

Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board



	Agenda Item	<b>4</b> iii
JS	Open	I
Stakeholder Reference G	Group	
Joanne Abbott-Davies, Partnerships	Assistant Director	of Strategy &
Alison James, Chair, Stakeholder Reference Group (SRG)		
Siân Harrop-Griffiths, Dir	ector of Strategy	
07 November 2018		
	Joanne Abbott-Davies, Partnerships Alison James, Chair, Sta Siân Harrop-Griffiths, Dir	Js Open Stakeholder Reference Group Joanne Abbott-Davies, Assistant Director Partnerships Alison James, Chair, Stakeholder Reference O Siân Harrop-Griffiths, Director of Strategy

Summary of key matters considered by the committee and any related decisions made.

#### **Patient Story**

A patient story was presented, including a video, by Lorna Tasker, Head of Rehabilitation Engineering entitled "Pressure Ulcers – How the PUPIS team improve the health of patients". The SRG noted the improvement in the patient's experience as a result and suggested ways in which the information on moving to minimize the risk of developing pressure ulcers could be distributed through voluntary sector and carers groups.

#### Annual Quality Statement (AQS)

It was reported that the Editorial Advisory Group (a subgroup of the SRG and Disability Reference Group) which had been arranged to consider the AQS had been cancelled because information was not available for it to consider. Cathy Dowling reported that Welsh Government guidance had now been agreed and would be based on the format of previous years, with the requirement to complete the AQS by 31<sup>st</sup> May 2019, and would include 9 months' worth of data. The previous proposal from the SRG to develop a technical document which met the requirements of Welsh Government with a separate public facing document which addressed the concerns which the public had and the issues they wanted to receive updates on from the Health Board was confirmed as a sensible way forward. To ensure that the public facing document addresses the issues of importance to the public it was agreed that the Health Board would use its ongoing engagement mechanisms with the public, service users, Carers and the voluntary sector to ask them what are the top 10 issues / topics they would like to receive updates on progress from the Health Board within the AQS.

#### **Membership of SRG**

It was noted that one of the elected representatives had not attended for 3 meetings and so a replacement representative would be sought. There had been difficulties finding a replacement faith representative and so the Health Board Chaplaincy service had been approached for a nomination, a response was awaited. New members joining the SRG to represent race and the Editorial Advisory Board were welcomed as well as Raymond Ciborowski, the new Independent Member for the SRG. An email had been sent to all members stressing the importance of the SRG and asking for people to nominate deputies where appropriate to ensure attendance.

#### Updates on Service Changes

Joanne Abbott-Davies updated the SRG on the Thoracic Surgery Consultation and the intention for the outcome to be presented to all the Health Boards in October 2018.

She also updated the SRG on the outcome of the engagement on changes to NHS services which had been considered at the July Health Board meeting. The setting up of a monitoring and evaluation group to track the impacts of the service changes and bed reductions was welcomed.

#### Nurse Staffing Act – Operational Handbook

Members noted the key issues from the operational handbook and updated the SRG on the implementation of the Act.

#### Update on ARCH / Regional Planning

Members received an update on the activities of A Regional Collaboration for Health (ARCH) and the regional planning underway with Hywel Dda Health Board. The SRG was pleased to hear that the programme was progressing and that its priorities had been confirmed going forward.

#### Service Change

Joanne Abbott-Davies updated the group on a range of service changes including:

- Adult Thoracic Surgery public consultation
- Proposed Changes to NHS Services
- Western Bay Area Plan
- Maesteg Day Hospital

The group asked that the Joint Monitoring and Evaluation Group which was being established to oversee the implementation of bed changes as a result of service reconfiguration asked that pre-empt beds should be considered as part of its work.

#### **Bridgend Boundary Change**

The Bridgend Transition Programme Monthly update was discussed. It had been agreed that the Chairs of both SRGs and leads from each Health Board would meet to understand the different approaches taken and how to ensure the voice of Bridgend residents would be heard within the reformed Cwm Taf SRG. A date for this meeting had been set, but recently cancelled and so another date was awaited.

#### **Report on Seasonal Plan**

A report on the Health Board's Seasonal Plan was discussed. SRG members agreed that if good things were happening in one hospital, they should be standardized and applied in other hospitals. It was also necessary to standardize what these services were called across the whole Health Board because of the confusion this caused to patients who increasingly were receiving services across multiple hospitals. The example of the Patient Advice and Liaison Service was given – with some of these teams being called PALS and others PIPS. Recently it had been agreed that all these services should be called PALS and this was welcomed by the group.

Key risks and issues/matters of concern of which the board needs to be made aware:

There are no key risks, issues or matters of concern to bring to the board's attention.

Delegated action by the committe	e:
None.	
Main sources of information rece	ived:
<ul> <li>Nursing Staffing Act</li> <li>Updates on service change</li> <li>Update on Bridgend Bounda</li> <li>Highlights from sub-groups repo</li> </ul>	
None.	
Matters referred to other committ	ees
No matters were referred to other c	ommittees.
Date of next meeting	24 September 2018

## **Appendix A**

## ABMU Health Board Advisory Group Annual Report

April, 2017 – March, 2018

## **Stakeholder Reference Group**

#### 1. Name and role of person submitting this report:

Alison James, Chair, ABMU Health Board Stakeholder Reference Group

#### 2. Dates covered by this report:

April, 2017 to March, 2018

### 3. Number of times Committee met:

The SRG held the following formal meetings:

3<sup>rd</sup> May, 2017 5<sup>th</sup> July, 2017 6<sup>th</sup> September, 2017 6<sup>th</sup> November, 2017 (cancelled as meeting was not quorate) 10<sup>th</sup> January, 2018 7<sup>th</sup> March 2018 (cancelled as meeting was not quorate)

Alison James the Carers Representative continues to Chair the Stakeholder Reference Group with Mags Griffiths, Children's representative's support as Vice Chair.

## 4. Attendance at meetings from each Special Interest Group

As you can see from the above, the Stakeholder Reference Group (SRG) met 3 times between April, 2017 and March, 2018 with the exception of November, 2017 and March, 2018 when, due to the number of apologies received the meeting was cancelled due to it not being quorate.

The following table outlines the membership of the Group as at 2017/18, together with the current vacancies.

1. Statutory stakeholders	2017/18
Local Authorities	
Amanda Aldridge, City & County of	1
Swansea	
Judith Brooks, Bridgend County Borough	1
Council	
Neath Port Talbot County Borough Council	No mombor
	No member
Town/ Community Councils	
Redvers Davies, One Voice Wales	1
Alan Carter	from 3/18
Police	
South Wales Police	No member
Fire and Rescue	
Mick Crennell, Mid Wales Fire & Rescue	1
Service meeting not attended by	
T/DCFO Rob Quin	
Environment	
National Resources Wales	Declined
Job Centre Plus/Want to Work	
Job Centre Plus	No member
Ambulance Services	
Louise Platt, Wales Ambulance Services	1
Trust meeting now attended by Jeff Morris	

Housing Associations	No member
Probation	Declined
Third Sector Care Providers	
Melanie Minty, Care Forum Wales	1
2. Equality & Other Specialist	
dimensions:	
Elected by Third Sector Health, Social Care Wellbeing Network	
Kelly Jones, Older People	1
Brendan Campbell, Disability	1
Shehla Khan, Race/ethnicity	1
Jean Humphreys, Faith/Belief	1
Anne O'Regan, Gender	Vacancy filled 01/18
Transsexual	No member
Sexual Orientation	No member
Neil Williams People with a Learning Disability	1
Alison James, Carers (Chair)	1
Mark Hopkins, Mental Health	1
Mags Griffiths, Children & Young People	1
Jamie Harris, Substance Misuse	Vacancy

	filled 01/18
Dean Baker, Welsh Language	1
Overall Total	17

### Members

The Group was successful in attaining two new members in January, 2018, namely Anne O'Regan from Both Parents Matter representing Gender and Jamie Harris from Barod Cymru who becomes the Group's Substance Misuse Representative.

In January, 2018, the Group sadly lost one of its real characters, Redvers Davies, from One Voice Wales. Redvers had been the Group's Town and Community Council Representative for many years and will be remembered for his humour, enthusiasm and love of life.

Alan Carter took over the representation of One Voice Wales from March, 2018.

### Attendance

### **Statutory Organisations with Nominated Representatives**

- Bridgend County Borough Council and Swansea Council have been represented at most of the meetings during the year, however Neath Port Talbot County Borough Council have not sent a representative to any meetings since 2015. Efforts continue to encourage participation from NPT CBC.
- Both Job Centre Plus and South Wales Police have not attended the Stakeholder Reference Group in 2017.
- Probation and Natural Resources Wales declined the invitation to join the Group.

 ABMU Health Board retains the responsibility for liaison with the statutory sector organisations to encourage their representation and to proactively and sensitively consider any evolving issues in relation to attendance, relevance and introductions to the meeting, Chair and Vice Chair. ABMU Health Board staff, along with the SRG Chair actively worked to promote attendance during 2017/18, and will be continuing to do so during 2018/19.

## **Specialist (Equality) Dimensions**

- Attendance at meetings has been good with all elected representatives valuing this important interaction and communication with ABMU Health Board.
- Apologies for poor attendance have been received from the Learning Disabilities representative, as a result of staff shortages preventing support being available at the meetings. Vacancies are currently being advertised which will address the problem.
- The Group has been successful in attaining a representative for Substance Misuse and Gender in January, 2018, although the attempts to gain representatives for Transgender and Sexual Orientation have not been successful to date. The Building Stronger Bridges (BSB) facilitators continue to promote these vacancies.
- The ABMU Health Board funded BSB facilitators continue to actively work within the 3<sup>rd</sup> Sector to ensure accurate and timely take up of representation and to proactively and sensitively consider any evolving issues. They support new members, complete the nominations process for vacant seats and hold a key role in supporting the interaction between health and the 3<sup>rd</sup> Sector.

### **Health Board**

- Meetings of the Group were attended by the Director of Nursing and Patient Experience, or elected representative, and a Non Officer Member of the Health Board.
- One meeting was attended by the Vice Chair of the Health Board.

- Management support was provided by the Assistant Director of Strategy and Partnerships.
- November, 2017 saw the departure of Rory, Farrelly the Director of Nursing and Patient Experience, to take up a new post in Ireland. The post remained vacant until January, 2018 when the post was filled on an interim basis.
- In January, 2018, the Group reviewed the tenure of membership which was extended to 4 years (to reflect the tenure of the Non Executive Directors of the Health Board). The Memorandum of Understanding was subsequently updated and submitted to ABMU Health Board in January, 2017 for agreement to this revised term which was confirmed.

### 5. Internal Audit – Stakeholder Engagement and Communication

In April, 2017 an Internal Audit report was received on Stakeholder Engagement and Communication which in its conclusion made three recommendations:

- Establishment of a SRG Web Page which would be displayed on the ABMU Health Board home page.
- Establishment of an Action Log to coincide with the meeting notes.
- Ensure that the Group's business cycle is aligned with that of the Health Board.

These recommendations have been implemented in full.

### Work undertaken during this period:

## Areas of work Planned and Completed in relation to ABMU business

- Feedback from ABMU Health Board meetings discussed at every meeting
- A patient story presented and discussed by the Group prior to it being submitted to the Health Board.

- The Executive Lead, nominated representative and Non Officer Member is in attendance at every meeting
- A Key Issues Report highlighting the matters discussed at the SRG is presented to each Health Board.
- ABMU Health Board Annual Quality Statement has been commented on and amended accordingly,
- Updates on the ARCH Programme have been provided for the Group
- Commissioning Strategy changes and the disbandment of the Commissioning Boards was discussed and comments were noted
- Seasonal Plan issues were discussed and our comments were noted for action
- The SRG ensured alignment to the ABMU Health Board Business Cycle for effectiveness of our comments
- Updates on the Integrated Medium Term Plan/Annual Plan have been provided.
- The Editorial Advisory Board was re-established as and when required to review the Annual Quality Statement and other public facing document.
- Patient Experience Strategic Programme, including the decision to include patient experience within the SRG's responsibilities – this has given patient experience a direct focus within the Health Board's reporting systems. The Group has been pivotal in changing the reporting mechanism into a more user friendly format.

# Areas of work planned and completed in relation to wider strategies

• Western Bay Programme

- Community Networks
- Social Services and Well Being Act
- Establishment of SRG Web Page on the Health Board's website.
- Well Being of Future Generations Act

## Areas of work planned and completed specifically in relation to the SRG:

- Meetings schedule aligned to Health Board meetings to endure effectiveness of SRG interaction with the Board
- SRG member terms of office and succession planning

## Areas of work planned in relation to ABMU that were not addressed.

 The SRG has produced a guidance for the production of reports intended for use within the Health Board. The guidance highlighted specific needs to enable accessibility for people with disabilities. Unfortunately, the guidance has yet to be implemented within the Health Board or utilised for Board papers.

# Areas of work planned but amended in relation to SRG specifically:

- Following the Internal Audit report undertaken in January, 2017 on Stakeholder Engagement and Communication – Stakeholder Reference Group the Group implemented the following recommendations:
  - Action Plan
  - Establishment of a designated web-page for the Group
  - Alignment of the Group's work programme with the Health Board's.
- 6. What difference did the SRG make during the year 2017-18?

- An Executive and Non Executive Member of the Health Board now attends every meeting and reports to the Health Board along with the Chair.
- Consolidated the importance and remit of the SRG to further advocate our contributions within the health board with structured planning for our future.
- ABMU Annual Quality Statement was discussed with our comments noted for amendments. We ensured that 'easy read' options for public-facing information were taken into consideration and made considerable changes to these publications.
- We were asked formally as a Group to consult and give our views on all significant Health Board activities. These views and comments have been provided as feedback into the processes for change.
- We noted and amended our work plan to ensure alignment with the Health Board's business cycle.
- The SRG has been consulted at all stages on the development of the revised Annual/Integrated Medium Term Plan (IMTP).

### **General Impact:**

- Engagement with SRG is an accepted on-going method of engagement for the Health Board
- Engagement with the SRG and the 3<sup>rd</sup> Sector is now happening at several levels within a constructive agreed format and is ongoing and transparent
- The Group were presented with information on the following topics and subsequently submitted formal responses:

### **Patients Stories**

As part of the on-going relationship between the SRG and Health Board, the Group has been the recipient of Patient Stories earmarked for discussion at a future Health Board meeting. This provides the Group with an opportunity to review the Patient Story, which are usually received in the form of a video presentation, and to provide comments on how it could be improved before submission to the Health Board.

The Patient Stories viewed this year were as follows:

- Suzanne Holloway, Head of Quality and Safety at Morriston Hospital gave a presentation entitled "A Patient's Journey through Health".
- Samantha Williams, Services Group Manager, Eirlys Thomas, Head of Nursing presented a video which focused on the newly established ABMYouth and its members.
- Lesley Jenkins, Unit Nurse Director told the Group about the innovative 4 month pilot project that helped elderly patients stay more independent and active during their inpatient stay on Ward C, Neath Port Talbot Hospital.
- Dr. Sue Morgan, Consultant in Palliative Care, Morriston Hospital, presented a patient story, outlining a family's experience of end of life care at Singleton Hospital and at home.

Other presentations were received from

- Prue Thimbleby, Arts in Health Co-ordinator on the diversity of the activities available and work undertaken within the Department.
- Prudent Innovation in the use of Proton Pump Inhibitors across the ABMU Health Board Area presented by Rhys Howells, Pharmacy

## 7. Main action plan themes/tasks due for completion in forthcoming year:

It is both a year for further consolidation and growth:

We can look at developing opinions from SRG members with a stronger link to each special interest perspective and nominated organisational perspective, e.g. Annual Report of Health Board; Development of an Annual/Three Year Plan (Integrated Medium Term Plan); Annual Quality Statement and Western Bay Programme.

Alongside our planned activity for 2018-2019, in line with Health Board cycle, we will also examine other areas of relevance to stakeholders and unplanned agenda items being considered at each Health Board meeting.

## Additional to note:

The Group, will as far as possible make space on Agenda, for key pieces of legalisation/major changes and/or issues that arise. However, the Group is also able to ask ABMU to respond formally, at any time, on the potential impact on ABMU interests of new and relevant changes and issues in relation to their special interest / equality topics.

## 8. Key issues to highlight going forward

- There needs to continue to be a focus on raising awareness of the SRG and our activities – across ABMU and other statutory and 3<sup>rd</sup> sectors
- To provide a press release to promote the SRG
- The Building Stronger Bridges (BSB) facilitators to continue to actively work to fill representative slots – both for the SRG and Health Board Project Boards
- SRG members to represent our commitment at regional Health Social Care & Well Being (HSCWB) meetings, clarifying how individual 3<sup>rd</sup> Sector members link to their defined areas of knowledge
- The BSB facilitators will lead on ensuing the process for appointing representatives to the Group is clear and transparent
- Examine how our feedback impacts on change within ABMU and how we evidence the difference we have made

### 9. Further Comments:

- The ABMU Health Board Memorandum of Understanding with SRG has made a significant and positive difference and is a working document for change
- The Health Board recognises the SRG with an Associate Member place on the Board for the SRG Chair, plus Executive and Non Executive leads within the framework of the Group. This provides for 3 well-informed Health Board members providing insight into the work and development of SRG

In conclusion, meetings have been regular and well attended by 3<sup>rd</sup> Sector representatives and have been busy and constructive. Statutory sector attendance has also been good; however work needs to be undertaken to ensure engagement by these key organisations is prioritised.