

Swansea Bay University Health Board
Unconfirmed
Minutes of the Performance and Finance Committee
held on 25th April 2023 at 9.30am
Microsoft Teams

Present:

Reena Owen	Independent Member (in the chair)
Steve Spill	Vice-Chair
Patricia Price	Independent Member

In Attendance:

Darren Griffiths	Director of Finance and Performance
Samantha Moss	Deputy Director of Finance
Deb Lewis	Interim Chief Operating Officer
Hazel Lloyd	Director of Corporate Governance
Meghann Protheroe	Head of Performance
Kate Hannam	Service Group Director, Morryston (minute 058/23)

Minute	Item	Action
049/23	WELCOME AND APOLOGIES	
	The Chair welcomed everyone to the meeting. There were no apologies for absence.	
050/23	DECLARATIONS OF INTEREST	
	There were no declarations of interest.	
051/23	MINUTES OF PREVIOUS MEETING	
	The minutes of the meeting held on the 28 th March 2023 were received and confirmed as a true and accurate record.	
052/23	MATTERS ARISING	
	There were no matters arising.	
053/23	ACTION LOG	

	<p>The action log was received and noted.</p> <p><u>Financial Reporting and Monitoring Final Internal Audit Report Actions</u></p> <p>(i) Darren Griffiths assured committee members that the majority of the actions related to the delegated powers and the notification of the key budget holders have been progressed and he would plan to bring an update to the May 2023 committee for completeness.</p>	
054/23	WORK PROGRAMME	
	The work programme for 2022-23 was received and noted .	
055/23	FINANCIAL POSITION FOR MONTH TWELVE	
	<p>An update setting out the month twelve financial position, including year-end forecast was received.</p> <p>In introducing the update, Sam Moss, Deputy Director of Finance and Performance highlighted the following points:</p> <ul style="list-style-type: none"> - Performance against the revenue resource limit was £0.401m under, performance against the capital resource limit was £0.39k under and performance against public sector pay policy was slightly under the 95% target at 94.69%. All of which were interim positions; - In the process of finalising the actual account templates which would be submitted on 5th May 2023 with external audit undertaking their work on 9th May 2023 with the figures remaining interim until they are signed off; - The ledger was closed, on what had been a very challenging year end to reach a balanced position. <p>In discussing the update, the following points were raised:</p> <p>Committee members congratulated the finance team on the remarkable position of a balanced position.</p> <p>Reena Owen asked whether it would be appropriate as the chair of the Performance and Finance committee to write a letter of thanks to finance staff. Hazel Lloyd advised that the letter of thanks would be well received by staff members should she wish to write one.</p> <p>Reena Owen asked Darren Griffiths to comment on the run rate position at Morrision service group. Darren Griffiths advised that Peter Herring was between contracts where the first wave of work of financial improvement director work was complete, but he was looking to re-commission Peter</p>	

	<p>Herring to complete further work in the next couple of weeks which would be brought to the May 2023 report, as a more substantial update on the Morriston service group.</p> <p>Darren Griffiths advised that he and Samantha Moss had completed the first round of financial review meetings with all of the service groups, which involved a check in to talk about the run rate reduction and saving plans for the new financial year. They were told by Morriston that agency consumption had reduced in April 2023 but the evidence had not been received at this point of time.</p>	
<p>Resolved:</p>	<p>- The update be noted.</p>	
<p>056/23</p>	<p>FINANCIAL PLAN</p>	
	<p>Verbal feedback following the submission of the financial plan to Welsh Government was received.</p> <p>In providing the feedback, Darren Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> - The only element of the letter seen as surprising was the detail of ‘the plans fell short of delivering the reduced number of ministerial priorities’ as it was the belief of the health board that it had articulated a strong response to the ministerial priorities but it was something to reflect on internally; - Welsh Government clearly acknowledged the economic context but tested the health board to go back on its inflationary assumptions, cost control measures and saving plan delivery; - What was important to be clear on, was that the forecast position was after £0.60m - £0.70m of other things the health board needs to do and in parallel with this, the chief executive officer had asked Darren Griffiths to write to Chief Executive of NHS Wales setting out the next steps the health board needed to take; - A meeting was scheduled to take place on 2nd May 2023 to present against the context of the letter and the content of the plan. <p>In discussing the feedback, the following points were raised:</p> <p>Reena Owen asked whether the letter of a similar vein had been sent to all health boards. Darren Griffiths was not sure, due to receiving the letter a couple of days ahead of the committee and would speak with finance colleagues to see what they had received. Darren Griffiths anticipated the underlying position would be the similar for most.</p>	

Resolved:	- The verbal update be noted .	
057/23	MONTH TWELVE PERFORMANCE REPORT	
	<p>An update setting out the month twelve performance was received.</p> <p>In introducing the report, Meghann Protheroe, Head of Performance highlighted the following points:</p> <ul style="list-style-type: none"> - The single cancer pathway remained under the outlined trajectory and the reported performance had deteriorated slightly to 44% from 50% in January 2023; - Increase on covid-19 with 378 cases reported compared to 249 in February 2023; - Sickness rates saw an improvement from 7.46% in January 2023 to 6.69% in February 2023. <p>In discussion of the report, the following points were made:</p> <p>Deb Lewis noted that the 2023-24 trajectories against 104 week target had not yet been submitted to Welsh Government, but would be finalised this week.</p> <p>Steve Spill highlighted the cancer ministerial targets particularly patients waiting of 52-weeks, and queried how confident were the health board in achieving those targets. Deb Lewis advised that there was a good degree of confidence in relation to achieving the 52-week target in all specialities with a slight uncertainty to orthopaedics. The assurance has been provided to Welsh Government, with the caveat that orthopaedics was a challenge for the health board, but the plan was to achieve it for all specialities. The orthopaedic directorate had the capacity in place to make that happen, however everything needed to align with the orthopaedic plan. The 104-week would be very challenging, but the deteriorating picture was seen through all health boards in Wales. In relation to cancer, Deb Lewis advised that it was not one of the ministerial priorities at the moment. The health board had submitted a very realistic trajectory for backlog removal which was approved through the enhanced monitoring meeting.</p> <p>Reena Owen noted that recovery had not been seen in the cancer performance in specialities of gynaecology and lower GI and asked if there was more which could be done. Deb Lewis advised that there were improvements to lower GI, with additional capacity approved by the chief executive officer, in relation to theatres and lower GI services. Gynaecology is a challenge from a cancer pathway perspective, a lot more capacity had been put in place to the front end of the pathway to get the patients through</p>	

	<p>to diagnostics as soon as possible, but the capacity gap was in the treatment. A second gynaecology surgeon was in post but unfortunately, the surgeon was not currently operating so the team were back down to a single handed surgeon and this was due to issues in the service which could not be discussed publicly. Outsourcing had been discussed, with Cardiff and Vale health board being asked to assist with treatment however, everyone was struggling with the surgical capacity.</p> <p>Deb Lewis raised that aside from endoscopy, the diagnostic and therapy waits continue to be the best in Wales but recognised there were pockets of improvements.</p>	
<p>Resolved:</p>	<ul style="list-style-type: none"> - The update be noted. <p>Action - The detailed action plan on the recovery of the speech and language therapies to be included as an appendix to the performance report.</p>	<p>MP/DL</p>
<p>058/23</p>	<p>UNSCHEDULED CARE</p>	
	<p>Members welcomed Kate Hannam, Service Group Director at Morriston. A report on unscheduled care performance was received.</p> <p>In introducing the report Kate Hannam, highlighted the following points:</p> <ul style="list-style-type: none"> - From a good news perspective, the year finished in a better position than it started in terms of the 12-hour delays; - This was a huge reflection in the work which had taken place in pre-hospital care and the advanced practice paramedic screening of the waiting demand with redirection of appropriate patients to alternative pathways thus avoiding ED; - The key focus for the remaining year, was to reduce the length of time ambulances are waiting to offload when they do attend; - In May 2023 a zero tolerance of the 4-hour performance in terms of patients waiting on ambulances; - Despite the data included in the Audit Wales report, SBUHB has never refused a red release and this would be challenged; - Meridian were commissioned to spend a month to look at the pathways internally into ED, and found that systems and practices were good in response to that, and there were tweaks carried out to increase staffing of the medical body; 	

- The Urgent and Emergency Care Board was being transformed to the '6 Goals Board' to provide oversight to the delivery of the programme across the Health board – the Board would be establishing the trajectories for improvement across the programme including the Tier 1 standards.

In discussing the report, the following points were raised:

Deb Lewis highlighted that the audit report was not shared with the team prior to publishing. The data was challenged in relation to the red release by way of a feedback loop with WAST.

Steve Spill asked what was being done with the covid-19 protocols as there was a review in the paper dated end of March 2023, Deb Lewis advised that the health board was managing the change in protocols slowly and on a patient by patient whilst trying to get back to 'business as usual' at the same time. Steve Spill went on to ask if there was any push back from the commissioning services for example, the trauma network in relation to the health board's performance. Deb Lewis advised there was not, the only push back from commissioners in regards to performance, was the bed issue, particularly from the cardiology pathway where patients are unable to be brought across from Princess of Wales and HDUHB due to lack of flow in the system rather than front door performance.

Pat Price asked if the health board's approach to the change to covid-19 protocols was a common approach across health boards. Deb Lewis advised there were hybrid approaches across health boards in Wales, very much depending on the configurations of their emergency departments on how they manage the protocols at the front door, and highlighted very few health boards had gone back to 'business as usual'. Pat Price was surprised to see that WAST had withdrawn the three halo vehicles, and noted her concern of the amber releases. She commented that the COP (Clinically Optimised Patients) graph was difficult to read, as some of the reasons in the graph were compressed, and felt it would be useful to see the table behind the reasons which underpins the COPs position and asked if the change to the 6-goals approach would see a helpful change. On the COPs position, Kate Hannam advised that in November 2022 Welsh Government implemented the validation of the delayed transfers of care position, and that has been done following a 3-month pilot period. The March 2023 position had been finalised which Kate Hannam agreed to share at the June 2023 committee.

KH

Given the gap in social services' provision Reena Owen asked if staff would be seconded into this area for the time being, given the area is a cause for concern. Deb Lewis advised that increased dialogue had been held with the directors of social services' in both Swansea Bay and Neath Port Talbot to which a good narrative had been received where most gaps have been filled

	<p>and the lack of availability should reduce. Deb Lewis noted that work was required to ensure social workers were out in the community. Reena Owen felt that a clear narrative was required for families involved to ensure clarity, Deb Lewis agreed and advised members that an integrated discharge hub was in the process of establishment.</p> <p>Reena Owen noted the continual increase in pressure at the front door, and in relation to the major trauma centre, asked whether it had contributed to the continual rise in numbers of patients attending A&E. Deb Lewis advised that numbers coming through A&E were static, what was being seen was the difference in acuity of the patients and whether that was the ability to access GPs was she did not know. The health board was trying to provide as much of an same day emergency care service to plug the gaps which might be contributed by GPs, further work through communications and working with patient groups was required to manage patient expectations on what primary care services look like post covid, for example face to face appointments.</p> <p>In relation to the increase in patients due to the major trauma centre Kate Hannam advised that early indications showed an increase in patients, in relation to plastics in particular. A piece of work was being done through the vascular steering group, as significant delays were seen in repatriating patients to their local health board</p>	
<p>Resolved:</p>	<ul style="list-style-type: none"> - The report be noted. <p>Action - The validation of the delayed transfers of care position, following the 3-month pilot period, and the performance position to be brought to the June 2023 committee.</p>	<p>KH</p>
<p>059/23</p>	<p>ORTHOPAEDICS</p>	
	<p>A verbal update on orthopaedics was received.</p> <p>Deb Lewis highlighted the following points:</p> <ul style="list-style-type: none"> - The Audit Wales report was undertaken pre-covid during 2018; - Usefully the data used in the Audit Wales report was more recent from 2021-22; - There were no surprises in the report, and it was a fair reflection and the report would go through the May 2023 audit committee; - From a findings perspective, SBUHB has the second highest volume of patients waiting for orthopedic surgery with waits being 	

	<p>the longest in Wales by a large margin. With 20% of patients waiting over two years;</p> <ul style="list-style-type: none"> - Whilst the orthopedic delays have been exasperated by Covid-19, the problems started long before Covid-19 took place predominately due to bed availability at Morrision; - The report teases out some recommendations which are predominately how the service recovery was aligned to GIRFT recommendations; - Team were working closely to achieve GIRFT (Getting It Right First Time) accreditation for the Neath Port Talbot unit, which would mean the first in Wales; - Plans were in place for continued recovery, and the new units were handed over last week; - From June 2023 onwards an additional theatre list every day would be rolled out, by September 2023 all three new theatres would be used as well as the old estate available through Neath Port Talbot hospital and it was hoped this would see a reduction to zero 104 week wait by the end of March 2024; - The ten beds available to patients who are not suitable for Neath Port Talbot, were still ring fenced in Morrision and that was an important part of the GIRFT recommendations. A regional approach would be sought through HDUHB Prince Philip hospital which would provide an 'in between resource' and additional capacity for those patients who will not be suitable for Neath Port Talbot but may not need Morrision; - Work was already progressing to address the recommendation of community musculoskeletal service and whether the health board were looking to review and maximise the effect that would have on the surgical waiting lists. The findings would be brought together for the full review of the orthopedic service. The results are not available yet, but the recommendation was to start to look at the area of work, which has been done; - The final recommendation was looking at outcomes of orthopedic surgery, which was one area the health board was behind the curve compared to other health boards in Wales. Work had commenced with a company called 'promap' which looks at patients on the waiting lists and provides them with information on the surgery and connects patient data. <p>In discussing the report, the following points were raised:</p>	<p>DL</p>
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	<p>Reena Owen asked to receive the recommendations and the response which would go to the Audit Committee in May 2023. Deb Lewis agreed to circulate the information outside of the committee.</p> <p>Reena Owen asked what the significance of achieving the GIRFT accreditation was. Deb Lewis advised that from an NHS systems perspective GIRFT was the recognised quality ‘stamp’ – it was an indicator of the quality of service which the health board was running. Deb Lewis advised that her reservation of the GIRFT recommendations was that it had the potential to put orthopaedics on a pedestal above all other services, which could become at the detriment to other services, therefore it was important to ensure the system was balanced. Reena Owen asked whether the GIRFT recommendations included the pre-operative elements, Deb Lewis advised it would.</p> <p>Deb Lewis advised that the Neath Port Talbot service group were holding conversations with Emergency Ambulance Services Committee (EASC) colleagues in relation to a designated repatriation vehicle to work across sites for those patients who become unwell.</p> <p>In terms of the new theatres, Reena Owen asked for assurance with regard to the staffing levels. Deb Lewis advised that there was a ‘pipeline’ of staff in training who would commence in September 2023. Some of the surgeon and anaesthetic teams may not be fully staffed but the theatres would manage with the staff in place, with assistance from insourcing company or additional sessions for existing staff members.</p> <p>Darren Griffiths agreed with Deb Lewis that the contingency plan was to use the insourcing company, and advised that the physical ownership of the theatres commenced yesterday (24/04/2023) and commended the work of capital colleagues who worked with the Private Finance Initiative (PFI) to get the theatres in place as quickly as possible.</p>	
<p>Resolved:</p>	<p>- The report be noted.</p> <p>Action – Deb Lewis to circulate the recommendations and the response to the Audit Wales orthopaedics report which was due to go through May 2023 Audit Committee.</p>	<p>DL</p>
<p>060/23</p>	<p>FINAL FINANCIAL PLAN</p>	
	<p>A presentation regarding the financial plan was received.</p> <p>In discussion of the slides, the following points were made:</p>	

	<p>Pat Price endorsed the approach to budget holders, as they can be held to account more effectively and in a way it acted as an escalation within the health board.</p> <p>Steve Spill asked how confident Darren Griffiths was that the non-recurrent mid-year funds from Welsh Government would be recurrent, Darren Griffiths advised it would be mixed, and lots of the planned care programme items would often come in mid-year in response to policy decisions, he wasn't expecting to receive many of those next year and he was not overly confident as a whole that much would be recurrent other than what was set out and included in the allocation letter, due to the scale of the deficit which meant there might be a different approach taken.</p> <p>Reena Owen agreed with the approach but asked if the health board were fully conversant with the risks in a sense that, should Welsh Government decide they are not able to accept that approach and were not prepared to accept the deficit. Darren Griffiths advised that as part of the delegation, the health board was in a position to reserve the right to 'claw back' and it would act as a reversed CIP. Darren Griffiths would report to the board any variations which were reversed but also high level variations which were favourable, and the best way to approach this would be to keep the £69.9m as a pillar, and any action plan and response against that to improve it would be reported.</p>	
	The report be noted .	
061/23	ITEMS FOR REFERRAL TO OTHER COMMITTEES	
	There were no items for referral to other committees.	
062/23	ANY OTHER BUSINESS	
	There was no further business discussed and the meeting was closed.	
048/23	DATE OF NEXT MEETING	
	The next scheduled meeting is Tuesday, 27 th June 2023.	