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1 Gorffennaf 2019 / 1 July 2019

Annwyl Aelod / Dear Member

Cynhelir Cyfarfod Cyngor Iechyd Cymuned Gogledd Cymru yng **Nghlwb Criced Bae Colwyn, 77 Rhodfa Penrhyn, Llandrillo Yn Rhos, Bae Colwyn LL28 4LR, ar ddydd Mawrth 9 Gorffennaf 2019 am 10.00yb**, ac yna cynhelir Cyfarfod Arferol y Cyngor Iechyd Cymuned.

Darperir lluniaeth o 9.30yb ymlaen. Atgoffir yr Aelodau y dylent gofrestru eu presenoldeb wrth iddynt gyrraedd gyda'r ysgrifenyddiaeth.

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

Darperir cinio ysgafn am tua 1.00yp. Gofynnir am eich presenoldeb.

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The Meeting of North Wales Community Health Council will be held at **Colwyn Bay Cricket Club, 77 Penrhyn Ave, Rhos On Sea, Colwyn Bay, LL28 4LR, on Tuesday 9 April 2019 at 10.00am**, followed by an Ordinary Meeting of the Community Health Council.

Refreshments will be provided from 9.30am. Members are reminded to register their attendance on arrival with the secretariat.

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

A light lunch will be provided at approximately 1.00pm. Your attendance is requested.

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

## COUNCIL MEETING



**COLWYN BAY CRICKET CLUB**  
**77 PENRHYN AVENUE, RHOS-ON-SEA,**  
**COLWYN BAY, CONWY LL28 4LR.**

**TUESDAY 9 JULY 2019, 10.00AM**

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

Please notify the Chair of Any Other Business prior to the start of the meeting.  
 A light lunch will be provided at around 1pm

<u>MINUTE</u>	<u>ITEM</u>	<u>ENC</u>	<u>TIME SLOT</u>
<b>FC19.20</b>	<b>CHAIR'S WELCOME</b>		10.00am
<b>FC19.21</b>	<b>APOLOGIES FOR ABSENCE</b>		
<b>FC19.22</b>	<b>DECLARATION OF INTEREST</b> To receive any disclosure of interest by any member in respect of any item on the agenda		
<b>FC19.23</b>	<b>PRESENTATION</b> Mrs Lesley Singleton and Mr Alberto Salmoiraghi will be in attendance to provide an update in respect of the Psychiatric Intensive Care Unit service in North Wales	<b>Verbal</b>	10:10am
<b>FC19.24</b>	<b>UPDATE ON PROGRESS ON THE BILL TO ESTABLISH A NEW CITIZENS VOICE ORGANISATION</b> 19.24(1) To receive an update in respect on progress on the Bill	<b>Enc 01</b>	11.10am
<b>FC19.25</b>	<b>CHAIR AND CHIEF OFFICER UPDATE</b> 19.25(1) National Projects 19.25(2) NWCHC Matters 19.25(3) Membership Update	<b>Verbal</b> <b>Verbal</b> <b>Verbal</b>	12.20pm
<b>FC19.26</b>	<b>MINUTES</b> To receive and approve the minutes of:- 19.26(1) AGM Meeting held on 9 April 2019 19.26(2) Full Council Minutes held on 9 April 2019 19.26(3) Matters Arising not on the Agenda by exception	<b>Enc 02</b> <b>Enc 03</b> <b>Verbal</b>	12.30pm
<b>FC19.27</b>	<b>NWCHC EQUALITY DIVERSITY AND HUMAN RIGHTS ACTION PLAN</b> 19.27(1) To receive an update Equality Diversity and Human Rights Action Plan April 2019 – March 2020 19.27(2) NWCHC Welsh Language Annual Report for the period 1 April 2018-31 March 2019	<b>Verbal</b> <b>Verbal</b>	12.40pm
<b>FC19.28</b>	<b>ANY OTHER BUSINESS</b>	<b>Verbal</b>	12.50pm
<b>FC19.29</b>	<b>DATE OF NEXT MEETING</b> Tuesday 15 October 2019, 10.00am, Colwyn Bay Cricket Club, Rhos on Sea, LL28 4LR.		



**Minutes of the Annual General Meeting of North Wales Community Health Council  
meeting held at Colwyn Bay Cricket Club, LL28 4LR  
Tuesday 9 April 2019 10.00am  
Chair: Mr Mark Thornton**

<b>PRESENT:</b>			
<b>CONWY LOCAL COMMITTEE</b>	Mrs M Baines Miss J Baker Cllr P Capper	Dr G Higginbotham Mr M Holmes Ms L Lidall	Mrs S Ramessur Mrs J Reeve Mr R Williams
<b>DENBIGHSHIRE LOCAL COMMITTEE</b>	Mrs K Benton Mrs E Edwards Miss M Jones	Mr M Theaker Ms G Williams	Mrs S Wright Cllr E Wynne
<b>FLINTSHIRE LOCAL COMMITTEE</b>	Mr M Boyle Mrs D Gill	Mrs S Howard Mr R Jackson	Mrs R Jones Cllr D Mackie
<b>GWYNEDD LOCAL COMMITTEE</b>	Dr A Drake-Lee Mr M Lloyd-Jones	Mrs M Jones Cllr D Roberts	Cllr P Rowlinson Mr M Thornton
<b>WREXHAM LOCAL COMMITTEE</b>	Mrs J Allen Ms E Burnham	Cllr F Hemmings Mrs N Tabern-Price	Mrs J Thomas
<b>YNYS MÔN LOCAL COMMITTEE</b>	Mr A Burgen Dr S Francis	Cllr R Griffiths Miss V Monaghan	Cllr D Rees Mr P Rendle
<b>CO-OPTED MEMBERS</b>	Mrs N Cossey Mrs J Hilton	Mrs L Johnson Mrs P Rannard	Mr N Taylor Mrs V Wilson
<b>Staff</b>	Mrs E Bowen Mrs E Ellis Mrs A Hughes Ms A Hughes Mrs R Hughes Mrs C Jones Mrs D Jones Ms B Perkins Mrs J Scupham Mrs C Williams	Complaints Advocate Administrative Officer Complaints Advocate Advocacy Office Manager Management Officer (part) Management Officer Complaints Advocate Complaints Advocate Administrative Officer Deputy Chief Officer	
<b>IN ATTENDANCE:</b>	Mr G Ryall-Harvey Ms S Irlam Mr H Huws	Chief Officer Secretariat Translator	
<b>APOLOGIES:</b>			
<b>CONWY</b>	Cllr F Bradfield Mr P Edwards	Cllr E Leighton-Hughes	Mrs H Randall
<b>DENBIGHSHIRE</b>	Mrs A Marshall	Mr G Hughes	
<b>FLINTSHIRE</b>	Mrs J Harley	Ms L Harper`	



<b>GWYNEDD</b>	Mrs M Buttigieg	Mrs G Jones	Mrs M Williams
<b>WREXHAM</b>	Mrs C Griffiths	Mrs C Hayward	Cllr G Jones
<b>YNYS MÔN</b>	Mr B Griffiths Cllr G Haynes	Mr A Osborne-Taylor	Ms A West
<b>STAFF</b>	Mrs L Barker Mrs B Davies	Mr R Duffield	Mrs D Postle
<b>NOT PRESENT</b>	Mr J Chorlton Mr A Dixon	Mrs D Griffiths Cllr S Jones	Cllr P Prendergast Cllr D Wisinger

<b>MINUTE</b>	<b>ITEM</b>	<b>ACTION</b>
<b>AM19.0 1</b>	<p><b>CHAIR'S WELCOME AND ANNOUNCEMENTS</b></p> <p>The Chair welcomed all present to the meeting. The Chair reminded those present that simultaneous translation was available and that contributions through the medium of Welsh, were welcome. The following reflections were made in respect of 2018-2019.</p> <ul style="list-style-type: none"> <li>• It had been a challenging year with the publication of the White Paper and the uncertainty surrounding the new body. Whilst this was a distraction for the NWCHC as a whole, members and staff have carried on with the work programme to ensure that the people of North Wales receive the health care services that they deserve.</li> <li>• In June 2019, BCUHB will have been subject to Special Measures for 4 years. The NWCHC recognises that there has been progress in some areas, but it remains concerned about the lack of progress in mental health especially.</li> <li>• Members continue to undertake robust activity in visiting and engagement with these two areas working hand in hand to evaluate and scrutinise health care services.</li> <li>• The Vice Chair deputised for the Chair a number of times during the year; the support afforded has been much valued.</li> <li>• The Officers and the wider staff cohort of the NWCHC undertake their work with dedication and professionalism; the continued support to the membership is very much appreciated as without this support members would be unable to carry out their duties.</li> </ul>	
<b>AM19.0 2</b>	<p><b>APOLOGIES FOR ABSENCE</b></p> <p>Apologies were received and are as recorded</p>	
<b>AM19.0 3</b>	<p><b>DECLARATION OF INTERESTS</b></p> <p>There were no declarations of interest in respect of any item on the agenda.</p>	
<b>AM19.0 4</b>	<p><b>MINUTES</b></p> <p><b>Circulated: Annual General Minutes of 17 April 2018</b></p> <p><b>Resolved: That the minutes of 17 April 2018 be approved and signed as an accurate record of the meeting.</b></p>	
<b>AM19.0 5</b>	<p><b>MATTERS ARISING</b></p> <p>There were no matters arising.</p>	
<b>AM19.0 6</b>	<p><b>ELECTION OF CHAIR 2019-2020</b></p> <p>The Chair stepped down and the election process was conducted by the Chief</p>	



	<p>Officer.</p> <p>A single nomination for the Office of Chair had been received from Mr Mark Thornton. In accordance with the Voting Procedure for the Elections of Officers, members endorsed the appointment of Mr Mark Thornton as Chair of the North Wales Community Health Council 2019-2020, by a show of hands. The result was unanimous and with no abstentions.</p>	
	<p><b>Resolved: To appoint Mr Mark Thornton as the Chair of the NWCHC for the period 2019-2020.</b></p>	
<b>AM19.07</b>	<p><b>ELECTION OF VICE CHAIR 2019-2020</b></p> <p>A single nomination had been received for the Office of Vice Chair from Dr Garth Higginbotham. In accordance with the Voting Procedure for the Elections of Officers, members endorsed the appointment of Dr Garth Higginbotham as Vice Chair of the North Wales Community Health Council 2019-2020, by a show of hands. The result was unanimous and with no abstentions</p>	
	<p><b>Resolved: To appoint Dr Garth Higginbotham as the Vice Chair of the NWCHC for the period 2019-2020.</b></p>	
<b>AM19.08</b> 18.18(1)	<p><b>MANAGEMENT REPORT</b></p> <p><b>Chief Officer to report 2018-2019 performance</b></p> <p>The Chief Officer, Mr Geoff Ryall-Harvey presented the CHC management report for the period 1 April 2018 – 31 March 2019. The following significant events and items considered by the Executive Committee during the period were noted:</p> <p><b>April/May 2018</b></p> <ul style="list-style-type: none"> <li>• NWCHC arranged for the Tawel Fan families to receive a presentation from AvMA (Action Against Medical Accidents); NWCHC advocacy staff also provided information in respect of the complaints process under PTR (Putting Things Right).</li> <li>• The HASCAS report was published on 3 May; the launch event was attended by the Chair and Vice-Chair, the Advocacy Team, the Chief Officer and Deputy Chief Officer.</li> <li>• Questions were asked in Plenary at the Senedd regarding the availability of mp-MRI scans for North Wales patients.</li> <li>• NWCHC began actively supporting patients who had paid privately for the scan, to recover monies via the NHS “Putting Things Right” procedures.</li> <li>• NWCHC responded to GP Performers List Consultation supporting option 3; i.e. amending the Regulations to allow a GP to be automatically listed on a Welsh Health Board's List if they are already on a primary care organisation (PCO) performer list elsewhere in the UK -with no need to submit an application or provide relevant information and documentation.</li> <li>• NWCHC wrote to the Chief Executive Officer at WAST requesting a full report in respect of the Paramedic 2 Trial.</li> <li>• The National Projects for the financial year 2018-2019 were:             <ul style="list-style-type: none"> <li>• Communications;</li> <li>• GP Recruitment and Fragility of Service;</li> <li>• Delayed Transfers of Care.</li> </ul> </li> </ul>	
	<p><b>June/July 2018</b></p> <ul style="list-style-type: none"> <li>• NWCHC reported progress against the National Standards</li> <li>• The NWCHC Operational Plan was approved</li> </ul>	



- Tawel Fan Families began to receive individual reports. CHC Advocacy Team and the Chief Officer provided support in this process. Despite claims made at the launch event, several individual reports admitted a qualifying liability and harm
- Members attended the three day national induction training
- The campaign to provide mp-MRI in North Wales continued with further correspondence with the Cabinet Secretary regarding BCUHB non-compliance with 2014 NICE guidance on post-biopsy mp-MRI
- The Ockenden Report on Tawel Fan was published on 12 July 2018 at the BCUHB Board Meeting.
- The Vice Chair prepared a summary of the HASCAS report which was shared with the wider membership
- On 17 July, the First Minister announced plans to replace CHCs with a new Patients' Voice body
- On 18 July NWCHC held a special meeting to discuss the announcement of the First Minister on the future of the CHCs - unfortunately very little information had been provided by Welsh Government. The Chair and Chief Executives of the Board of CHC's were invited to attend a meeting with the Staff and Members in North Wales as a matter of urgency.

#### **August/September 2018**

- On 4 September – the CHC Chair and Chief Officer met the new BCUHB Chair, Mr Mark Polin.
- On 27 September NWCHC held a special meeting with the Chair of the Board of CHCs in Wales and the Joint Chief Executives to address concerns and questions raised by staff and members following the First Minister's legislative announcement made on 17 July 2018.
- NW CHC considered the following Board of CHC matters;
- Planning Cycle
- Peer Review
- Framework for Engagement and Consultation and Service Change
- EDHR Policy
- Member Code of Conduct: Dealing with Alleged Breaches

#### **October/November 2018**

- NWCHC responded to the Welsh Language Commissioner's Compliance Notice
- A comparative report was issued setting out staffing levels and bed occupancy in community hospitals for 2016, 2017 and 2018
- The Chair and Chief Officer met with the newly appointed WAST Director of Operations on 2nd October.
- NWCHC sought the Cabinet Secretary's position on NICE Guidance in respect of mp-MRI Scans
- The VMG considered how monitoring anti-ligature work could be incorporated into CHC visiting activity.
- The Engagement and Consultation Group developed a questionnaire relating to patients with all forms of sensory loss
- NWCHC received an update in respect of the BCUHB Orthopaedic Plan from Mrs Jill Newman, BCUHB Performance Director
- The Chief Officer reported that National Project on communication in



	<p>the NHS (led by NWCHC) had closed with 1350 individual responses received.</p> <ul style="list-style-type: none"> <li>• The NWCHC continued to support Tawel Fan families by attending individual HASCAS report meetings; which were expected to conclude by the end of November 2018.</li> <li>• The CHC and representatives of the Tawel Fan families were appointed to the Stakeholder Group; this group has oversight of the 15 work streams put in place to ensure that the recommendations of both the HASCAS and Ockenden reports are implemented.</li> <li>• The Cabinet Secretary met with members of the Tawel Fan families on 31 October, the DCO was present.</li> <li>• Mp-MRI Scans - The Chief Officer reported that a test case had been submitted to the Public Services Ombudsman for Wales.</li> <li>• On 14 November a Special Meeting was held with Welsh Government representatives on the proposed Bill for the new Patients' Voice Body</li> </ul>	
	<p><b>December 2018/January 2019</b></p> <ul style="list-style-type: none"> <li>• The BCUHB Chair Mr Mark Polin, having been in post for four months attended Full Council on 22 January to provide an overview of his experiences and observations to date. Mr Polin answered questions from CHC members</li> <li>• Mr Rod Taylor, BCUHB Director of Estates and Facilities, was also in attendance on 22 January to provide an overview and update in respect of estates and facilities.</li> <li>• The national project on GP Out of Hours Service commenced. The project was led by CAVOG CHC and ran from 22 January 2019 - 31 March 2019.</li> <li>• The Chief Officer and the men involved in the mp-MRI campaign attended the Welsh Government Petitions Committee to speak in support of the petition calling for equality in prostate cancer care. The petition had more than 6500 signatures and the Petitions Committee approved a Senedd debate to take place in February 2019.</li> <li>• NWCHC highlighted age discrimination in the Bowel Screening Service. Over 75's in Wales are excluded from the Bowel Cancer programme (even if they offer to pay for their own test). This is not the case in England and Scotland. The issue was referred to the Board of CHCs to be raised at national level.</li> <li>• The Chair, Vice Chair and Chief Officer attended the Peer Review training workshop in Cardiff on 25 January.</li> <li>• NWCHC was appointed lead on the Living with Cancer national project.</li> <li>• CHC Chief Officer &amp; Chair met with the BCUHB Chair and discussed proposed changes to Vascular Services. The CHC advised (verbally and in writing) that engaging with patients regarding the changes was essential.</li> </ul>	
	<p><b>February/March 2019</b></p> <ul style="list-style-type: none"> <li>• The Chair, Vice Chair and Chief Officer gave evidence to the evidence to the Public Accounts Committee Inquiry on 4 February into governance arrangements at the BCUHB</li> <li>• Services Planning Committee received a detailed presentation on the Vascular Services changes.</li> </ul>	



	<ul style="list-style-type: none"> <li>Services Planning Committee heard that BCUHB had made a bid to Welsh Government on the redevelopment of Wrexham Maelor</li> </ul> <p><b>On-going Issues – 2019-2020</b></p> <ul style="list-style-type: none"> <li>NWCHC will continue to promote the reduction in use of long term urinary catheters for men. NWCHC will also urge BCUHB to make its bid to Welsh Government for a Surgical Robot and will continue to support this initiative to support staff retention and recruitment.</li> </ul>	
	<p><b>Social Media</b></p> <p><b>CHC Twitter page</b></p> <ul style="list-style-type: none"> <li>The number of accounts following and interacting with the Twitter page is 1488.</li> <li>There were 629 bilingual Tweets posted between 1st April 2018 and 31 March 2019, which are regularly re-tweeted which therefore reaches a far wider audience than just our followers.</li> <li>The number of times a NWCHC tweet has been delivered to a Twitter account's timeline (referred to as 'impressions') is 185,550 impressions.</li> </ul> <p><b>Facebook</b></p> <ul style="list-style-type: none"> <li>NWCHC has 326 Facebook followers currently who regularly like and share CHC posts and comments.</li> <li>The number of Facebook users who have seen our posts as a result of them being shared by our own followers has reached 25,512 people.</li> </ul>	
	<p>In response to question received, the following comments and observations were made:</p> <p><b>The New Body</b></p> <ul style="list-style-type: none"> <li>At the current time the make-up of the new body is not known. It may be quite similar to the current CHC model, but it could also be quite different.</li> <li>Currently CHCs are statutory bodies, the new model may see the new body being a Welsh Government sponsored body which would grant the new body more control as it would be independent from the Welsh Government; independence of course would bring commensurate risks.</li> <li>It is understood that whilst a number of Bills have been withdrawn due to Brexit, the Bill in respect of the new body is still moving forward currently.</li> <li>It is hoped that it will retain the same powers but with enhanced responsibilities in the field of social services. There is some discussion around the visiting function; should this not be granted, CHCs may revisit support for the Bill.</li> <li>There are also discussions regarding the status of the current membership as to whether they would 'members' or 'volunteers'.</li> <li>The Bill would need to be laid in the current legislative programme and by no later than 18 July 2019; if not it may fall.</li> <li>The Bill would also be subject to the scrutiny and support of the Health select Committee, which has no government majority.</li> <li>If the Bill is enacted much of the detail would still be unknown as this would be developed by the successor body. It is likely that a period of 18-24 months would be taken to establish the new body.</li> </ul> <p><b>Bowel Screening services</b></p> <ul style="list-style-type: none"> <li>It is not known at the current time if the age limit for bowel screening</li> </ul>	





	<p>services is to be reduced to 50 years old. Currently Men and women aged 60 to 74 are invited to take part in screening every two years.</p> <ul style="list-style-type: none"> <li>It was noted the Board of CHCs had undertaken to raise concerns in respect of bowel screening at a national level. The Chief Officer undertook to seek clarity as regards the possible age reduction.</li> </ul> <p><b>BCUHB Special Measures</b></p> <ul style="list-style-type: none"> <li>The appearance of NWCHC Executive members and evidence given at the recent Public Accounts Committee (PAC) was commended.</li> <li>Acknowledging the concern at the lack of progress made by BCUHB in areas subject to Special Measures, the Chief Officer noted the appointment of the new Chair of BCUHB and his different approach to the previous Chair. Mr Polin has said things have to change and will change. The pace of change will pick up and the focus of the Board is different. The CHC will continue to hold the BCUHB to account to influence change.</li> <li>The evidence presented to the PAC, demonstrated that progress in respect of Special Measures was glacially slow. It was noted that as a very last resort Welsh Government could impose its own Board to bring about the necessary progress to remove the health board from Special Measures. This is the case in England, where progress is much more rapid.</li> <li>Notwithstanding the support the BCUHB has received from Welsh Government throughout the duration of Special Measures, progress has been inadequate. It is therefore open to question whether WG support has been sufficient.</li> </ul> <p><b>Bank and Agency Staff</b></p> <ul style="list-style-type: none"> <li>It had been reported that BCUHB spends £1 million per month on bank and agency staff at the Wrexham Maelor; although the total spend on bank and agency staff is only a small percentage of the total BCUHB budget.</li> <li>Wards need to be staffed and if that cannot be done with the current staff cohort bank and/or agency staff need to be used to ensure safe staffing levels.</li> <li>There are not enough doctors or nurses being trained or returning to North Wales once qualified and despite the NHS being devolved in Wales there are no real initiatives being used to attract staff.</li> <li>A medical school in Bangor would re-establish links with the medical school in Bangor and should see more doctors remaining in Wales.</li> </ul>	<p>CO</p>
<p><b>AM19.09</b> 19.09(1)</p>	<p><b>NWCHC ADVOCACY REPORT</b> Complaints Advocacy Report 2018-2019 Mrs Audrey Hughes, Complaints Advocate, based at the Bangor Office was in attendance. Mrs Hughes gave a brief overview of her role as an advocate.</p> <ul style="list-style-type: none"> <li>The Complaints Advocacy Service was established 16 years ago by the then Health Minister Jane Hutt AM.</li> <li>Based in the Caernarfon office of the then Gogledd Gwynedd CHC, and also supporting clients in the then Meirionnydd CHC the variety and complexity of complaints varied greatly.</li> <li>Since its inception the advocacy service has undergone a number of changes to ensure consistency and standardisation across the service. The number of staff working in the advocacy service has increased</li> </ul>	



	<p>commensurate with the increase in complaints. Advocates are now supported by advocacy office managers and advocacy support officers.</p> <ul style="list-style-type: none"> <li>• People from all walks of life have been supported to make a complaint about the health care they have received including nurses, doctors, consultants and even a member of the BCUHB Concerns team.</li> <li>• The number of complaints being received from patients with a mental health condition is increasing; these are often challenging.</li> <li>• During the 2018-2019 financial year the advocacy service was contacted by 438 members of the public, although not all of these went on to become full blown complaints.</li> <li>• Despite the changes over the years the standards and principles of the advocacy service remain the same:             <ul style="list-style-type: none"> <li>• The advocacy service is a free, independent, and confidential service.</li> <li>• It is led by the views and wishes of the complainants and is non-discriminatory and non-judgemental.</li> <li>• The service is provided to clients in the language of their choice and is accessible to all.</li> <li>• Clients are supported in a way that makes them feel that someone is listening to them and that there is a clear way forward for them.</li> <li>• The advocacy service has and does make a difference to the care provided; it has brought about changes to the BCUHB cannula bundle. In addition praise has been received for the support to one of the Tawel Fan families along with commendations for the work undertaken by both the advocacy service and the Chief Officer to secure refunds for North Wales patients who had paid for private mp-MRI scans.</li> <li>• Advocates regularly meet staff from the BCUHB Concerns Team so as to address issues such as delays, with the complaints process.</li> <li>• Noting that she would be retiring after 16 years as an Advocate, Mrs Hughes went on to wish her colleagues and the members well for the future.</li> </ul> </li> </ul> <p>The Chief Officer presented Mrs Hughes with a gesture of thanks for her service to the CHC and the patients of North Wales. He also noted his personal thanks for the dedication shown by Mrs Hughes to her clients. The NWCHC is proud of the service Mrs Hughes has given her clients and her experience will be missed.</p>	
<p><b>AM 19.10</b> 19.10(1)</p>	<p><b>NWCHC EQUALITY, DIVERSITY AND HUMAN RIGHTS REPORT</b> Equality, Diversity and Human Rights Action Plan 2018-2019 Progress against the NWCHC Equality and Diversity Action Plan was noted. No further comments were received.</p>	
<p><b>AM19.11</b></p>	<p><b>ANY OTHER BUSINESS</b> There was no other business.</p>	
<p><b>AM19.12</b></p>	<p><b>DATE OF NEXT MEETING</b> Annual General Meeting Date and Venue to be advised</p>	
	<p><b>The meeting closed at 11.09am</b></p>	

**CHAIR** .....

**DATE** .....



**Minutes of the of North Wales Community Health Council Meeting held at Colwyn Bay  
Cricket Club, LL28 4LR  
Tuesday 9 April 2019 following AGM  
Chair: Mr Mark Thornton**

<b>PRESENT:</b>			
<b>CONWY LOCAL COMMITTEE</b>	Mrs M Baines Miss J Baker Cllr P Capper	Dr G Higginbotham Ms L Lidall	Mrs S Ramessur Mrs J Reeve Mr R Williams
<b>DENBIGHSHIRE LOCAL COMMITTEE</b>	Mrs K Benton Mrs E Edwards Miss M Jones	Mr M Theaker Ms G Williams	Mrs S Wright Cllr E Wynne
<b>FLINTSHIRE LOCAL COMMITTEE</b>	Mr M Boyle Mrs D Gill	Mrs S Howard Mr R Jackson	Mrs R Jones Cllr D Mackie
<b>GWYNEDD LOCAL COMMITTEE</b>	Dr A Drake-Lee Mr M Lloyd-Jones	Mrs M Jones Cllr D Roberts	Cllr P Rowlinson Mr M Thornton
<b>WREXHAM LOCAL COMMITTEE</b>	Mrs J Allen Ms E Burnham	Cllr F Hemmings Mrs N Tabern-Price	Mrs J Thomas
<b>YNYS MÔN LOCAL COMMITTEE</b>	Mr A Burgen Dr S Francis	Cllr R Griffiths Miss V Monaghan	Cllr D Rees Mr P Rendle
<b>CO-OPTED MEMBERS</b>	Mrs N Cossey Mrs J Hilton	Mrs L Johnson Mrs P Rannard	Mr N Taylor Mrs V Wilson
<b>Staff</b>	Mrs E Bowen Mrs E Ellis Mrs A Hughes Ms A Hughes Mrs R Hughes Mrs C Jones Mrs D Jones Ms B Perkins Mrs J Scupham Mrs C Williams	Complaints Advocate Administrative Officer Complaints Advocate Advocacy Office Manager Management Officer (part) Management Officer Complaints Advocate Complaints Advocate Administrative Officer Deputy Chief Officer	
<b>IN ATTENDANCE:</b>	Mr G Ryall-Harvey Ms S Irlam Mr H Huws	Chief Officer Secretariat Translator	
<b>APOLOGIES:</b>			
<b>CONWY</b>	Cllr F Bradfield Mr P Edwards	Cllr E Leighton-Hughes	Mrs H Randall
<b>DENBIGHSHIRE</b>	Mrs A Marshall	Mr G Hughes	
<b>FLINTSHIRE</b>	Mrs J Harley	Ms L Harper	



<b>GWYNEDD</b>	Mrs M Buttigieg	Mrs G Jones	Mrs M Williams
<b>WREXHAM</b>	Mrs C Griffiths	Mrs C Hayward	Cllr G Jones
<b>YNYS MÔN</b>	Mr B Griffiths Cllr G Haynes	Mr A Osborne-Taylor	Ms A West
<b>STAFF</b>	Mrs L Barker Mrs B Davies	Mr R Duffield	Mrs D Postle
<b>NOT PRESENT</b>	Mr J Chorlton Mr A Dixon	Mrs D Griffiths Cllr S Jones	Cllr P Prendergast Cllr D Wisinger

<b>MINUTE</b>	<b>ITEM</b>	<b>ACTION</b>
<b>FC19.11</b>	<p><b>CHAIR'S WELCOME AND ANNOUNCEMENTS</b> The Chair welcomed all present to the meeting. The following changes in membership were reported since the meeting held on 22 January 2019:</p> <p><b>Conwy Local Committee</b> Mr Mark Holmes, appointed as a third sector representative Mrs Nerys Cossey end of term of office but appointed as a co-opted member Mrs Lorraine Johnson reappointed as a co-opted member for a further period of 12 months Mrs Sian Ramessur reappointed as a third sector member</p> <p><b>Denbighshire Local Committee</b> Miss Christine Evans end of term of office Ms Gill Williams transferred from Wrexham local committee Mr Gordon Hughes reappointed as a co-opted member for a further period of 12 months</p> <p><b>Flintshire Local Committee</b> Mrs Lynn Pike co-opted member, no further term of office sought</p> <p><b>Gwynedd Local Committee</b> No changes</p> <p><b>Wrexham Local Committee</b> Ms Gill Williams transferred to Denbighshire local committee</p> <p><b>Ynys Môn Local Committee</b> No changes</p>	
<b>FC19.12</b>	<p><b>APOLOGIES FOR ABSENCE</b> Apologies were received and are as recorded</p>	
<b>FC19.13</b>	<p><b>DECLARATION OF INTERESTS</b> There were no declarations of interest in respect of any item on the agenda.</p>	
<b>FC19.14</b>	<p><b>PRESENTATION</b> Mr Mark Wilkinson, BCUHB Executive Director of Planning and Performance was in attendance to speak about the BCUHB Three Year Outlook and the Annual Plan for the period 2019-2020. A copy of the presentation is appended to these minutes. The following points in particular were made:</p>	



- The Health Board has annual budget of £1.45billion, with a staff cohort of approximately 16,500. The annual budget represents 10% of the Welsh Government resources. North Wales has a population of approximately 700,000; life expectancy for women is 82.5 years and 78 years for men although there is variance of 7 years dependent on the area of residence.
- The strategic context of the Three Year Outlook and the Annual Plan were set out in a Healthier Wales.
- The plan sets out the outcomes the health board is hoping to achieve and notes the importance of partnership work with the 6 Local Authorities and third sector organisations in delivering the plan and achieving the stated outcomes.
- There is range of work being undertaken in partnership with the LAs, via Regional Partnership Boards using one off transformation funding including but not limited to early interventions.
- Delivering healthcare for the patients of North Wales is not without its challenges. The recently appointed Chair has been clear that there will be changes with a focus on accountability.
- Budget challenges need to be addressed, notably the spend on agency and locum staff. It was noted that 90% of the prescriptions issued are for proprietary brands; opportunities for cost savings in respect of repeat prescriptions need to be addressed.
- The Chair of BCUHB has been explicit in saying that it is the responsibility of the whole Board to bring about change. The Chair has also been clear in saying the current performance is not satisfactory as the health board is not delivering but is overspending. He has also challenged the Board to connect with staff and to listen effectively what staff are saying about the services they deliver.
- There are areas of significant deprivation in North Wales and it is challenging to ensure that the appropriate services are delivered where they are needed.
- There are pockets of excellence and areas where healthcare is delivered well across the health board.
- It was noted that there is a real sense that change will happen and that will bring improvements in the long term.
- The challenges facing the health board are not unique to BCUHB but are also being faced by other healthcare providers.
- Within the plan there are three main care priorities each of which has several strands within. The three main priorities are:
  1. Improving health and improving health inequalities;
  2. Providing care closer to home; and
  3. Providing excellence in health care in both planned and unscheduled care.
- All of the actions as laid out in the plan, can and will be measured against SMART targets
- In delivering planned care the health board will seek to reduce waiting lists by using other initiatives such as the CMATS team for orthopaedic patients. Changes will be made to ensure that staff are working efficiently. It will also look at timely discharges so as to free up beds;



	<p>delays around prescriptions will also be addressed.</p> <ul style="list-style-type: none"> <li>• It was acknowledged that unscheduled care is problematic, with patients experiencing unacceptably long waits. The health board will be using SAFER<sup>1</sup> to ensure earlier and more timely discharge of patients</li> <li>• Acknowledging long waiting lists, concern was noted at the length of time patients are facing for a consultant referral, which has been marked as urgent by the GP, but re-categorised by the Consultant as routine upon reviewing the patient's notes.</li> <li>• BCUHB faces significant workforce challenges which are also replicated across the UK. The cost of bank and agency staff continues to increase. The shortage of staff is more concerning than a lack of funding; more needs to be done to encourage people to train and work in North Wales.</li> <li>• BCUHB also faces significant challenges with the general estate as it is not sustainable in its current state. One quarter of the estate pre-dates the NHS, with the oldest site dating to 1813. The Board has prioritised several capital schemes including Wrexham Maelor, North Denbighshire, Ruthin, the Ablett Unit and Abergele.</li> <li>• Finally there will be significant investment in digital technology which is currently outdated and varies from site to site.</li> </ul> <p>The Vice Chair noted his thanks to Mr Wilkinson for attending and providing an overview of the Annual Plan and the Three Year Outlook. The SMART measurable targets were welcomed and the Vice Chair went on to note it would be useful to share progress in respect of the plan and the targets. Finally the Vice Chair noted that should members have questions which had not been addressed that these should be sent via the CHC office.</p>	
<p><b>FC19.15</b> 19.15(1)</p>	<p><b>BCUHB VASCULAR SERVICES</b></p> <p>To receive an update in respect of Vascular Services at BCUHB Dr Adrian Drake-Lee the CHC appointed representative to the Vascular Task and Finish Group went on to make the following observations:</p> <ul style="list-style-type: none"> <li>• The outcome of the consultation in 2012 and the conclusion thereof in 2013 noted that specialist centre for complex arterial surgery would be sited at YGC. Non-complex surgery would be undertaken across the three DGHs.</li> <li>• To maintain the service consultants undertook a 1 in 4 rota with on call alternating between Wrexham Maelor and Ysbyty Gwynedd.</li> <li>• One high dependency unit bed and a hybrid theatre has been funded. 18 vascular beds were to be provided. This has been reduced to 12 and is considered to be inadequate.</li> <li>• Whilst the specialist centre was under development, anaesthetists were relocated. This has now created a lack of middle grade doctors capable of delivering anaesthesia at YGC.</li> <li>• A vascular scientist has been recruited, but has nowhere to work from; the number of nurses recruited to run the ward is inadequate. It was noted that a podiatrist has been appointed. As the CHC representative</li> </ul>	

<sup>1</sup> SAFER: Senior Review; All patients will have expected discharge date and clinical criteria for discharge; Flow patients will be moved from assessment ward to an inpatient ward in a timely manner; Early discharge patients to be discharged before midday Review of patients with extended stays.



on the Task and Finish Group Dr Drake-Lee has noted his concerns around the staffing for the unit.

- Lower limb salvage should be offered across the 3 DGHs and not just at Ysbyty Gwynedd.
- Patients from the West requiring complex vascular surgery will be faced with excess travelling time to attend YGC.
- It is understood that routine vascular surgery is to be carried out at the three DGHs with the specialist care unit at YGC being an addition to the current provision.
- Whilst this is a positive step, some patients will clearly be disadvantaged due to increased travel times. This has also caused public concern in respect of the perceived gravitation of services to the East.
- The Health Board needs to allay the public concerns that this is not the case.
- The original outcome of the consultation was to centralise services, but a solution was found to ensure the service remained at the three sites, yet it now appears that the service is being centralised.

The following comments were also noted:

- There appears to have been a lack of planning and co-ordination with WAST in respect of demands that will be placed on the ambulance service to convey patients to the specialised centre at YGC.
- The hybrid theatre did not include laminar air flow, meaning that it can only be used for vascular procedures rather than other surgical procedures.

Mr Ryall-Harvey made the following observations

- It would be useful if the Health Board could set out which services are being offered from which sites, so that the public are aware.
- The CHC is very aware of the issues such as rurality and siting such a service so that it meets the needs of the population and also that it meets the professional guidance and recommendations.
- The CHC had previously advised the Chair of the BCUHB and the Chief Executive Officer that further consultation or engagement with the public might be prudent as there are legitimate concerns that a local service is being removed.
- The work being undertaken by the BCUHB communications team to engage with the public was acknowledged; this should continue so as to inform the public.
- It was confirmed that at the current time, vascular services are not robust across North Wales; the evidence to hand suggests that the service is not being provided in the best way; if changes are not made the service will only worsen.
- Professional advice, received at the time of Health Care in North Wales is Changing 2012, was consistent - recommending the centralisation of specialist services; the advice remains the same. It was noted however, that most vascular units are located in an urban setting, therefore the challenge of conveying patients to the specialised unit at YGC within the 1 hour timescale to ensure that best outcome for the patient will be challenging.
- Concern was noted that patients may be moved from one hospital to



	<p>another in the middle of the night should it become apparent that the care needed was more complex than could be undertaken at either Wrexham Maelor and or Ysbyty Gwynedd.</p> <ul style="list-style-type: none"> <li>It was noted that the CHC would remain vigilant on this matter and would continue to hold regular dialogue with the BCUHB via the Services Planning Committee on this subject.</li> </ul>	
<b>FC19.16</b> 19.16(1)	<p><b>CHAIR AND CHIEF OFFICER UPDATE</b></p> <p>Due to the time constraints the Chief Officer would ensure that an email briefing was prepared and circulated to the wider membership.</p>	<b>CO</b>
<b>FC19.17</b> 19.17(1)	<p><b>MINUTES</b></p> <p><b>Circulated: Minutes of the Full Council Meeting held on 22 January 2019</b></p> <p><b>Resolved: That the minutes of the Full Council meeting held on 22 January 2019 be approve and signed as an accurate records of the meeting.</b></p>	
19.17(2)	<p><b>MATTERS ARISING</b></p> <p>There were no matters arising.</p>	
<b>FC19.18</b> 19.18(1)	<p><b>NWCHC EQUALITY DIVERSITY AND HUMAN RIGHTS ACTION PLAN</b></p> <p>To receive the Equality, Diversity and Human Rights Plan April 2019-March 2020 (Draft)</p> <p>This item had been removed from the agenda and would be considered by the Executive Committee before being presented to the wider membership at the Full Council meeting to be held in July 2019.</p>	
<b>FC19.19</b> 19.19(1)	<p><b>ANY OTHER BUSINESS</b></p> <p><b>COUNTESS OF CHESTER</b></p> <p>Mr Russell Jackson of the Flintshire local committee declared an interest at this stage, noting that he is a publically appointed Stakeholder Governor at the Countess of Chester.</p> <ul style="list-style-type: none"> <li>The NWCHC had been made aware that the Countess of Chester would no longer be accepting new referrals for elective procedures for Welsh Patients.</li> <li>It was noted that discussions around the tariff paid to English healthcare providers had been held at a national level, but the Countess of Chester had acted unilaterally in making the decision to no longer provide services to new Welsh patients for elective procedures. Local tariff agreements are not in place as the tariff paid is agreed nationally and with all healthcare providers.</li> <li>Mr Jackson noted that there had long been issues with the tariff and as such the Countess of Chester can longer sustain the service which has a discrepancy of £2.5 million. Mr Jackson went on to note that he had personally written to the Minister, the Head of the NHS in Wales and to other key personnel noting his concern in respect of the tariff paid.</li> <li>It was confirmed that BCUHB has adhered to previous tariff arrangements and has fulfilled all current contractual duties.</li> <li>Notwithstanding the fact that the Countess of Chester was built to provide healthcare for the patients of Chester, Deeside and Flintshire it was confirmed that there are a number of other English Trusts that provide healthcare to Welsh patients, notably for patients from Powys</li> </ul>	





	<p>which has no DGH, all of whom continue to treat Welsh patients at the current tariff.</p> <ul style="list-style-type: none"> <li>• The Chief Officer went on to say that the action undertaken by the Countess of Chester could not be condoned as it was putting patients from North Wales at a serious disadvantage. He went on to note the divisive social media comments that had been observed in respect of the actions taken by the Countess of Chester.</li> <li>• The knock on effect for patients from North Wales is of concern. BCUHB may have to seek further providers or it may have to identify capacity from within. The three DGHs in North Wales will face further demand and waiting lists may also increase as patients are treated on clinical need.</li> <li>• Whilst the NWCHC regrets the decision taken and the impact on Welsh patients, it is understood that negotiations between the Minister's office and the various English health providers are on-going. The NWCHC will be actively monitoring the situation to ensure the impact on Welsh patients is minimal.</li> </ul>	
<b>FC19.20</b>	<p><b>DATE OF NEXT MEETING</b> Tuesday 9 July 2019, 10.00am Colwyn Bay Cricket Club, Rhos on Sea, LL28 4LR</p>	
	<p><b>The meeting closed at 12.57pm</b></p>	

**CHAIR** .....

**DATE** .....