

PARTNERSHIP AND REGENERATION SCRUTINY COMMITTEE

Minutes of the hybrid meeting held on 13 November 2024

PRESENT: Councillor Dylan Rees (Chair)
Councillor Gwilym O Jones (Vice-Chair)

Councillors Non Dafydd, Jeff M Evans, John Ifan Jones,
Euryn Morris, Margaret Murley Roberts and Sonia Williams

Portfolio Member

Councillor Dyfed W Jones – Portfolio Member for Children, Young
People and Families

IN ATTENDANCE: Chief Executive,
Director of Social Services,
Head of Adults' Services,
Head of Democracy,
Scrutiny Officer (EA),
Committee Officer (MEH),
Webcasting Committee Services Officer (FT).

APOLOGIES: Councillor Ken Taylor;
Councillor Dafydd R Thomas – Portfolio Member for Highways,
Waste and Property;
Mrs Gillian Thompson – Parent Governor (Primary Schools
Sector);
Mr John Tierney – The Roman Catholic Church;
Mrs Wenda Owen – The Church in Wales.

Deputy Chief Executive;
Scrutiny Manager.

Mrs Ffion Johnson - Area Director (West) – Betsi Cadwaladr
University Health Board.

ALSO PRESENT: Portfolio Members

Councillor Neville Evans – Portfolio Member for Leisure, Tourism
and Maritime;
Councillor Alun Roberts – Portfolio Member for Adults' Services
and Community Safety;
Councillor Dafydd Roberts – Portfolio Member for Education and
the Welsh Language;
Councillor Nicola Roberts – Portfolio Member for Planning, Public
Protection and Climate Change;
Councillor Robin Williams – Deputy Leader and Portfolio Member
for Finance and Housing.
Ms Fflur Jones and Mr Alan Hughes – Wales Audit;

Mr Dyfed Edwards – Chair of the Betsi Cadwaladr University Health Board;
Mrs Carol Shillabeer, Chief Executive – Betsi Cadwaladr University Health Board.

1 APOLOGIES

As noted above.

2 DECLARATION OF INTEREST

Councillor Dyfed W Jones declared a personal interest in item 4 – Audit Wales : Urgent and Emergency Care : Flow out of Hospital and item 5 – Betsi Cadwaladr University Health Board as he is an Independent Member of the Betsi Cadwaladr University Health and following legal advice he was able to take part in the discussion.

Mr Fôn Roberts, Director of Social Services declared a personal interest in item 4 – Audit Wales : Urgent and Emergency Care : Flow out of Hospital and item 5 – Betsi Cadwaladr University Health Board as he is an Associate Member of the Betsi Cadwaladr University Health and following legal advice he was able to take part in the discussion.

3 MINUTES

The minutes of the previous meeting held on 15 October, 2024 were confirmed as correct.

4 AUDIT WALES : URGENT AND EMERGENCY CARE : FLOW OUT OF HOSPITAL - NORTH WALES REGION

The Chair welcomed Ms Fflur Jones and Mr Alan Hughes from Audit Wales to the meeting.

The report of the Wales Audit was presented for consideration by the Committee.

The Head of Adults' Services reported that Audit Wales conducted research on Flow Out of Hospital – North Wales Region and the relationship between the Health Board and Social Services which resulted in several recommendations as to how to facilitate the improvement journey for patients to enable the service to be more effective and to consider the experience of the individuals.

Ms Fflur Jones, Audit Wales reported that the report summarises as to how the North Wales Region addresses the risk resulting from delays of patients being discharged from hospital and the implications for the patient in terms of their recovery, rehabilitation and independence and addressing their needs within the care services. She further said that the partner organisations understand and shows a commitment to improving patient flow out of hospital. Improving patients flow from hospital is a key feature of plans across the partners, which align to the Welsh Government's six goals for urgent and emergency care. Partners also need to maximise the use of the Regional Integration Fund (RIF), to improve the services provided. She noted that consistent training needs to be undertaken by Health Care staff. Audit Wales has outlined 16 recommendations within the report and a positive response has been received.

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

- In terms of delayed hospital discharges, how does the North Wales Region compare with other Regions on a National level. Ms Fflur Jones responded that page 11 of the reports highlights the number of delayed discharges per 100,000 of population between April 2023 and February 2024 which compares with the average delays across Wales. Appendices attached to the report also highlights comparisons across the region.
- Reference was made that 10 out of the 16 recommendations by Audit Wales requires joint working between the Local Health Board and the Local Authority. Questions were raised as to how Audit Wales will monitor the effectiveness of this collaborative working. Ms Fflur Jones said that it will be the responsibility of the Health Board and Local Authority to monitor and document the effectiveness of the collaborative working in response to the recommendations of Audit Wales. She noted that organisations use different systems to track and monitor against the recommendations put forward by Audit Wales. Assurances is required by Audit Wales that required monitoring and progress is undertaken.
- Reference to the Welsh Governments Health Minister recently announcing a challenge to Health Boards and Local Authorities to improve hospital discharge and community care. It was noted that the Audit Wales report refers to the lack of information shared between the Health Board and the Local Authorities. Questions were raised as to whether there are improvements regarding sharing information between the Health Board and the Local Authorities. The Director of Social Services responded that an improved arrangements needs to be put in place in sharing information between both organisations. However, there is sensitivity between patients' information and the permission of the patient is also required. The Chair referred that the reports highlights that awaiting clinical assessments is the highest cause of delays in the West of the region compared to the Wales average. He questioned as to how joint assessment by the Health Board and the Local Authority can improve the discharge for hospitals. The Head of Adults' Services responded that whilst most people will be admitted to hospital and discharged will be after a few days with limited assistance required or no assistance required. However, there is a small proportion of patients with complex needs that will require additional care needs which may result in delay in discharge from hospital. He noted that it is accepted that this process needs to be improved, and Social Services staff are now visiting Ysbyty Gwynedd to facilitate the discharge process whilst ensuring that people are safe within their

own home following discharge. The Chief Executive of Betsi Cadwaladr University Health Board said that Western Region is fortunate in the willingness by the Local Authorities to work closely with the Health Board in addressing the needs of the patients.

- Questions were raised as to the monitoring processes that exists within Audit Wales to ensure the recommendations set are being met. Ms Fflur Jones responded that Audit Wales is only able to make recommendations to the statutory bodies and it is expected that these recommendations will be implemented through the Local Authority's track and reporting systems. The Regional Partnership Boards (RPBs) will also be reviewing and responding the recommendations set out by Audit Wales. Further questions were raised as to how Audit Wales will be reporting on the improvements in addressing the recommendations within the report. Mr Alan Hughes, Audit Wales said that the Council receives internal reports from the regulators and progress reports thereafter will be considered by the Governance and Audit Committee. He noted that internal process within the Authority to update Members on the progress achieved should be reported to all Elected Members. The Chief Executive said that this Committee could ask Audit Wales to report back to this Committee on the findings of improvements of the joint working between the Health Board and this Authority within 18 months.
- Questions were raised as to how the Authority intends to work in collaboration with the Health Board for the benefit of the people who are having to be admitted to hospital. The Head of Adults' Services responded that staff within the Social Services Department meet with staff from the Health Board at least three time per week when patients are ready to be discharge from the hospital. He assured that collaboration is undertaken with the Health Board especially when some patients with complex needs require additional support and people within the communities need to be prioritised who may need intervention. Further questions were raised as to the further steps which can be taken to improve the service following Audit Wales's report. The Head of Adults' Services said that Wales Audit report was published at the beginning of this year and a work programme has been created to address the issues raised in the report; a different models of work is undertaken to facilitate the discharge and needs of patients from hospital.
- Reference was made that WLGA have recently highlighted to Welsh Government as significant gap for funding within Social Care. Questions were raised as to how it is possible to ensure more funding can be available to combat the challenges faced within the Social Care Sector. The Chief Executive said that Welsh Government is fully aware of the pressures and demands of social care, but funding has limited to make a difference. He said that it is hoped that greater recognition on the pressures on social care will attract more funding at the beginning of the next financial year by Welsh Government. The Chair said that WLGA has written recently on behalf of all the Local Authorities to Welsh Government expressing the concerns of funding for social care as it is not sustainable and more financial assistance is required.
- Reference was made to para 103 within the report regarding that the Health Board has established the Urgent and Emergency Care Board. The Board oversees the planning and delivery of the six goals programme, aiming to ensure collaborative planning and ownership among system-wide stakeholder. The Chair read out from the report *'despite several requests to the Health Board, we*

were unable to observe the Board nor receive any relating documentation and as such, we were not able to review its effectiveness’. The Chair questioned whether there was any update as regards to this matter. Ms Fflur Jones responded that no response had been received by the Urgent and Emergency Care Board but through more recent work with the Health Board that there are different arrangements in place. The Chief Executive of the Health Board said that internal mechanisms have been undertaken as there is pressure for Urgent and Emergency Care.

- Reference was made to Recommendation 10 – Addressing key gaps in capacity within the report. Questions raised whether Audit Wales has examples of good working practice in other Health Boards. The Director of Social Services responded that work has been undertaken as regards to the ways of working practices and staff from the Councils’ Teulu Môn Team works from Ysbyty Gwynedd who undertake work in assessing the needs of the patients. He noted that it has become obvious that some patients do not require the assistance of a Social Worker and may be discharged to the care of their families. He considered that early interventions and discussions with the patients and families is paramount to enable early discharge from the hospital environment. Ms Fflur Jones said that a ‘good practice’ team is within Audit Wales which is able to share good practices. Further questions were raised that whilst there is a focus of improvements within data of patients been released from hospitals, questioned where raised as to whether some patients are release too early to improve the data. The Head of Adults responded that it is accepted that patients should not been released too early from hospital and having to be re-admitted. He further said that a Care Team has been established in Holyhead to offer care to people within their homes and to afford support when they have been discharged from hospital.
- Reference was made to the WCCIS system that enabled Local Authorities and Health Board to be able to access data in respect of patients care. Questions were raised as the WCCS system will be phased out, whether another system will be available. The Director of Social Services responded that it came evident that as there are different digital systems within the Health Board which did not serve its purpose of the WCCIS system. He noted that it is anticipated that a new portal system will be available but there are challenges as to whom will be financially paying for a new system.

The Chair thanked Ms Fflur Jones and Mr Alan Hughes for attending the meeting.

It was RESOLVED to accept the recommendations contained with Audit Wales’s report in relation to the National Health Service and Adult Social Care.

ACTION : As noted above.

5 BETSI CADWALADR UNIVERSITY HEALTH BOARD

The Chair welcomed Mr Dyfed Edwards, Chair of the Betsi Cadwaladr University Health Board and Mrs Carol Shillabeer, Chief Executive – Betsi Cadwaladr University Health Board to the meeting.

The Chair noted that a report had been presented by the Betsi Cadwaladr University Health Board to this Committee. In considering the report, the following were points of discussion by the Committee:-

- Questions raised as to how it is intended to further develop joint working between the Health Board and the Local Authority's Social Services Department.
- Reference was made that the voice of the patient is important when dealing with their care needs.
- Reference was made that report notes significant progress made by the Health Board in addressing the critical issues which led to special measures intervention. Questions raised as to what the key challenges and risks will impact on the ability of the Health Board to maintain its' continued improvement journey.
- 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 Anglesey and how can Elected Members forward their electorate concerns to the Health Board.
- Reference was made that following discussions at this Committee in November 2023 it was agreed that the Health Board would identify a contact point for response to statutory consultation processes associated with significant planning applications. Questions were raised as to whether the Health Board has identified a contact point to respond to the statutory consultation process on planning applications.
- Reference was made to the long delays with the Accident and Emergency Department and questions were raised as to how the Health Board will address this issue.
- Questions were raised as to what examples can the Health Board provide to demonstrate an improvement in organisational culture in the Health Board over the last 12 months.
- Reference was made to the waiting list for Additional Learning Needs assessment. Questions were raised as to how the Health Board and the Local Authority work in collaboration to reduce the waiting list.
- Questions were raised as to the effect on the health service when people do not attend GP and hospital appointment.
- Questions were raised as to the turnover of staff within the Health Board due to pressures of working in the health sector.
- Reference was made that the dental service for under 16, has closed recently at the Penrhos Stanley Hospital. Questions were raised as to the provision afforded for dental services for the under 16 on Anglesey.
- Questions were raised as to how communication with patients awaiting treatment can be improved.
- Questions were raised as to what degree does funding for end-of-life hospice care have an impact on the effective hospital discharge.

The response of the representatives Betsi Cadwaladr University Health Board and Officers to the questions raised were as follows:-

- The Chair of the Betsi Cadwaladr University Health Board expressed his appreciation for the positive collaboration between the Health Board and the Isle

of Anglesey County Council and the commitment of the Chief Officers of the Council to ensure good working relationship with the Health Board. The Chief Executive of the Health Board said that joint working with the Local Authorities is paramount to patients care and well-being. She gave an example of collaboration with the Local Authority as regards to the Primary and Community Care project in Holyhead.

- The Chair of the Health Board agreed that the voice of the patient is paramount to the improvement of the improvement journey of the Board. The Chief Executive of the Health Board said that work has recently been undertaken as regards to Mental Health and the experience people have had during their difficult situations. She said that the Board wishing to be an open, transparent and engaging Health Board.
- As regards to the key challenges and risk which impact the ability of the Health Board to maintain its' continued improvement journey, the Chief Executive of the Health Board said that there is an Annual Structural Assessment and Audit Wales prepares a report on the progress achieved together with risks and challenges. She noted that the recent progress has resulted in clarity of the issues that needs to be addressed, and 5 strategic objectives has been set out. She further referred that as the Health Board is in continued special measures, the Board must show continued progress to Welsh Government. The Chair of the Health Board outlined as to how the Board needs to show a culture of continued improvement journey which is linked to Leadership and sustainability of staff. He noted that there has been a high turnover of staff within the Leadership Team Board over the years.
- In response to questions as to how Elected Members can communicate with the Board when matter arise within their electoral wards, the Chair of the Health Board suggested that a briefing/forum session could be arranged for Elected Members to express their concerns.
- Regarding questions as to improvement of Health Care provision in rural areas, the Chair of the Board said that he considered that the Health Board should lead on the discussion as regards to how health provisions are afforded within rural area and to learn from good practices within other areas to improve the service provided.
- In response to questions as regards to a contact point in the Health Board to respond to statutory consultation on significant planning applications the Chair of the Health Board said that a framework has been established to respond to significant planning applications. The Chief Executive said that he would discuss with the Group Leaders the focal contact between the Health Board and the Local Authority when significant planning applications are submitted as 10 to 15 houses could have a significant impact on a rural community as regards to health services in the area.
- As regards questions relating to the long delays in the Accident and Emergency Department the Chair of the Health Board responded that it is accepted that there are long delays and especially during the weekends due to lack of access to other medical assistance. He expressed that the Emergency Department need to be for medical emergencies only and people should consider carefully if they need to attend A+E and. He noted that attending a pharmacy for assistance and advice is available. The Chief Executive of the Health Board said that there is a facility of same day Emergency Care provision in Ysbyty Gwynedd which has been successful. She expressed that communication with people needs to

be improved as regards to the other facilities provided for advice on medical issues are available rather than going into the A+E Department which can overwhelm the department with patients awaiting long periods.

- In response to the questions raised as to what examples can the Health Board provide to demonstrate an improvement in organisational culture in the Health Board over the last 12 months, the Chair of the Board said that through the improvement journey of the Health Board there needs to be openness with people and staff of the Board. The Chief Executive of the Health Board said that the assistance of expert in the field of improvement of services has been undertaken with the Board. She agreed that staff engagement is important in any organisation to improve the health service within the Board. Training and engagement have been undertaken with staff and it is considered that they will be able to respond whether there is improvement to the organisational culture.
- Regarding the questions raised as to how the Health Board and the Local Authority work in collaboration to reduce the waiting list for Additional Learning Needs assessment, the Chief Executive of the Health Board said that there is a nation-wide concern as to the waiting list for ALN assessments. She accepted that referrals for ALN assessment can seem a long process with numerous appointments required to have a diagnosis. She noted that there is an all-Wales Conference to be held at the end of this month to discuss how to address the ALN assessment process. The Chief Executive said that the delay in ALN assessment has an impact within the schools and staff and long-term solution needs to be addressed.
- In response to the questions regarding the effect on the health service when people do not attend GP and hospital appointment, the Chair of the Board said that some people have a tendency of attending the A+E Department rather than attending GP appointments which result in backlog in the A+E Department. He considered that there is a need to educate people on the need to attend pre-arrangement appointments and GPs should also highlight the issue of missed appointments.
- Regarding the questions as to the turnover of staff within the Health Board due to pressures of working in the health sector, the Chief Executive of the Health Board responded that there is around 8% of turnover within the Health Board each year. She noted that some staff are contracted for a fixed term, staff retire, and some staff have promotion within the health service. There has recently been a national recruitment process to recruit nursing staff. She expressed that it is important that staff feel that their role is fulfilling and that they are making a difference and that their skills are appreciated.
- In response to questions regarding the closure of the dental provision at Penrhos Stanley Hospital, the Chief Executive of the Health Board said that the Health Board has been reliant of the independent contractor models for dental provision. She noted that independent contractors are moving away from the dental provision and dental surgeries are showing interest in affording dental facilities. She further said that dental provision is under served within the North Wales region but there are 6 dental practices on Anglesey that afford NHS urgent dental services and other non-urgent provision.
- In response to questions as to how communication with patients awaiting treatment can be improved, the Chair of the Health Board said that he agreed that communication need to be improved across the Health Service. He expressed that the experience of patients attending the health system needs to

be improved. Whilst in special measures, the Health Board is trying to improve the provision with the health and well-being sector and to ensure that the best possible health care can be afforded to the people of North Wales.

- Regarding the questions relating to what degree does funding for end-of-life hospice care have an impact on effective hospital discharge, the Chief Executive of the Health Board responded that revised plans are currently being undertaken by Welsh Government as to how to fund hospices. The Health Board has increased their funding towards hospices over the year.

The Chair thanked Mr Dyfed Edwards and Mrs Carol Shillabeer, for attending the meeting.

ACTION : That arrangements be made to convene a briefing/forum session with representatives from the Health Board and Elected Members so that Members can express their electorates experiences and concerns as regard to the provision of health care.

The meeting concluded at 4.45 pm

**COUNCILLOR DYLAN REES
CHAIR**