

Minutes of the North Wales Regional Partnership Board Meeting 9th June 2023 9:30am – 12:00 pm at Conwy Lounge, Colwyn Bay

Present:	Cllr Dilwyn Morgan (Chair), Alwyn Jones, Catrin Roberts, Cllr Alun Roberts, Cllr Elen Heaton, Cllr Liz Roberts, Estelle Hitchon, Ffion Johnstone, Fôn Roberts, Jenny Williams, Mary Wimbury, Meinir Williams-Jones, Michelle Greene, Neil Ayling, Nicola Stubbins, Rhun ap Gareth, Roger Seddon, Sian E Tomos, Teresa Owen
Apologies:	Alwyn Williams, Ann Woods, Cllr Christine Jones; Cllr John Pritchard; Dylan Owen, Karen Higgins; Libby Ryan-Davies, Liz Grieve
In Attendance:	Dyfed Edwards, Chair BCUHB (agenda item 2) Olivia Shorrocks, Welsh Government (agenda item 2) Chris Stockport, on behalf of Carol Shillabeer, Interim Chief Exec. BCUHB (agenda item 2) Steve Swindon, TAPE (agenda item 3) Lil, Ysgol y Gogarth (agenda item 3) Kathryn Whitfield, NWLD Board (agenda item 4) Shell Williams, NWLD Board (agenda item 4) from RPB Business Support Team: Adele Baguley, Business Support Officer Eluned Yaxley, Business Support Manager Llinos Howatson, Regional Business Manager – Workforce & Commissioning Sharon Hinchcliffe, Regional Business Manager, Improving Outcomes for Children

Item		Actions
1	Welcome, Introductions & Apologies	
	A warm welcome was extended to all members and guests by the Chair for the	
	first face to face RPB meeting since the pandemic in 2020. All agreed it was good	
	to be back in the same space.	
	The Chair also welcomed some of the RPB Business Support Team members adding to the Board members that as we're all one team and wanting to bring a sense of cohesion moving forward! The Chair will also meet with the wider	
	Business Support Team at a full Team meeting in due course.	
	The agenda was tailored in accordance with it being the first meeting in 3 years.	

2. **BCUHB Special Measures Update**

The Chair welcomed the BCUHB Chair along with WG & BCUHB representatives. He added that with BCUHB being a vital RPB partner, the RPB would support the work going forward and as always, sit alongside BCUHB during the months ahead.

DE thanked the Chair and members for the invitation to address the RPB.

The current Board for BCU has been operational for 4 months, having inherited the challenges currently being faced. Looking ahead, DE added there are many encounters to face, however the principles of the new Board is primarily partnership working, the Board will be enthusiastic, determined with kindness and care at the heart of everything. DE thanked all LA's and other partners for their support adding that responding to the needs of our communities here in North Wales is the aim moving forward – not only as a Board, but with each and every organisation/partner. BCUHB have worked with WG on a framework to achieve where the Board is aiming to get to. DE & Carol Shillabeer are eager to meet with the people of North Wales and continually engage with and become part of the community.

OS presented to the Board the key reasons for escalation of BCUHB into Special Measures. Advising the RPB of the eight domains of the Special Measures framework consisting of:

- Governance, board effectiveness and audit.
- Workforce and organisational development.
- Financial governance and management.
- Compassionate leadership and culture.
- Clinical governance, patient experience and safety.
- Operational delivery.
- Planning and service transformation.
- Clinically vulnerable services.

After which OS laid out and explained in detail the Conditions for Sustainability namely:

- Clear strategic vision
- Cultural change journey
- Effective board
- Strong leadership and engagement
- Clinical leadership
- Strengthened clinical services
- Integrated performance and quality
- Accountability
- Responsive
- Learning and improving organisation
- Strong programme management
- Improved access, outcomes and experience

The RPB heard in depth of the Stabilisation Phase - Phase 1 - First 90 days Expectations as outlined in the eight domains as above.

CS explained the background into why BCUHB were escalated into Special Measures on 27th February, 2023; with the eight areas of concern being:

- Governance, board effectiveness and audit
- Workforce and organisational development
- Financial governance and management

- Compassionate leadership and culture
- Clinical governance, patient experience and safety
- Operational delivery
- Planning and service transformation
- Mental Health

10 independent reviews undertaken on

- 1. Mental Health Inpatient Safety
- 2. Executive Portfolios
- 3. Interim Staff
- 4. Planning
- 5. Contract Procurement Management
- 6. Patient Safety
- 7. Clinical Governance Systems
- 8. Mental Health Reviews Stocktake
- 9. Office of the Board Secretary
- 10. Vascular

whereby thereafter

- Welsh Government arranged for a number of Independent Advisers as part of an Intervention and Support Team
- Report presents the draft first 90-day organisational Response Plan
- Once considered by the Board it will be submitted in draft to Welsh Government

The process for developing an organisational response is as follows: Structure process undertaken; Discussions with Welsh Government officials throughout; Workshop held with Independent Advisors, Welsh Government Officials and Board Members; Further input deployed by Welsh Government via reviews listed earlier; Internal workshops based on each of the 8 areas of concern; Executive Special Measures Review Group established; Independent Member engagement.

CS explained in detail the 1st 90day Response Plan cycle pertaining to the eight areas of concern. The implementation of the Plan will be led by the (interim) Chief Executive and the Executive Team working closely with Independent Members of the Board as part of a Unitary Board.

Board sub committees relating to the:

- 1. Audit Committee
- 2. Performance, Finance and Information Governance (PFIG) Committee
- 3. Quality, Safety and Experience (QSE) Committee
- 4. Partnerships, People and Population Health (PPPH) Committee;

will

- receive a report that is tailored to the remit of the Committee
- The Executive will regularly consider and manage risks, thus assessing delivery confidence
- BCUHB will work with partners on elements of delivery are not wholly within the Health Board's control

Concluding, CS added the next steps being:

• The BCUHB Board is presented with the draft Special Measures Response Plan for the first 90-day cycle of the Stabilisation Phase;

- Significant consideration and dialogue regarding the approach to be taken, the outcomes and the focus for the first 90 days;
- Whilst it is a broad plan, it does demonstrate a commitment to make rapid and determined progress;
- Once the BCUHB Board have approved the draft plan, it will be submitted to Welsh Government imminently.

DE added the trust in partners to provide health and social care services adding that this must be ensured that this happens on the ground. Perhaps it has happened in the past, however might not be case at this moment in time, but a call for collaboration is needed.

Whilst AR was pleased that improvement timetable is in place he questioned what resources / tools will be used to measure the success of the plan - how will achievement be measured?

- CS responded by adding that the measurement information not fully signed off to date, currently working with WG colleagues and independent advisors and when all agreed, BCUHB can move forward! Once available, they will be shared.
- OS added that the de-escalation criteria not yet agreed adding there are
 90 days to look at de-escalation plan.

RS questioned how the plan spells outcome based noting one paragraph engaging with priority groups. RS wanted confirmation on what are the plans communicating with public questioning if there was to be a positive communication plan to highlight good work undertaken.

- CS confirmed that the Communication Plan had been compiled. It will be
 an evolving document as at embryonic stage and clarity around the 90
 days. A range of events will be attended; websites to go live and
 communication plan components will start trickling through.
- AJ added the need to deal with historical issues, prior to moving forward.
 It was questioned how will history be dealt with ie financial issues, this will not be a positive message, however, needs to be addressed to gain public confidence in moving forward.
- DE responded by saying that AJ's statement not far from his mind continually. He added that his ambition is to delay, sound legal advice in clearing and dealing with issues. DE acknowledged it will be challenging as dealing with the public, caring for the public. The wish is to get everything out in public, draw a line under it and move forward with the changes.

JW questioned the momentum on special projects eg at key meetings, health colleagues apologising for the challenges within the Health Board. The need to learn lessons when working well. As the RPB continues to progress and improve – JW added her concern as to capacity and joint working adding it needs to continue.

DE responded by stating many have been in difficult situations where we turn in on oneself. The need to be outward looking despite being under siege and the reminder of that continuation paramount.

MW welcomed the openness and engagement with partners, however, feels that partnership is not working as BCUHB has gone on in on itself, as care provides who support the system decisions being made without consultation or engagement. Care providers would welcome discussions moving forward.

MW also added that the view of the public in North Wales is that 'this will never work, the board is too big'. MW asked for clarification on how it will work etc YGC A&E

- DE responded that partnership working is part of the programme and certainly not off the radar. There is a sense and feeling of improvement, however, DE could not answer what's happened in the past but the ambition moving forward is a new way of working, cooperation and positive and clear on improvements we're making getting people to deliver the work. This is a long term picture.
- OS added re. same day emergency care: triaged at front desk with support from Red Cross eg. A 0 tolerance on 4hr ambulance wait undertaken to ensure that the service will be sustainable.
- OS added that both Mental Health and Cancer treatments in BCUHB amongst the best in Wales: but want to be better!
- CS responded by stating at the ED at YGC waiting times not acceptable, however an improving picture mooting that the plan that seems to be delivering. Difficult message in that it's a good news story! But clear improvement.
- Regarding the size of the Board there is a new thinking moving forward.
 Details included in the 1st 90days plan on how to move operating model forward.

NA was interested in the positive presentation and progress being made. Re. the MH review stocktake, that too was good to hear. Will BCUHB include partner involvement?

 CS advised it was following on from the historical review commissioned to look back at 2015 which was now completed and signed off. Challenged by press and media – independent assessment – Royal College of Psychiatry will determine involvement from partner organisations moving forward.

EH observed that all RPB members support and serve the same people. Always an accountability to do better, there is now an opportunity to not lose momentum or sight of services that ensures people's lives are enhanced. She added that running our organisations whether be big, 3rd sector / LA etc, working collaboratively is a positive way forward.

LR added that she'd previously worked at the Health Board. LR commented on the "Super staff" on the ward, the feeling of being overstretched. LR questioned whether there was anything LA's and partners could do to assist, reiterating the need for partnership working to be improved. Elected members on RPB need to be working within their communities obtaining their perspective and disseminating of information provided in liaison with the RPB & BCUHB.

RaG commented on importance of public ownership of the health service, therefore transparency essential adopting the Nolan principles once again. RaG was encouraged to hear the dedication moving forward together with the dedication from the staff to move forward.

Cllr EH discussed the challenges faced by Mental Health Services in DCC in the past. Stating that Mental Health services are vital. Cllr EH questioned MH services within the Plan for 90days.

 TO responded adding that the current workplan and crisis work eg; 111 * 2 through partners having an impact on early intervention. iCan primary care hubs plan being rolled out under the leadership and management of Vicky Jones; who will engage with all services undertaken by LA's. TO & Cllr EH have further discussion.

DE concluded the discussion by stating that communication is key — both internally and externally. The road ahead is not going to be an easy one however by collaborative working any barriers / challenges that are faced can be dealt with. DE added happy to attend any future RPB meetings to discuss and update.

3. NWRPB Children's Sub-Group (CSG) 6 monthly update

The Children's Sub-Group update was shared in paper format prior to the meeting addressing and updating on CGS Governance; RIF Funded initiatives; Launch of the Staywise Cymru Website; Developing the approach to Nyth /Nest whole system approach along with the Emotional Health, Wellbeing and Resilience Framework and others.

SS & Lil advised the members to the co-production that's been undertaken with children re. the implementation phase of the No Wrong Door having been renamed to the 'Right Door Approach'. This is far more positive and was endorsed by the Children's Commissioner.

Lil also introduced The Right Door web series – of which the children at Ysgol y Gogarth, have developed a web series to explain the Right Door from a child's perspective. This will continue to be developed and fully launched in 2023/24.

Lil advised that the 4 next episodes to feature: LGBTQ; eating disorders, bereavement and exercise. Lil will be off to college in September and will mentor new incoming project!

MWJ commented that sometimes members lose the importance of being board members, however, Lil's presentation was "WOW!" MWJ added ensuring children and young people are heard will ensure the success of the CSG.

Lil added that Ysgol y Gogarth is portrayed as a school for wheelchair users and that she was unhappy that both herself and Josh who are both wheelchair users were portrayed on the BBC coverage. She also added, that Ysgol y Gogarth is not a 'special school' but an additional education school.

RS advised of the Wheel – an Irish organisation similar to WCVA who are currently looking for partnership working with North Wales TAPE could possibly tap into the resources!

MW enquired as to how to get in touch with Hope productions and SS advised currently via TAPE, prior to setting up of website!

The Chair thanked both SS and Lil for their interesting and powerful presentation.

All members were in agreement that the CSG is moving in the right direction and that by undertaking a children's rights approach alongside the National Participation Standards and empowering children and young people to shape the work of the Board enables the RPB Board to hear directly from them was indeed a positive undertaking.

4. Learning Disability Programme Update

In addition to the Report submitted, SW presented the 5 key workstreams from the NWLD programme – those being Communities; Health; Technology; Employment and Children & Young People.

SW advised that she is paid as a coordinator for the North Wales self-advocacy group called the Flyers. SW added that it's important for people with LD to have a voice adding that people need to hear what they're saying. SW's role is paid for by the North Wales LD Partnership group and the programme put in extra money to fund a regional advocacy officer post. That person assists in getting more people with LD to share their ideas and thoughts.

SW also touched one of the projects set up and now funded being the Health Check Champions. SW advised that people with LD have a higher risk of developing many illnesses and dying early. WG pay GPs to do health checks on people with LD. As many people with LD are unaware of the health check — a Health Check Champion will travel across North Wales advising people about their rights to a health checks and health screening. They also help people to think about their physical and mental health as well as training professionals about people with LD. Regarding Technology, SW advised of equipment that helps people live their lives. SW shared her experience of trialling an epilepsy seizure watch etc. Trialling and developing apps on phones and tablets being undertaken as well as advice on Laptops, smartphones and tablets.

One to one together with group technology training for people with LD and their staff provided as well as Technology Hubs for individuals.

Re. Children's and Young People's Workstream; as this is a new Workstream, the programme has researched what people want to do when they leave school eg. Work also undertaken with people with LD to produce videos that can be shared with young people and their families. They are introductions on how to get somewhere to live, how to find a job, how to decide whether to stay in college or something else. There is a new video being made with the help of TAPE about sex and relationships.

SW advised members that many LD individuals want to work. They're unaware of that they can earn up to £163pw without losing their benefits. The team have been working on an employment model because people with LD told them this it what was important to them.

Leadership Group have agreed further money to set up a model over the next three years.

The Chair thanked both KW & SW for their concise and very interesting presentation adding that a small investment brings a big return.

RS advised of various organisations to investigate re. possible further funding streams namely; Walkways and Peace IV Programme. More funding across regional model via Improvement Cymru. Irish Sea framework. RS mentioned a team in Merthyr who advise on applications etc.

MW queried as to how the link between local and regional – RIF – anything that can be done to illustrate a good practice model of work that could be learnt from. KW & SW responded by adding LD partnership & NW Flyers; health & Social Service driven by them – supported employment is a great representation of all counties coming together to discuss issues together with meeting and getting voices heard.

NA thanked colleagues for supporting supported employment – the only programme of its stature in Wales here in NW. NA advised that KW sits on

	national group and Shell has been nominated for Inspirational Woman award from Chwarae Teg.	
5.	Open Discussion RS elaborated on a discussion held at the 'Hot Tub' group from Flint to Prestatyn: "Hot tub" enabling experts to put in their opinions in court / policy documents about new models in health and care. RS added the severe lack of knowledge how health organisations work in NW. eg, not knowing what are pan clusters; use of jargon etc. RS augmented the use of storytelling to share information as well as coproduction of initiatives are paramount to success. In response TO added that currently a strategy to rid of jargon being undertaken. TO added health literacy; patient story space currently not in the organisation space. With the current challenges facing the HB, TO elaborated the importance of engagement and communication v's managing expectations. Moving forward linking in with partnership engagement comms teams etc. TO to discuss and feedback with Helen Stevens-Jones for guidance.	
	AJ raised the point of occasionally, in terms of RPB, WG expect responses urgent, at stealth ie Winter pressures – RPB issue, sort it out! AJ added monthly meetings sometimes not best medium to respond as RPB's are NOT corporate bodies etc. Aj questioned should a crises arise, the expectation to speak as one quickly, how to action – set up a 'core representation from LA? HB?	
	MW agreed as RPB meetings held monthly, but individuals carried on meeting to drive forward ie a strategic overview. As WG ask for relatively minutiae discussions and the next in-person RPB meeting in October, possibility of reporting back and discussing and the table at that time.	
	RS voiced that he was against that nature of 'networks' eg WG – need view on whole example and as a Board and not an 'elite group'. RS added, decision making good idea, but needs investigating further.	
	EH suggested the possibility of some work on policy positions on certain discussion aspects ie discussion on predictable winter pressures etc. possible collective agreement in reference – share collective view.	All to investigate
	The Chair mooted the idea of investigating how to move forward.	how to move forward.
6	Minutes and actions of last meeting – May 2023	
	All agreed a true account and actions completed.	
7	Any Other Business All agreed that having a 'different' agenda as per the 9/6 meeting was something that needs to happen regularly allowing members to 'touch base on what we do'.	
8	Dates of next meetings: Friday 14 th July, 2023 – Zoom	
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