

**CONFIRMED MINUTES OF A MEETING OF THE  
RESOURCE AND DELIVERY COMMITTEE  
HELD ON 30 JANUARY 2018 – 9.00AM  
CORPORATE MEETING ROOM, HEADQUARTERS, UHW**

**Present:**

Maria Battle	UHB Chair
Charles Janczewski	Chair – UHB Vice Chair
Akmal Hanuk	Independent Member – Local Community
John Antoniazzi	Independent Member – Business Planning
Eileen Brandreth	Independent Member - ICT
Sara Moseley	Independent Member – Third Sector

**In Attendance:**

Abigail Harris	Director of Planning
Geoff Walsh	Assistant Director of Planning
Fiona Jenkins	Director of Therapies, Health Science and IT
Lee Davies	Assistant Chief Operating Officer
Martin Driscoll	Director of Workforce and Organisational Development
Peter Welsh	Director of Corporate Governance
Sharon Hopkins	Director of Public Health
Steve Curry	Chief Operating Officer

**Observer:**

**Apologies:**

Len Richards	Chief Executive Officer
John Union	Independent Member - Finance
Marie Davies	Deputy Director of Planning
Robert Chadwick	Director of Finance
Ruth Wales	Nurse Executive
Keithley Wilkinson	Equality Manager

**Secretariat:**

Glynis Mulford

**RD: 17/036 WELCOME AND INTRODUCTIONS**

The Chair welcomed the UHB Chair and Members to the final meeting of the Committee. In regards to item 12 of the agenda, it was explained members from the Strategy and Engagement Committee were invited to discuss the role and responsibilities of the new Strategy and Delivery Committee.

**RD: 17/037 MATTERS ARISING**

There were no matters arising.

## **RD: 17/038 APOLOGIES FOR ABSENCE**

Apologies for absence were noted.

## **RD: 17/039 DECLARATIONS OF INTEREST**

The Chair invited Members to declare any interests in the proceedings. None were declared.

## **RD: 17/040 MINUTES OF THE RESOURCE AND DELIVERY COMMITTEE MEETING HELD ON 8 AUGUST 2017**

The Committee **RECEIVED** and **APPROVED** the minutes of the meeting held on 7 November 2017.

## **RD: 17/041 ACTION LOG FROM MEETING PEOPLE, PLANNING AND PERFORMANCE MEETING HELD ON 8 AUGUST 2017**

The Committee **RECEIVED** and **NOTED** the Action Log from the meeting of 7 November 2017.

## **RD: 17/042 CHAIR'S ACTION – REVISED POLICY ON RECORDS MANAGEMENT**

Comments were received and noted from the Executive Nurse. **ASSURANCE** was provided by adherence to the UHB Standing Orders. The policy was presented to the meeting and the Committee **ENDORSED** the action taken by the Chair.

## **RD: 17/043 WORKFORCE AND ORGANISATIONAL DEVELOPMENT DELIVERY PLAN OBJECTIVE REPORT – HEALTH AND WELLBEING INCLUDING SICKNESS MANAGEMENT**

Mr Martin Driscoll, Director of Workforce and Organisational Development updated the Committee on the report and highlighted the following:

- Members were informed that Health and Wellbeing was embraced in the Efficient Workforce objective of the IMTP. In regard to the key metrics data, this focused on absenteeism and influenza and highlighted there was additional information available.
- In terms of the Corporate Health Standards, the Organisation achieved both gold and platinum in the final quarter of the calendar year. The Director of Workforce and Organisational Development attended the final day of the

independent assessment and was impressed with the work attained by many parts of the organisation where comments received from the assessors stated the Health Board was exemplar in the work done across the public and private sector in Wales, which was ongoing.

- The Committee recognised and commended the team with the work accomplished and was informed that the Chief Executive had written to individuals involved in the work.
- There were conversations and work around engagement being a proactive interface with initiatives to build a better health service and a healthy workforce. Discussions would be integrated into the workplace to transform conversation around employees and this should have an impact on the sickness absence performance.
- Through close governance, sickness absence performance had shown significant improvement over the past few years. It was stated that the initial target was to go down from 7% to 4% by 2017/18. This was considered too ambitious and had demonstrated this was not achievable as the Maximising Attendance Group had set itself challenging targets for reducing sickness absence. By reviewing this area with the team, a proposed absence target was set to a level that could be achieved although stretched. The Committee was informed that the sickness level currently stood at 4.9% and aimed to reduce this to 4.6% by end of year.
- In regards to the Occupational Health and Wellbeing programme there had been a considerable amount of work undertaken by the Occupational Health Team and Flu Champions in the Clinical Boards and the uptake of flu jab stood at 63%.
- The other area reviewed was the development of the Employee Assistant Programme, an external programme, which was used through the Employee Wellbeing Service, of which the majority of staff continued to use. It was reported that the UHB had engaged with an external group to support employees (Employee Assistant Programme), the Board had also continued to engage the Employee Wellbeing Service, which is longstanding and broadly trusted by the employees. It is viewed that there will not be an ongoing requirement to support two programmes of employee assistance and this position will be reviewed in March 2018.

It was discussed and noted:

- In response for more depth and understanding in regard to the independent assessment, it was explained that there was a detailed report from the Assessment Board which is a national body. They had received detailed submission packs in advance. This had been presented extensively along with the team and across the organisation, but was happy to circulate report with further information. Also, in regards to recommendations there were further targets to achieve which would be addressed.
- In looking at Maximising Attendance and what is reasonable, the revision of the targets was welcomed. Clinical Board targets would be variable in regards to how they had performed in the past. In discussion with Heads of Workforce it was deemed a fairer way of accomplishing and achieving the targets.

- Commendation was given to the team in regards to seeing how the work was coming together stating it demonstrated both a growing maturity and systems leadership within the Organisation. It was suggested that at some point in the future those departments that were achieving lesser results should seek to learn from others.
- In discussion with the operational teams, areas had been highlighted in the Organisation where they were more challenged than others. It was stated a tailored approach would be more welcome as some departments would be able to extend whereas others could only achieve the minimum. There was a need to ensure line managers were empowered and capable to discharge responsibilities around this.
- Leadership is a good indicator but would like to consider looking at a motivational level and staff morale whether this was being captured and lining up aspects of achievements. In response it was stated that Employee Service Plans will go ahead this year but returns from previous years were relatively low with low scoring. But acknowledged this was an indicator of a piece of work to undertake.

**ACTION: M Driscoll to circulate the Corporate Health Standards report to Committee Members**

The Committee:

- **NOTED** the update and progress of the health and wellbeing agenda

#### **RD: 17/044 WALES ANNUAL EQUALITY STATEMENT AND REPORT**

Mr Keithley Wilkinson, Equality Manager, was unable to attend the meeting. Members were informed that the paper would go forward to Board for consideration.

#### **RD: 17/045 UPDATE ON PERSONAL APPRAISAL AND DEVELOPMENT REVIEW**

Mr Martin Driscoll, Director of Workforce and OD gave a verbal update on Personal Appraisal and Development Review (PADR), stating the detail came through to the Board meeting reports. Members were informed that PADR performance was static from March 2016 to March 2018. This included medical staff which had shown marginal improvement. This was an area that had a level of traction but no progress. There was a challenge going forward for a significant piece of work to be undertaken. It was emphasized that line managers should at least once a year, discuss staff aspirations and their future and engage staff on how to take this into a different arena; for there to be wider discussion on succession planning, talent and development management. This should form the basis of information that came from appraisals. In two to three months' time a piece of work would be brought to the new Committee on what would be considered to be taken forward.

It was discussed and noted:

- This was a fundamental step in moving forward as the Board was responsible for the culture and the development of staff.
- The scrutiny was welcomed and it was acknowledged there were more PADRs being undertaken than were currently recorded on the Electronic Staff Record system. There was a need to ensure it is a valuable conversation and rewards individuals appropriately.

The Committee:

- **NOTED** the verbal update on Personal Appraisal and Development Review

### **RD: 17/046 MORE THAN JUST WORD (WELSH LANGUAGE)**

Sara Moseley, Independent Member gave a verbal update stating that she had recently attended a meeting with the Welsh Language Commissioner to review the Annual Reporting Plan resulting in a number of specific suggestions. This was overshadowed as the Standards had not yet been published. In early observations the Independent Member had asked the team for benchmarking data against other Health Boards in regard to good practice and what was working well. It was stated for the Health Board not only to comply with the standards but to celebrate what we had in relation to diversity and the number of staff able to speak the language. There were discussions on having a creative approach and being more engaged. The team was focused in undertaking work around this area and was exploring ideas for improvements.

The Director of WOD stated that good work had been undertaken and achievements captured during the past 12 months. There was promotion of the Welsh language in terms of recruitment and induction. There were some challenges around recruitment outside of Wales. The More than Just Words strategy has a traction in the organisation and a strategic objective. Further updates will be given in new Committee.

It was discussed and noted:

- In response to whether the question is asked if employees speak Welsh, it was stated that although the question is asked it was not compulsory to answer. The Organisation had a service where staff wear lanyards for patients and visitors to identify those who can speak Welsh.
- There was a need to ensure that people who are unable to speak Welsh were not deterred by applying for posts. There was a need to look at the national and international market and for there to be a balance by looking for other skills too.
- It was highlighted that a number of items on the table were RAG rated red with dates stating not current and asked for these to be reviewed by the team.

- It was acknowledged that there was very good work ongoing across the Organisation and for this to be recognised.

**ACTION: For team to review table with RAG rates that are red**

The Committee:

- **NOTED** the course of action undertaken to ensure compliance to the More than Just Words Strategy and the UHB Welsh Language Scheme
- **ENDORSED** progress report to Board

**RD: 17/047 POLICIES FOR APPROVAL**

### **Business Continuity Policy**

The Committee **RECEIVED** the Business Continuity Policy and the Committee was informed that Internal Audit had been looking at the procedure for some time and one of the gaps was to have an updated policy. It was acknowledged that a considerable amount of work had been undertaken.

It was discussed and noted:

- The security cyber-attack last year raised questions around business continuity and the WAO audit required Clinical Boards to have their own continuity plans in place. It was suggested that there should be a link for executive leadership in IT and this should be a defined role added into the policy. Welsh Government will be running a seminar on business continuity for executives in the near future and this should be reflected in document. The Director of Therapies and Health Science considered that as she also had a responsibility for patient safety, this should be included in the policy.
- The Strategic Partnership and Planning Manager and team had engaged with the Chief Operating Officer (COO), Chief Executive and Clinical Boards around emergency preparedness. As the scope of this document is very wide-ranging, it was recognised that having specific leads for high profile risks was important. The COO played a particular role in emergency preparedness and given the potential impact on the organisation there may be a need for particular leads allocated to particular items.
- It was highlighted that it said in the EQIA 'no action required at this stage' and queried if this was the case with such a number of actions. It was explained that each Clinical Board had to have ownership of their individual policy which fed into the broader document. This was not about service improvement but whether the Health Board could continue to function and operate if a crisis arose.
- It was suggested that the Equality and Health Impact Assessment (EHIA) on front cover of report could be reworded 'where relevant in delivering the policy an EHIA will be undertaken'.
- The real delivery and assurance centred around Clinical Boards doing the appendices in the document and for them to progress and ensure they are enacted.

**ACTION: G Walsh to discuss revising document to include Director of Therapies and Health Science around the professional and executive role in IT**

**To clarify if the 'no actions required at this stage' was robust**

**SUBJECT** to above amendments the Committee:

- **APPROVED** the BC Policy and BC Planning Guidance
- **APPROVED** the full publication of the BC policy and BC Planning Guidance in accordance with the UHB publication scheme

### **Employment Policy and Procedure**

The Committee was informed the employment policies were a revised All Wales policy with key changes highlighted. There had been a new approach for staff to raise concerns which has been championed by Chair. The documents will be disseminated via the intranet and clinical portal.

The Committee:

- **ADOPTED** the revised All Wales Special Leave Policy
- **ADOPTED** the revised All Wales Procedure for NHS Staff to Raise Concerns
- **APPROVED** the full publication of the Policy and Procedure in Accordance with the UHB Publications Scheme

### **RD: 17/048 TO DISCUSS AND AGREE THE ROLES AND RESPONSIBILITY OF THE NEW COMMITTEE IN ORDER FOR THE TERMS OF REFERENCE TO BE PREPARED**

The UHB Chair informed Members that a Wales Audit Office (WAO) draft report was being considered and recognized a brand new Board and the challenges this had for the Organisation. Part of the WAO report reviewed the Resource and Delivery and Strategy and Engagement Committees. In speaking to Independent Members it was recognized they had been given detailed fundamental training on the NHS and governance. There was a need to look collectively as a unitary Board to review how we seek assurance as a Board and revise our Committee structure. This will be looked at in detail at the Board Development Away Day in February.

Members were invited to provide input into the requirements needed for the new Committee and a robust discussion ensued on the role and responsibilities of the Committee. This will be discussed further at the Board Development Away Day. It was agreed that a Working Group be set up before the Board Development Day to ensure the day can be set with clear principles and parameters.

**ACTION: The UHB Chair to set up Board and Committee Working Group**

The Committee:

- **AGREED** to stand down the Strategy and Engagement and Resource and Delivery Committees and replace these with a new Strategy and Delivery Committee
- **SUPPORTED** Chair's Action to agree the terms of reference of this new Committee and for this to be endorsed at the Board's meeting on 29 March 2018

**RD: 17/049 HIGH LEVEL PERFORMANCE DASHBOARD**

The dashboard taken up to quarter three for this year was presented for information by the Chief Operating Officer. It was explained this was a view of high level indicators covering Tier 1 targets and related to the IMTP to highlight whether or not the Health Board was compliant.

There was wider discussion in understanding where the challenges should be and what appropriate scrutiny should be against these reports.

The Committee:

- **NOTED** Year to date performance for 2017-18 against key operational targets

**RD: 17/050 CONTINUING HEALTHCARE REPORT**

The report is required by Public Accounts Committee to be noted at the meeting. It was queried whether the report should sit with the Finance Committee.

**ACTION: Chief Operating Officer to distribute missing page**

The Committee:

- **NOTED** the paper

**RD: 17/051 ANY OTHER BUSINESS**

There was no other business to report.