional cost for the Health Board. On an inhaler-to-inhaler level switch, DPIs are often at a higher cost to MDIs. However, the Committee received assurance that the wider benefit from the focus on patient's overall disease management through patient-level education and improved inhaler technique and compliance is expected to lead to reduction in potential exacerbations, in addition to improving overall symptom control and reducing the volume of inhalers prescribed. This is aligned to VBHC and the effective utilisation of resources.
- Welsh Health Circulars the Committee received the Welsh Health Circulars (WHC) report and received assurance in respect of understanding when the WHCs will be delivered, any barriers to delivery, impacts of non/late delivery and assurance that the risks associated with these are being managed effectively.
- Ministerial Directions the Committee noted the content of the Ministerial Directions report and received assurance that all NHS Non-Statutory Instruments (NSI), otherwise known as Ministerial Directions (MD) issued by WG between 1 August 2022 and 31 January 2023, as well as MDs issued previously, which are still in the process of being implemented.
- **Financial Procedures** the Committee was advised that no financial procedures were revised or created during the period covered by this report.
- Healthcare Contracting, Commissioning and Outsourcing Update the Committee received assurance from the content of the Healthcare Contracting, Commissioning and Outsourcing Update report and from the mitigating actions detailed in the report.

- **Decarbonisation Task Force Group Update Report –** the Committee received assurance from the Decarbonisation Task Force Group Update Report from the meeting held on 19 January 2023.
- **Balance Sheet** the Committee the content of the Balance Sheet as at the end of Quarter 3 2022-23 and the developments to improve scrutiny of the Balance Sheet.
- Update on All-Wales Capital Programme: 2022/23 Capital Resource Limit and Capital Financial Management - the Committee received the Update on All-Wales Capital Programme: 2022/23 Capital Resource Limit and Capital Financial Management report, providing details of the Health Board's Capital Expenditure Plan and Expenditure Profile Forecast for 2022/23, the Capital Resource Limit for 2022/23 and an update regarding capital projects and financial risks.
- All Wales IM Digital Network Highlight Report the Committee noted the content of the All Wales IM Digital Network Highlight Report.

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd ar eu cyfer / Matters Requiring Board Level Consideration or Approval:

- NWSSP Procurement Services Energy Contract Ratification Report Committee consideration of the proposed approach to Energy procurement governance arrangements, prior to approval at a Chair's Action meeting on 28 February 2023 and ratification by the Board at its meeting on 30 March 2023.
- Long Term Agreement (LTA) Values and Process for 2023/24 Committee scrutiny of the contract values ahead of signature by the Board at its meeting on 30 March 2023 and received assurance that a robust process has been undertaken with each provider.

Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:

- Limited assurance received by the Committee regarding the processes implemented for the delivery of the strategic programmes of change, recognising uncertainties within this to receive assurance regarding the financial challenge to translating any improvements into financial gains and contribution to corporate risk 1432 *Risk to the delivery of the Health Board's draft interim Financial Plan for 2022/23.*
- The Month 10 financial position, and risk to delivery of the forecast financial outturn position of £59.0m which provides a challenging starting point for financial delivery for 2023/24.

Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol / Future Reporting:

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified at the previous Committee meeting will be undertaken.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

25 April 2023