# CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 September 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Report of the Chair
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Miss Maria Battle, Chairman
SWYDDOG ADRODD: REPORTING OFFICER:	Miss Maria Battle, Chairman

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

### ADRODDIAD SCAA SBAR REPORT

## Sefyllfa / Situation

To provide an update to the Board on relevant matters undertaken by the Chair of Hywel Dda University Health Board (the UHB) since the previous Board meeting.

#### Cefndir / Background

This overarching report highlights the key areas of activity and strategic issues engaged in by the Chair and also details topical areas of interest to the Board.

#### Asesiad / Assessment

We have all together mourned the passing of HM Queen Elizabeth II and remembered her extraordinary dedicated long service, compassion and love for the people of the United Kingdom, her Realms and the Commonwealth. We have paid our respects and expressed our profound gratitude by attending many of the memorial services, including those at Llandaf Cathedral and St David's Cathedral. We also attended the Proclamations of the Ascension of King Charles III in the three Counties and have reached out to support staff in their grief. I will continue to lead the Queens Green Canopy in the NHS in memory of Her late Majesty.

## Public Engagement

Throughout the summer, the Chief Executive. Medical Director, Executive Director of Planning and I have been meeting with people across Hywel Dda and in particular in Pembrokeshire to listen to their views and answer their questions about our Programme Business Case. This has included the representatives in the third sector, the community councils, Save Withybush Campaign and the Social Care Overview and Scrutiny Committee of Pembrokeshire County Council. We will continue to do so as we progress with the delivery of Programme Business Case.

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#### **Ukrainian Refugees**

We have been caring for hundreds of people, mainly women and children, at the Urdd in Llangranog, who have had to leave war ravaged Ukraine for safety. I would like to express, on behalf of the Board, my sincere thanks for the expert care and dedication of all our staff who ensured that that their physical and emotional health needs were cared for with kindness, understanding and expertise. This was an example of excellent partnership reflecting all the principles held dear in our Nation of Sanctuary. The Urdd has now reverted to its original use. Some of the refugees have been hosted by families in West Wales or provided with accommodation and have been able to settle, which will enrich our communities. I would particularly like to thank Eifion Evans, the Chief Executive of Ceredigion County Council and Jo McCarthy, Deputy Director of Public Health, for their exceptional dedication in organising and responding so quickly and professionally.

### First in Wales to Offer Osteoporosis Medication

Glangwili General Hospital (GGH) has become the first in Wales to administer a new medication that will help patients suffering from osteoporosis. It was approved by the National Institute for Health and Care Excellence (NICE) and it the first new osteoporosis drug treatment of its kind for over a decade. The new treatment - Romosozumab - is now available in Wales for preventing future fractures in patients suffering from osteoporosis. With increasing numbers of elderly patients with osteoporosis, this injection is an additional drug available to specialists to treat these patients, helping to reduce disability and health and social care costs in the long term.

#### (LUMEN) Pilot Launch in Carmarthenshire

On 15<sup>th</sup> August 2022, the UHB, funded by Moondance Cancer Initiative, launched a pilot service, the Lung Cancer Symptom Assessment Line (LUMEN), a Nurse-led service aimed at smokers and non-smokers, in the Carmarthenshire area. Within Wales there are over 2,300 patients diagnosed with lung cancer each year, however less than 20% of these are diagnosed at early stage when they are eligible for curative treatment, it has been shown that early diagnoses lead to improved survival. This innovative new service has the potential to revolutionise the lung cancer diagnostic pathway leading to earlier diagnosis and better patient outcomes and if successful it is hoped that the pilot will be extended to both Pembrokeshire and Ceredigion.

#### Sunflower Initiative Launched to Support Staff's Wellbeing

Hywel Dda University Health Board (UHB) Sunflowers for Staff Well-being initiative was launched across the UHB in May 2022, to support staff well-being. The scheme is part of the wellbeing champions initiative which is funded by NHS Charities together. The aim is to encourage staff across the Health Board to grow sunflowers, to take advantage of the benefits of being outdoors, to take notice and learn about nature, and to create some positive conversations within and across teams, all of which contribute to our five ways to wellbeing. I am delighted that our wellbeing champions have been successful in securing the funding to get this initiative off the ground and achieving their goal. It is great to see that our staff are connecting with nature and supporting their wellbeing in the process in addition to all the other initiatives.

### **Board Seminar 8 September 2022: Three Year Annual Plan Discussion**

In response to an action from Board on 4<sup>th</sup> August 2022, a meeting took place on 8<sup>th</sup> September 2022 in order to scrutinise the Three-Year Annual Plan to ascertain the impact of choices and opportunities on quality, safety, finance and performance. Following detailed discussion, it was agreed that the delivery of the Target Operating Model including the complexities of the COVID- 19 choices and the expected timescale be considered by Board in September 2022.

#### **Chairs Action**

There may be circumstances where decisions which would normally be made by the Board need to be taken between scheduled meetings, and it is not practicable to call a meeting of the Board. In these circumstances the Chair, supported by the Board Secretary as appropriate, may deal with these matters on behalf of the Board.

There has been one such action to report since the previous meeting of the Board (attached as Appendix 1), which relates to the approval of a Homebased Care Service for the West Wales Region. Plans to co-ordinate a regional model which will be delivered at pace on the basis of local partner configuration with both Pembrokeshire and Carmarthenshire Local Authorities jointly funding the workforce required to deliver this scheme. The full report is attached as Appendix 2.

#### Deaths in Service

I am very sad to report the deaths of respected colleagues and wish to express my sincere condolences on behalf of the Board and the organisation to their family, friends and colleagues.

#### Lisa Lewis

Lisa Lewis passed away following a long battle with cancer on 2<sup>nd</sup> August 2022. Lisa worked as a Senior Nurse Manager in Critical Care, GGH.

#### Meriel Wait

Meriel Wait passed away following a period of illness on 3<sup>rd</sup> August 2022. Meriel worked as a secretary within the Patient Experience Team in Withybush General Hospital (WGH).

#### **Denise Lewis**

Denise Lewis passed away following illness on 5<sup>th</sup> August 2022. Denise worked as a Cardiac Rehabilitation Clinical Nurse Specialist in Bronglais General Hospital (BGH).

#### Key Meetings

I have attended the following meetings,:

- Chair's Appraisal with the Minister for Health and Social Services
- Vice Chancellor, Aberystwyth University
- Director of Social Services, Ceredigion County Council
- Chair of Swansea Bay UHB (SBUHB)
- Overseas Nurses Meet and Greet
- Meeting regarding the Ukrainian refugees
- Healthcare Inspectorate Wales & Hywel Dda UHB: Keeping in touch meeting
- Councils Leaders' Monthly Meetings
- CHC Monthly Meeting
- All Town/Community Councils and Third Sector virtually; Milford Haven Town council in person
- Save Withybush General Hospital Group in person
- Monthly political meeting
- New Hospital Building Plans meeting (linked to Trade Apprenticeships)
- League of Friends Llandovery
- Welsh NHS Confederation Management Committee
- Ministerial meeting with Health Board Chairs
- Queens Green Canopy
- SSOSPAN
- Ashgrove Medical Centre

#### **Visits**

On 7<sup>th</sup> September 2022, I attended the Cyswllt Royal College of Physicians Connect event in WGH. The event was an opportunity to listen to inspirational talks from clinicians on cardiology, intermediate care and the importance of fulfilment at work.

#### **Board Member Patient Safety Walkabouts**

Historically, Board Members have undertaken formal and informal visits to both acute and primary care teams across Hywel Dda. These visits are really important to listen to staff and understand the current challenges and successes. However, due to restrictions during the COVID-19 pandemic, all visits were paused. In May 2022, formal patient safety visits re-started across Hywel Dda and since the Board was last updated at its July 2022 meeting the following areas have been visited:

- WGH Emergency Department
- Pembrokeshire Community Maternity & MLU Birth Centre WGH
- GGH Emergency Department
- Dewi Ward
- BGH Maternity
- GGH Maternity
- BGH Emergency Department
- Community Dental
- Prince Philip Hospital (PPH) MIU
- Cardiac Pathway, GGH
- Stroke Pathway, PPH

#### Celebrating Success/Awards

#### **NHS Wales Awards**

Hywel Dda University Health Board is celebrating, after three of our projects to support local patients and communities made the finals of this year's NHS Wales Awards. The national awards recognise how innovative ideas for change can make a significant difference to the patients who need care, the organisations who provide care, and the health and care system as a whole. Successful local finalists are as follows:

Team	Category
A team of different health and social	Delivering person-centred services
professionals in Carmarthenshire who	
provide intermediate care.	
A project to improve the workflow and	Enriching the well-being, capability and
efficiency of pharmacy services in GGH	engagement of the health and care
Hospital.	workforce.
A partnership pilot project between the	Providing services in partnership across
Same Day Emergency Care team at	NHS Wales.
Withybush Hospital and the Welsh	
Ambulance Service Trust.	

#### Royal College of Nursing (RCN) Nursing award

The RCN Nursing Awards is a yearly event which invites nurses, nursing students and nursing support workers to share their innovations and expertise and celebrate their contribution to improving care and outcomes for people of all ages and walks of life. The Supporting Uncertainty for Babies Early in Antenatal Management (Spreading Sunbeams) team at Hywel Dda University Health Board (UHB) has been selected from hundreds of

entries as finalist at the RCN Nursing Awards. The team, whose collaborative work helps families facing potentially life-limiting fetal congenital anomalies that are time sensitive, has been shortlisted in the Child Health category. Spreading Sunbeams project was developed in September 2021 out of the need for professionals from across the palliative care, fetal medicine, maternity and neonatal network in Wales, to collaborate in a more integrated way. The team has embraced new ways of working across specialties and put the family at the very heart of the whole process. On behalf of the Board, I wish to congratulate the team on their nomination and wish them luck at the awards ceremony on 6<sup>th</sup> October 2022.

#### **Eisteddfod Gorsedd**

On 5<sup>th</sup> August 2022, Carys Stevens, a member of Hywel Dda University Health Board's palliative nursing team, was honoured and admitted to the Eisteddfod Gorsedd at the Eisteddfod in Tregaron. Carys was accepted as a blue robe to the Gorsedd and will be known as Carys Camddwr. Blue robes are awarded to individuals for their contribution to their locality or the nation in the fields of Law, Science, Sports, Journalism or Media. On behalf of the Board, I wish to extend my congratulations to Carys.

#### **Employee or Team of the Month**

Members of staff, patients, service users and the public can nominate staff who have gone above and beyond the call of duty and for their excellent work. Since the Board was last updated at its July 2022 meeting, the following employees/teams have received the Employee or Team of the Month award.

I, or a member of the Board, have been privileged to meet them all and visit them in their places of work. With such busy and demanding roles, it is often the only time a team or individual can stop and reflect on their work, their dedication and the challenges of the last two years. It is also an opportunity to listen and thank staff on behalf of the Board.

Employee or Team	Reason for Nomination	
Helen Morley, Child Health Department, WGH, Haverfordwest.	Nominated by Donna Redfern, Service Support Manager, in recognition of her outstanding dedication, competence and conscientious performance. Throughout the Pandemic she has worked exceptionally hard to overcome short staffing issues, train a new member of the team and managed and coordinated a huge Fluenz Campaign. Helen has had a significant impact on the service by ensuring that around 6000 extra children were vaccinated by working extra hours to meet the deadline whilst managing the workload of other members of staff. Her dedication and commitment are exemplary, with consistently demonstrating our organisational values to an exemplary level.	
Medical Rota Coordinators WGH	Nominated by Janice Cole-Williams, General Manager, in recognition of their tireless work ensuring the rotas in WGH are covered appropriately to support safe care delivery to our patients. COVID-19 has taken already high operational pressures to a different level with creative rostering requirements adding further pressure to their roles. Despite these high pressures the team always remain focussed whilst showing respect, resilience, professionalism, and determination. Their work to introduce new colleagues and provide a	

Mental Capacity Team Hafan Derwen St David's Park Carmarthen	good first impression and supportive work environment is also highlighted, with these roles being 'pivotal' to the safe running of WGH.  Nominated by Ben Smith, Reducing Restrictive Practice Trainer, in recognition of their outstanding dedication, competence, conscientious performance, excellent customer service and ingenuity. The team are a special and rather unique team of practitioners that have the capacity to improve patient experiences in a complex arena. In addition to raising awareness of forthcoming legislation changes via the development and delivery of comprehensive, highly recommended training sessions. As a team they epitomise the organisational values of 'working together to be the best we can be', 'striving to develop and deliver excellent services' and 'putting people at the heart of everything we do'.
Tracy George Sunderland Ward South Pembrokeshire Hospital Pembroke	Nominated by Rebecca Bicknell, Senior Sister, in recognition of her significant impact on the Department, its core goals and objectives. As a flu champion Tracy has been incredibly dedicated to the Influenza vaccine campaign. She has performed at a level above and beyond the normal job requirements. Tracy continually displays the organisational values to an exemplary level and ensures that patients receive dignified and prudent care. She is the cornerstone of Sunderland Ward and has been of invaluable support within ward management.

## **Independent Board Member Update**

• I am pleased to announce that, following approval by the Minister for Health and Social Services, Mrs Chantal Patel has been appointed Independent Member (University) for a period of 4 years, until the end of July 2026.

# **Argymhelliad / Recommendation**

The Board is asked to:

- **SUPPORT** the work engaged in by the Chair since the previous meeting and note the topical areas of interest;
- RATIFY the actions undertaken by the Chair on behalf of the Board, detailed in Appendix 1.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)				
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable			
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability			

Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	6. Contribute to global well-being through developing international networks and sharing of expertise 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:			
Ar sail tystiolaeth:	Chairman's Diary & Correspondence		
Evidence Base:			
Rhestr Termau:	Included within the body of the Report		
Glossary of Terms:			
Partïon / Pwyllgorau â ymgynhorwyd	Chairman		
ymlaen llaw y Cyfarfod Bwrdd lechyd			
Prifysgol:			
Parties / Committees consulted prior			
to University Health Board:			

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No impact
Ansawdd / Gofal Claf: Quality / Patient Care:	Ensuring the Board and its Committees make fully informed decisions is dependent upon the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.
Gweithlu: Workforce:	No impact
Risg: Risk:	No impact
Cyfreithiol: Legal:	No impact
Enw Da: Reputational:	No impact
Gyfrinachedd: Privacy:	No impact
Cydraddoldeb: Equality:	No EqIA is considered necessary for a paper of this type.

# Appendix 1 - Register of Chairman's Actions 2022/23

Serial No.	Requesting Department	Details of Request	Cost, where applicable	Date Issued	Date Signed by Chair
128	Primary Care	To approve the Homebased Care Service for the West Wales Region. Plans to co-ordinate a regional model which will be delivered at pace on the basis of local partner configuration with both Pembrokeshire and Carmarthenshire Local Authorities jointly funding the workforce required to deliver this scheme.	£476,000	22.08.2022	15.09.2022



# REQUEST FOR CHAIR'S ACTION

**Serial Number: 128** 

In accordance with the Standing Financial Instructions and Standing Orders ref 2.1; the Chair/CEO has delegated authority to approve decisions which would normally be made by the Board, to be taken between scheduled meetings provided that neither the Chair or CEO has a personal interest in the decision to be taken.

# Details of request: (Supporting evidence to be attached, including evidence of costs):

### **Building Community Care Capacity – Enhanced Bridging Care**

#### Introduction

The West Wales Region plans to co-ordinate a regional model which will be delivered at pace on the basis of local partner configuration. The 5 agreed objectives are:

- To grow the total homebased care workforce in the community on a sustainable basis.
- To develop a consistent and regional set of principles which can be owned and implemented as most appropriate in each County System.
- The focus of the teams will be to support independence, reablement or enablement and the Home First principles.
- To do this in partnership recognising the impacts on the experience and outcomes for individuals and the wider population.
- To share the responsibility and risk in the design, implementation and resourcing and will ensure senior consistent representation in a regional steering group and local Operational Delivery Groups.

The regional model will provide additional capacity to bolster the provision of home care and support in the short term where other forms of care are not available within a timescale that is deemed reasonable relative to the risk in the system. It enhances the community workforce which will integrate and enhance health and social care provision in partnership between the Health Board and the Local Authorities.

#### Care may be provided:

- for those individuals at home to prevent or reduce the risk of an urgent admission to hospital
- for those individuals in an acute or community hospital bed who require care to enable them to transfer home for their assessments
- for those individuals in an acute or community hospital bed who require care to enable them to transfer home whilst waiting for their assessed long term care provision

#### **Current Challenge**

The Health Board holds a manual SharePoint system for our complex to discharge cohort of patients. This gives us greater understanding of our flow and the blocks but also enables us to combine this knowledge with the analysis from Lightfoot. This is a manual system and therefore subject to human error around the data quality.

	At 10.6.22	At 1.9.22
People in hospital Ready to	102	152
Leave		
Average & total days since	31 3173	30 4568
RTL date		
Average & total days	18 1857	21 3118
between Medically		
Optimised and RTL		
Average & range of Length of	91 7 - 263	95 3 – 331*
Stay		

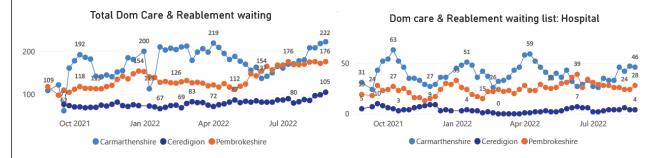
<sup>\*</sup>The person with the longest LOS is in a Community Hospital Bed waiting for a social package of care and has been stranded for 155 days.

54% of people RTL were on the D2RA Pathway 2 – assess at home (38.5% of those identified as Medically Optimised).

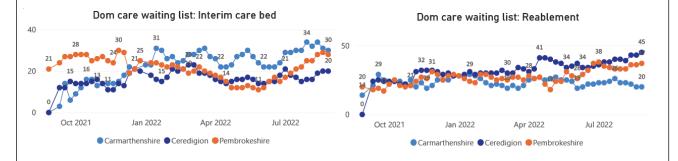
Older people who stay in ED longer than 4 hours and in hospital for more than 72 hours will have very long LOS.

Of the 152 people stranded and Ready to leave on 1.9.2022, 69 were waiting a package of care or reablement and had been stranded for an average of 38 days.

The total waiting list held by each Local Authority demonstrates a rising trend across all three Counties.



There is also a significant number of people in interim beds thereby reducing availability in Care Homes for people waiting for long term packages (55 people waiting on 1.9.22 with an average of 19d stranded for residential and 30d for nursing). There is a rising number of people in reablement services waiting which is reducing the capacity of those services.



The numbers of those supported by NHS services at home are not currently routinely reported in the same way however, on 1.9.2022 there were 30 people supported by the Pembrokeshire Care at Home Team who were waiting for a package of care. This accounts for 57% of their caseload and a total of 263 hours of care per week.

Home based care capacity is the single largest constraint on flow through our whole system.

#### **Bed Benefit Analysis**

Hospital bed occupancy varies between the 4 acute hospitals and more so if the community hospital beds are included. Analysis on best outcomes from Lightfoot has highlighted:

- 80 occupied bed efficiency by October by increasing front door turnaround and recuing overall LOS by 1 day for people over 75 years – 100 beds by March 2023
- 100 occupied bed efficiency by October by increasing front door turnaround and recuing overall LOS by 1 day for people over 65 years.

This is a realistic assessment of achievable delivery.

It is expected that through reducing the deconditioning which people experience following long lengths of hospital stay, and the timely intensive intermediate care provision, that there will be a reduction in care packages. This will be monitored as part of the programme.

#### **Delivery Plan**

Improving processes at the front door - using SDEC and optimising use of assessment units - with the objective of discharging more people within 72 hours is assumed to result in a reduction of 1 day Length of Stay (LoS) by October 2022.

Focussing on reducing conveyance and processes in the Emergency Department to avoid admission is assumed to reduce the admission rate by 10% by October 2022 (using urgent & intermediate care community resource) – 4 people per day.

Enhancing community care capacity will provide reassurance and reduce the delivery risk of achieving these efficiencies despite the reported levels of acuity and complexity of patients presenting as emergencies. This action dependent on successful recruitment which may be phased over longer period of time 6 – 18 months.

- **Carmarthenshire** developing a short term intermediate care function with additional c.32WTE joint reablement/rehabilitation/assess at home staff.
- Ceredigion are starting from a preferable position in terms of Length of Stay and Bed Occupancy – reviewing opportunities to increase the joint enablement scheme following evaluation of the Transformation Funded scheme.
- **Pembrokeshire** developing intermediate care function and jointly growing long term care capacity through recruitment of 20WTE joint health & social care support workers and 15 joint apprentices.
- Direct payment and micro-enterprises to be further developed in each Local Authority area.

**Benefit:** based on the operational impact of similar teams in Pembrokeshire and Carmarthenshire the following benefit has been provisionally submitted to Welsh Government:

- 52 community beds in Carmarthenshire assuming full 32WTE staff employed
- 38 beds in Pembrokeshire assuming full 20WTE staff employed

In addition the following community capacity has also been submitted:

14 beds Ty Pili Pala in Carmarthenshire

- 9 bed Hillside & Havenhurst in Pembrokeshire
- 6 beds by increasing in-house residential care in Ceredigion
- 250 hours of homebased care in Ceredigion by increasing the Health and Social Care workforce as part of RIF (approximately 10 beds)

This generates total of **129 beds** against a WG expectation of **117**. There will also be a further 20 beds in Pembrokeshire when the Joint Apprentices enter their 2nd year.

Impact on the acute part of the system is difficult to assess due to multiple compounding factors but Lightfoot analysis of the whole UEC system remains extant and will demonstrate system efficiencies as this plan progresses.

**Financial modelling:** further clarity has been given to the finance teams, and discussions held between Local Authority and Health Board colleagues. Assuming that all staff are on-boarded by 1st October 2022 the table below outlines the maximum expected Health Board contribution needed for 2022-23 as £591,452.

	Current year only						
	Assume staff employed 1 October Pembs						
	and Carms						
						1 and subse	•
	Additional Workforce Sought :	Carms	Pembs	Total	Carms	Pembs	Total
1	Band 2 HCSW/generic role – 20 WTE		315.969	315,969		631.938	631.938
'	(Pembs) – 7 days 7am – 10pm		315,969	315,969		031,936	031,936
2	Band 3 HCSW/generic role - 32 WTE	540.044		540.044	4 000 404		4 000 404
2	(Carms) - 7 days 7am - 10pm	549,211		549,211	1,098,421		1,098,421
	Band 5 Supervisors – 4 WTE (2 Carms, 2						
3	Pembs) - Monday - Friday only normal	36,695	36,695	73,390	73,390	73,390	146,779
	hours	,	,			ĺ	
	Band 3 - 2 WTE (1 Carms, 1 Pembs)						
4	Monday - Friday only normal hours	13,954	14,084	28,037	27,907	27,907	55,814
	Band 2 Apprentices - 15WTE (Pembs) - 7						
5	days 7am - 10pm		23,698	23,698		473,954	43,885
		599,859	390,445	990,304	1,199,718	1,207,188	1,976,837
		200,000	555,115	000,000	1,100,110	1,201,100	1,010,001
	Travel	80,000	87,500	167,500	160,000	175,000	335,000
	IT Equipment, uniforms etc £300 per head,						
	plus £5k admin etc	12,100	13,000	25,100	-	-	-
	Total	691,959	490,945	1,182,904	1,359,718	1,382,188	2,311,837
	Share paid for by HDda	345,979	245,473	591,452	679,859	691,094	1,155,918

It is expected that there will be some on boarding delays and therefore the liability for the Health Board for 2022-2023 would be in the region of:

Carmarthenshire: 242k
Pembrokeshire: 184k
Project Management Support / legal advice: 50k
Total: 476k

This is within the £550k window discussed which has been notified to Welsh Government however this is an additional cost pressure for the Health Board which would need to offset the costs incurred from surging beds and supporting overnight patients in Emergency Departments.

**Legal Framework**: Draft Partnership Agreements are currently in the final stages of negotiation between the Health Board and both Local Authorities. The principle of a 50:50 funding split has been agreed as is a fair share of any liabilities should the agreement end. An initial letter of agreement has been signed to support Carmarthenshire whilst the Partnership Agreement is being finalised.

**Recruitment**: Job descriptions have been agreed for both Counties (The first recruitment fair was held in Pembrokeshire on 22nd August. There were 55 expressions of interest

for the day and 17 interviews were held with 15 conditional offers being made. Follow up interviews are planned for a further 15 people who were unable to attend on the day on 8th and 9th September.

Carmarthenshire interviews are planned for 28th and 29th September.

Initial discussions have been held to consider whether employment opportunities could exist within the Welcome Centre in Llangrannog, main challenge here is matching the work opportunities with the sponsorship locally. This will be considered as part of the recruitment plans.

Exploration of lease and pool cars also explored to support the new workforce, specifically the cost of driving. LAs have been devolved funding to support with driving lessons and tests and they have been asked to explore how this could be used to support this new workforce.

#### Recommendation

To approve Chairs Action on the understanding that:

- Agreement has been reached with both Pembrokeshire and Carmarthenshire Local Authorities to jointly fund the workforce required to deliver this scheme.
- Flexibility within Health Board finances this year will enable the scheme to proceed without creating a further deterioration on the in-year deficit position.
- The scheme will impact on the underlying deficit; but that it is anticipated that this will be funded by benefits within the system when these are realised.
- Consideration will need to be given to an exit strategy if this scheme is not successful in delivery.

This request was made by:	
Name: Jill Paterson	
Signature:	Date: 22.08.2022
<b>Approved by Andrew Carruthers, Executive Directo</b>	r of Operations
Signature:	Date: 22.08.2022
<u>Decision</u>	
Approved/Not approved (please delete as appropri	iate)
Comments:	
Chairman's Signature:	Date:
Chief Executive's Signature:	Date:
Reported to Board: Signature (Board Secretary):	Date:

Forms should be typewritten and signed and approved by the relevant Executive Director prior to submission to the Chief Executive and Chair.