

CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

**'UNCONFIRMED' MINUTES OF THE MEETING OF THE
PLANNING, PERFORMANCE & FINANCE 'IN COMMITTEE'
HELD ON 28 JUNE 2022, AS A VIRTUAL MEETING WHICH
WAS HELD VIA MICROSOFT TEAMS**

PRESENT

- Carolyn Donoghue - Independent Member (Chair)
- Mel Jehu - Independent Member
- Nicola Milligan - Independent Member
- Ian Wells - Independent Member
- Patsy Roseblade - Independent Member

IN ATTENDANCE

- Sally May - Executive Director of Finance & Procurement
- Gethin Hughes - Chief Operating Officer
- Bill Rogers - Programme Director, Major Projects
- Bernard Carter - Senior Projects Manager, Capital Planning
- Cally Hamblyn - Assistant Director of Governance and Risk
Governance/Board Secretary
- Paul Dalton - Internal Audit Assurance
- Emily Howell - Audit Wales
- Kathrine Davies - Corporate Governance Manager
(Meeting Secretariat)

PART 1. PRELIMINARY MATTERS

1.1.0 WELCOME AND INTRODUCTIONS

The Chair **welcomed** everyone to the meeting including Bill Rogers and Bernard Carter who were in attendance to present agenda item 2.1.0, 2022-23 Capital Programme.

1.2.0 APOLOGIES FOR ABSENCE

Apologies for absence had been received from Georgina Galletly, Director of Corporate Governance.

1.3.0 DECLARATIONS OF INTERESTS

There were no declarations received.

PART 2. MAIN AGENDA

2.1.0 2022-23 CAPITAL PROGRAMME

B. Rogers and B. Carter presented the report that provided the Committee with a summary of the discretionary capital funding and planned programme as well as an update on the key All Wales Capital Schemes and large discretionary investments.

The Committee **NOTED** that the all Wales Capital Programme had been reduced by £255m with the Health Boards total discretionary allocation being £7.4m which would prove to be very difficult and challenging for this financial year.

P. Roseblade referred to the Imaging Programme and that on the table it stated that the expenditure had been allocated and queried if the work had not been agreed with services how would they know if those expenditure estimates were accurate. In response, B. Carter advised that the majority of the allocation related to the purchase of equipment with a smaller element capturing the storage of equipment.

P. Roseblade queried whether the Health Board provided car-parking chargers for electric vehicles and if so were they being appropriately used. If not in place, were there any plans to install them? B. Rogers confirmed that there was one charging point at Prince Charles Hospital (PCH) and the Health Board had approached Welsh Government to discuss the options for expanding charging points. At the moment, there was a capital allocation issue across Wales however, there was a counter argument on whether the hospitals should provide chargers and how would they be managed.

B. Carter advised that that they undertook installation of about 12 charging points across some of the sites for Health Board vehicles. He also advised that they had received a £1m grant to install solar PV panels in Keir Hardie Health Park, Ysbyty Cwm Cynon and Ysbyty Cwm Rhondda and that those were about to be completed and operational by the end of July 2022.

G. Hughes referred to theatres at the Princess of Wales Hospital and advised the Committee that they were looking at some alternatives that would provide longer-term benefit from the capital expenditure and bring on stream the old maternity area and back up theatre at the Royal Glamorgan Hospital. He advised that they had to get value for money and if they were going to have to close down the theatre block, they would explore the most cost effective way of doing this.

Agenda Item 2.1.1

I Wells referred to the discretionary capital plan and queried if any of the funding being referred to include the ICT disaggregation from Swansea Bay UHB for integrating their data systems with the rest of Cwm Taf Morgannwg and was there a capital element to that. In response, S. May advised that they were still awaiting the allocation that had been promised for that work. She confirmed that it was a priority programme; however, the current capital allocation would not stretch to undertake that work without further external funding to support it.

M. Jehu provided assurance to colleagues that this was the first time since the formation of the PPF Committee that this report had been received. The PCH Ground and First Floor Project Group meet on a monthly basis, which he chairs, and from a governance perspective the terms of reference state that they should report into this Committee. He thanked B. Carter and B. Rogers for attending and providing the update and for the huge amount of work that was being undertaken.

The Committee received a report summarising the discretionary capital funding and planned programme as well as an update on the key All Wales Capital Schemes and large discretionary investments.

The Committee **NOTED** that the all Wales Capital Programme had been reduced by £255m with the Health Boards total discretionary allocation being £7.4m which would prove to be very difficult and challenging for this financial year.

Following detailed discussions on specific elements of the Programme the Committee noted the report. S May concluded the item by reiterating that this was a large complex programme with many elements, which were also impacted by issues such as inflation and scarcity of contractors, all of which heighten the risk around delivery with fewer resources available within the discretionary capital fund. The Committee acknowledged that it was going to be a challenging year and the Health Board would need to maintain a close watching brief on Capital Programme resources.

S. May thanked M. Jehu and advised the Committee that his contribution to the Project was invaluable.

Resolution: The Committee **NOTED** the report.

3.0.0 OTHER MATTERS

3.1.0 ANY OTHER URGENT BUSINESS

There was none.

3.1.2 CLOSE OF THE MEETING – DATE AND TIME OF NEXT MEETING:

The next full meeting of the Committee was scheduled to be held on the 23 August 2022 at 2:00 pm.

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