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Abertawe Bro Morgannwg
University Health Board



Meeting Date	27th September 2018			Agenda Item: 4ii.
Report Title	Committee Chairs' Report			
Report Author	Liz Stauber, Committee Services Manager			
Report Sponsor	Pam Wenger, Director of Corporate Governance			
Freedom of Information	Open			
Purpose of the Report	The purpose of the report is to outline discussions undertaken by board committees and other groups reporting to the board.			
Key Issues	This report focuses on all the board's corporate objectives but specifically relates to embedding effective governance and partnerships.			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
			✓	
Recommendations	The board is asked to note the report.			

COMMITTEE CHAIRS' REPORT

1. INTRODUCTION

The purpose of the report is to provide an update on matters considered by the board's committees. The board is asked to note a number of summary reports from the chairs of the sub-committees and where appropriate, ratify any approvals made.

2. BACKGROUND

The board will be aware that a number of committees have been established under the health board's standing orders and each committee will present reports to the board during the course of the year outlining key discussions, issues and risks discussed during meetings.

3. REPORTS FROM COMMITTEE CHAIRS

(i) Strategy, Planning and Commissioning Group (appendix 1)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 25th July 2018.

(ii) Audit Committee (appendix 2)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 31st July 2018.

(iii) Health and Safety Committee (appendix 3)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 7th August 2018.

(iv) Workforce and OD Committee (appendix 4 and 5)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 16th August 2018 and ratify the revised terms of reference.

(v) Mental Health Legislation Committee (appendix 6)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 24th August 2018.

4. GOVERNANCE AND RISK ISSUES

Any governance risks and issues are managed via the committee meetings and exception reports will be provided to the board by the respective chairs.

5. FINANCIAL IMPLICATIONS

There are no financial implications for the board to consider/approve.

6. RECOMMENDATION

Members of the board are asked to:

- **NOTE** the content of the reports;
- **APPROVE** the terms of reference for the Workforce and OD and Quality and Safety Committees.

Governance and Assurance					
Link to corporate objectives <i>(please ✓)</i>	Promoting and enabling healthier communities	Delivering excellent patient outcomes, experience and access	Demonstrating value and sustainability	Securing a fully engaged skilled workforce	Embedding effective governance and partnerships
					✓
Quality, Safety and Patient Experience					
Ensuring the board carries out its business appropriately through its sub-committees and aligned with its standing orders is a key factor in the quality, safety and experience of patients receiving care.					
Financial Implications					
No financial implications for the board to be aware of.					
Legal Implications (including equality and diversity assessment)					
It is essential that the board complies with its standing orders, which includes receiving updates from its sub-committees.					
Staffing Implications					
No staffing implications for the board to be aware of.					
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)					
The report outlines work undertaken by committees and joint committees to review the short term performance and finance position of the health board as well as focussing on the longer term sustainability. The governance structure aims to identify issues early to prevent escalations and the committees integrate into the overall board arrangements. In addition, the health board works collaboratively with partners as part the joint committees.					
Report History	This report is a standing item on the board's agenda.				
Appendices	As outlined in the main report.				



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		Agenda Item	4iii (a).
Freedom of Information Status		Open	
Reporting Committee	Strategy, Planning and Commissioning Group		
Author	Liz Stauber, Committee Services Manager		
Chaired by	Andrew Davies, Chairman		
Lead Executive Director (s)	Siân Harrop-Griffiths, Director of Strategy		
Date of last meeting	25 July 2018		
Summary of key matters considered by the committee and any related decisions made:			
<ul style="list-style-type: none"> - Organisational Strategy – members received a presentation outlining the work to date to develop the organisational strategy. The group discussed a number of ways in which the strategy could be developed further before it was presented to the board in August 2018. Following this, it needed to be tested with groups outside of the board but this could be undertaken through meetings already organised rather than arranging sessions specifically. 			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none"> - There are no key risks and issues/matters of concern of which the board needs to be made aware 			
Delegated action by the committee:			
No delegated action was taken by the committee at this meeting.			
Main sources of information received:			
No further sources of information to note.			
Highlights from sub-groups reporting into this committee:			
None received.			
Matters referred to other committees:			
None identified.			
Date of next meeting	08 October 2018		



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		Agenda Item	4iii (b)
Freedom of Information Status		Open	
Reporting Committee	Audit Committee		
Author	Liz Stauber, Committee Services Manager		
Chaired by	Martin Sollis, Non-Officer Member		
Lead Executive Director (s)	Pam Wenger, Director of Corporate Governance		
Date of last meeting	31 July 2018		
Summary of key matters considered by the committee and any related decisions made.			
<ul style="list-style-type: none"> - Governance Work Programme – the committee received the latest iteration of the governance work programme outlining progress against a number of external reviews, which now included the recommendations of the NHS Wales Delivery Unit’s review of serious incidents. - Finance Update – members heard that the period three demonstrated continued improvement but the run rate to achieve £25m deficit was still above what it needed to be and the main issues affecting financial performance were under delivery of savings targets and only £15.7m of the £21.3m savings had been identified. It was noted that board discussions had been clear in relation to not compromising quality and safety to achieve a better financial position and the committee stated that any savings schemes needed to be signed-off by the Medical Director or Director of Nursing and Patient Experience to safeguard against any potential adverse quality issues. 			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none"> - NHS Wales Informatics Service (NWIS) Business Continuity Incidents – members received an update on the recent data outages relating to national systems. It was noted that a joint management board of NWIS and other NHS Wales organisations had been established and issues were now discussed and mitigated through this forum. 			
Delegated action by the committee:			
<p>The committee agreed the following:</p> <ul style="list-style-type: none"> - Losses and special payments; - Freedom of Information Act policy; - Revised technical accounting process for fixed assets. 			
Main sources of information received:			
<ul style="list-style-type: none"> - The committee heard that work to develop a board assurance framework had progressed and a draft version would be received at the next meeting; - Members received a report outlining a review of outstanding internal and external audit recommendations to determine which ones were extant and those which had been superseded. An updated list was to be received at the September 2018 committee; - The trading account for Bridgend clinic for 2017-18 was received and noted with no 			

significant issues along with a breakdown of single tender actions and quotations approved in the period since the previous meeting;

- The standing updates from internal and external audit were received and considered, as well as the response to an audit of handover of care at emergency departments across Wales for Welsh Ambulance Service NHS Trust (WAST).
- The latest declarations of interest register and the Healthcare Inspectorate Wales operational plan for 2018-19 were received for information.

Highlights from sub-groups reporting into this committee:

- The minutes of the recent hosted agencies governance sub-committee were received and noted with no significant issues raised.

Matters referred to other committees

No matters were referred to other committees at this meeting.

Date of next meeting

20 September 2018



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		Agenda Item	4iii (c)
Freedom of Information Status		Open	
Reporting Committee	Health and Safety Committee		
Author	Liz Stauber, Committee Services Manager		
Chaired by	Martyn Waygood, Non-Officer Member		
Lead Executive Director (s)	Siân Harrop-Griffiths, Director of Strategy		
Date of last meeting	07 August 2018		
Summary of key matters considered by the committee and any related decisions made.			
<ul style="list-style-type: none"> - Review of Singleton Services Delivery Unit – members received an update as to health and safety matters at Singleton Services Delivery Unit. It was noted that significant work had been undertaken in relation to the cladding risk but some concern was raised that the unit did not have a security service. It was agreed that guidelines would be developed to assist units with the reports to the committee going forward to highlight the areas on which the committee wished to focus. - Health and Safety Annual Report 2017-18 – the committee received the health and safety annual report which highlighted areas of good practice as well as those needing improvement. While the committee took some assurance from the report, it suggested some amendments and agreed to receive the final version for approval at the next meeting. - Risk Register – members received the health and safety risk register and raised concern as to the scores for some of the risks, therefore it was agreed that the Director of Corporate Governance would provide support to review the entries. Violence and aggression and lone working were also areas in which the committee felt more focus was required. 			
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 committee:			
<ul style="list-style-type: none"> - Work Programme - the committee agreed its work programme. 			
Main sources of information received:			
<ul style="list-style-type: none"> - Internal Audit Report: Fire Safety – members noted that an internal audit of fire safety had received limited assurance and a management response had been agreed. A follow-up of this and general health and safety, which had also received a limited assurance rating, was planned for the next quarter. - Workforce Risks - the committee received a verbal update in relation to a report written for the Audit and Workforce and Organisational Development (OD) committees outlining early reflections of workforce risks from the Director of Workforce and OD. Some of these would align with health and safety. 			

Highlights from sub-groups reporting into this committee:	
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| <ul style="list-style-type: none">- Health and Safety Operational Group - the minutes and work plan of the health and safety operational group were noted without any significant concerns raised. | |
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Matters referred to other committees	
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No matters were referred to other committees.	
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Date of next meeting	24 September 2018
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		Agenda Item	4iii (d)
Freedom of Information Status		Open	
Reporting Committee	Workforce and Organisational Development (OD) Committee		
Author	Liz Stauber, Committee Services Manager		
Chaired by	Ceri Phillips, Non-Officer Member		
Lead Executive Director (s)	Hazel Robinson, Director of Workforce and OD		
Date of last meeting	16 August 2018		
Summary of key matters considered by the committee and any related decisions made.			
<ul style="list-style-type: none"> - Workforce Risks - members received a further update in relation to the reflection from the Director of Workforce and OD as to her observations during her first few months within the organisation. It was noted that a similar report had been received by the Audit Committee, which had resulted in a request for a workforce risk register. <p>The committee heard that progress had been made in a number of areas, for example leadership training, due to monies received from Welsh Government as part of the recovery and sustainability package. In addition, two business cases had been approved in relation to medical workforce; one to support consultant job planning and the other for a locum off-duty system to quantify monthly expenditure. A case had been finalised for the investment and benefits group for case investigators, which would help with the issue of independence, and also for the electronic scanning of records.</p> <p>It was agreed that the next iteration of the report would include an assessment of the risk profile, after which it should be submitted to the board.</p> <ul style="list-style-type: none"> - Freedom to Speak Up Guardians – the committee heard that research had been undertaken at several NHS England trusts to view different approaches to freedom to speak up programmes. It was felt that such a scheme would need to be owned by staff to encourage others to raise issues. An update against progress would be received at the next meeting. 			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none"> - Personal Files – members noted that a break-in at a community hospital had been reported to the Information Commissioner’s Office, as some personal files had been stored there. Assurance was provided that plans were in place to move the records to an interim alternative storage facility whilst staff review the files to determine retention periods of these records. 			
Delegated action by the committee:			
<ul style="list-style-type: none"> - Future Workforce and OD Committee Planning – members raised concern at the high-level operational detail included in the reports, noting that this was as a consequence of no alternative forum. It was agreed that a proposal be put to the Executive Board to establish a workforce and OD forum and an update be received at 			

the next meeting along with any urgent issues. After this, a stocktake could be completed as to where the various workforce risks were reported to determine the future role and remit of the committee.

- **Terms of Reference** – at its July 2018 meeting, members agreed revised terms of reference which are appended for ratification by the board.

Main sources of information received:

The committee received and noted updates on the following with no significant issues raised:

- Digital strategy;
- Physician associates;
- Current status of graduate trainee management development programmes in the health board;
- E-job planning;
- Nursing exit interviews;
- NHS Wales Staff Survey;
- Nurse Staffing Levels (Wales) Act 2016

Highlights from sub-groups reporting into this committee:

An update report was received from the medical workforce board with no issues raised.

Matters referred to other committees

No matters were referred to other committees.

Date of next meeting

18th October 2018

Workforce &
Organisational Development (OD)
Committee

Terms of Reference & Operating
Arrangements

1. INTRODUCTION

- 1.1 The LHB's standing orders provide that *"The Board may and, where directed by the Assembly Government must, appoint Committees of the LHB either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees"*.
- 1.2 In line with standing orders (and the LHB's scheme of delegation), the Board shall nominate annually a committee to be known as the **Workforce & Organisational Development (OD) Committee**. This committee's focus is on all aspects of workforce as a resource aimed at ensuring the strategic and operational workforce agenda, priorities and work plan enables the delivery of the LHBs objectives and supports quality and safety of healthcare and employment practice.
- 1.3 The detailed terms of reference and operating arrangements set by the Board in respect of this committee are set out below.

2. PURPOSE

- 2.1 The Workforce & OD Committee "the Committee" is established for the following purposes:
- **To provide assurance** – in relation to the LHB's arrangements for workforce & OD ensuring they are in accordance with its stated objectives and the requirements and standards determined for the NHS in Wales;
 - **To provide assurance** to the Board in relation to the LHB's arrangements for the implementation of remuneration agreements and terms and conditions including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales and to perform certain, specific functions on behalf of the Board. This will exclude issues considered by the Remuneration and Terms of Service Committee.
 - **To plan and design** – a forum at which strategic workforce priorities can be **identified and agreed**, providing a vehicle for organisation wide multi-disciplinary **discussion and strategic planning** to support the

development of workforce strategies and initiatives;

- **To make decisions and provide advice** – on behalf of the Board **determine and agree** workforce solutions and initiatives for implementation within the organisation and provide evidence based and timely **advice** to the Board to assist it in discharging its functions and meeting its responsibilities with regard to workforce & OD matters;

2.2 The Committee will not routinely consider workforce matters that form part of the responsibility and that fall within the Terms of Reference of another LHB Committee. As such workforce performance metrics (reviewed by the Finance and Performance Committee) and the identified workforce projects and initiatives being managed through the Recovery and Sustainability will not feature within the core work of the Committee.

2.3 The Committee shall have no powers to develop or modify existing pay schemes.

3. KEY ACTIVITIES, DELEGATED POWERS AND AUTHORITY

Key Activities

3.1 With regard to its role in providing advice and assurance to the Board, the key activities of the Committee will include:

- Support and inform the development of a multi-disciplinary People Strategy for the Health Board, through the identification of key workforce priorities which:
- take account and responds to the outcomes and objectives of the Parliamentary Review
- identify and inform strategic workforce issues and ensure these are reflected in the Integrated Medium Term Plan (IMTP)
- enhance service/quality improvement;
- deliver sustained performance improvement and the organisational effectiveness of the workforce
- In respect to the development of a People Strategy the following areas of Workforce and OD activity will be specifically considered and informed by the Committee. The purpose being to develop

plans and policy in the following areas of the strategic workforce agenda.

- Interventions to enhance staff engagement and experience, to include further embedding of Organisational values
- Review the outcomes of national and Organisational staff surveys to inform action and improvement plans
- Plans to enhance medical engagement
- Leadership development and management development
- Staff education and development, building teams, talent management and succession planning
- Recruitment and retention, to include the Widening Access and Working Longer agendas
- Prudent workforce resourcing encompassing workforce planning, role redesign, new role opportunities aligned to clinical service strategies
- Digital workforce solutions strategy and implementation
- Staff Health and well-being services (not covered within the R&S work programme)
- Relationships with educational partners
- Oversee and ensure the alignment of the LHB's Workforce & OD policies and frameworks with those of NHS Wales, including the future role, remit and relationship with Health Education Improvement Wales (HEIW) and the development of a workforce across the Health and Social care sectors in line with the recommendations of the Parliamentary review of Health and Social Care January 2018
- Oversee the application of key workforce related legislation and contractual arrangements to support long-term business goals and outcomes
- Monitor action taken in response to internal and external reports relating to workforce in terms of the organisation not individuals
- Ensure that medical education issues affecting junior doctors including rota risks are reported to the Committee, which in turn will be reported to the Board to meet the requirements of the GMC.

Areas of Assurance

3.2 The Committee will, in respect of its assurance role, seek assurances that governance (including risk management) arrangements are

appropriately designed and operating effectively to ensure the delivery of the workforce & OD agenda across the full range of the LHB's services and oversee the delivery of agreed workforce priorities.

3.3 The Committee's will ensure that, in relation to all aspects of workforce & OD:

- there is clear, consistent strategic direction, strong leadership and transparent lines of accountability;
- the workforce is appropriately selected, trained, supported and responsive to the needs of the service, ensuring that professional standards and registration/revalidation requirements are maintained;
- there is an ethos of continual quality improvement and regular methods of updating the workforce in the skills needed to demonstrate quality improvement throughout the organisation;
- there is good team working, collaboration and partnership working to provide the best possible outcomes for its citizens;
- there is continuous improvement in the workforce & OD agenda across the whole organisation – continuously monitored through the Healthcare and Standards for Wales;

Authority

3.4 The Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the LHB relevant to the Committee's remit and ensuring patient/client and staff confidentiality, as appropriate. It may seek any relevant information from any:

- Employee (and all employees are directed to cooperate with any reasonable request made by the Committee); and
- Other committee, subcommittee or group set up by the Board to assist it in the delivery of its functions.

3.5 The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it

necessary, in accordance with the Board's procurement, budgetary and other requirements.

Access

- 3.6 The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Workforce & OD Committee.
- 3.7 The Committee will meet with Internal Audit [and, as appropriate, nominated representatives of Wales Audit Office / Healthcare Inspectorate Wales] without the presence of officials on at least one occasion each year.
- 3.8 The Chair of the Committee shall have reasonable access to Executive Directors and other relevant senior staff.

Working Groups

The Committee may establish task and finish groups to carry out work on its behalf and will ask for report from existing groups where appropriate to include:

- Medical Workforce Group
- Nurse staffing Act Task and Finish Group
- Workforce Information System Board
- Health Professions Forum
- Therapies and Health Science Working Group
- Volunteers' Group

MEMBERSHIP

Members

4.1 Membership will comprise of the following 4 Members:

Chair	Non Officer Member of the Board
Vice Chair	Non Officer Member of the Board
Members	Two other Non Officer Members of the Board.

Attendees

4.2 In attendance Director Workforce and OD

Assistant Directors of Workforce and OD
Medical Director or nominated deputy
Director of Nursing or nominated deputy
Director of Therapies and Health Sciences or
nominated deputy

Chief Operating Officer (or nominated deputy)

A representative from each Delivery Unit to reflect a
full spread of professions and functions

4.3 By invitation The Committee Chair may extend invitations to
attend committee meetings as required to the
following:

- The Chief Executive
- Other Executive Directors; and/or
- Any representative of operational service
management as requested by the committee
- Any representative of Swansea University
- Any others officials from within or outside the
organisation to attend all or part of a meeting to
assist it with its discussions on any particular matter

Secretariat

4.4 Secretary As determined by the Board Secretary.

Member Appointments

4.5 The membership of the Committee shall be determined by the Board,
based on the recommendation of the LHB Chair – taking account of the
balance of skills and expertise necessary to deliver the committee’s
remit and subject to any specific requirements or directions made by
the Welsh Government.

4.6 Members terms of office will be reviewed annually by the Board
Chairman. A member may resign or be removed by the Board.

4.7 Terms and conditions of appointment, (including any remuneration
and reimbursement) in respect of co-opted independent external
members are determined by the Board, based upon the
recommendation of the LHB Chair

Support to Committee Members

- 4.8 The Board Secretary, on behalf of the Committee Chair, shall:
- Arrange the provision of advice and support to committee members on any aspect related to the conduct of their role.

5. COMMITTEE MEETINGS

Quorum

- 5.1 At least two members must be present to ensure the quorum of the Committee, including either the committee Chair or Vice Chair.

Frequency of Meetings

- 5.2 Meetings shall be held monthly. The format of the Committee will operate on a bi-monthly cycle, with alternating months used for either development, planning and visioning to inform the development of key issues for consideration, decision and approval and assurance.

Withdrawal of individuals in attendance

- 5.3 The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

6. RELATIONSHIPS & ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS

- 6.1 Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for ensuring the workforce & OD agenda. The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 6.2 The Committee, through its Chair and members, shall work closely with the Board's other committees, including joint (sub) committees and groups to provide advice and assurance to the Board through the:
- joint planning and co-ordination of Board and Committee business;
 - and

- sharing of information

in doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework. This will be achieved primarily through the **Audit Committee**.

- 6.3 The Committee shall embed the LHB's corporate standards, priorities and requirements, e.g., equality and human rights through the conduct of its business.

7. REPORTING AND ASSURANCE ARRANGEMENTS

- 7.1 The Committee Chair shall:

- Report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes verbal updates on activity, the submission of committee minutes and written reports, as well as the presentation of an annual report;
- bring to the Board's specific attention any significant matters under consideration by the Committee;
- Ensure appropriate escalation arrangements are in place to alert the LHB Chair, Chief Executive or Chairs of other relevant committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the LHB.

- 7.2 The Board may also require the Committee Chair to report upon the committee's activities at public meetings, e.g. AGM, or to community partners and other stakeholders, where this is considered appropriate, e.g. where the committee's assurance role relates to a joint or shared responsibility.

- 7.3 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation including that of any sub committees established.

8. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS

8.1 The requirements for the conduct of business as set out in the LHB's Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

- Quorum
- Notice of meetings
- Notifying the public of Meetings
- Admission of the public, the press and other observers

9. REVIEW

9.1 These terms of reference and operating arrangements shall be reviewed annually by the Committee with reference to the Board.



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		Agenda Item	4iii (e)
Freedom of Information Status		Open	
Reporting Committee	Mental Health Legislation Committee		
Author	Liz Stauber, Committee Services Manager		
Chaired by	Emma Woollett, Vice-Chair		
Lead Executive Director (s)	Gareth Howells, Director of Nursing and Patient Experience		
Date of last meeting	24 August 2018		
Summary of key matters considered by the committee and any related decisions made.			
<ul style="list-style-type: none"> - Mental Health Act Monitoring Report – members received an update as to compliance with the Mental Health Act 1983 in which it was noted that there had been one exception and one invalid detentions within the reporting period. One young person had been admitted to an adult mental health bed but transferred to the specialist unit within one day. The committee asked that a piece of work be undertaken to identify how often the bed within the adult ward was used against the capacity at the specialist unit. In addition, it agreed that clarity be sought from the Director of Corporate Governance as to whether services commissioned by the health board, such as child and adolescent mental health services (CAMHS) or continuing healthcare within care homes, should report any breaches of the act as the providers. - Mental Capacity Act Monitoring Report – the committee noted that the report needed to be developed further in order to provide sufficient assurance. Reporting training compliance remained a challenge, as the number of staff requiring it needed to be identified to determine how many were outstanding. Concern was raised as to the lack of timescales to address this. - Mental Health Measure Monitoring Report – the committee received a report on compliance with the four parts of the Mental Health Measure. For services provided by ABMU, the health board is largely compliant, although some improvement is required to the provision of care and treatment plans for learning disability services, particularly within Swansea. However, non-compliance by Cwm Taf University Health Board against CAMHS, as the service provider, has significantly impacted on ABMU's performance, bringing it below the target. Overall, performance against the measure was satisfactory and close to green in most areas as such, Welsh Government had stood the organisation down from quality and delivery meetings. 			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none"> - Deprivation of Liberty Safeguards (DoLS) – members expressed grave concern at the level of breaches and applications, particularly as the health board does not have designated lead. The need for an action plan for improvement to be developed and for a more substantive report to the next meeting was agreed. 			

Delegated action by the committee:

No delegated action was undertaken by the committee.

Main sources of information received:

No other sources of information were received.

Highlights from sub-groups reporting into this committee:

None received.

Matters referred to other committees

No matters were referred to other committees.

Date of next meeting

08 November 2018