

# **NATIONAL DELIVERY GROUP**

**24 September 2009**

**11:00am**

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

## **Present:**

Paul Williams – Chair  
Dr Tony Jewell  
Eifion Williams  
Simon Dean  
Gwyn Thomas  
Rob Pickford  
Owen Crawley

Richard Bowen  
Stephen Hunter  
Zoe Harcombe  
Peter Max  
John Collins  
Hazel Robinson

## **1. WELCOME AND APOLOGIES FOR ABSENCE**

- 1.1 The Chair welcomed Rob Pickford to his first meeting and thanked Eifion Williams for the work he has undertaken as Acting Director of Finance. Chris Hurst, Director of Finance, will be in post as of Monday 28<sup>th</sup> September.
- 1.2 Apologies were received from John Palmer, Sheelagh Lloyd-Jones, Rosemary Kennedy, Sian-Marie James and Christopher Cule.

## **2. MINUTES OF PREVIOUS METING – 23 JULY 2009**

- 2.1 The minutes were agreed as an accurate record.
- 2.2 On matters arising, para 4.1(viii), NDG were informed that all the LHB Medical Director appointments had now been made.

## **3. PROGRESS REPORT ON THE SUITE OF NATIONAL EFFICIENCY INDICATORS**

- 3.1 RB provided a brief update on the broad range of targets  
**INFORMATION REDACTED**

### **3.2 INFORMATION REDACTED**

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***Action - Sickness comparative data across trusts to be presented at next meeting - SLJ***

### **3.3 INFORMATION REDACTED**

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#### **4. NHS PERFORMANCE UPDATE**

4.1 Update provided on the current NHS performance against a number of key targets, as at the end of July 2009 position. The high priority areas were highlighted covering cardiac, diagnostic and therapies, cancer, unscheduled care and A&E.

4.2 The following points were raised:

- The position is worsening for the RTT target of 98% of non-admitted patients having a maximum wait of 26 weeks. The response was that those who are at the end of the pathway (ie those who have waited the longest) are being targeted first. This approach reflects the change from component wait to RTT.
- The handover target is 100% and current position is 82.2%. The achievement of the target is going in the right direction although the improvement is coming from the acute hospital side. The turnaround after a patient is handed over to the acute hospitals is then an issue for the Ambulance Trust.
- Rolling 12 month data requested rather than the current format.

**Action – RB**

#### **5. NEW NHS PERFORMANCE IMPROVEMENT FRAMEWORK**

5.1 The paper set out the first phase of the performance improvement framework for NHS Wales. The key issues regarding performance improvement and review were:

- Priority areas of concern – the Director of Operations and Director of Finance will work with their NHS colleagues to manage performance;
- Monthly Chief Executive meetings now up and running, chaired by PW;
- HSS DG Executive Directors Team members to meet with their LHB counterparts to collectively discuss the challenges (frequency to be determined);
- On-going work to develop an interactive performance dashboard, containing a robust and up to date information.

5.2 Comments from the NDG included:

- Clarification provided regarding benchmarking which is done against both local and national indicators
- Could we develop plans to bring non-executives together so that best practice/ experience and learning can be shared across Trusts. SLJ is working on a plan to put such a process in place.
- Para 14 – how are priorities decided of where to focus intervention/support? There is a need to be flexible to respond to changes with the limited resources. Focus will be on the organisations who need it the most.  
**Action – Summary of DSU work plan to be brought to the next meeting – RB**
- Para 20 – rewards and interventions set out in AOF will continue to operate. List will be stronger on interventions than rewards. Framework for new NHS is work in progress.  
**Action – Outline Paper for next NDG regarding rewards and interventions.**

## 6. MEDICAL STAFFING ISSUES

- 6.1 The NDG received a paper which set out the current issues relating to medical staffing issues, including recruitment and retention, and European Working Times Directive (EWTD) compliance. The paper highlighted the complex and intended issues, particularly around meeting service and training requirements.
- 6.2 The NDG were informed that the DG considered this to be an area of fundamental importance and he had asked the Chief Medical Officer (CMO), Medical Director and Director of Workforce and Organisational Development (OD) to review existing committee structures to establish one group responsible for the strategic direction for the Medical and Dental Workforce in Wales.  
**Action – Regular updates requested on the strategic direction for Medical and Dental Workforce in Wales – SLJ**

## 7. INFORMATION REQUIREMENTS

- 7.1 GT introduced the paper which outlined the membership, operation and role of the Information Requirements Board. To begin with the IRB will meet monthly and then move to a quarterly cycle. Regarding the membership it was suggested that one of the Specialist IM&T Non-officer Members from the LHBs should join the Board. **INFORMATION REDACTED** was put forward as a nominee. RP and GT to discuss social care, outside of the NDG.

## 8. IDEAS DASHBOARD

- 8.1 The paper provided an update on the available data for the KPIs, which have been agreed to service the IDEAS programme. It was queried whether it would be possible to look at timelines to access GPs and why cancer was included. In regard to the latter, it was explained that they linked to AOF Targets.

***Action – RB to look at this regarding read across for the next meeting.***

- 8.2 The Mental Health charts were discussed and asked whether there was any further information and what was it measuring. The chart needs to be built up with further information sitting under it. It was clarified that some are long term with very little movement.

***Action – Patient experience requested for the next meeting***

## **9. RELATIONSHIP BETWEEN HEALTH AND SOCIAL CARE AND THE ROLE OF LSBS**

- 9.1 The paper was for information.

***Action – series of papers to be presented:***

- ***Paper on the background and the wider context of LSB's***
- ***Paper on safeguarding children***
- ***Paper on the WLGA collaborative audit***

***All for RP***

## **10. OVERARCHING PRIORITIES AND STRATEGY PAPER**

- 10.1 The question was how do we ensure that there is a coherent strategic framework in place in order to deliver health and social services. The paper provided a starter for ten on how to move forward. There was a cross cutting theme with Delivering a Digital Wales.

## **11. NHS REFORMS UPDATE**

- 11.1 The paper provided a progress report of NHS Reform Programme since the previous meeting in July. The new LHB's will be fully operational from 1<sup>st</sup> October. A Transitional Director has been appointed working with HCW and LHBs. The new Powys model of working (Powys Project) was signed off by the County Council and LHB yesterday. It is expected that savings will be made due to the reorganisation which will be down to fewer financial IT systems, audit processes and staffing as of 1<sup>st</sup> October.

***Action – Update at next meeting on how the junior posts in the NHS have been filled - SLJ***

## **12. NHS WALES BUDGET UPDATE**

- 12.1 INFORMATION REDACTED

## **13. BUDGET PLANNING 2009/10**

- 13.1 INFORMATION REDACTED

## **14. FIVE YEAR SERVICE, WORKFORCE AND FINANCIAL STRATEGIC FRAMEWORK**

- 14.1 The development of the SaFF will ensure the delivery of the NHS Service and Financial targets. The Plan will be key in steering the NHS through the current and next 5 years. A Project Group (from both WAG and NHS) will be in place and will be supported by external consultants (McKinsey & Co). NDG noted the paper.

**15. AOB**

- 15.1 ***Action – Paper requested on the audit of NHS Organisations but not just from a financial perspective but from the inspection side too – CH/RB***
- 15.2 ***Action – Non-executives would like to be invited to attend the NHS Confederation in November – JP***
- 15.3 ***Action – NAB Meeting dates to be sent to the non-executives in order for them to attend as appropriate – Chris Cule***