

Swansea Bay University Health Board

Unconfirmed

**Minutes of a Meeting of the Health Board
held on 19th August 2021 at 3pm via Zoom**

Present

Emma Woollett	Chair
Mark Hackett	Chief Executive
Steve Spill	Vice-Chair
Andrew Jarrett	Associate Board Member
Christine Williams	Interim Director of Nursing and Patient Experience
Debbie Eyitayo	Interim Director of Workforce and OD
Jackie Davies	Independent Member
Keith Lloyd	Independent Member
Maggie Berry	Independent Member
Nuria Zolle	Independent Member
Reena Owen	Independent Member
Richard Evans	Executive Medical Director
Siân Harrop-Griffiths	Director of Strategy
Tom Crick	Independent Member

In Attendance:

Alison Clarke	Assistant Director of Therapies and Health Science
Matt John	Director of Digital
Mwoyo Makuto	Community Health Council
Nick Samuels	Interim Director of Communications
Pam Wenger	Director of Corporate Governance
Rab McEwan	Interim Chief Operating Officer
Sue Evans	Community Health Council
Liz Stauber	Head of Corporate Governance

Minute No.		Action
204/21	WELCOME AND INTRODUCTIONS	
	<p>Emma Woollett welcomed everyone to the meeting, particularly Debbie Eyitayo who had joined the health board as the Interim Director of Workforce and OD. She also noted that it was the last Board meeting for Rab McEwan, adding that he had made a significant contribution as Interim Chief Operating Officer.</p> <p>Apologies for absence were received from Christine Morrell, Interim Director of Therapies and Health Science, Darren Griffiths, Interim</p>	

	Director of Finance, Keith Reid, Director of Public Health and Martyn Waygood, Independent Member.	
205/21	DECLARATIONS OF INTEREST	
	There were no declarations of interest.	
206/21	MATTERS ARISING	
	There were no matters arising not otherwise on the agenda.	
207/21	CASENOTE REVIEW OF TAVI	
	<p>A report setting out an update in relation to the Royal College of Physicians' casenote review of the TAVI (transcatheter aortic valve implantation) service was received.</p> <p>In introducing the report, Richard Evans highlighted the following points:</p> <ul style="list-style-type: none"> - The review by the Royal College had comprised three elements – casenote review of those who died on the waiting list, a site visit and a casenote review of those on the list dating back to the inception of the service in 2019; - The reports for all three elements had now been received; - Work was being undertaken with the patient experience team in terms of redress and causation; - All cases had been discussed with the mortality and morbidity group, attended by the full multi-disciplinary team; - - Although challenges remain to maintaining the waiting list position, given the component waiting times and the potential for patients to be referred in to the service at a late stage in the pathway, there was now robust management and strong clinical leadership. - The service aimed to treat patients within 18 weeks of referral for TAVI; data for July 2021 show 96% achievement; - No patients had died while on the waiting list since May 2019; - Assurance could be taken that the team had made significant progress to improve the governance and delivery of the service and a quality dashboard was in place to monitor progress; 	

	<ul style="list-style-type: none"> - It was proposed that regular updates be provided to the Management Board via Quality and Safety Governance Group going forward. <p>In discussing the report, the following points were raised:</p> <p>Reena Owen referenced a previous Board report which had raised the possibility of the commissioner of the service, the Welsh Health Specialised Services Committee (WHSSC), reducing the waiting list time to 18 weeks. She queried if these plans were still intended. Richard Evans responded that the commissioned waiting list time remained at 36 weeks but there was an ambition to create an aortic stenosis pathway, which would include TAVI, and for this to have a 12-week waiting list (exceeding the UK standard of 18 weeks). The current ambition for TAVI within the health board was to have an 18-week waiting list.</p> <p>Steve Spill advised the Quality and Safety Governance Group reported to each Quality and Safety Committee meeting and he met regularly with its chair. On that basis, he was assured that the situation would still receive the scrutiny it required and any issues could be escalated to the Board by exception.</p> <p>Emma Woollett asked whether resources were sufficient to manage the increase in numbers requiring a TAVI. Richard Evans advised that they were but careful watch was being kept to identify issues early.</p> <p>Emma Woollett stated that the situation now being in a position to be monitored through the Quality and Safety Governance Group was a seminal moment and testament to the work of Richard Evans.</p> <p>Mark Hackett advised that a review of research and data surrounding cardiac services was being undertaken internally and a full report and a plan to improve delivery would be shared with at the next Board meeting.</p>	
Resolved:	<ul style="list-style-type: none"> - It be approved that future reports be received through Management Board via the Quality and Safety Governance Group every six months, providing evidence that it has reviewed its performance against national quality and outcome standards 	
208/21	PROPOSALS FOR ADDITIONAL THEATRES AT NEATH PORT TALBOT HOSPITAL	
	<p>A report setting out proposals for additional theatres at Neath Port Talbot Hospital was received.</p> <p>In introducing the report, Rab McEwan highlighted the following points:</p>	

- Work had been undertaken to design a procurement build for four modular theatres at Neath Port Talbot Hospital to address the backlog of elective cases and future orthopaedic demand;
- The bid would be submitted to Welsh Government for funding. If approved, the facilities should be in place by quarter one/quarter two in 2022-23;
- It was anticipated that around 4,500 cases could be undertaken through the additional theatres, comprising 24 lists transferred from Morriston Hospital and 64 new ones;
- There was a significant wait for diagnostic services and it was estimated these cases would increase the elective cases by 45%;
- There were two potential funding scenarios for Welsh Government to consider – either Welsh Government to fund the enabling works or provide capital for the enabling works and the equipment. On either scheme, the health board would lease the remainder;
- The costs of running the theatres would be £18.9m recurrently following an initial cost of £21m in 2022-23;
- 177 whole time equivalents would need to be recruited and this would need to commence shortly and at pace to secure the staff.

In discussing the report, the following points were raised:

Emma Woollett stated that the workforce requirements were significant despite the fact some of the additional lists at Neath Port Talbot Hospital would be transferred from Morriston Hospital. She noted the level of recurrent expenditure, adding that without external support, the health board would not be able to afford to increase elective capacity.

Nuria Zolle queried if there was confidence that the health board would be able to recruit the levels of staff required. Mark Hackett responded that work was already taking place with theatre staff to determine what was needed and it would take around a year to reach the required level through substantive, bank and agency staff. The jobs would be attractive to staff, as the unit was standalone which would mean that lists would not be disrupted by emergencies and staff could fulfil their roles as expected. A range of roles were being considered in addition to nurses, such as operating theatre practitioners. He added that the majority of those on orthopaedic lists were elderly and vulnerable waiting for joint replacements, and it was important the health board found ways to make their experiences better.

Keith Lloyd advised that there had been a successful initiative between Swansea University and Singleton Hospital to make joint appointments to make roles more attractive to a higher quality of applicants across a

	<p>range of specialties. He added there was an opportunity to replicate that for this programme of work.</p> <p>Mark Hackett stated that further discussions were needed between himself and the Director of Finance with Welsh Government, but in the main, colleagues were supportive of the direction of travel. The level of funding would be dependent on the amount of monies provided to Welsh Government from the UK government and this would inform the precise detail of the bid.</p> <p>Emma Woollett summarised that the Board was supportive of the case being submitted to Welsh Government, noting the flexibility around the options, and that the exact detail would be shared in due course. She added that this was an important decision for the organisation due to the longstanding performance issues in relation to planned care. She also noted that the community health council continued to raise concerns over the long orthopaedic waits and these were also the subject of many complaint letters. Addressing these waits was an important priority for the Board.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted; - The submission of a case to Welsh Government setting out the establishment of additional theatres in Neath Port Talbot Hospital be approved. 	
209/21	ANY OTHER BUSINESS	
	<p>(i) <u>Acute Adult Mental Health Services</u></p> <p>Siân Harrop-Griffiths informed the Board that the Minister for Health and Social Care had approved the strategic outline case for replacement acute adult mental health services for the two wards at Cefn Coed Hospital which were no longer fit for purpose. Work would now commence in the outline and full business cases.</p>	
	There was no further business and the meeting was closed.	
210/21	DATE OF NEXT MEETING	
	The date of the next meeting was confirmed as 7 th October 2021.	