

ABM University LHB**Unconfirmed**

**Minutes of the Meeting of the Health Board
held on 31st January 2019
in the Millennium Room, Health Board HQ, Baglan**

Present

Andrew Davies	Chairman/ Independent Member
Tracy Myhill	Chief Executive
Emma Woollett	Vice-Chair / Independent Member
Martyn Waygood	Independent Member
Maggie Berry	Independent Member
Reena Owen	Independent Member
Jackie Davies	Independent Member
Mark Child	Independent Member
Richard Evans	Medical Director
Gareth Howells	Director of Nursing and Patient Experience
Chris White	Chief Operating Officer
Hazel Robinson	Director of Workforce & Organisational Development
Siân Harrop-Griffiths	Director of Strategy
Lynne Hamilton	Director of Finance
Sandra Husbands	Director of Public Health (until 9/1/19)
Malcolm Lewis	Associate Board Member
Alison James	Associate Board Member (until 9/1/19)
Pam Wenger	Director of Corporate Governance/Board Secretary
In Attendance:	
Matt John	ABMU Associate Director, Informatics / Interim Chief Information Officer
Hannah Evans	Director of Transformation
Darren Griffiths	ABMU Associate Director, Performance (until 12/1/19)
Irfon Rees	Chief of Staff
Paul Lewis	ABMU Communications Team
Paul Edmonds	ABMU/CTUHB Communications & Engagement Manager (until 17/1/19)
Marie-Claire Griffiths	ABMU Strategy Programme Support Manager
Nicola Johnson	ABMU Interim Assistant Director of Strategy (until 9/1/19)
Kerry Broadhead	ABMU Head of Strategy & Value (until minute 9/1/19)
Carol Moseley	Wales Audit Office
Wendy Penrhyn-Jones	ABMU Head of Corporate Administration (minutes until 23.1.19)

Minute No.	APOLOGIES	Action
1/1/19	Apologies for absence were received from Martin Sollis, Independent Member; Tom Crick, Independent Member; Ceri Phillips, Independent Member; Brian Moon, Chair, ABM Community Health Council (CHC); Cathy Moss; ABM CHC; Emrys Davies, Non-Executive Director, Welsh Ambulance Services Trust (WAST).	

2/1/19	WELCOME / INTRODUCTORY REMARKS	
	<p>Andrew Davies welcomed everyone to the meeting in particular Malcolm Lewis who was attending his first formal Board Meeting and the staff members observing the meeting.</p> <p>Andrew Davies paid tribute to the exemplary contributions made by Professor Ceri Phillips whose term of office with ABMU was ending that day. It was noted that Ceri could not be present as he was now an Independent Member of the Health Education & Improvement Wales (HEIW) Board which was also holding its meeting on this day.</p>	
3/1/19	DECLARATION OF INTERESTS	
	<p>Alison James declared an interest in the item regarding Service Level Agreements with the voluntary organisations given her role in Neath Port Talbot Carers Service.</p>	
4/1/19	PATIENT STORY	
	<p>The story related to the personal experience of a lady who had suffered ill-health and felt she needed to increase her level of exercise. The story explained that the gym had not been suitable for her but that through a friend she learned of 'Dance for Health' sessions which she described as having 'brought joy' as well as introducing her to new people who had gone on to become friends and 'was far better than any therapy that could be prescribed'. She said she was now far more agile, empowered and her asthma had eased. The story ended with her expressing that she felt a sense of wellbeing from attending these classes.</p> <p>Andrew Davies stated that ABMU was the only Health Board involved with 'Dance for Health'. He referenced the work of Prue Thimbleby in bringing patient stories to the Board and various other operational meetings fora within ABMU. He said that Prue Thimbleby and Marcia Buchanan who were part of the Patient Experience Team had developed a governance package around story-telling which would be brought to the Board in due course for consideration as part of an update on Arts in Health work.</p>	
Resolved:	<ul style="list-style-type: none"> - The Patient Story be noted. 	
5/1/19	MINUTES OF THE PREVIOUS MEETING	
	<p>The minutes of meeting held on 29th November 2018 were received and confirmed as an accurate record apart from the following changes:</p> <ul style="list-style-type: none"> i. Reena Owen had been present; 	

	<p>ii. Under 236/18 – Board Performance Report, there had been a typographical error in the spelling of ‘Martyn’;</p> <p>iii. The following correction needing to be made to minute 238/18 – Key Issues Reports – Board Committees.</p> <p><u>Mental Health Legislative Committee – 8.11.18</u></p> <p>Emma Woollett stated that staff training compliance was a concern. Gareth Howells stated that this was linked to Deprivation of Liberty Safeguards (DoLS) and he gave assurances that a plan was in place to address staff training requirements.</p>	
6/1/19	MATTERS ARISING	
	There were none.	
7/1/19	ACTION LOG	
	The action log was received .	
8/1/19	REPORT OF THE CHAIRMAN AND CHIEF EXECUTIVE	
	<p>A joint report setting out key issues from the Chairman and Chief Executive was received.</p> <p>In introducing his report the Chairman highlighted the following points:</p> <ul style="list-style-type: none"> • An expression of interest had been received from Professor Julian Hopkin at Swansea University in replacing Professor Ceri Phillips as an Independent Member on the ABMU Board; • Andrew Davies had recently sat on the interview panel for a new Vice Chancellor at Swansea University the outcome of which would soon be announced. • This meeting represented Tracy Myhill’s first anniversary as Chief Executive of ABMU and thanked her for the positive impact she was having upon the organisation. <p>In introducing her report, the Chief Executive highlighted the following points:</p> <ul style="list-style-type: none"> • The Targeted Intervention (TI) meeting between Welsh Government and ABMU representatives had taken place at the end of November 2018 (rather than October as set out in the report) and the meeting scheduled December 2018 had been cancelled which was viewed as a sign of increasing confidence in ABMU. The Joint Executive Team which had taken place in mid-December 2018 had also been positive. The next TI meeting would take place in early February 2019; 	

- Unscheduled care continued to present a challenge however performance was better than 12 months previously with a small over achievement against planned care;
- The completion of appointments to the Executive Team had enabled an appointment to be made to the position of Deputy Chief Executive. The Remuneration & Terms of Service Committee was to further discuss the remit of the post. Chris White, Chief Operating Officer had agreed to assume this additional role;
- The recent publication of a report by Health Inspectorate Wales (in relation to ABMU's handling of the employment of Kris Wade). Tracy Myhill reiterated apologies both personal and from the Board to the patients involved in this matter for the part the organisation played in terms of its initial response and the length of time taken to investigate the matter as well as condolences to the murder victim's family for the loss of life caused by Kris Wade's abhorrent actions. ABMU had been acknowledged by both Welsh Government and HIW have taken on board lessons and strengthened processes but remained on an improvement journey. Tracy Myhill said ABMU supported the report's recommendations which brought impetus to deliver on all the recommendations many of which were in train with assurances being provided that the remainder would be completed in a timely way. ABMU's formal response was scheduled to be finalised in the next two weeks and with updates being reported through the Quality & Safety Committee to the Board. The findings of the review would result in an all-Wales review of Disclosure and Barring Service checks to further strengthen safeguarding systems. She offered thanks were offered to learning disability service staff for their commitment through a difficult time.

In discussing the reports the following issues were raised:

Andrew Davies commended Tracy Myhill for the way she had dealt with the issues. Mark Child said that everyone had a responsibility to be aware of what to do when they became aware of any such allegations.

With reference to the pending organisational name change to Swansea Bay University Health Board (which was taking place on 1st April 2019), Mark Child asked if this would prompt a change to name of the Western Bay Health & Social Care Programme. Andrew Davies stated that he was aware that this was under consideration and that the Regional Partnership were also proposing a name change. In respect of the latter he asked Board members if they were supportive of the proposal around West Glamorgan Regional Partnership Board and this was confirmed.

	<p>Alison James stated that third sector organisations were involved in feeding back on the proposed name change.</p> <p>With reference to the recommendation for a single thoracic surgery centre located at Morriston Hospital, Emma Woollett sought clarity as to funding arrangements. Siân Harrop-Griffiths stated that Welsh Health Specialised Services (WHSSC) were currently developing a commissioning framework which would lead to a business case that would detail any additional capital or revenue requirements. She added that short-term work was also underway between the medical directors in Cardiff and Vale University Health Board and ABMU around clinical job planning issues.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted. - The proposed change of name to Western Bay Regional Partnership Board be supported. 	
9/1/19	CLINICAL SERVICES PLAN AND ANNUAL PLAN 2019/20	
	<p>A report seeking approval of the Clinical Services Plan (CSP) and approval of the Annual Plan 2019/20 for submission to Welsh Government was received.</p> <p>In introducing an update Siân Harrop-Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> • The Organisational Strategy had been approved by the Board in November 2018 since which time the organisation had been concurrently updating its CSP Plan and developing an Annual Plan regarding which there had been significant engagement; • Thanks were conveyed to all who had been involved in contributing the CSP and the Annual Plan documents including the strategy team themselves. <p>In discussing the report the following points were raised:</p> <p>With reference to the CSP, Richard Evans said this was an important document for citizens and whilst ambitious it was seen as a way of developing mechanisms and strategies which would run until 2024 and would require widespread clinical improvement to implement. Sandra Husbands said it was a whole pathway plan which started with prevention.</p> <p>Emma Woollett praised both documents to which independent members had been invited to contribute. Emma Woollett sought assurances that ABMU had sufficient programme management resources to take this forward in a measured way. Siân Harrop-Griffiths acknowledged that robust implementation would be key to the successful delivery of the CSP and that if approved by the Board it was proposed that a clinical services board be established as part of a Transformation Programme which was crucial to the submission of an Integrated Medium Term Plan (IMTP) later in 2019.</p>	

Malcom Lewis congratulated the colleagues on the CSP adding that workforce engagement was crucial for a balanced and inclusive plan.

Hannah Evans stated that the CSP represented the essence of the Transformation Plan but there were other considerations such as how the plan was supported, organised and resourced. Richard Evans commented that the CSP had been received by the GP Cluster Leads earlier that week in recognition of the need for primary and secondary clinical services staff to work more closely together under a single care pathway. He added that whilst GPs were keen to be involved they had highlighted the need for an infrastructure arrangements.

Martyn Waygood sought clarity around how the success measures would be reported to the Board. Siân Harrop-Griffiths stated that the CSP would be delivered through the IMTP with information being channeled through Board committees as appropriate. Sandra Husbands concurred adding that there would be need for common measurement metrics to provide useful indicators.

Reena Owen asked as to the plans for communicating with the local population. Siân Harrop-Griffiths acknowledged there would be need for communication with staff and the public and this would be linked to the new organisation. Sandra Husbands stated that the public would need to be supported to act upon the messages that were published. Mark Child stated that the approach taken in this regard would be key.

Tracy Myhill praised the progress made in developing the CSP which had credibility. She said that the implementation would be important and there would be a need for proactive strong communication both inside and outside the organisation to overcome the skepticism that remained particularly given the previous plan had not been fully delivered. She added that the CSP was a significant part of the organisational plan and thanked everyone involved in contributing to its development.

With reference to clinical service workshops he had attended around the CSP, Andrew Davies said there was evidence of energy and enthusiasm. He said he had recently met with Sophie Howe, Future Generations Commissioner and the ABMU Organisational Strategy, CSP and Annual Plan demonstrated the level of commitment in this regard. He thanked Siân Harrop-Griffiths and her team for the quality of work in developing the documents.

With reference to the draft Annual Plan, Siân Harrop-Griffiths stated that the original intention was to have developed a three-year IMTP but that given the pending transition of Bridgend based services to Cwm Taf University Health Board (as of 1st April 2019) the position was too complex. She referenced the accountability letter appended to the report which set out the organisation's level of ambition and the plan to move to a three-year plan later in the summer of 2019.

Siân Harrop-Griffiths stated that the Performance & Finance Committee had been heavily engaged in the development of the financial content of

the Annual Plan and service performance trajectories. She added that whilst unscheduled care trajectories were ambitious these were linked to a transformation bid in conjunction with two local authorities.

With regard to the workforce section, Siân Harrop-Griffiths stated that this represented a significant step forward and that the workforce templates would be finalised towards the end of February 2019 which had been agreed by Welsh Government on account of the need to take account of the impact of the Bridgend transition. Jackie Davies commented that this was an excellent piece of work which was both transformational and achievable with the necessary elements being given the required focus. Gareth Howells stated that the inputs were already bringing benefits to both patient care and experience. He cited the examples of reduced levels of patient falls and increased screening of patients for diabetes.

Siân Harrop-Griffiths stated that if approved by the Board, the draft Annual Plan would be submitted to Welsh Government and that ABMU would continue to engage with colleagues there around the development of a three-year plan.

Lynne Hamilton thanked colleagues included Performance & Finance Committee members for the support and challenge received in the development of the draft financial plan. She confirmed ABMU would be planning to achieve a balanced financial position in 2019/20 and to develop a sustainable financial plan from then onwards which enabled the organisation to produce the expected levels of service performance.

Lynne Hamilton stated that there were two key risks in achieving financial balance which was why it was not possible to recommend approval of a one-year balanced financial plan at this meeting. With reference to the context in which the organisation was operating, Lynne Hamilton stated that in previous years the level of delivery of savings was between 55-60% and for this reason 'headroom' needed to be built into savings plans to allow for any necessary adjustments during the year. Lynne Hamilton stated that whilst the Bridgend transition represented a risk (as ABMU was effectively transferring 28% of its income), work to assess the organisation's ability to release costs accordingly was taking place alongside assessments of the workforce impacts. She said that this represented a £8.4m gap and the draft financial plan set out the assumptions and risks in this regard. In conclusion Lynne Hamilton recommended to the Board that the plan to balance during 2019/20 be supported.

Andrew Davies thanked the Performance & Finance Committee for their input into the process.

Emma Woollett stated that the Annual Plan had solid foundations but there was a need to maintain a focus on what was being delivered. She expressed the view that some of the tables within the appendices appeared to be more aspirational than others and it was important to maintain an appropriate level of challenge. With reference to the plan to

	<p>improving theatre efficiency she said that this was an important part of the 'high opportunity costs' and required central co-ordination. Emma Woollett acknowledged the size of the challenge that lay ahead and emphasised the need for teamwork to achieve the outturns that were required.</p> <p>Tracy Myhill stated that it was the Executive Team's ambition to secure an approved IMTP in the next financial year which then had the potential to lead to reduce the level of escalation for the organisation. She said that to deliver progress in 2019/20 it was fundamental that the financial elements of the Annual Plan were concluded by 1st April 2019 and that the first quarter service performance for 2019/20 would be a key indicator. She added that it would also be critical to 'own' the Annual Plan and drive delivery forward as a smaller organisation with a westerly focus post April 2019.</p> <p>Tracy Myhill concluded by recommending the draft Annual Plan for approval to be submitted to Welsh Government and undertook to keep the Board informed of feedback.</p>	
Resolved:	<ul style="list-style-type: none"> – The report be noted; – The Accountability Letter be noted; – The CSP be approved; – The Annual Plan 2019/20 be approved for submission to Welsh Government – The finance chapter and templates and planned care trajectories be noted; – The NHS Wales Planning Framework Mandatory Templates be received. – The proposal that Workforce templates be submitted in February 2019 be noted; – The Capital Plan be approved; – The Stage 1 Equality Impact Assessment for the Clinical Services Plan and Annual Plan be noted. 	<p>SHG</p> <p>SHG</p>
10/1/19	CHANGE TO AGENDA ORDER	
Resolved:	Agenda item 3.3 be taken next.	
11/1/19	BOARD PERFORMANCE REPORT	
	<p>A detailed report on current performance was received.</p> <p>In introducing the report Darren Griffiths and Gareth Howells highlighted the following points:</p> <ul style="list-style-type: none"> • The level of emergency admissions had reduced in December 2018 although the number of patients experiencing 12hr or more 	

	<p>waits had increased along with levels of patient acuity. Overall unscheduled care performance was better when compared with the same period in 2017;</p> <ul style="list-style-type: none"> • In terms of stroke care, 3 out of 4 of the indicators were above profile and there had been a step change in terms of admissions to the stroke unit; • For planned care the 36 week profile had been achieved at the end of December 2018 which meant that performance was better than forecast; • The performance in terms of outpatients remained good mirroring performance over the past 12 months; • The performance around the 8 week diagnostic waiting time target was good; • Cancer performance was stable at 87% (31day target) and 94% (62 day target) with a plan in place to address the patient backlog; • As regards infections, the system was coping well with E-Coli, Staphylococcus Aureus and Clostridium difficile all at lower levels than the previous year; • The speed of responses to formal complaints had improved; • The level of patient falls was the lowest in 19 months; • There had been a slight increase in staff sickness/absence rates although long-term sickness had decreased; • Staff statutory and mandatory training compliance was ahead of profile; • Work was underway to incorporate public health, primary care and mental health measures into the performance report to further improve the balance of information provided. <p>In discussing the report the following points were raised:</p> <p>Andrew Davies commented on the positive different in the way performance information was now being presented which allowed the Performance & Finance Committee to scrutinise and challenge the detail for the Board to receive assurance.</p> <p>Chris White stated that whilst inpatient falls were decreasing this was against a backdrop of a very busy clinical environment with patients having positive outcomes.</p> <p>Tracy Myhill asked Darren Griffiths for a view on the areas of greatest concern in terms of performance. Darren Griffiths stated that patients who were 'medically fit' for discharge but could not leave hospital due to additional support arrangements not yet being in place prevented other parts of the hospital system from working as efficiently as they might otherwise. He said that work was ongoing with partner organisations in</p>	
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	<p>this regard and there was no single solution that would address all issues. Tracy Myhill stated that there was a need to reflect on what further actions were needed internally to ensure that internal processes were robust and not contributing to delays. Chris White stated that ABMU was reviewing this aspect as well as working with local authorities to understand what more could be put in place and that this work was being led by the Unit Nurse Director in Primary Care. He added that there were around 90 medically fit patients ready to leave Morriston Hospital each day and if these numbers could be reduced then it would enable systems to be resilient in responding to increased levels of clinical demand when this arose.</p> <p>Maggie Berry stated that in order to address the problem of delayed transfers of care it was essential that ABMU had productive relationships with its partners in local authorities and the voluntary sector. She said that it was also important that patients left hospital with discharge summaries to avoid readmissions.</p> <p>Martyn Waygood sought clarity around the outpatient follow-up position for patients that had gone beyond a target date such as Child & Adolescent Mental Health Services (CAMHS). Emma Woollett stated there was a plan to reduce CAMHS waiting times.</p>	
<p>Resolved:</p>	<p>– The report be noted.</p>	
<p>12/1/19</p>	<p>MAJOR TRAUMA NETWORK</p>	
	<p>A report providing an update on progress with the preparatory work for the implementation of the South Wales Major Trauma Network was received.</p> <p>In introducing the report Siân Harrop-Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> • The Trauma Network Programme Board had been in operation for a number of months; • WHSSC had secured Welsh Government funding for the implementation of a network and both a project manager and administrative support had been agreed which would be hosted through the ARCH Programme Management Office; • There had been a meeting the previous day with Welsh Government representatives who had been reassured by the ongoing joint work around the establishment of the network; • A business case would need to be developed in due course and Morriston Hospital would have a different role given it provided the regional burns and plastics service. 	

Resolved:	<ul style="list-style-type: none"> - The update provided by the NHS Wales Health Collaborative was noted; - The actions being taken forward both within ABMU and in conjunction with Hywel Dda University Health Board to prepare for the implementation of the Trauma Network for the region be noted. 	
13/1/19	MAESTEG DAY HOSPITAL	
	<p>A report outlining the responses received to engagement on proposals to re-provide Day Hospital Services at the Princess of Wales Hospital and seeking support for the further engagement with stakeholders and the local population was received.</p> <p>In introducing the report, Siân Harrop-Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> • The Board had approved the public engagement document around the re-provision of Day Hospital Services in October 2018 and the report provided the outcome of that exercise; • Day Services continued to be provided from the Princess of Wales Hospital at the current time; • Richard Evans, Sandra Husbands and herself had attended a public meeting in Maesteg in November 2018 to discuss the proposals; • The concerns raised related to the plans for the future of Maesteg Community Hospital including any plans for re-provision of respite care which was central to supporting carers. As a result of the concerns raised, the Community Health Council (CHC) were planning, in conjunction with the local authority and Cwm Taf University Health Board, further engagement on the service required in the local community. <p>In discussing the report the following points were raised:</p> <p>Reena Owen asked if there was a vision for what Maesteg Community Hospital would provide. Siân Harrop-Griffiths stated that some elements of the hospital had already been redeveloped with investments in primary care services as part of the Primary Care Strategy. She added that Cwm Taf had confirmed they would be undertaking a review of the roles of their community hospitals post-April 2019.</p> <p>Andrew Davies stated that access to primary care services in Cymmer remained an important issue and work was needed with partners to address concerns.</p>	

Resolved:	<ul style="list-style-type: none"> - The report be noted; - The engagement carried out in relation to the re-provision of Day Hospital Services at the Princess of Wales Hospital be noted; - The responses and concerns raised as part of the engagement process be noted; - The plans to undertake further engagement with stakeholders be supported. 	SHG
14/1/19	INTERIM REVIEW OF WINTER PLANS	
	A report summarising comparative demand and performance data for the November & December periods of 2017 and 2018 and progress against implementation of winter planning initiatives received .	
	<p>In introducing the report, Chris White highlighted the following points:</p> <ul style="list-style-type: none"> • Whilst attendance levels had reduced patient acuity levels had increased in 2018, more patients were being managed without the need for admission; • The number of contacts with GP Out-of-Hours (OOH) service was also reducing; • Escalation levels in 2018 were reaching higher levels but they were also abating more swiftly showing system resilience was improving; • There were maturing working relationships with local authorities with a genuine will to want to address the issues to improve the overall system; • The levels of delayed discharges had significantly increased in 2018 compared with 2017 	
	<p>In discussing the report the following points were raised:</p> <p>Chris White stated that patient acuity was sometimes difficult to define due to the myriad of variables this involved. He added that various services were in place to help avoid patients needing to be admitted to hospital by support them in the community but inevitably this resulted in the most unwell patients being admitted which was putting additional demands on hospital services. He explained that ABMU had an 'immediate release' policy in place whereby patients in ambulances which were needed for 'red' ambulance calls would be moved into trolley areas to await assessment.</p> <p>Martyn Waygood noted levels of attendance at Medical Assessment Units (MIU) and Emergency Departments had reduced whereas the levels of patients requiring admission was increasing. Chris White stated</p>	

	<p>this required further examination by the MIU Group as increased volumes had not been seen at Morriston or Singleton MIUs.</p> <p>Martyn Waygood asked about the common ailment service. Chris White responded that he did not have information regarding this. Emma Woollett suggested that this needed to be included within the Health Board performance report. Richard Evans stated that it would not be possible to record instances where patients self-administered medication but did not seek any form of clinical assessment.</p>	
Resolved:	<ul style="list-style-type: none"> - The update be noted. - The plan to undertake a full review of winter position and the impact of winter planning arrangements during April 2019 be noted. 	
15/1/19	KEY ISSUES REPORTS	
	<p>Key issues reports in relation to meetings of the Performance & Finance Committee on 22nd January 2019 and the Quality & Safety Committee on 6th December 2018 were received.</p> <p>In introducing the Performance & Finance Committee key issues report Emma Woollett highlighted the following points:</p>	
	<ul style="list-style-type: none"> • Significant time had been spent on scrutiny and challenge around the draft Annual Plan; • A report had been received regarding theatre efficiency which had shown that devolving responsibility to delivery unit level had had disadvantages and a working collaborative of three teams had been established. A more centralised approach was required; • A report on delayed follow-up patient reviews had been received and a further report was being prepared; • The committee's remit no longer included items such as medical agency and workforce metrics which were now being reported to the Workforce & Organisational Development Committee. 	
	<p>In introducing the Quality & Safety Committee key issues report Maggie Berry highlighted the following points:</p>	
	<ul style="list-style-type: none"> • The patient story had highlighted variation in services across the organisation which needed to be addressed wherever possible; • Delivery Unit representation at the Quality Forum continued to be disappointing. 	
	<p>In discussing the report the following points were raised:</p>	

	<p>Tracy Myhill stated that the need for delivery units to be represented at the Quality Forum had recently been raised with service directors but would be followed-up once again. She said that it was important the Executive provided any clarity required in terms of the role of the forum, the mechanisms for reporting to it and the role the units had in this process.</p> <p>Maggie Berry stated that she was about to assume the role of Chair of the Health & Safety Committee and Martyn Waygood would be transferring over to Chair the Quality & Safety Committee. She added that she would expect similar reporting structures beneath the Health & Safety Committee as were in place around Quality & Safety issues.</p> <p>Malcom Lewis stated that as of 1st April 2019 the Health Board would be the named litigant for GP legal claims which would intensify the relationship between them and bring greater focus upon the need to learn from mistakes and incidents. Lynne Hamilton stated she was aware this was taking place and would prepare a brief in this respect. Pam Wenger stated that this could form part of the planned update from the Welsh Risk Pool (WRP) being prepared for a future Board Development Session.</p>	
Resolved:	<ul style="list-style-type: none"> – The reports be noted; – Contact be made with delivery units regarding the issues raised around their attendance at the Quality Forum; – Executive Board report being prepared for Tracy Myhill on the changes in liability for claims against GPs post April 2019; – Update on changes in liability for claims against GPs be added to the Board Development Session programme as part of the planned update from WRP. 	<p>GH/CW</p> <p>LH</p> <p>PW</p>
16/1/19	FINANICAL POSITION – MONTH 9	
	<p>A report regarding financial performance to month 9 was received and a draft letter from ABMU to Welsh Government around cash assistance was tabled.</p> <p>In introducing the report, Lynne Hamilton highlighted the following points:</p> <ul style="list-style-type: none"> • The revenue position showed that plans were on-track to meet the agreed £10m deficit control total but this continued to be closely monitored along with savings plan delivery; • Achievement of the 95% level for processing of invoices within 30 days was getting closer to target; • The capital position continued to report a break-even position; 	

	<ul style="list-style-type: none"> • The workforce spend position reflected the payment of a wage award and variable pay was above where it needed to be notwithstanding the winter period; • The key risks being managed related to the £10m deficit control total and overall Referral to Treatment target performance. Both of these issues had been subject to detailed discussions at the Performance & Finance Committee. 	
	In discussing the report, Emma Woollett stated that the key focus needed to be delivery of the end of year position in 2018/19 to avoid any impact at the start of the next financial year.	
Resolved	<ul style="list-style-type: none"> – The report be noted; – The updated £10m forecast deficit position be noted. 	
17/1/19	VOLUNTARY SECTOR FUNDING	
	<p>A report outlining implementation of the Strategic Framework for the Voluntary Sector, the next steps and the proposed timescale for the procurement process once the Bridgend service transition had taken place was received.</p> <p>In introducing the report Siân-Harrop-Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> • The Strategic Framework had previously been approved in March 2017 for the period 2017 – 2020 and outlined the ambitious programme of change based upon maturing working relationships between ABMU and the voluntary sector and was recognised as an exemplar; • Work had been progressing on the implementation of the framework however given work was needed to disaggregate the voluntary sector service level agreements (SLA) in readiness for the Bridgend service transition to Cwm Taf this had been delayed the planned procurement process; • It was proposed that this SLA was extended to March 2021 with without either funding uplift or cost improvement requirements. <p>In discussing the report the following points were raised:</p> <p>Andrew Davies paid tribute to the work undertaken by Joanne Abbott-Davies with regard to the SLA.</p> <p>Emma Woollett stated that when she had seen the financial analysis when the Board approved the framework she had made a request around future monitoring arrangements and therefore this needed to feed-into ABMU's governance reporting processes. She also sought clarity around whether there was a necessity for ABMU to use the OJEU</p>	

	<p>process (Official Journal of the European Union). Reena Owen said that in view of the Future Generations Act it was important that smaller organisations were given an opportunity to get involved. Andrew Davies concurred and advocated Reena Owen's involvement in this regard. It was agreed that the issue be reviewed outside the meeting.</p> <p>Alison James stated that there was a potential for joint SLAs to have an adverse impact on services. Siân-Harrop-Griffiths undertook to also look into this outside the meeting.</p>	<p>SHG</p> <p>SHG</p>
Resolved:	<ul style="list-style-type: none"> - The report be noted; - The extant Strategic Framework for the Voluntary Sector 2017/20 be noted; - The proposed revised timetable for the procurement process for all voluntary sector organisations with the health board be agreed in principle subject to verification as to whether it was necessary to use the OJEC process; - The proposed extension of current SLAs with the voluntary sector to coincide with the conclusion of the procurement process outlined within the report be agreed; - The proposed funding position for these SLAs be agreed; - The Strategic Framework be revised during 2019-20 (which would include the route for financial monitoring and reporting via ABMU governance processes) be agreed. 	<p>SHG</p> <p>SHG</p> <p>SHG</p>
18/1/19	BRIDGEND BOUNDARY CHANGE	
	<p>A report setting out supporting information to the Letter of Assurance required by Welsh Government from both ABM and Cwm Taf University Health Boards providing assurance on readiness to transfer responsibility for the commissioning and provision of services for the population of the Bridgend County Borough Council area was received.</p> <p>In introducing the report Hannah Evans made the following points:</p> <ul style="list-style-type: none"> • The detailed report had been considered by the Joint Transition Board on 22nd January 2019 who had recommended it for approval by the respective health boards; • The draft Letter of Assurance had been developed in partnership between ABM and Cwm Taf and had been considered and approved by the Cwm Taf Board at their meeting the previous day; • The three areas requiring approval related to changes to clinical services schedule, transfer of properties and a letter of assurance enabling the Welsh Government to lay the Boundary Change 	

	<p>Order and Transfer Order before the National Assembly for Wales resulting in this becoming legally effective as of 1st April 2019;</p> <ul style="list-style-type: none"> • The report set out key areas of progress which underpinned the assessment of readiness for transition; • The next steps would be to further analyse the expected financial impact of the transition and this would be further discussed with the Welsh Government as part of ABMU's scheduled TI meeting on 4th February 2019; • There was a Joint Executive meeting taking place between the two health boards on 17th February 2019. 	
Resolved:	<ul style="list-style-type: none"> – The report be noted; – The draft Letter of Assurance be approved; – The further work planned be noted; – The Property Transfer list be approved. – The changes to clinical services schedule be approved. 	<p>HE</p> <p>HE HE</p>
19/1/19	LINC PROGRAMME	
	<p>A report seeking approval of an outline business case for investment in an electronic solution and services for pathology across Wales known as the LINC Programme and inclusion of estimated costs in the IMTP was received.</p> <p>In introducing the report the Matthew John highlighted the following points:</p> <ul style="list-style-type: none"> • The report set out the outline business case background and scope, anticipated benefits, progress to date, strategic risks and issues as well as local issues and financial implications and each health board were being asked to support it; • There was no further means by which the existing pathology system contract could be further extended beyond June 2020; • The lessons learned in terms of the outline business case had been discussed with Tom Crick, ABMU Independent Member; • The future supplier would be funded on the basis of key deliverables; • There were dedicated technical resources at national level to take this project forward; • It would be necessary to continue to fund the existing system alongside the new system until that was fully functional; 	

	<ul style="list-style-type: none"> The business case had been considered by the Executive Board and the Investments & Benefits Group prior to being presented to the Board for approval; <p>In discussing the report the following points were raised:</p> <p>Whilst indicating his support for the outline business case, Chris White stated that the full business case needed to be clear in terms of the benefits realisation. Emma Woollett concurred.</p> <p>Matthew John stated the Board was being asked along with other health boards in Wales to support in principle to move forward to the next stage which would involve the development of a full business case.</p> <p>Lynne Hamilton suggested there was need for a check-point at the procurement stage which would provide the required assurance in terms of benefits realisation.</p> <p>Tracy Myhill suggested that Judith Bates, LINC Programme Director be invited to attend a future Board Development Session to discuss this further.</p> <p>Following discussion it was suggested that the Board approved the recommendations with the following caveats:</p> <ol style="list-style-type: none"> (1) Further work is undertaken with deputy Directors of Finance regarding the apportionment of costs and the financial model within the full business case to better illustrate over the life of the contract what the current and new costs as well as the delivery of savings; (2) The introduction of a check-point at the procurement stage to provide greater assurances regarding benefits realisation. (3) Local resource requirements for all phases of the project be worked-up, taking into account other pathology resource pressures such as the LIMS1 upgrade and the LIMS blood transfusion implementation. 	
<p>Resolved:</p>	<ul style="list-style-type: none"> The report be noted; The LINC outline business case be approved in principle on the basis of the above caveats to allow the development of a Full Business Case; The proposal that the estimated costs be outline business case and the LINC programme be included within ABMU's IMTP plans be supported; Judith Bates, LINC Programme Director be invited to attend a future Board Development Session to discuss this further. 	<p>MJ</p> <p>MJ</p> <p>MJ</p>

20/1/19	FUNDED NURSING CARE (FNC)	
	A report providing an update on seeking approval on the FNC issues including work following the Supreme Court Judgement to ensure compliance and approval for an uplift to the 2018/19 FNC rate was received .	
Resolved	<ul style="list-style-type: none"> – The report be noted; – The need to revised the FNC rate approved by the Board in March 2018 be noted; – The NHS pay award which had led to the 2018/19 FNC rate being calculated be noted and the NHS component of the 2018/19 rate of £167.87 (with a further component payable by local authorities) be approved. 	GH
21/1/19	KEY ISSUES REPORTS – BOARD COMMITTEES	
	<p>An update on matters considered by various Board committees was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Pam Wenger stated that the Audit Committee had met the previous week and that a key issues report would be received in that respect at the March 2019 meeting of the Board.</p> <p><u>Health and Safety Committee</u></p> <p>Martyn Waygood stated that service delivery units were now attending the Committee to report on key issues. There had been three internal audit reports on fire safety which had a ‘limited assurance’ finding. Both Gareth Howells (<i>who had now assumed the executive lead for the issue of health & safety</i>) and Maggie Berry (<i>who was taking over as the Chair of the Committee</i>) were aware of this. Internal Audit would be continuing to monitor compliance. Martyn Waygood concluded by stating that the issue of backlog maintenance would be an issue that would be reviewed over the coming year.</p> <p><u>Charitable Funds Committee</u></p> <p>Martyn Waygood stated that the post of Fundraising Manager was now subject to recruitment.</p> <p>As a result of the transition of Bridgend services to Cwm Taf, a proportion of ABMU’s charitable funds would be transferring as of 1st April 2019.</p>	

	<p><u>Workforce & Organisational Development (W & OD)</u></p> <p>In the absence of the Committee Chair (Ceri Phillips) Hazel Robinson stated that the most recent meeting of the W & OD Committee had supported the proposed way forward in respect of a W & OD Framework and this would be brought to the March 2019 meeting of the Board.</p> <p>Andrew Davies stated that Tom Crick had agreed to act as the Chair of the Committee going forward and he would be communicating this to Independent Members by email.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted. 	
22/1/19	WALES AUDIT OFFICE (WAO) REPORTS	
	<p>A report setting out the findings of WAO's audit work during 2018 in relation to the Structured Assessment and the Annual Audit Letter was received.</p> <p>In discussing the report the following points were raised:</p> <p>In his absence Martin Sollis had asked that thanks be conveyed to Carol Moseley and WAO colleagues for the constructive and supportive approach that had been adopted. He had commented that the Structured Assessment contained a significant number of recommendations due to the level of changes within the organisation. In his view the report represented a fair and balanced position given the considerable work that had been undertaken to improve arrangements alongside day-to-day business requirements. Finally his comments noted the commitment to develop a Board Assurance Framework from April 2019 and acknowledged the need to strengthen quality governance arrangements.</p> <p>Andrew Davies invited Carol Moseley to respond. Carol Moseley thanked ABMU representatives for supporting WAO's work saying that the 2018 audit had felt different in terms of ABMU having many new Board appointments and whilst some significant challenges remained, it had been pleasing to see the approval of the Organisational Strategy in the autumn of 2018 and the CSP at today's Board meeting. She added that a significant degree of positive work had been seen and the foundations for actions were now in place for the strengthening of risk management although there was more to do in terms of quality governance. In her concluding comments, Carol Moseley referenced the annual audit of ABMU's accounts and the issuing of a substantive report. She said she hoped the organisation was now on a pathway to deliver an improved financial position.</p>	
Resolved	<ul style="list-style-type: none"> - The report be noted; - The Structured Assessment 2018 be supported; 	PW

	<ul style="list-style-type: none"> - The management response to the Structured Assessment was due to be presented to the Audit Committee in March 2019 be noted. 	
23/1/19	ABMU LOCAL PARTNERSHIP FORUM	
	<p>A report on key issues discussed at the ABMU Local Partnership Forum on the 28th November 2018 was received.</p> <p>In discussing the report Hazel Robinson stated that she felt the Forum was truly operating on the basis of a partnership and she had seen a positive and constructive relationship developing over the past six months. Tracy Myhill and Jackie Davies concurred, with Jackie Davies adding that she felt there was a strong sense of trust.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted. 	
24/1/19	KEY ISSUES - ARCH PROGRAMME BOARD	
	A key issues update which included an overview of the portfolio design and governance arrangements as well as progress and achievements to date was received and noted .	
25/1/19	NHS WALES COLLABORATIVE LEADERSHIP FORUM	
	The minutes of the meetings of the above Forum held on 14 th June and 6 th September 2018 minutes of the NHS Wales Collaborative Leadership Forum were received and noted .	
26/1/19	JOINT REGIONAL PLANNING & DELIVERY COMMITTEE (JRPDC) UPDATE	
	An update from the Joint Committee meeting held on 3 rd December 2018 was received and noted .	
27/1/19	ITEMS FOR INFORMATION	
	A. Matters Reported In-Committee At Previous Meeting	
	A report outlining matters reported in-committee at the November 2018 meeting was received and noted .	
	B. Reports on Corporate Governance Issues	
	A report outlining corporate governance issues including the application of the Common Seal, Welsh Health Circulars issued, the Board Business Cycle was received and noted .	

28/1/19	ANY OTHER BUSINESS	
	There was none.	
29/1/19	DATE OF NEXT BOARD MEETING	
	The date of the next Board meeting was 28 th March 2019.	

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Andrew Davies (Chairman)

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Date: