## NATIONAL DELIVERY GROUP

# 23 July 2009 11:00am

# Committee Room 39, Temple of Peace, Cathays Park, Cardiff

### Present:

Paul Williams – Chair
Rosemary Kennedy
Dr Tony Jewell (part)
Eifion Williams
Sheelagh Lloyd-Jones
Gwyn Thomas
Keith Ingham
Mike Chown
Stephen Hunter
John Palmer
Chris Riley
Carl James
Zoe Harcombe
Peter Max

Owen Crawley Sian-Marie James

## 1. APOLOGIES FOR ABSENCE

1.1 Apologies were received from John Collins, Bob Hudson, Simon Dean and Graham Williams.

## 2. MINUTES OF PREVIOUS METING – 4<sup>th</sup> JUNE 2009

2.1 The Minutes were agreed.

### 3. TERMS OF REFERENCE

3.1.1 PW advised that the Terms of Reference (ToR) should be kept under review as the role of the NDG developed.

### Action:

Organisational Chart to be circulated – SMJ

## 4.1 DIRECTORS UPDATES

PW had asked all Directors to provide the Independent Members with background briefing on their portfolio areas.

## (i) Operations

CJ presented his paper that set out the functions of SD's Directorate; (i) Performance Management of the NHS; (ii) Regional Offices; and (iii) Quality, Standards and Safety Improvement. The following matters were discussed:

- PW asked that for the next meeting, the NDG would receive a progress report on the suite of National Efficiency Indicators;
- PM asked when the NDG could expect to see the Annual Operating Framework (AOF) for 2010/11. PW confirmed that this would be available late autumn, linked to the proposed 3/5 year Strategic Plan (currently being commissioned);
- RK referred to transformational work being led by the Delivery and Support Unit (DSU) on Intelligent Targets;
- KI requested more joint Social Services/NHS targets in future AOFs:
- PM requested timescales to be included in future papers about the operations functions.

#### Actions:

- Progress Report on the suite of National Efficiency Indicators for next meeting – CJ
- All future papers about the operational management of the NHS should include timescales - CJ

## (ii) <u>Information</u>

GT provided an overview on the information issues affecting the Service, and referred to his paper on the Review of the Informing Healthcare (IHC) Programme 2004-2008.

- ZH asked what could be done to help people work together. GT replied that by showing the benefits of new ways of working, and by engaging with the Service early in development of new systems, cultural changes could be made;
- PM enquired whether the priorities were being re-appraised as a result of the current financial climate. GT confirmed this work was underway, with a previous federated model moving to a performance management model. GT felt that we needed controlled local innovation that could be nationalised if successful. OC agreed that we needed effective strategic development in Wales:
- PM asked if there was scope for adopting a UK-wide approach to informatics. GT felt that we should adopt both a UK-wide approach to some issues, but maintain innovation in Wales particularly where there was policy divergence between countries. Systems should be shared where appropriate;
- PM asked if there was a LHB Informatics Lead. GT said that we must avoid being too prescriptive, but the aim should be to maintain consistency across the seven LHBs. He added that there was a Non-Officer Member on the LHB Boards with an IT background.

## (iii) Workforce

SLJ provided an overview on the main issues being addressed within Workforce and Organisational Development as part of the NHS Reform Programme.

#### INFORMATION REDACTED

- ZH asked how staff costs could be reduced. PW confirmed that during the NHS Reform Programme management posts had been frozen and staff would be redeployed, with any redundancies handles through natural wastage. This was sometimes more difficult to achieve in clinical areas:
- PW referred to the current Junior Doctor shortage, which was resulting in services being reorganised to ensure they are safe and sustainable:
- PM asked if there was data available on productivity. PW confirmed this was available in some form linked to the performance management work;
- PM asked if there was a UK-wide approach to pay and conditions as a result of the financial climate. SLJ advised that AfC was a 3year pay agreement.

## (iv) Finance

MC confirmed that his paper was a snapshot of the current financial position. PW referred to the current tender specification for management consultants to work on a 5-year Service and Financial plan.

- PW felt that the Service must turn problems into opportunities to reform services, but this would need effective engagement with stakeholders:
- PM asked when the Service and Financial Plan would be available.
   PW thought that a first draft would be available in the autumn.

## (v) Strategy and Planning

CR introduced the paper in BH's absence, which set out the current functions of the Strategy Unit; (i) Planning; (ii) Policy and Strategy development; (iii) Service Availability; (iv) Infrastructure; and (v) Cross Cutting policy imperatives.

CR confirmed that in light of the end of the market structure there must be a new formal planning system. This work was progressing with the establishment of a Working Group, attended by key stakeholders.

The Team also dealt with cross-cutting areas, including Sustainable Development and European Health.

### (vi) Social Services

KI introduced this paper in GW's absence, which set out the challenges facing Social Services and the establishment of a Director's office. The paper also provided details on the Directorate's functions; (i) Children's Health and Social Services; and (ii) Older People and Long Term Care.

- PM referred to Delayed Transfers of Care (DToCs) and asked if the NDG would be considering the challenges facing Social Services and the NHS in working together. PW advised that the DToC figures were reducing and this area was being addressed by a number of Local Service Boards (LSBs).
- JP added that all 6 of the LSB pilots had a project on health and social care integration.

### Action:

 Paper on the relationship between health and social care, and the role of LSBs for the next meeting – KI/JP

## (vii) Nursing

RK introduced her paper, which provided an overview of issues relating to the Nursing and Midwifery professions in Wales. RK also provided the Independent Members with a number of policy documents as background briefing.

Nurses were a major part of the workforce. **INFORMATION REDACTED** Work was on-going to explore using experience nurses in different areas, such as undertaking colonoscopies.

## (viii) Chief Medical Officer

CMO introduced his paper, which focused on two areas; (i) Pandemic Flu; and (ii) the establishment of Public Health Wales NHS Trust.

- ZH asked if there was a contingency plan for GPs in light of the additional work resulting from Swine Flu. TJ confirmed that primary care was a key part of the Business Contingency Plans that were already in place. TJ had issued a second CMO letter and would circulate to NDG Members;
- ZH asked whether the NHS had a contingency plan as an employer. TJ confirmed that Business Continuity Plans were in place.

#### Action:

Send CMO's second letter to NDG Members – TJ/CC

### (viii) Medical

SH introduced his paper, which provided a brief on some of the major issues engaging Medical Directors; (i) the LHB Medical Director appointments; (ii) the European Working Time Directive (EWTD); (iii)

recruitment of Junior and Middle Grade Doctors; (iv) the Junior Doctors Workforce Group; and (v) the Postgraduate Medical Education and Training Board.

SH highlighted the importance of the LHB Medical Director appointments, as medical leadership in the new structure was vital. Approximately 9% of the workforce were medics, with 11% of the staff costs, controlling 80% of the activity.

## (ix) Therapies and Science

OC introduced his paper outlining the diverse nature of this part of the workforce.

The key issues in this area were (i) Pathology Services; (ii) Molecular Pathology Services; (iii) Imaging Services; (iv) the shortage of radionuclides; (v) Modernising Scientific Careers; (vi) the Therapy Strategy for Wales; (vii) Therapy Services Data; and (viii) Graduate Employment.

#### 4.2 SWINE FLU

CMO had dealt with this item as part of his report above.

## 4.3 NHS REFORM PROGRAMME

SMJ introduced this paper, which informed NDG on the progress of the NHS Reform Programme. SMJ confirmed that the Programme was on track.

### 4.4 RURAL HEALTH PLAN

CR introduced this paper, which set out the development of the Rural Health Plan and its progress.

CR confirmed that following a Ministerial Steering Group, chaired by Lord Elystan Morgan, the Rural Health Plan had been issued for a sixteen week consultation period. This ended on the 21<sup>st</sup> August 2009.

NDG would receive a further paper after the consultation had ended.

### 4.5 PRIMARY AND COMMUNITY STRATEGY

CR introduced this paper, which set out the progress with the Primary and Community Services Strategic Delivery Programme. The National Advisory Board had considered this Strategy at its first formal meeting on the 29<sup>th</sup> June 2009.

CR referred Members to the diagrammatic representation of the current "push" system for primary and community services. The Strategy aimed to create a "pull" system, with more integrated working between health and social care.

- ZH asked whether this model had been adopted in any other parts of the world. CR confirmed that bits of it were in evidence.
- PW felt that the implementation of this Strategy required a massive cultural change. PM considered this Strategy to be inspiring.

#### Action:

 NDG Members to receive regular up-dates on progress with implementation of the Strategy – BH/CC

### 4.6 IDEAS PROGRAMME AND KEY PERFORMANCE INDICATORS

JP introduced this item and explained the corporate IDEAS Programme and the Health and Social Services Directorate General Key Performance Indicators.

### 4.7 PERFORMANCE INFORMATION AND REPORTING

CJ presented a paper on the performance management function, which demonstrated the sort of information currently collated, mainly based on secondary care. CJ asked the Independent Members what information they required to challenge the Executives.

- PM had a number of questions but suggested that they were dealt with outside the formal meeting.
- PW confirmed that the Dashboard was developing, and NDG Members could call for the information behind the high-level KPIs.

## 5. ANY OTHER BUSINESS

PW asked the Independent Members for their views on the papers presented.

- ZH asked if there was one overarching policy/strategy document.
   PW confirmed that the AOF provided an overview of the main priorities, but we would arrange for an overarching paper to be prepared for discussion at the next meeting;
- PM suggested that in future issues were identified on an Exception basis:
- PM also asked if the Independent Members could meet with Executive Directors outside of the formal meeting. This was agreed.

### Action:

 Paper to next meeting setting out priorities and strategy – CJ/CR  Independent Members to attend office for a day to meet with Executive Directors - CC

# 6. DATE OF NEXT MEETING

The next meeting will be held on the 24<sup>th</sup> September 2009.