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15 Ionawr 2021 / 15 January 2021

Annwyl Aelod / Dear Member

Cynhelir Cyfarfod Cyngor Iechyd Cymuned Gogledd Cymru yn defnyddio 'Zoom' ar ddydd Mawrth 26 Ionawr 2021 am 10.00yb.

<https://us02web.zoom.us/j/81193692039?pwd=UnBwTnVleXdSUGFhL0VTdUIESXpTdZ09>

Dalier sylw na fydd unrhyw eitemau yn cael eu hystyried o dan y pennawd 'Unrhyw Fater Arall' oni bai fod y Cadeirydd yn ystyried eu bod yn faterion brys a bod rhybudd ohonynt wedi ei roi a'i dderbyn yn swyddfa CIC erbyn dydd Gwener 22 Ionawr 2021, fan bellaf.

Cofiwch fod croeso i chi ddefnyddio'r iaith Gymraeg yn y cyfarfod - bydd cyfleusterau cyfieithu ar y pryd ar gael.

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The Meeting of North Wales Community Health Council will be held using 'Zoom' on Tuesday 26 January 2021, at 10.00am.

<https://us02web.zoom.us/j/81193692039?pwd=UnBwTnVleXdSUGFhL0VTdUIESXpTdZ09>

Please note that no items will be considered under 'Any Other Business' unless they are considered by the Chair to be urgent and unless notice of them has been received at the CHC office by no later than Friday 22 January 2021.

Please remember that you are welcome to use the Welsh language at the meeting – simultaneous translation facilities will be available.

Yn gywir iawn / Yours sincerely

Geoff Ryall Harvey
Prif Swyddog / Chief Officer



Rydym yn croesawu gohebiaeth trwy gyfrwng y Gymraeg a'r Saesneg. Os byddwch yn ysgrifennu atom yn Gymraeg byddwn yn ateb yn Gymraeg, ni fydd hyn yn arwain at oedi wrth ymateb i'ch gohebiaeth

We welcome correspondence through the medium of both Welsh and English. If you write to us in Welsh we will answer in Welsh, this will not lead to a delay in responding to your correspondence

Cyngor Iechyd Cymuned Gogledd Cymru yw enw gweithredol Cyngor Iechyd Cymuned Betsi Cadwaladr
North Wales Community Health Council is the operational name of the Betsi Cadwaladr Community Health Council



CYNGOR IECHYD CYMUNED
COMMUNITY HEALTH COUNCIL

CIC GOGLEDD CYMRU / NORTH WALES CHC

COUNCIL MEETING

VIA ZOOM LINK BELOW

TUESDAY 26 JANUARY 2021, 10.00AM

The meeting will be conducted bilingually with the assistance of simultaneous translation. You are welcome to contribute in either Welsh or English.

<https://us02web.zoom.us/j/81193692039?pwd=UnBwTnVleXdSUGFhL0VTdUIESXpTdZ09>

Please notify the Chair of Any Other Business prior to the start of the meeting.

MINUTE	ITEM	ENC	TIME SLOT
FC21.01	WELCOME		10.00am
FC21.02	APOLOGIES FOR ABSENCE		
FC21.03	DECLARATION OF INTEREST To receive any disclosure of interest by any member in respect of any item on the agenda		
FC21.04	PRESENTATION Mr Mike Smith, BCUHB Interim Director of Nursing MHL, Mental Health & Learning Disabilities and Iain Wilkie BCUHB Interim Director MHL, Mental Health & Learning Disabilities will be in attendance to give a presentation around <i>“The priorities of the Mental health and Learning disabilities division”</i>	Verbal	10:10am
FC21.05	UPDATE ON PROGRESS ON THE BILL TO ESTABLISH A NEW CITIZENS VOICE ORGANISATION 21.05(1) To receive an update in respect on progress on the Bill	Verbal	11.30am
FC21.06	CHAIR AND CHIEF OFFICER UPDATE 21.06(1) Mental Health Services 21.06(2) Vascular Services 21.06(3) Covid-19 and Vaccination programme 21.06(4) Robotic Assisted Surgery	Verbal Verbal Verbal Verbal	11.40am
FC21.07	MINUTES To receive and approve the minutes of:- 21.07(1) Full Council held on 29 September 2020 21.07(2) Matters Arising not on the Agenda by exception	Enc 01 Verbal	12.05pm
FC21.08	NWCHC EQUALITY DIVERSITY AND HUMAN RIGHTS ACTION PLAN 21.08(1) To receive an update Equality Diversity and Human Rights Action Plan April 2019 – March 2020	Verbal	12.15pm
FC21.09	WELSH LANGUAGE		12.25pm

21.09(1)	Welsh Language Standards	Verbal	
FC21.10	ANY OTHER BUSINESS	Verbal	12.30pm
FC21.11	DATE OF NEXT MEETING Tuesday 30 March 2021, 10.00am the Ordinary Meeting will follow the Annual General Meeting		



**Minutes of the of North Wales Community Health Council Meeting held Via Zoom
 Tuesday 29 September 2020, 10.00am
 Acting Chair: Mr Andy Burgen to Agenda Item FC20.14
 Chair: Mrs Jackie Allen from Agenda Item FC20.14**

PRESENT:			
CONWY LOCAL COMMITTEE	Joy Baker Frank Bradfield	Phil Capper Sian Ramessur	John Roberts
DENBIGHSHIRE LOCAL COMMITTEE	Karen Bellis Kelly Benton Rhys Davies	Eva Edwards Gordon Hughes	Cheryl Williams Emrys Wynne
FLINTSHIRE LOCAL COMMITTEE	Di Gill Linda Harper	Gladys Healey Stella Howard	David Wisinger Rita Jones
GWYNEDD LOCAL COMMITTEE	Adrian Drake-Lee Vicki Harvey	Michael Lloyd-Jones Dewi-Wyn Roberts	Paul Rowlinson
WREXHAM LOCAL COMMITTEE	Jackie Allen Celia Hayward Frank Hemmings	Gwenfair Jones Adrian Leslie	Niki Tabern-Price Jayne Thomas
YNYS MÔN LOCAL COMMITTEE	Richard Bladon Andy Burgen Sadie Francis	Glyn Haynes Aaron Osborne-Taylor	Dylan Rees
CO-OPTED MEMBERS	Brace Griffiths Garth Higginbotham	Mair Jones Morfudd Jones Christopher Phillips	Mike Theaker Mark Thornton
Staff	Eleri Ellis Rebeca Hughes Cerys Jones Carol Williams	Complaints Advocate Management Officer Management Officer Deputy Chief Officer	
IN ATTENDANCE:	Geoff Ryall-Harvey Sue Irlam John Darlington Gwynfor Owen Mark Wilkinson	Chief Officer Secretariat BCUHB Assistant Director Corporate Planning Translator BCUHB Director of Planning and Performance	
APOLOGIES:			
CONWY	Liz Liddall Hilary Randall	Jo Reeve	Roger Williams
DENBIGHSHIRE	Angela Marshall	Neil Taylor	
FLINTSHIRE	Michael Boyle	David Mackie	
GWYNEDD	John Jones	Vera Wilson	
WREXHAM	Sandra Baughan		
YNYS MÔN	Deborah Chafer	Trefor Lloyd-Hughes	Val Monaghan



STAFF	Lucy Barker Bev Davies Ross Duffield	Allison Hughes Debra Jones Debbie Postle	Jill Scupham Rachel Valentine
NOT PRESENT	Myfanwy Baines Jon Chorlton Dot Griffiths	Russell Jackson Linda Kinani	Gill Williams Menna Williams

MINUTE	ITEM	ACTION
FC20.12	<p>WELCOME</p> <p>The Acting Chair welcomed all present to the meeting. It was noted that this was the first meeting of the Full Council to be held via Zoom; members were reminded of remote meeting etiquette that microphones should be muted when not speaking.</p>	
FC20.13	<p>CONFIRMATION OF THE RESULTS OF THE ELECTION FOR THE OFFICE OF CHAIR AND VICE CHAIR 2020 - 2021</p> <p>The Chief Officer went on to announce the result for the recent postal election for the offices of Chair and Vice Chair.</p> <ul style="list-style-type: none"> • There had been one candidate for the office of Chair; Jackie Allen had stood unopposed. 28 postal ballots had been returned to endorse the appointment of Jackie Allen as Chair of the NWCHC until the Annual General Meeting to be held on 30 March 2021. • There had been two candidates for the office of Vice Chair; Andy Burgen and Celia Hayward. 28 ballot papers had been returned. Andy Burgen received 18 votes; 10 votes were received for Celia Hayward accordingly Andy Burgen is appointed Vice Chair of the North Wales CHC until the Annual General Meeting to be held on 30 March 2021. • Jackie Allen, the newly appointed Chair of the NWCHC Full Council thanked those members who had endorsed her appointment and went on to note that she would continue to represent the patients of North Wales. Thanks were also extended to Andy Burgen for stepping up as Acting Chair following the resignation of Peter Rendle. • Andy Burgen also noted his thanks to the members who had voted for him. He also extended his thanks for the support he had endured during his short term as Acting Chair. 	
	<ul style="list-style-type: none"> • Before moving on to the agenda proper the translator provided a brief explanation as to how the Welsh Language translation service would work. 	
FC20.14	<p>APOLOGIES FOR ABSENCE</p> <p>Apologies were received and are as recorded</p>	
FC20.15	<p>DECLARATION OF INTERESTS</p> <p>There were no declarations of interest in respect of any item on the agenda.</p>	
FC20.16	<p>PRESENTATION</p> <p>Mark Wilkinson, BCUHB Director of Planning and Performance and John Darlington BCUHB Assistant Director of Corporate Planning were in attendance to provide an update in respect of the actions taken to date and planning for quarters three and four. . A copy of the presentation is appended to these minutes. The following points in particular were made:</p>	



- Thanks were extended to the Full Council for the opportunity to present the BCUHB update; it was noted that it was a welcome opportunity to hear and listen to the views and feedback from the members of the NWCHC.
- The pandemic has seen unparalleled changes in health care, social care and the third sector.
- The Health Board has seen significant challenges to the way its services are delivered; these include new services such as test and trace.
- The rapidly changing environment means change is at pace with agile planning to deal with the pace of change to deal with the highly transmissible virus.
- The number of asymptomatic people is higher than initially thought and this is problematic.
- Medical knowledge and advances as regards medication are developing.
- All the temporary field hospitals included the provision of piped oxygen for the treatment of COVID-19 patients; oxygen requirements are not as previously anticipated as the virus has changed and evolved.
- There are challenges as regards testing and diagnostics with some testing positive after swabbing after a previously clear test. Whilst work to develop the vaccination continues at pace, there is no date as to when this will be available.
- Notwithstanding the challenges dealing with the pandemic has brought, there have also been a number of positive changes that the health board wishes to retain and build on.
- There have been advances in digital technology; consult and connect allows primary care practitioners to speak to clinicians remotely, whilst attend anywhere facilitates remote outpatient appointments.
- The health board has also been successful in recruiting 1000 additional staff to the organisation.
- The number of cases in the community is increasing once again; this increase could be attributed to the relaxation in social distancing rules, the re-opening of the hospitality industry and/or pupils and students returning to educational settings.
- The infection per 100,000 remains low in the west but is increasing in the centre and the east.
- Inpatient numbers remain low as the number of new confirmed cases has not converted to hospital admissions. At the current time there are 30 COVID positive patients in hospital.
- The health board is investigating if patients have been harmed as a result of non-COVID activity. Whilst the number of patients waiting for procedures has increased due to the cessation of non-urgent or non-essential services significant harm has not been evidenced.
- There is evidence that there has been harm caused by the wider societal lockdown such as mental health issues.
- There is a multi-agency Prevention and Response Plan in place across North Wales; this is made up of the health board, local authorities and other partners so as to be able to manage local outbreaks.
- There will be a focus on a robust flu vaccination programme; BCUHB will also be providing support to care homes and will be developing its



winter plans to include possible surges in demand due to the increase of COVID-19 cases.

- As part of the plans to deal with the on-going challenges of dealing with COVID-19 Test Trace and Protect (TTP) has been implemented. Whilst this led by the health board, local authorities also have a crucial role to play.
- To date TTP in North Wales has been successful in contacting 90% of contacts within 24 hours as well as contacting 80% of their contacts.
- In previous years there has been a 60% take up of the flu vaccination across the BCUHB area; it is expected that the take up will be higher this year. Members of the general public are being encouraged to have their flu vaccination as soon as they can as there has to be a 28 day gap between the having a flu vaccination and then a COVID vaccination.
- BCUHB are planning to have vaccination plans in place by mid-November for the possibility of a COVID-19 vaccine from the end of November. It is looking how the programme can be delivered by utilising primary care settings, dedicated vaccination centres and the field hospitals. Any vaccine would be provided to those at high risk health and social care staff before being rolled out to the wider population subject to it being approved safe to use by the regulatory bodies.
- Those over the age of 50 would be in the second tranche of the COVID-19 vaccination programme; this would be challenging due to the number falling in to that category i.e. in excess of 300,000.
- The care sector faced significant challenges during the first wave of the pandemic; to mitigate similar problems in the second wave BCUHB has committed to providing PPE.
- If care homes are forced to close this could delay the discharge of patients needing recuperative care. Discharge pathways may also be disrupted due to the need for patients needing to be clear for 14 days after a COVID test prior to discharge.
- Demand for unscheduled care services dropped considerably at the beginning of the pandemic. Demand for unscheduled care is now increasing but still not to pre-COVID19 levels.
- It has also been evidenced that patients who would ordinarily have presented at the ED have not been harmed by non-attendance.
- It is anticipated there will be a similar decline in attendances as and when the second peak occurs.
- Modelling shows the occurrence of seasonal flu may be less than is normal due to the impact of social distancing. The spread of the common cold may also be less due to better hand hygiene practices.
- The 'Phone First' initiative is a priority for the unscheduled care pathway. Patients are required to call ED in advance of them attending; this is being trialled currently in the Cardiff and Vale University Health Board.
- BCUHB will use the lessons learnt to role the initiative out; it was noted that patients would be treated if they presented at the ED without having phoned in advance.
- The temporary field hospitals created 980 additional beds and will form part of the BCUHB surge plans. Staffing these additional beds would be



a challenge and demand modelling is currently taking place.

- BCUHB's priorities for the next 6 months are to provide care under "essential services"; to provide safe unscheduled care; to improve mental health services; to provide safe and secure environments for patients and staff; and to use resources effectively.
- BCUHB has restarted its programme of planned care as and when it is safe to do so as so to ensure there is no harm caused; this will be done using the principles of "essential services".
- There will be a clinical approach to the planned care pathway for quarters 3 and 4 to ensure that the plans are fit for purpose; there will also be a fuse on delivery care closer to home.
- BCUHB is investigating the possibility of investing in a diagnostic and treatment centre to reduce the number of long waiters for procedures. It is also considering how to address the backlog of patients waiting for CT, MRI and ultrasound by utilising mobile units.
- BCUHB continues to build on its primary care work in respect of GMS, Dental, Ophthalmology and Pharmacy in line with the Welsh Government's plans. Patients will be triaged and treated according to clinical needs; access needs of the patient will also be borne in mind.
- Community services plans will be developed in partnership with Regional Commissioning Board, the third sector other stakeholders to ensure that the services are safe and resilient.
- Support will be given to primary care to manage demand for mental health services; additional support will also be given to A&E which may also see an increase in the demand of patients presenting with a mental health condition. The mental health needs of those working in health and care settings will also be considered under the plans for mental health services.
- Work is underway to digitise patient notes in acute settings.
- Investment in estates will also support the safe delivery of care with the creation of the North Denbighshire hospital, works to the infrastructure at Wrexham Maelor, the development of the Ablett Unit and works to the infrastructure at Ysbyty Gwynedd. Improvements are also to be made to the residential accommodation for staff.
- As the number of positive cases begins to increase again engagement with the general public remains paramount.
- Following the guidance as issued by Public Health Wales is essential so as to minimise future outbreaks.

In response to questions received the following comments were received:

- The detail around the resumption of General Dental Services and Community Dental Services will be requested and shared with the membership via the office. Wider dental services are part of the community plans that BCUHB is developing.
- More detail as regards the numbers of staff shielding and not redeployed and thus unable to work will be requested and shared with the attendant BCUHB officers so that this can be addressed. BCUHB have endeavoured to facilitate home working for staff. An agile and safe working group has been established to look at how staff are able to work safely.

MW/IJD

**BM/MW/
JD**



- The number of planned care referrals are increasing to almost pre-COVID levels. It is challenging to make sure that this planned care can be delivered in a COVID-safe environment. To ensure the environment is safe beds have been removed and cleaning regimes have been enhanced. Previously, non-recurrent monies could have been secured from WG to address patient backlogs; due to the global pandemic the availability of funding from WG is less certain. It was noted that work to reduce patient backlogs will be a multi-year endeavour rather than a multi-month endeavour.
- Bangor University has its own testing programme for those students returning or arriving on campus for the first time. It is not known if Glyndwr University will also be undertaking its own testing programme. Mark Wilkinson and John Darlington undertook to confirm testing arrangements at Glyndwr University and report back. Prevention and response plan are also in place for universities.
- Should students become ill they should seek medical advice via their GP as the first point of call. Should the condition require it students would be admitted to hospital for this care.
- Welsh Government has issued guidance around who should be tested.
- Testing centres are located in the community should testing be needed; it is acknowledged that some needing a COVID test may have to travel
- Noting the likely increase in the demand for flu vaccinations it was confirmed that the health board has planned for a higher uptake of the vaccination.
- It is not known if the flu vaccination also affords some protection against COVID-19 as the virus is evolving constantly.
- Due to the demand for the flu vaccination, members of the general public in the 50 – 65 age bracket, may have to wait until those over the age of 65 and those with underlying health conditions have had the flu vaccination. At this stage it is not known at this stage if BCUHB will bring forward the flu vaccination programme for those in the 50 – 65 age range.
- Before the 'phone first' initiative is rolled out in North Wales, BCUHB would ensure the public is fully aware how to access the service and would look to the NWCHC to help share the information and access details.
- It was confirmed that the same swab is used for both the nose and throat swab when undertaking a COVID test.
- Whilst it is only patient records in an acute setting that will be digitised at the current time, the system should allow GPs read only access to these records.
- There is an element of interoperability with the digitised patient records so these should be available at tertiary sights accessed by Welsh patients such as the Walton Centre.
- The BCUHB plans in respect of COVID-19 are available publically on the BCUHB website and are discussed at public meetings.

The Chair thanked Mark Wilkinson and John Darlington for attending. Should members have further questions these can be sent to the office for onward transmission to BCUHB for response.

MWIJD



	<p>NWCHC can do as the health board continues to work through the actions.</p> <ul style="list-style-type: none"> • The invited review analysis work has been completed and agreed; it is due to be submitted. • Abdominal aortic aneurysm (AAA) screening has been affected by the pandemic; screening has now recommenced. There have been a number of referrals for surgery but it is reported that patients are reluctant to attend as they are worried they may catch COVID-19. • Arteriovenous (AV) fistula procedures appear to have increased with the number on the waiting list decreasing. • The number of available vascular beds remains problematic; there are no dedicated vascular beds at Ysbyty Gwynedd. There are challenges to staff the 18 vascular beds at Ysbyty Glan Clwyd due to the number of vacancies. • The pathway for diabetic foot problems will remain at a community level. • Groin abscesses were previously treated at a local vascular level in North Wales; these are now to be undertaken via general surgery. • NWCHC will be undertaking a patient experience survey with vascular service patients so as to provide a level of independence in enabling patients to provide feedback. • As always NWCHC remains committed to receiving complaints from patients who have used the vascular service in North Wales, which will be used to further validate the patient experience and shared with the BCUHB review team. 	
FC20.19 20.19(1)	<p>MINUTES</p> <p>To receive and approve the minutes of the Full Council held 28 January 2020</p> <ul style="list-style-type: none"> • Resolved that the minutes of the meeting held on 28 January 2020 be approved as an accurate record of the meeting. 	
20.19(2)	<p>Matters Arising not on the Agenda</p> <p>There were no matters arising.</p>	
FC20.20	<p>NWCHC EQUALITY DIVERSITY AND HUMAN RIGHTS ACTION PLAN</p> <p>Linda Harper provided the following update making the following observations:</p> <ul style="list-style-type: none"> • The latest EDHR briefing in respect of the human rights action plan had been shared with the wider membership; the next update would be provided in November 2020. • There had been discussions around the process of obtaining a 'gender recognition certificate' had been undertaken; the process will be made easier. • National EDHR training is being held remotely for NWCHC members; Linda Harper questioned some of the information that was being asked for on the course enrolment form, noting that she would be reporting back following the training. 	
FC20.21 20.21(1)	<p>WELSH LANGUAGE</p> <p>Welsh Language Standards</p> <ul style="list-style-type: none"> • NWCHC remains fully compliant with the 110 Welsh Language Standards. The 6 other CHCs and the Board Office have received a formal derogation in respect of some of the standards from the Welsh 	



	<p>Language Commissioner, as and when the derogations lapse so will their compliance.</p> <ul style="list-style-type: none"> • NWCHC has prepared and submitted its annual report on its compliance with the Welsh Language Standards for the period 1 April 2019 – 31 March 2020. The report also notes developments in the organisation during the year to strengthen its Welsh language services. The report will be published on the website to meet the requirement as laid down by the Welsh Language Commissioner. • A telephone answer system had been introduced to ensure that callers wishing to speak Welsh were not treated any less favourably than English callers. • There had been a small number of complaints at the offset of this system; since the provision of mobile phones to advocates, NWCHC has received no further complaints in respect of lack of access due to the introduction of the telephone answering service. • With many NWCHC working from home it was noted that the answer machine messages can be checked remotely; messages are relayed to the correct member of staff with callers receiving a call within a relatively short period of time. 	
FC20.22 20.22(1)	ANY OTHER BUSINESS There was no other business transacted.	
FC20.23	DATE OF NEXT MEETING The date and arrangements for the next Full Council meeting will be advised.	
	All were thanked for attending the meeting The meeting closed at 12.01pm.	

CHAIR

DATE