

Agenda – Y Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon

Lleoliad: I gael rhagor o wybodaeth cysylltwch a:
Ystafell Bwyllgora 1 – Y Senedd Sarah Beasley
Dyddiad: Dydd Iau, 11 Gorffennaf 2019 Clerc y Pwyllgor
Amser: 10.00 0300 200 6565
SeneddIechyd@cynulliad.cymru

Yn ei gyfarfod ar 3 Gorffennaf, derbyniodd y Pwyllgor gynnig o dan Reol Sefydlog 17.42(vi) i wahardd y cyhoedd o eitem 1 o'r cyfarfod a gynhelir heddiw

- 1 Gwasanaethau nyrsio cymunedol a nyrsio ardal: Trafod yr adroddiad drafft**
(10.00–11.00)
Egwyl (11.00–11.10)
- 2 Cyflwyniad, ymddiheuriadau, dirprwyon a datgan buddiannau**
(11.10)
- 3 Gwaith craffu cyffredinol: Sesiwn dystiolaeth gyda Bwrdd Iechyd Prifysgol Aneurin Bevan**
(11.10–12.40) (Tudalennau 1 – 21)

Ann Lloyd, Cadeirydd, Bwrdd Iechyd Prifysgol Aneurin Bevan

Judith Paget, Prif Weithredwr, Bwrdd Iechyd Prifysgol Aneurin Bevan

Glyn Jones, Cyfarwyddwr Cyllid a Pherfformiad, Bwrdd Iechyd Prifysgol Aneurin Bevan

Martine Price, Cyfarwyddwr Interim Nyrsio, Bwrdd Iechyd Prifysgol Aneurin Bevan



Briff Ymchwil

Papur 1 – Bwrdd Iechyd Prifysgol Aneurin Bevan

Egwyl (12.40–13.15)

**4 Bil Iechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru):
Sesiwn dystiolaeth gyda'r Gweinidog Iechyd a Gwasanaethau
Cymdeithasol**

(13.15–14.45)

(Tudalennau 22 – 42)

Vaughan Gething AC, Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol

Sioned Rees, Uwch Swyddog Cyfrifol, Bil Iechyd a Gofal Cymdeithasol

(Ansawdd ac Ymgysylltu) (Cymru), Llywodraeth Cymru

Janet Davies, Dirprwy Gyfarwyddwr, Y Grŵp Iechyd a Gwasanaethau

Cymdeithasol, Llywodraeth Cymru

Sapna Lewis, Cyfreithwraig, Llywodraeth Cymru

[Bil Iechyd a Gofal Cymdeithasol \(Ansawdd ac Ymgysylltu\) \(Cymru\), fel y'i
cyflwynwyd](#)

[Memorandwm Esboniadol](#)

Briff Ymchwil

5 Papurau i'w nodi

(14.45)

**5.1 Llythyr gan y Gweinidog Iechyd a Gwasanaethau Cymdeithasol ynghylch
adolygiad barnwrol yr Alban ar erthyliad meddygol cynnar yn y cartref**

(Tudalen 43)

5.2 Llythyr gan Gadeirydd Bwrdd Iechyd Prifysgol Caerdydd a'r Fro

(Tudalen 44)

- 6 Cynnig o dan Reol Sefydlog 17.42(vi) i benderfynu gwahardd y cyhoedd o weddill y cyfarfod hwn**
(14.45)
- 7 Gwaith craffu cyffredinol ar Fwrdd Iechyd Prifysgol Aneurin Bevan: Trafod y dystiolaeth**
(14.45–14.55)
- 8 Bil Iechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru): Trafod y dystiolaeth**
(14.55–15.05)

Mae cyfyngiadau ar y ddogfen hon



Aneurin Bevan University Health Board

Submission to the National Assembly for Wales Health, Social Care and Sport Committee General Scrutiny Sessions with NHS Organisations in Wales

Date of Session: Thursday, 11 July 2019

1. Introduction:

Aneurin Bevan University Health Board welcomes the opportunity to contribute to the Health, Social Care and Sport Committee's General Scrutiny Inquiry in relation to NHS organisations in Wales.

This paper provides an introduction to the organisation, provides an overview of the Health Board's responsibilities, current areas of focus, recent achievements and plans for the future, including any issues and challenges. It also provides further information regarding our Integrated Medium Term Plan and how this supports 'A Healthier Wales', an overview of Health Board finances, our performance, our workforce developments and challenges, our approaches to integrated working and information regarding our current preparations for EU withdrawal (Brexit).

2. About the Organisation:

Aneurin Bevan University Health Board was established in October 2009 and achieved University status in 2013. We serve an estimated population of over 639,000 people covering the areas of Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen. This equates to approximately 21% of the total Welsh population.

The Health Board has a budget of £1.2 billion from which we deliver health care services to people in the above areas and also provide some secondary care services to the population of South Powys. The organisation has approximately 14,000 staff.

The Health Board is committed to commissioning and providing safe, high quality services and delivering local and national targets within our available resources. This commitment, our priorities and plans are described in our Integrated Medium Term Plan, which has been approved by Welsh Government.

Throughout 2018/19, the organisation has maintained its focus on effective leadership underpinned by public sector values, openness, candour with patients and our staff, and sought effective engagement in the planning and delivery of services with our partners and the local population.

The Health Board is fully committed to realising the benefits of working in partnership on behalf of the population we serve and is actively working with partners on the Well Being of Future Generations Act, Social Services and Well Being Act and the Welsh Government's plan for health and social care – 'A Healthier Wales' and our local approaches are supported by robust governance and assurance processes.

3. Strategic Overview and the Clinical Futures Programme

The Health Board has a vision that everyone is able to live longer and healthier lives with the majority of their care being provided either at home or in their local community, where it is safe, effective and efficient to do so. This will be achieved through delivering an integrated system of health, care and wellbeing, with the continued development of Neighbourhood Care Networks (GP and Community Clusters) at its heart.

This is evidenced through our continued focus on:

- Effective Public Health
- Enhanced Primary and Community Care
- Accessible and sustainable Mental Health and Learning Disability services
- Improving performance in delivering safe and high quality services
- The drive to deliver services closer to home
- Development of new relationships focusing on outcomes and value
- Adopting a "place based" approach to improve co-ordination and integration of care across organisational boundaries

The Health Board has a strong overarching organisational strategy called Clinical Futures, which is consistent with the national plan – 'A Healthier Wales' and responds to the significant challenges facing the health system at both local and national levels.

During the last year the Health Board has continued to progress our Clinical Futures Programme - "Caring for You and Your Future". Our plans are to ensure that more services are provided in the community and closer to where people need to use them, improving patient experience and service sustainability.

Construction and development of The Grange University Hospital, a new £350 million, 471 bed specialist and critical care centre is well advanced, currently delivering on time and on budget in readiness to open in 2021 at Llanfrechfa near Cwmbran. This facility, a centre of excellence for specialist and critical care, enables the Health Board to transform hospital services to support our new system of care.

The redesign of our clinical models has been the focus of significant effort in the last year and seeks to provide assurance that the Health Board is transforming its services and seeking to optimise the opportunities across the whole system aligned to 'A Healthier Wales'.

4. Planning and Integration

The Health Board has also played an active role in regional NHS planning and also in local strategic partnerships such as the five Public Service Boards (PSBs) in our area, the Regional Partnership Board for the Social Services and Well Being Act and other public service partnerships, which are designed to take forward our commitment to integrated public services for the population of Gwent.

NHS Regional Planning:

The Health Board has continued to develop our regional partnerships building on the South Wales Programme through the South Central and East Regional Planning and Delivery Forum (with Cwm Taf Morgannwg UHB and Cardiff and Vale UHB). The Health Board is leading regional planning for ophthalmology services and plays an active role in other work streams, including vascular services, radiology and endoscopy services. This has included the implementation of an Out of Hours Regional Interventional Radiology Service, and with Velindre NHS Trust in the development of a Radiotherapy Satellite Centre at Nevill Hall Hospital, Abergavenny, as part of the transforming cancer services plan.

Regional Partnership Board (Social Services and Well-being Act):

The Health Board is making an active contribution to the work of the Regional Partnership Board along with representatives of our five Local Authorities, the third sector and independent sector.

The Regional Partnership Board sets a strategic regional vision which is translated into operational delivery through Strategic Partnership Boards, Integrated Partnership Boards (8) and Neighbourhood Care networks (12).

The Regional Partnership Board meets on a bi-monthly basis and is supported by a Regional Leadership Group. The work of the Regional Partnership Board is now embedded into the internal governance and assurance structures of the Health Board.

Creating a seamless system of care across Gwent, predicated on improved well-being, building sustainable services and providing greater integration across health and social care continues at pace and is a key priority for regional working. The transformation fund award of £13.4 million, alongside the Integrated Care Fund (ICF) allocation has enabled the development of a clear plan to develop new models of integrated care at scale and pace.

This includes the delivery of five Integrated Well-being Networks, the creation of a Gwent Compassionate Communities Model, the reform of services for children with an emotional and mental health need, and the delivery of the Home First discharge model.

The Regional Partnership Board provides the integrated leadership function to drive forward change at pace across the key priorities for population health, primary care and social care. All activity towards this shared aim, is undertaken through strategic partnership working, so that additional short term resources are creating the foundations of a modern, sustainable and integrated system, predicated on a 'place based approach'. Specific areas of progress include; improving early intervention and prevention services; delivering more care closer to home; preventing unnecessary admissions to hospital and facilitating earlier hospital discharge, where appropriate.

Public Service Boards (PSBs):

The five Public Service Boards in the Health Board area are established on the local authority footprints, and are charged with improving well-being across a number of domains. The Health Board plays an important leadership role in supporting the development of and delivery of the PSB Well-being Plans.

Executive Directors and Independent Members represent the Health Board on each PSB, and act as champions for agreed PSB priorities reporting progress back to the Health Board's Public Partnerships and Well-being Committee and the Board. This is also reflected in the Health Board's approved Well-being Objectives and the organisation's well advanced embedding programme for the Well-being of Futures Generations Act to ensure that the intentions of the Act are fundamental principles about the ways in which we plan and conduct our business.

Over recent months increasing focus has been given to enhanced joint working across the Public Service Boards, who are charged with improving population well-being, and the Gwent Regional Partnership Board for Health and Social Care, that is charged with improving well-being for those with a care and support need. There is shared recognition that both have critical roles to play in improving well-being, and the continuing challenge is to develop a seamless framework of activity which is mutually supportive in achieving improved well-being for our population.

5. Integrated Medium Term Plan (IMTP)

The Health Board approved its Integrated Medium Term Plan in January 2019 and the Minister for Health and Social Services approved our IMTP on 27 March 2019.

This represents the 5th successive year that the Health Board's Integrated Medium Term Plan has been approved, and the Health Board welcomes the confidence shown by Welsh Government in this organisation. In approving the Plan, Welsh Government recognised the growing maturity of integrated planning within the Health Board, and highlighted a number of areas of good practice including the strong focus on public health, progress in establishing Neighbourhood Care Networks, commitment to Learning Disability and embedding quality improvements and value.

The Health Board recognises the significant challenges in delivering its plans over the next three years covered by its Integrated Medium Term Plan. These include delivering improvements in excess to unscheduled care services and having no patients waiting over 36 weeks for elective treatment whilst implementing the next phase of our ambitious Clinical Futures Programme, including the opening of The Grange University Hospital and the transition to a robust hospital network, as a key part of the wider health and social care system in Gwent.

The priorities and expectations are clear, based on actively listening to our citizens and those who use our services as well as ensuring national priorities are fully reflected in our plans.

Our focus on Quality and Safety, and a value based approach has been embedded in the planning and delivery across the Health Board.

The Health Board continues to improve and innovate across the range of healthcare services it provides and in undertaking its public health responsibilities.

6. Performance

The Health Board has regular meetings to review its performance with Welsh Government. In addition to having an approved Integrated Medium Term Plan the Health Board undertakes 'routine monitoring' with Welsh Government which means it is not in any form of escalation.

There are a wide range of performance indicators against which the Health Board's services and delivery of its plans are measured. In terms of the key measures:

RTT:

At the end of March 2019, the Health Board had 112 patients waiting over 36 weeks for elective treatment whilst our aim is to ensure no-one waits this long, this is a significant improvement compared to March 2018, when 986 patients were waiting longer than 36 weeks.

Diagnostic Services:

No patients waited longer than 8 weeks for access to diagnostic services at the end of March 2019.

Therapy Services:

No patients waited longer than 14 weeks for access to therapy services at the end of March 2019.

Unscheduled Care:

Ambulance response time for Category Red calls exceeded the 65% target, achieving 73.8% in March 2019.

The Health Board recognises it has further work to do in improving on its A&E 4 and 12 hour targets and ambulance handover times. There has been a significant rise in Emergency Department attendances, particularly patients presenting with acute, complex problems, but the Health Board has plans in place to improve access to these services.

Mental Health Services:

The Health Board has sustained its performance during 2018/19 in terms of meeting access times for mental health assessment and interventions including access to children and adolescent mental health services.

Cancer:

The Health Board delivered 98.2% against the target of 98% for the 31-day cancer standard in March 2019. It also delivered 87.3% against the 95% target for the 62-day cancer standard in March 2019. The Health Board is experiencing a significant increase in cancer referrals and its plans aim to improve access to these services.

Prevention:

Uptake of flu vaccinations has increased during 2018/19 with uptake amongst healthcare workers exceeding the 60% target.

Quality Improvement:

Delivering improvements in quality and safety ranging from reducing the rate of inpatient falls, hospital acquired pressure ulcers, cases of C-difficile to maintaining Birthrate Plus staffing ratios in maternity care, and improving the care of the patients admitted with a fractured neck of femur.

7. Finance

The Health Board has a strong track record of good financial management and has achieved financial balance consistently since the establishment of the Health Board. In 2018/2019 the Health Board again achieved its statutory financial targets, delivering small surpluses against its revenue budget (c £1.2bn) and capital budget (c £140m). It also met its financial targets regarding public sector payment policy (PSPP), timely payment of suppliers and holding minimal cash balances.

The Health Board's Integrated Medium Term Plan for 2019/20 to 2021/22 not only assumes that we continue to meet our statutory financial duties, but that we will strengthen our underlying financial position, as the organisation moves through a period of significant service change. Improved financial flexibility will be important as we continue to deliver our key priorities, along with the opening of the new Grange University Hospital in spring 2021, implementing other components of the Clinical Futures Programme and managing the transitional arrangements.

8. Workforce, Organisational Values and Culture

The Health Board is clear that our staff are our most important and valued asset and it is only through their continued ambition and seeking excellence in everything they do will the Health Board continue to achieve and deliver.

The Health Board's values are:

- People First
- Personal responsibility
- Passion for improvement
- Pride in what we do

In order to support these ambitions and ways of working the Health Board has in place a comprehensive cultural change programme that is underpinned by our Values and Behaviours Framework and a new evidence based Employee Experience Framework.

The Health Board's emphasis on excellence in everything we do is also supported by Aneurin Bevan Continuous Improvement (ABCI), the Health Board's in-house centre for improvement and innovation. ABCi continues to focus on, amongst other things, building capability in improvement, leadership and modelling skills across the Health Board to enable staff to deliver meaningful change. By the end of 2018/19, ABCi delivered in excess of 100 trained Improvement Coaches and Measurement Leads from its programmes principally through the ABUHB Improvement Collaborative. The courses continue to evaluate well, with participants typically self-reporting >30-40% increase in knowledge/skills.

The Health Board also has an internationally recognised Value Based Healthcare Programme. The guiding principles of the Value Based Health Care programme at Aneurin Bevan University Health Board are consistent with the 'Quadruple Aims' and design principles and is a key enabler to delivering higher value for health and social care. The programme underpins the methodology to enable the design and delivery of new models of care, to ensure innovative and transformative ways of organising and delivering care around the patient and their carers. Re-designed models will be data and evidence driven, with a clear focus on patient outcomes.

All of this work has clear emphasis on positive staff engagement, innovation, development and well-being. It has a particular focus on the transformational change needed to implement our Clinical Futures Programme. The development of a network of over 500 Clinical Futures Champions is well established and its impact has been evaluated positively in relation to staff engagement.

We recognise that staff experience shapes patient experience and the important role this plays in how we all work together to deliver safe and high quality care and support.

As a result, we developed our Employee Experience Framework that draws together the two essential cornerstones of employee well-being and engagement. We have revised our development offers for managers and supervisors and these have a greater focus on 'people management' and the skills required for Clinical Futures transformation.

Our last NHS Wales Staff Survey results demonstrated an improvement in our engagement index scores, which were again all higher than the overall NHS Wales score. The overall engagement index score for the Board is 3.87 (up from 3.70 in 2016) and is above the overall engagement index score for NHS Wales (3.82).

The Health Board has also retained the Gold Corporate Health Standard Award following a rigorous two day assessment. The Health Board also holds the Platinum Corporate Health Award which focusses on the role the organisation takes in promoting health and well-being with its strategic partners and the wider community.

Workforce Performance Overview:

Our current PADR compliance is 77.05% and we continue to support our PADR Champions to increase the number of PADRs and improve their quality.

The Health Board's performance in relation to statutory and mandatory training compliance is 70.45% and we are continuing to encourage and support staff to complete their training.

Reduction in sickness absence in March 2019 to 5.05%, a reduction of 0.56% from February 2019. The cumulative rate is 5.25%.

Our current turnover rate is 8.34%. We are also using the Employee Stability Index and the Workforce Survival Curve to measure turnover and get a better understanding of what is influencing retention.

Job planning compliance continues to increase following the implementation of an escalation process in April 2018. The compliance rate has improved over the last 12 months from 55% in April 2018 to 80% in March 2019.

Nurse Staffing Act:

The Health Board has kept under close scrutiny the requirements of the Act and has received regular reports and annual reviews with regard to its implementation and compliance with the Act. The staffing levels and funding required to assure compliance with the Act are included in the Health Board's Integrated Medium Term Plan. The Health Board is clear that the continuing risk to compliance relates to registered nurse vacancies and the challenges of recruitment.

Primary and Community Care Workforce:

Significant progress to test new workforce models to deliver sustainable and value driven primary care is being made through directly managed practices. Early indications are that patients welcome these models and report better access to services and enhanced experience of care.

For patients to experience seamless care, it is essential that there is greater integration of services across health and social care. This is a Health Board priority and a key recommendation of "A Healthier Wales". Expanding our community assets is a key principle that underpins how we plan and deliver more sustainable services 'Closer to Home', with a place based approach used to co-locate services. The Regional Partnership Board is the primary driver to achieve integrated services and has a key role to play in maximising well-being, enabling more people to live independently for longer.

A key priority is the implementation of the Integrated Well-being Hub model alongside the new workforce model for primary care. This was endorsed as a priority in the Gwent Regional Partnership Board's Area Plan, and supported by new resources from the national Transformation Fund. It is proposed that services be reconstructed to bring prevention, health improvement and early intervention together through placed based community models, with the objective of reducing demand on acute services, and improving service sustainability in the longer term.

9. EU Withdrawal (Brexit Preparations)

The Health Board has been fully participating in the preparations being undertaken at a national level and has been contributing to the all-Wales preparedness work being led by Welsh Government.

Locally, the Health Board has established an EU Transition Group to lead and coordinate all business continuity, emergency preparedness and risk management arrangements in relation to any potential implications of Brexit that could impact upon staffing, services or supplies.

We have identified the most significant risks to the Health Board and our associated partner services. However, much of this operates on an NHS Wales level, and we are continuing to work closely with our colleagues in Welsh Government and across the health and social care sector in Wales.

We are closely monitoring the situation and have a robust business continuity plan in place that reflects actions taking place at an all-Wales level, supplemented with local actions. As part of this, all clinical and service areas have been required to consider and make plans to mitigate the risks that could impact on service delivery in the event of a no-deal Brexit.

We are continually reviewing our own business continuity plans and engaging with local and regional partners across the health and social care sector to review all identified potential risks and arrangements.

10. Conclusion:

In conclusion the Health Board has a strong overarching strategy in Clinical Futures which is consistent with national strategies. During 2018/19 the Health Board has continued to progress the Clinical Futures Plan 'Caring for You and Your Future' and the Health Board is seeking to optimise the opportunities for transformation across the system as a result of The Grange University Hospital.

Throughout 2018/19, the Health Board has maintained its focus on effective leadership underpinned by public sector values, openness and candour with patients and staff.

The Health Board is committed to commissioning and providing high quality services and the best possible delivery of local and national targets within available resources. The Health Board's approved Integrated Medium Term Plan for 2019/20 to 2021/22 continues to focus on delivering improvement, managing pressures and enhancing services across the spectrum of care within the context of the Clinical Futures Strategy.

**Bwrdd Iechyd Prifysgol Aneurin Bevan/
Aneurin Bevan University Health Board
21 June 2019**

Eitem 4

Yn rhinwedd paragraff(au) vi o Reol Sefydlog 17.42

Mae cyfyngiadau ar y ddogfen hon

Vaughan Gething AC/AM
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: MA - P/VG/2216/19

Dai Lloyd AC
Cadeirydd
Y Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon
Cynulliad Cenedlaethol Cymru
Bae Caerdydd
Caerdydd
CF99 1NA

1 Gorffennaf 2019

Annwyl Dai,

Bydd Aelodau'r pwyllgor yn cofio i'r Society for Protection of Unborn Children (SUPC) gychwyn Adolygiad Barnwrol y llynedd yn gwrthwynebu polisi Llywodraeth yr Alban ar erthyliad meddygol cynnar yn y cartref. Roedd hyn o ddiddordeb i'r Pwyllgor gan ein bod ni wedi defnyddio'r un pwerau i gyflwyno defnydd misoprostol yn y cartref i fenywod yng Nghymru. Pe bai Llywodraeth yr Alban wedi colli'r achos, byddai hyn wedi arwain at oblygiadau uniongyrchol ar gyfer y polisi penodol hwnnw. Yn awr, gallaf roi'r wybodaeth ddiweddaraf ichi am y mater hwn.

Gwrthodwyd yr adolygiad barnwrol gan Lady Wise ar y ddwy sail. Apeliodd SPUC yn erbyn y penderfyniad yn yr Alban a chlywyd yr achos gan y Llys Apêl ar 2 a 3 Ebrill. Cyhoeddwyd y penderfyniad ddydd Mercher 22 Mai.

Yn gryno, gwrthododd y llys gynnig apêl SPUC gan gadw at benderfyniad yr Arglwydd Ordinari, felly mae'r polisi o ganiatáu erthyliad meddygol cynnar yn y cartref yn gyfreithlon. Mae'n bosibl y gellir herio polisi Llywodraeth Cymru, ond mae canlyniad yr achos yn yr Alban wedi lleihau'n sylweddol y risg y bydd hynny yn digwydd. Ond, mae'n dal i fod yn bosibl y bydd SPUC yn mynd â'r achos i'r Goruchaf Lys yn y DU, felly bydd fy swyddogion yn cadw mewn cysylltiad agos â Llywodraeth yr Alban a'r Adran Iechyd a Gofal Cymdeithasol rhag ofn y bydd unrhyw ddatblygiadau pellach.

Yn gywir,

Vaughan Gething AC/AM
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Eitem 5.2



GIG
CYMRU
NHS
WALES

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Cardiff and Vale
University Health Board

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Ein cyf/Our ref: MB-JTF-06-7545
Welsh Health Telephone Network:
Direct Line/Llinell uniongychol: 02921 836011

Maria Battle
Chair

4th July 2019

Private & Confidential

Dr Dai Lloyd AM
Chair of Health, Social Care and Sport Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Dear Dr Lloyd AM,

Health, Social Care and Sport Committee

I understand at the scrutiny session yesterday into Cardiff and Vale University Health Board, the Committee had expected me to attend. Please accept my sincere apologies.

The invitation letter, dated 11 February 2019, was sent to the Chief Executive. My Board Secretary checked with other Health Board Secretaries and was informed it was their executives who had attended for scrutiny of operational matters except in the case of Cwm Taf Health Board where the Chair was expressly called to attend. The Committee Clerk was informed on 20th June 2019 of the list of attendees from Cardiff and Vale University Health Board. I have asked my Board Secretary to liaise directly with the Committee Clerk in respect of future attendance.

I sincerely apologise for this confusion and wish to you assure you and your Committee Members that no disrespect was intended. Should the Committee wish me to attend I am more than willing to do so at your convenience.

Yours sincerely

Maria Battle
Chair