PARTNERSHIP AND REGENERATION SCRUTINY COMMITTEE

Minutes of the hybrid meeting held on 13 November 2023

PRESENT: Councillor Dylan Rees (Chair)

Councillor Gwilym O Jones (Vice-Chair)

Councillors Non Dafydd, Pip O'Neill, Derek Owen,

Margaret Murley Roberts, Ken Taylor and Sonia Williams

IN ATTENDANCE: Chief Executive,

Director of Social Services, Head of Adults' Services, Head of Democracy, Scrutiny Manager (AD), Scrutiny Officer (EA), Committee Officer (MEH)

APOLOGIES: Councillors John I Jones and Euryn Morris

Councillor Nicola Roberts (Portfolio Member for Planning &

Climate Change)

Deputy Chief Executive

ALSO PRESENT: Councillor Llinos Medi – Leader of the Council & Portfolio Member

for Economic Development.

Councillor Neville Evans - Portfolio Member for Leisure, Tourism &

Maritime:

Councillor Carwyn Jones - Portfolio Member for Corporate &

Customer Experience;

Councillor Gary Pritchard – Deputy Leader & Portfolio Member for

Children, Youth and Housing Services;

Councillor Alun Roberts - Portfolio Member for Adults' Services &

Community Safety;

Councillor Dafydd Roberts - Portfolio Member for Education &

Welsh Language;

Councillor Dafydd R Thomas - Portfolio Member for Highways,

Property & Waste:

Councillor Robin Williams - Deputy Leader and Portfolio Member

for Finance.

Mr Dyfed Edwards – Chair of the Betsi Cadwaladr University

Health Board:

Mrs Ffion Johnson – Area Director (West) – Betsi Cadwaladr

University Health Board.

The Chair welcomed Mr Dyfed Edwards, Chair of the Betsi Cadwaladr University Health Board and Mrs Ffion Johnson, Area Director (West) – Betsi Cadwaladr University Health Board to the meeting.

1 APOLOGIES

As noted above.

2 DECLARATION OF INTEREST

None received.

3 BETSI CADWALADR UNIVERSITY HEALTH BOARD

The report of the Betsi Cadwaladr University Health Board was submitted to the Committee for consideration.

The Chief Executive said that the Betsi Cadwaladr University Health Board is the largest partner organisation that works with this Authority to help vulnerable people and afford the best services and care for the residents of the Island. He noted that it is recognized that the Health Board has faced a challenging period over the last six months due to special measures been placed by Welsh Government on the Health Board. However, it is recognised that improvements have been achieved within the Health Board and it is hoped that progress will continue. He further said that the Council is fortunate in having two individuals on the Besti Cadwaladr University Health Board with Councillor Dyfed W Jones as an Independent Member on the Board and Mr Fôn Roberts, Director of Social Services as an Associate Member.

Mr Dyfed Edwards, Chair of the Betsi Cadwaladr University Health Board said that it is unusual that the whole of the Health Board was placed in special measures by Welsh Government in February 2023 due to a number of concerns relating to delivery, organisational performance and governance. He referred to the Board's membership and structure and it is hoped to appoint further representatives on the Board in due course. Mr Edwards further said that the history of the Health Board has been challenging over the last decade with a number of Chief Executive's appointed and leaving their posts. He said the experiences of people receiving the services of the Health Service have been monitored which has resulted in comments praising the health service once they have been seen and have received treatment but there are still challenges experienced in receiving appointments and services in the first instance.

Mr Edwards said that his aim as the Chair of the Health Board and the Chief Executive is to improve the services afforded and to give the best health and well-being support to the people the Health Boards serves. He expressed that the Health Board needs to further engage with local communities and to be able to afford services within these communities and several consultation meetings are to be held to gauge the opinions of people as regards to the Health Board. He further

said that it is paramount to engage and share information with the local authorities to afford the best possible services to the people the Health Board serves.

Mr Edwards further said that the Health Board is a major employer which employs nearly 20,000 employees across the region and the socio-economic effect the Board has is far reaching.

Mrs Ffion Johnson, Area Director (West) – Betsi Cadwaladr University Health Board said that continued good working relationship consists with this Authority and the Health Board.

In considering the report, the Committee discussed the following main matters:-

- Reference was made that the Health Board's improvement journey which includes 5 key outcomes as noted within the report. Questions were raised as to what challenges or risks impact on the ability of the Health Board to realise its improvement journey? Mr Dyfed Edwards responded that there are 5 key outcomes within the report, and he referred specifically to the culture aspect of the Health Board in is ability to afford the best services and health care to the patients. However, he said the culture of the Health Board is very fragile as staff feel under pressure due to long working hours and continued changes within the leadership of the Health Board; he considered that people need to be more considerate of one another and to be ready to listen to patient's needs. Mr Edwards further expressed that creating an organization that meets standards is paramount. Mrs Ffion Johnson referred to the challenges that has been faced with recruitment of medical staff and she considered that the Medical School in Bangor University will afford local young people the opportunity to study and potentially been the future medical staff within the Betsi Cadwaladr University Health Board. She noted that the Health Care Assistant within the Health Board are also given the opportunity to attend courses in Bangor and Aberystwyth Universities to become registered nurses.
- Questions were raised as to whether the '90 day cycles of improvement' as regards to the 5 key outcomes within the report, will put added pressure on the Health Board? Mr Dyfed Edwards responded that the Health Board is currently within a 'stabilisation phase' and it has been emphasized to Welsh Government that flexibility is required as improvements in certain aspects of the Health Board will take a longer period of time. He gave an example that Welsh Government has commissioned reports on specifics areas within the Health Board and as part of the special measures programme the Health Board needs to be seen to be acting within these specific areas.
- Questions were raised as to what degree does the Health Board share and learn from good practice examples in other areas to improve services in rural areas like the Isle of Anglesey? Mrs Ffion Johnson responded that examples of good practices are shared within rural areas and with areas within Ceredigion. The Hywel Dda Health Board is currently looking at urgent and emergency care model and it is hoped that good practices can be learnt from this model.
- Reference was made that as a statutory consultee the Health Board does not respond to planning applications. It was expressed that a development within local communities can have a negative effect on GP services within these communities. Mr Dyfed Edwards responded that there will be a need to establish an arrangement in place for the Health Board to responded planning

- applications that has a negative effect on health care provisions within local communities. He noted that the Health Board should also be part of discussions during the creation of the Local Development Plan. The Chief Executive said that the Health Board will be a statutory partner in terms of the process within the creation of the Local Development Plan. He noted that the development of housing developments within a rural area can have an immense effect on services within the community and especially the health care provision.
- Questions were raised as to how it is intended to further develop joint working between the Health Board and the Isle of Anglesey County Council Social Services? Mrs Ffion Johnson responded that numerous joint projects have been established with the Social Services Department on Anglesey. She referred to examples of joint working with the three Community Resources Team, Multi-Disciplinary Teams, Care Packages, and the potential use of the Garreglwyd Residential Home in Holyhead. She noted that a Community Hub pilot scheme which has been established at Penrhos Stanley Hospital, Holyhead is focusing on reducing the hospital admissions for the high-risk patients. The Director of Social Services said that there is a good working relationship across the workforce of the Social Services Department and the Health Board and discussions are undertaken to ascertain as to how to improve services to the residents of Anglesey on a regular basis.
- Reference was made to the Age Friendly sector who convene meetings in numerous villages on Anglesey. Issues of concerns were raised at these meetings to the hospital transport facility and to the long period of time people are having to wait for transport home following hospital appointments and the requirement for additional primary care facilities within their local communities. Mrs Ffion Johnson responded to the issues raised and noted that the acute specialist care is currently within the main hospitals and consideration should be given to relocating the Specialist Nurses into the community. She noted that she would raise the issues raised with Dr Dyfrig ap Dafydd, who is the Cluster Lead on Anglesey.
- Reference was made that there are recruitment challenges as regards to Orthodontics in the West. Questions were raised as to how the Health Board is addressing the recruitment challenges of Orthodontics. Mrs Ffion Johnson responded that following the retirement of the Orthodontist in Bangor there has been a challenge in filling the post. She said that discussions are taking place across North Wales as regards to Orthodontics provision. She noted that discussion have been undertaken with the Dental Academy at Bangor and the Orthodontics in the central and eastern areas of North Wales have been contacted to ascertain whether they would be willing to attend the clinic in Bangor or whether patients are willing to travel to other areas. The Committee further referred to dental practices closing on the Island with only 7 remaining. Mrs Ffion Johnson responded that there is a lack of dental practices across North Wales. The Dental Academy at Bangor affords dental teaching programmes for students. She noted that discussions have been undertaken with the NHS Dentists ton the Island to ascertain whether any adjustment can be made to the NHS contracts, but it is a matter for Welsh Government if any adjustments can be made to their contracts.
- Questions were raised as to what work streams are in place to strengthen the voice of local people and provide accountability to the citizens and communities

of the Island and North Wales? Mr Dyfed Edwards responded that the Health Board has independent members on the Board that represent different organisations and community interests. A representative from 'Llais' the former Community Health Council is represented on the Board. Mr Edwards expressed that as Chair of the Board he is eager to attract local community representatives and elected members on the Health Board. He noted that a series of meeting are to be arranged across North Wales in local communities, where people can express their opinions on the services of the health service and an opportunity for local authorities and the third sector representatives to meet the Health Board to voice their concerns. Questions were further raised as to how the Health Board engages with residents. Mr Edwards responded that as Chair of the Health Board he would consider further as to how the Health Board engages with residents and it would be advantageous to gauge how this Council engages with residents.

- Questions were raised as to whether the cost-of-living crisis has affected the Health Board. Mr Edwards responded that a combination of issues has affected people health and mental health due to the cost-of-living crisis, climate change and the post-covid, which is still ongoing. He noted that the quality of life of people affects people's health. There are examples, within local communities, of trying to get people together to socialise and having a hot meal. There are 'warm spaces' across North Wales afforded by the third sector and community groups. However, there is a risk in maintain such a provision due to resources and people to volunteer.
- Reference was made that people contact their Elected Member with concerns as regards to health issues i.e. unable to get a GP appointment, lack of dentist, waiting for hospital appointments. Questions were raised as to how an Elected Member can have contact with the Health Board to raise such concerns. Mr Dyfed Edwards responded that as Chair of the Health Board he was willing to address any concerns in the first instance. He expressed that consideration would need to be given to have a specific contact within the Health Board for Elected Members to be able express their electorates concerns.
- Reference was made within the report to medical records and key patient data. Questions were raised as to what arrangements are in hand to respond to recent comments by the Coroner in a case of medical referral records going missing? Mr Dyfed Edwards said that the response of the Health Board to similar cases has been unacceptable and as Chair of the Health Board he and the Interim Chief Executive have agreed that they need to address such matters and standards must be set and to try and restore the people's trust in the Health Board.

The Portfolio Member for Adult's Services wished to thank Mr Dyfed Edwards and Mrs Ffion Johnson for attending the meeting and noted that the partnership working with both the Health Board and the Social Services Department of the Council is paramount to support the health and care of residents of the Island.

It was RESOLVED:-

• To note the report by Betsi Cadwaladr University Health Board;

 To invite Betsi Cadwaladr University Health Board to submit a further update on progress to the Partnership and Regeneration Scrutiny Committee in 12 months.

ACTIONS:-

- To improve the system as to how Elected Members can forward concerns of their electorate to the Health Board;
- That there is a need for a contact within the Health Board to respond to the statutory consultation process of planning applications when proposals for large housing developments affect the health provision in rural communities.

The meeting concluded at 3.40 pm

COUNCILLOR DYLAN REES CHAIR