

# Pre-appointment hearing – Chair of Powys Teaching Health Board

September 2022

## 1. Introduction

### **Powys Teaching Health Board (PTHB)**

- 1.** Powys is one of the most rural counties in the UK. Whilst the county is approximately 25 per cent of the landmass of Wales, it has only five per cent of the population. The population in Powys is older compared to the rest of Wales and the proportion of older people is growing. The working age adult population is smaller compared to the rest of Wales and it is predicted that the number of young people and working age adults will decrease, whilst the number of older people will increase. It is predicted that there will be an eight per cent decline in the Powys population by 2039.
- 2.** The county has a strong network of small towns and villages with a high level of community commitment and a strong voluntary sector. Unemployment is low, however Powys has a low income economy with low average earnings and house prices that are high when compared to other areas in Wales. Five areas (Lower Super Output Areas) are among the most deprived 30 per cent in Wales, clustered around the main market towns with higher residential populations.
- 3.** There are generally good health outcomes in the county and people live longer and spend more years in good health than the national average, eating a healthier diet and being more physically active. Fewer people feel lonely and there is a greater sense of community and satisfaction with life. 83 per cent report that they feel they belong to their local area, compared to 75 per cent in Wales as a whole. However, whilst general health is good, there are issues that have informed the long term strategy. One in five people still smoke, one in four children are



overweight or obese on entering school and six in ten adults are overweight or obese. Health inequalities amongst people living in the most deprived areas of Powys are significant; a child born in the most deprived area lives approximately 10 years (boys) to 14 years (girls) less than a child born in the least deprived area.

**4.** PTHB is both a commissioner and a direct provider of healthcare. It is different to other health boards in Wales in relation to the proportion of services that are provided to the population by other health care providers. The health board's budget is circa £300m. 50 per cent is spent on secondary and specialist care, 20 per cent is spent on primary care and 30 per cent is spent on directly provided services. The directly provided services are delivered through a network of community services and community hospitals which includes mental health, learning disabilities, maternity and children's services. Care is also provided in Powys through primary care contractors such as general practices, dental practices, pharmacists and optometrists, as well as the third sector. There is also provision of an increasing range of consultant, nurse and therapy led outpatient sessions, day theatre and diagnostics in community facilities, bringing care closer into Powys itself and closer to people's own communities and homes.

**5.** In relation to commissioning, there are some unique characteristics that set the Powys context. Being an entirely rural county with no major urban conurbations and no acute general hospitals, people in Powys have to travel outside the county for many PTHB services, including secondary and specialist healthcare, higher education, employment and leisure.

**6.** The health board buys services on behalf of the population from 15 main NHS provider organisations across England and Wales. Shrewsbury and Telford Hospitals NHS Trust makes up the largest proportion of commissioned activity and Wye Valley NHS Trust is the second largest. In Wales, the health board buys services from Hywel Dda, Aneurin Bevan, Swansea Bay and Cwm Taf Morgannwg University Health Boards and others in smaller proportions. This covers all specialities, however PTHB is not the majority commissioner of any acute provider.

## 2. The pre-appointment hearing process

### The process

**7.** Welsh Ministers and the Welsh Parliament agreed to introduce pre-appointment scrutiny by Senedd committees of certain public appointments which are of significant public interest or which will have a significant impact on the public. The aim is to further improve the scrutiny and transparency of the public appointment making process. Pre-appointment scrutiny generally

takes the form of a public pre-appointment hearing with the preferred candidate. For appointments to these agreed roles, it is for the relevant committee to decide whether or not it wishes to carry out a pre-appointment hearing.

### **Pre-appointment hearing**

**8.** On 21 September 2022, the Committee held a pre-appointment hearing with Carl Cooper, the Welsh Government's preferred candidate for the position of Chair of PTHB. The meeting transcript is available on the [Committee's website](#).

**9.** To inform the hearing, the Welsh Government provided us with a briefing on the process ("[the Welsh Government briefing](#)"), Carl Cooper's [application form, CV and supporting statement](#) and a copy of the [information pack for applicants](#). The Committee also asked the preferred candidate to complete a [questionnaire](#) in advance of the hearing.

## **3. The recruitment process**

**10.** On 24 May 2022, the Welsh Government Public Appointments Unit advertised for a Chair for PTHB.

**11.** The initial campaign advertised in March/April 2022 failed to produce applications of the required standard and it was agreed with the Minister for Health and Social Services to re-advertise the appointment. Executive search agents were engaged in both advertising campaigns with the aim of increasing the number of applicants and widening the diversity.

**12.** Following a four week re-advertisement period, the advert closed on 24 June 2022 and six applications were received. Diversity data relating to the applicants can be found in the [Welsh Government briefing](#).

**13.** The Advisory Assessment Panel recommended four of the six candidates for interview. The four applicants were invited to attend an online stakeholder session on 18 July 2022. This required them to lead a topic discussion relating to how the COVID-19 pandemic highlighted the impact of health inequalities in Powys and how as Chair they would address the health inequalities in strategy development and service delivery. The four applicants were also invited to attend a formal interview with the Advisory Assessment Panel on 19 July 2022.

**14.** Both the stakeholder panel and Advisory Assessment Panel agreed three applicants were deemed appointable. The Minister agreed to the recommendations and selected Carl Cooper as the preferred candidate on 17 August 2022.

## Role and person specification

**15.** The Welsh Government set out the role of the Chair in the [information pack for applicants](#). This included notification that, at the Committee's discretion, appointment to the role of Chair could be subject to a pre-appointment hearing.

**16.** The Chair will be accountable to the Minister for Health and Social Services for the performance of the Board and its effective governance, upholding the values of the NHS, and promoting the confidence of the public and partners throughout the health board area.

**17.** In addition, the Chair will:

- Lead the Board in the development of a strategic vision for the Health Board's services of the future, realising and building on the inherent potential and skills within the organisation to develop an innovative and exemplar service with the aim of improving well-being and outcomes for the population;
- Provide effective and visible leadership across the breadth of the Board's responsibilities, internally through the Board and externally through connections with a wide range of stakeholders and partners at community, local authority, health board and national levels;
- Ensure the Board delivers effectively together the strategic and operational aims of the Health Board through delivery of strategic aims, policy and ensuring good governance;
- Be responsible for maintaining the highest quality of public health standards and practices, and improving quality and safety of healthcare;
- Be accountable for the performance of the Board at community, local authority, Board and national levels through the agreement of a three year Integrated Medium Term Plan (IMTP) and an annual delivery plan and the annual evaluation of achievements against the plan in public by the Minister for Health and Social Services;
- Hold the Chief Executive to account across the breadth of their responsibilities;
- Work effectively with partners, in particular with primary care contractors and other NHS bodies, universities, local authorities, the third sector and social partners, to ensure the planning and delivery of safe, effective, person centred services aiming to improve population outcomes;

- Provide the assurance and governance for the proper stewardship of public money and other resources for which the Board is accountable;
- Provide the assurance for ensuring that the Board is governed effectively within the framework and standards set for the NHS in Wales, with a particular emphasis on ensuring openness and transparency;
- Undertake an external ambassador role, delivering in the public spotlight and instilling public confidence;
- Act as a Corporate Trustee of PTHB Charity.

## 4. The Welsh Government's preferred candidate

### Background

**18.** Carl Cooper, the Welsh Government's preferred candidate, is currently Chief Executive Officer of Powys Association of Voluntary Organisations (PAVO), Chair and member of the Powys Regional Partnership Board, Board Member of Social Care Wales, and a member of the Third Sector Partnership Council.

**19.** In the pre-appointment questionnaire, he states:

*"I have served on and chaired a number of committees, boards and partnerships in Powys, the majority of which have related to health, care and wellbeing. I have experienced instances of services being developed and/or strengthened that have had a fabulous and beneficial impact upon the lives of people, households and communities. The opposite has also been the case, where services have occasionally not been adequately coordinated or sufficiently reliable and people have not received the support they deserve and should be able to expect. I am both motivated and committed to building on the good and positive experiences in order to ensure that Powys' citizens receive the best possible care and support. I would enthusiastically welcome the opportunity to continue to serve the people of Powys in this important role."*

## **Our view**

**20.** In line with the guidance on pre-appointment hearings agreed between the Welsh Government and the Senedd, our role is to set out our views on the suitability of the Welsh Government's preferred candidate.

**21.** During the pre-appointment hearing, we had a wide-ranging discussion with the preferred candidate, Carl Cooper. This covered his experience of working in other organisations, including roles in the voluntary, university and public sectors. We talked about how good governance, management and effective operational delivery can transform services, and Mr Cooper said that, if appointed, one of his first priorities would be to ensure that the accountability and governance of the organisation was effective and working as it should.

**22.** We discussed transparency and developing a culture of openness and candour. Mr Cooper talked about the importance of a sustainable workforce, and the need to care for and invest in staff. He also acknowledged that it was an important responsibility of the board to ensure that appropriate policies and procedures were in place to safeguard the wellbeing of staff, including in respect of domestic abuse. Finally, we talked about equality and diversity, and Mr Cooper recognised the importance of communication and of ensuring that PTHB services reflected the linguistic diversity of its population, beyond English and Welsh.

**Conclusion 1.** Based on his performance and responses to questioning at the pre-appointment hearing, we see no reason why the Welsh Government's preferred candidate, Carl Cooper, should not be appointed to the post of Chair of Powys Teaching Health Board.

**23.** Should Carl Cooper be appointed, we wish him well for the future and look forward to constructively scrutinising him in his role as Chair of PTHB during the course of this Senedd.