



**MINUTES OF PEMBROKESHIRE PUBLIC SERVICES BOARD  
Tuesday 25<sup>th</sup> April 2023 at 10.00am (Microsoft Teams meeting)**

**Present:**

Cllr. Neil Prior	PCC (Chair)
Phil Kloer	Executive Medical Director, Hywel Dda UHB (Vice-Chair)
Caroline Drayton	Operations Manager, NRW
Richard Brown	Assistant Chief Executive, PCC
David Evans	Assistant Principal, Pembrokeshire College
Mydrian Harries	Assistant Chief Officer- Director of Resources, MAWWFRS
Iwan Thomas	Chief Executive Officer, PLANED
Tegryn Jones	Chief Executive, PCNPA
Sue Leonard	Chief Officer, PAVS
Cllr. Elwyn Williams	Chair MAWW Fire Authority
John Thomas	Vice-Chair, OVW
John Evans	County Director, Hywel Dda UHB
James White	Head of Engagement, Performance and Community, PCC
Gemma Baker	Policy and Performance Officer, PCC
Claire Germain	Deputy Director for Local Government Transformation and Partnerships, Welsh Government (arr. 10.45am)

**Support/Secretariat**

Nick Evans	Corporate Policy and Partnerships Manager, PCC
Lynne Richards	Corporate Partnerships Officer, PCC
Amy Richmond-Jones	Engagement, Planning and Performance Manager, MAWWFRS
Hassim Ganiyu	Engagement Officer, Hywel Dda UHB

**Apologies**

Will Bramble	Chief Executive, PCC
Alison Perry	Director of Commissioning, OPCC
Supt. Craig Templeton	Dyfed Powys Police
Barry Walters	Principal, Pembrokeshire College
Anna Malloy	Stakeholder Engagement and Communication Manager, MHPA
Christine Harley	Head of Dyfed Powys Local Delivery Unit, Probation Service
Cllr. David Simpson	Leader, PCC
Darren Mutter	Acting Director of Social Care, PCC
Tom Sawyer	Chief Executive Officer, MHPA
Jo McCarthy	Deputy Director of Public Health, HDUHB
Kelvin Barlow	Regional Partnership Programme Manager, West Wales Care Partnership

The meeting commenced at 10.05am.

## **1. Welcome and Apologies**

NP welcomed everyone to the meeting. Apologies were received from those listed above.

## **2. Minutes of last meeting / Action Log**

The minutes of the last meeting held on 7<sup>th</sup> March 2023 were approved as an accurate record. All actions from the meeting had been completed.

## **3. Approval of Final Well-being Plan for publication / 4. Well-being Plan delivery, monitoring and reporting arrangements**

NE suggested taking Items 3 and 4 on the agenda together, as Item 4 would include discussions around engagement and as the role of the Engagement Group was currently reflected in the Plan changes to this may require some minor non-material amendments to the Plan prior to approval.

NP began by providing an overview of the proposed delivery structure at Appendix A, which had been raised and discussed at the last meeting, and highlighted the following questions in the paper for discussion;

- The role and placement of engagement within the delivery structure – retain the existing PSB Engagement Group or pass responsibility for engagement and co-production to each project group and associated supporting groups?
- How project activity is to be reported to the PSB – ‘spotlight’ sessions at each meeting and written progress updates?
- How will project leads be held to account where progress is not forthcoming?
- How cross-cutting activity will be identified and delivery co-ordinated - through existing groups? New groups?

He opened the discussion with the question around engagement and whether there should be an overarching engagement group (PSB Engagement Group) or whether engagement should be mainstreamed within each of the Silver project groups.

SL expressed her wish to see a wider engagement practitioner network established, sitting outside the PSB structure and including wider partners with an interest in engagement and involvement, which could be used as a resource for the PSB. She said that engagement was already built into the delivery plans of the silver groups. She also noted that the Engagement Group had not been particularly effective as attendees were too busy.

PK voiced his approval with the structure and suggested that engagement should be a theme throughout the bronze and silver groups with possibly an overarching group. He also noted that more detail was needed around outcomes and outputs for each of the project areas in terms of ensuring accountability.

NP provided an update of project activity under the *Strengthening Communities* work. The group had met on 21<sup>st</sup> April and agreed to set up a meeting in June to look at what is currently happening in PCC with regard to working with communities, discuss development of community ambassador role and undertake a mapping exercise to assist with the engagement aspect of the project. He then outlined how he envisioned the spotlight sessions working. Project leads would have the opportunity to provide a brief overview of

activity and PSB partners would have the opportunity to ask questions and identify issues. This would be one part of reporting on delivery, with project leads also being asked to produce a short one page written report for each meeting, outlining headline and issues. NP would meet separately with NE and LR to discuss format.

Moving on to the Well-being Plan, all partners present agreed that they were happy to approve the PSB's Plan for 2023-28 for publication.

## **5. New Hywel Dda Hospital site and land consultation**

ER gave a brief presentation on Hywel Dda's consultation around the siting of the new West Wales hospital, which would end on 19<sup>th</sup> May.

MH asked what the level of response to the consultation had been in Pembrokeshire to date. ER said that there had been 300 responses overall so far to the consultation questionnaire, and within Pembrokeshire the consultation event in Haverfordwest had been attended by approximately 50 people and events were due to be held in Milford Haven and Fishguard.

SL asked whether issues around the use of green spaces around the site had been considered, along with community transport and an increased focus on digital service access points to prevent unnecessary travel. ER said that the public space around the hospital would be designed and managed to improve health and well-being and a community transport strategy would be developed. PK said that the new hospital was part of a move towards a more community primary care focussed NHS with a greater focus on digital.

CD noted that one of the proposed sites was partly on land susceptible to flooding and she would encourage Hywel Dda to think carefully about this in light of the costs associated with flood consequence assessments and the potential consequences that development of the site could have downstream. She also noted the potential need for a strategic environmental assessment going forward.

DE asked whether additional cost predictions had been factored in as part of the consultation, in light of increased costs of building materials and development costs. ER noted that the Health Board were in the process of considering this, although by the time the hospital came to be built these costs would likely have changed again.

DT then asked what the site investigation process had been and whether there were any historical structures on any of the sites which could delay development. ER said that a desktop review had been undertaken but no initial concerns had been identified.

PK thanked NP for the opportunity to present to the PSB and for the comments made by members.

## **6. PSB Poverty Strategy update**

JW began by noting that attendance at meetings of the group had been good. Focus initially had been on work associated with the cost of living crisis but the group was now moving towards development and delivery of the strategy.

Some of the main issues identified in the PAVS work with people affected by poverty had been captured in the word cloud on page 18 of the draft strategy and these were similar to issues across Wales. As a rural county rural isolation and lack of access to services were

particular issues, but specifically the main issues in Pembrokeshire were associated with a lack of access to affordable childcare, insecure/part time/low paid/seasonal work and hunger, in particular an increase in children arriving in school hungry who may not have eaten the previous evening. JW noted that there had always been cases where this was an issue but it now applied to a much wider group and within this group were individuals who would not necessarily be eligible for FSM.

A report on the Keep Warm, Keep Well work was being prepared by PAVS and this would add to the content of the strategy in Section 5 and further information would be added from organisations who had not yet responded to the request for information. JW raised the suggestion made by the poverty group to hold a launch event for the strategy and an annual conference to maintain focus.

TJ asked whether the issues regarding rurality could be better captured within the document as they weren't particularly well represented in the draft. He also said that he was in favour of an annual conference, but not a launch event. GB agreed that rural issues were under-represented, however, this had not been raised as a particular issue with local residents engaged with as part of the lived experience work led by PAVS.

Regarding this work, SL said that what had been most striking for her was the fact that young people spoken to as part of the research did not see a future for themselves in the county. There were also some people with two or even three jobs who were still unable to make ends meet and because they were not able to access free childcare or FSM were questioning the value of working. SL also noted that some of those involved in the research were keen to remain involved in the process which could provide useful information in the long term about the success or otherwise of the groups' activity.

PK said that he would contact colleagues in public health to make links with the group regarding health inequalities and agreed with SL about the value of those who had been involved in the initial research project remaining involved to provide a longitudinal case study.

DE noted that there would be a lot of investment in the green economy and jobs in the near future and a significant level of jobs coming to the county due to this investment.

With regard to the lack of response from some partners, NP asked specifically where JW needed help. JW said that information was needed from PCC Housing in particular and also information from Health around community pharmacy common ailments scheme. He also noted that there was diminishing strategic capacity by members of the group to undertake work that was not statutorily required so this was also an issue more generally. The main determinant of poverty – money – was out of the control of the group to influence so their role would be to identify routes out of poverty and opportunities and support for people to better their own circumstances.

It was agreed that an email would be circulated again in NP's name to those who had not responded and the final strategy would be brought to the group for approval at the next meeting.

## **8. AOB**

EW said that this would be his last meeting as he would be moving on from his role on the MWW Fire Authority. NP thanked him for his contributions to the PSB.

There was no other business.

The meeting ended at 12.00pm.

## Action Log

No.	Pg.	Action	Target date	Owner	Resolution
1	3	Meet to discuss summary reporting format for project groups	Next meeting	NP/NE/LR	COMPLETED
2	4	Circulate email in the Chair's name to those who have not yet responded to the request for information from the Poverty Group	asap	GB	COMPLETED