

Bundle Local Partnership Forum 6 May 2025

- 1 PRELIMINARY MATTERS
 - 1.1 13:00 - L25/18 Welcome and apologies
Jan Tomlinson, Chair
 - 1.2 13:02 - L25/19 Minutes of previous meeting
Jan Tomlinson, Chair
L25.19.1 Unconfirmed Minutes LPF 5.2.25 V0.1
 - 1.3 13:07 - L25/20 Matters Arising and Action Log
Jan Tomlinson, Chair
L25.20.1 LPF Action Log
- 2 LEAD ITEMS
 - 2.1 13:12 - L25/21 Staff story - The importance of Inclusivity and Ensuring Equity of Opportunity for Under-represented Groups
Katie Sargent, Assistant Director of Communication and Engagement
L25.21.1 LPF Staff Story May 2025 Coversheet
 - 2.2 13:32 - L25/22 Verbal Update on Social Partnership Bill
Jan Tomlinson, Chair
Jason Brannan, Deputy Director of People
 - 2.3 13:47 - L25/23 Verbal Update on Foundations for the Future Programme
Ffion Johnstone, Programme Director for the Foundations for the Future Programme
Georgina Roberts, Associate Director of People Services, West
 - 2.4 14:02 - L25/24 Values and Behaviour Deployment Plan
Jason Brannan, Deputy Director of People
L25.24.1 Values and Behaviours Framework Deployment Plan
- 3 ROUTINE REPORTING
 - 3.1 14:17 - L25/25 Finance Report
Russell Caldicott, Executive Director of Finance
L25.25.1 M11 2024-2025 Finance Report Coversheet
L25.25.2 M11 2024-2025 Finance Report
 - 3.2 14:27 - L25/26 Corporate Planning Update
Dylan Williams, Assistant Director of Health Strategy Planning
L25.26.1 Corporate Planning Update 6.5.25
 - 3.3 14:42 - L25/27 Lead Items from Trade Union Partners / Escalations
Jan Tomlinson, Chair
 - 3.4 14:52 - L25/28 Workforce Report
Jason Brannan, Deputy Director of People
Report to include:
 - *Employee Relations Report*
 - *Workforce Policies Group Report*
 - *Workforce Partnership Group*
 - *Workforce Engagement Update*
 - *Job Evaluation Programme Report*
 - *Equality Update*L25.28.1 Workforce Report
 - 3.6 15:07 - L25/29 Review of Cycle of Business and Terms of Reference
Pam Wenger, Director of Corporate Governance
L25.29.1 DRAFT LPF CoB 2025-26 V0.01.
L25.29.2 Local Partnership Forum ToR V10.2 DRAFT 30.04.25
- 4 ANNUAL REPORTS

- 4.1 15:17 - L25/30 Local Partnership Forum Draft Annual Report
Pam Wenger, Director of Corporate Governance
L25.30.1 DRAFT LPF Annual Report 2024-25 v0.02
- 5 FOR INFORMATION
- 5.1 15:27 - L25/31 Well-Being Objectives
L25.31.1 Well-Being Objectives
- 5.2 L25/32 Minutes of People and Culture Committee Meeting held on 3rd March 2025
L25.32.1 Minutes from P&C Committee 03.03.25 V1.00 Confirmed (Public)
- 5.4 L25/33 Chief Executive's Report to Board
L25.33.1 Chief Executive's Report to Board
- 6 CLOSING BUSINESS
- 6.1 15:37 - L25/34 Agree Items for referral to Committee/Board
Jan Tomlinson, Chair
- 6.2 15:38 - L25/35 Agree items for Chair's Assurance Report (AAA report)
Jan Tomlinson, Chair
- 6.3 15:40 - L25/36 Review of Meeting Effectiveness
Jan Tomlinson, Chair
- 6.4 L25/37 Any other Business
- 6.5 Date of next Meeting
1pm, 5th August 2025



DRAFT Local Partnership Forum

Minutes of the meeting held on 5th February 2025 Virtual via Teams

Present	Role / representing Trade Union
Carol Shillabeer (CS)	Chief Executive / Joint LPF Chair (Chairing)
Cath Jones (CJ)	NMC / Deputy Chair, Staff Side
Tracey Eccles (TE)	Workforce / Speak up Safely Lead Guardian
Dyfed Edwards (DE)	Chair, Health Board (part meeting)
Gareth Evans (GE)	Workforce & OD
Joanna Garrigan (JG)	Finance Director for Commissioning and Strategy (part meeting, deputising for Russell Caldicott)
Michelle Greene (MG)	Integrated Health Community Director (East)
Kay Hannigan (KH)	Associate Director People Services - Central
Ceri Harris (CH)	Head Of Equality and Human Rights
Andrea Hughes (AH)	Nursing Director, IHC East
Jacqui Hughes (JH)	Society of Radiographers
David Maslen-Jones (DMJ)	Assistant. Director of Occupational Health, Safety and Security
Jane Moore (JM)	Executive Director for Public Health
William Nichols (WN)	Independent Member, Royal College of Nursing Steward
Debbie Payne (DP)	British Dietetics Association
Martin Piggott (MP)	Estates, Unite
Eleri Roberts (ER)	Deputising for Ffion Johnstone, IHC Director, West
Georgina Roberts (GR)	Associate Director for Workforce – West (deputising for Jason Brannan)
Stacey Roberts (SR)	Unison Branch Officer
Katie Sargent (KS)	Assistant Director of Communications and Engagement (part meeting)
Helen Stevens-Jones (HS-J)	Director Of Partnerships, Communications and Engagement
Paolo Tardivel (PT)	Director of Transformation and Improvement (part meeting)
Rebecca Testa (RT)	Head of Organisational Development
Kath White (KW)	Pharmacy / Learning RCN Representative - Observing
Stuart Whittaker (SW)	Unite (part meeting)
Susan Williams (SW)	CAMHS / RCN Representative
Iain Wilkie (IW)	Director of Mental Health & Learning Disabilities (part meeting)
Angela Wood (AW)	Executive Director of Nursing & Midwifery (part meeting)
Toni Wood (TW)	Midwife, Royal College of Midwives
Fiona Lewis (FL)	Corporate Business Officer, Minute taker

PRELIMINARY MATTERS	Action by
Welcome and apologies	
The Chair warmly welcomed everyone to the meeting, noting the following apologies:.	

<p>Jan Tomlinson Jason Brannan (Georgina Roberts to deputise) Pam Wenger Ian Donnelly Russell Caldicott (Joanna Garrigan to deputise) Helen Roberts Alison Kemp Alison Tardivel Amanda Chesworth David Barber Gareth Evans Geoffrey Armstrong Julia Clayton Vivienne Nelson Denise Roberts</p>	
<p>L25/01 Declarations of Interest</p> <p>There were none.</p>	
<p>L25/02 Minutes of the previous meeting, held 10.09.24.</p> <p>The minutes were approved as an accurate record of the meeting.</p>	
<p>L25/03 Matters Arising and Action Log</p> <p>All actions to close agreed and updates were added to the Summary action Plan</p> <p>Actions:</p> <ul style="list-style-type: none"> • Item L24/15.2 Item deferred on February agenda. CS to speak to Pam Wenger to discuss whether this could be left to next meeting (May) or requires attention sooner. • Item L24/24.3 Clarification to be sought from NWSSP as to the appropriate mileage reimbursement figure. Government figure is 45p/mile, however in draft Expenses Policy no figure is noted, but it redirects to the Agenda for Change, where it quotes is 59p/mile. Georgina Roberts and Kay Hannigan agreed to investigate and find when current 'draft' Expenses Policy due to be finalised. • Item L24/24.3 Georgina Roberts and Martin Piggott to talk outside of meeting regarding the difficulties he is encountering accessing Expenses information, for GR to investigate and respond. 	<p>CS</p> <p>GR / KH</p> <p>GR</p>
<p>LEAD ITEMS</p>	
<p>L25/04 A Staff Story – The Impact of Inconsistent Application of Workforce Policies on Staff.</p> <p>The story was presented by Katie Sargent, Assistant Director of Communications and Engagement. The author wished to remain anonymous, however their experience linked to themes and practices that others have highlighted.</p>	

The story was from a member of staff relocating from the South of England, and it provided an insight into the impact of a situation caused by communications and processes of contract negotiations, extensions, revocations and their journey to securing a permanent contract.

The job insecurity caused by the situation, left the member of staff concerned about being able to pay rent and bills and possibly having to relocate if the contract ended suddenly. The lack of clarity and transparency of process from higher levels left the Member of staff feeling exhausted when the impact of the decisions were so significant to their livelihood and wellbeing; this left them feeling unvalued.

The report reflected that recent Workforce improvements, including the newly launched People Manager's Forums would support managers with similar issues and the Organisation Development Team extended their gratitude and appreciation to the staff member for sharing their experience.

Members were assured that fixed-Term Contracts are no longer entered into unless for maternity or long term sickness cover or a fixed-term project; Workforce were looking at all fixed-term contracts to ensure they were appropriate and where identified as not, moving staff to permanent positions. Payroll were noted as now asking more specific questions to identify and assist, should emergency payments be requested.

In discussing the story, Members were thankful for bringing this story to their attention and felt that good people might be lost unless improvements were made to the system and suggested that this story should be shared more widely and KS confirmed that the story had been shared with People & Culture Committee, for them to discuss at their next meeting. It was agreed that the Health Board needed to be able to respond and provide more flexible ways of working, whilst still affording security to staff.

The Group **noted** the themes raised in this story and considered what action might be taken to prevent similar experiences occurring.

L25/05 Items from Trade Union Partners / Escalations

'Corridor care/ Escalation of these incidences and is the Health Board Auditing these incidences'.

The response was provided by Angela Wood, Executive Director of Nursing and Midwifery, who highlighted the following:

- acknowledgement that the recent RCN report into these occurrences was very stark reading and that following this report, all Executive Directors of Nursing met with Helen Whiley, Director of RCN Wales and Sue Tranka, Chief Nursing Officer, to discuss the situation and identify what needed to be done to take things forward.

- AW recognized that the consistent capture of data nationally was proving difficult, with differing systems throughout Wales and that internally, work was taking place to get an electronic solution to the problems around the failings of Datix, so that data was adequately and consistently recorded.
- Staffing levels in Emergency Departments (EDs) had been increased to ensure an oversight of patients in corridors and waiting rooms; thus enabling dynamic, hour-by-hour assessments to take place.
- Following discussions with Sue Tranka, AW and her team had identified opportunities for the overnight situations, when ED had overflowing waiting rooms and corridors, examining the risk of moving patients onto an appropriately staffed wards as opposed to patients being cared for in corridors, thus sharing the load across the hospital.

On discussing the response, Members were advised that:

- waiting rooms and triages are monitored very closely and where required, extra staff made available to ensure that 15 minutes triaging takes place, thus enabling an understanding of risks within the department.
- Healthcare Inspectorate Wales had acknowledged the new systems in place in Ysbyty Glan Clwyd, where regular monitoring of patients in the waiting room takes place, and were working well.
- AW's team were looking at what could be done to encourage staff to use the Datix system, to make the process simpler.
- since August 2022, there has been a significant reduction in staff vacancy rates from 14% to 5.9%; greatly improved sickness and staff retention rates and a much-reduced ratio of agency to BCU staff on the wards.
- with staffing issues addressed, the flow and system perspectives were being addressed
- preliminary discussions had taken place about making more community care available to reduce pressures.

The Executive Director of Nursing and Midwifery's verbal response was **noted**.

[Angela Wood left the meeting]

L25/06 Annual Planning Cycle – Workshop

Paolo Tardivel, Director of Transformation and Improvement, provided an update to The BCU Three Year Plan, highlighting the following:

- progress of the plan and emerging themes
- Cabinet Secretary's Health and Social Care priorities
- areas for collaboration within the plan
- Health Board priorities and strategic objectives

Discussions took place regarding the following themes:

<ul style="list-style-type: none"> • Progress with technological improvements, such as Artificial Intelligence (AI) and the implementation of Electronic Healthcare Records (EHRs). It was noted that AI was already being used in certain areas, in particular diagnostic and administrative areas. It was acknowledged that Wales was behind England in the implementation of EHRs, however it was also noted that particular focus was being made to speed up the implementation of Mental Health ESRs, following receipt of funding from Welsh Government. • The possible refresh of the All-Wales App – ‘My A&E Live’, which provides the public with real-time information concerning waiting times in local Minor Injuries Units and Emergency Departments (EDs). PT to investigate how to publicise the App. • The need for honest discussions with not only the North Wales public but nationally, concerning managing expectations, self-help and prevention as well as what people believe are the priorities. It was noted that the Organisation’s ongoing engagement with the public, through community events including hosting the Annual General Meeting within the community, discussions with carers and families, the Well North Wales initiative, all of which helped to assure the public and shape how the Organisation builds health and care around communities • The need to focus on building community capacity, to avoid some preventable admissions to EDs. • Members were reassured that the Workforce team had worked alongside the Transformation team, supporting the Impact Assessment for the Operations Plan submissions for each of the sub-objectives, this had helped identify areas that required strengthening in the final draft. <p>Action:</p> <ul style="list-style-type: none"> • L25/06.1 PT to discuss with Digital team how to encourage use of the My A&E App. <p><i>[Paolo Tardivel left the meeting]</i></p>	PT
5 MINUTE COMFORT BREAK	
<p>L25/07 Foundations for the Future</p> <p>Carol Shillabeer, Chief Executive, provided a verbal update, noting that the Discovery stage of the programme was complete; concluding in the publication of the Discovery Report in November 2024. This report included a great deal of valuable feedback and assessment of the key themes included in Special Measures, independent reviews and reviews from national bodies, in terms of their interactions with the Health Board.</p> <p>The team was actively into the Design phase, with sessions having already taken place, and the Chair wished to thank staff for their positive contributions to the process, which helped to shape the design of the Foundations for the Future (formerly known as the Operating Model) going forward. It was anticipated that parts of this would be tested mid-March, following which feedback would be digested, with the anticipation that the Design stage would be completed by the end of May.</p> <p>Georgina Roberts provided colleagues with the link to the Discovery Report, which included a questionnaire covering questions asked in the Design workshops.</p>	

<p>Colleagues were encouraged to ask teammates to complete the questionnaire and to provide anonymous contributions, if they so wished.</p> <p>https://nhs.wales365.sharepoint.com/sites/BCU_OBS/SitePages/Foundations-for-the-Future-%E2%80%93-your-opportunity-to-shape-how-we-work.aspx.</p> <p>Members were assured that when the Organisation gets to the stage where organisational change is required, it will look to do this in partnership with the trade unions.</p> <p>Following the update, it was suggested that the current approach was being pitched at too high a level for most members of staff and might discourage some staff from contributing. CS and GR to reflect on how this might be addressed as they acknowledged that the main drivers were to ensure that the Organisation arranged itself in the best way possible to deliver the best services for patients and to ensure that staff have the best possible conditions to deliver that service.</p> <p>Action:</p> <p>L25/07.1 CS and GR to reflect on how to pitch the approach, with simpler language to aid engagement with the majority of staff members.</p> <p>The Foundations for the Future Verbal Update was received.</p>	<p>CS/GR</p>
<p>L25/08 Review Cycle of Business and Terms of Reference</p> <p>Item Deferred.</p>	
<p>L25/09 CEO Briefing – Organisation Progress and Special Measures Verbal Update</p> <p>Carol Shillabeer, Chief Executive, provided a verbal update and promised to circulate her Board Reports, which include more detail concerning alignment to Board’s five strategic objectives. She highlighted the following:</p> <ul style="list-style-type: none"> • The establishment of an Executive Committee of the Board, which helps to demonstrate a higher level of openness and transparency, will publish a bi-monthly report into Executive Committee’s activities. • The structured Assessment Review, recently carried out by Audit Wales, looked at the Organisation’s governance, planning and finance and indicated important progress was being made, particularly in the fields of Corporate Governance and Finance. • The huge strides in terms of responding to complaints, which had resulted in the Health Board going from worst to best-performing in Wales. 50% of complaints refer to access to care, hence the focus on long waiting times and urgent emergency care. • The work involved in developing the Citizen’s Experience Report, a new Board report which demonstrated how the Citizens’ experiences were put at the heart of the work carried out by the Board. The report displayed how feedback was translated into action. 	<p>CS</p>

- Welsh Government awarded the Health Board the funding to facilitate Mental Health Electronic Healthcare Records, which demonstrated the support received from Government to Mental Health Services.
- It was noted that
 - Jane Moore had been formally appointed as the Executive Director for Public Health,
 - Russell Caldicott had been appointed Executive Director of Finance
 - Chris Stockport, Executive Director of Strategy and Transformation, would be leaving the Health Board at the end of February, to take up a Chief Medical Officer role in the Isle of Man
 - Stuart Keen had commenced in his role as Director of Environment and Estates
- CS and the Board wished to thank colleagues for the resilience shown in dealing with the effects of recent storms and severe water shortages

Members received assurance from CS that questions had been asked concerning the recent discovery of Reinforced Autoclaved Aerated Concrete (RAAC) in Wrexham Maelor Hospital (WMH), following on from what had been described as a comprehensive review of all building control plans, carried out in December 2023, to identify the use of RAAC in all of the building plans. The Health Board had been advised in 2023 that the only building where RAAC had been discovered was Bryn-y-Neudd, however following further visual inspections being deployed by a different company, this had uncovered the situation at WMH, which despite not being of a concrete construction, did have a small element of concrete within it. CS agreed to share the formal advice she had received.

Action:

L25/09.1 CS to share the Board's CEO reports.

L25/09.2 CS to share the formal advice the Organisation had received following the discovery of RAAC in Wrexham.

The verbal briefing on Organisation Progress and Special Measures was **noted**.

ROUTINE REPORTING

L25/10 The Workforce and Organisational Directorate Overview Report

Georgina Roberts, Associate Director of People Services (West), presented the report and highlighted the following:

- Attendance Management – instances of absence continued to rise, due mainly to an increase in respiratory illnesses, as reflected by the public
- A reduction in uptake of immunisations. Members were asked for suggestions as to how to promote the uptake. It was suggested that the Strategic Health and Wellbeing Group, which had existed pre-Covid, where TU partners and managers met to promote health and wellbeing, might be reformed. GR agreed to investigate.
- GR noted the progress in the reduction of disciplinary cases – from 60 cases in January 2024 to 22 cases by the end of December 2024.

<ul style="list-style-type: none"> GR thanked colleagues for their continued support in the process of updating and maintaining Workforce Policies. Following discussions between the LPF joint Chairs, concern had been raised about the Job Evaluation processes within the Organisation, which had resulted in CS requesting Internal Audit carry out an audit of the practice. CS and GR to discuss outside the meeting the results of the audit and look at mechanisms to encourage managers to allow job matching training, when TU representative request release from duties to carry this out. <p>Actions:</p> <ul style="list-style-type: none"> L25/10.1 GR to investigate reinstating the Strategic Health and Wellbeing Group L25/02.2 CS, GR and Jan Tomlinson to discuss outside the meeting the findings of the internal audit into Job Evaluations. <p>The Workforce and Organisational Directorate Overview Report was noted.</p>	<p>GR CS/GR JT</p>
<p>L25/11 Finance Report M9</p> <p>Joanna Garrigan, Finance Director for Commissioning and Strategy, presented the M9 Finance report, noting the key headlines:</p> <ul style="list-style-type: none"> The Year-to-date financial position exceeded the level of planned deficit for close of the financial year, by £8.3m. This will need to be recovered over the remainder of the financial year, by minimising expenditure and keeping control of emerging pressures to recover the overspend against plan. Proposals put forward by services were not forecasted to deliver the required savings, which resulted in the enforcement of further control mechanisms such as stopping any non-patient facing agency posts and the control of non-clinical supplies. All departments of the Health Board have been set spend reduction targets for between Month 9 and the end of the financial year. <p>Following presentation of the report, discussion ensued regarding concerns regarding the impact of the reduction of administration staff in patient booking services, which would have a direct impact on patient care and services. Assurance was provided regarding the mechanisms put in place to examine exceptional cases, to ensure this did not happen.</p> <p>Assurance was provided by the Chairman of the Board, Dyfed Edwards, that the Health Board recognised the impact of cancelling agency staff, and that the Board was appreciative of staff efforts in this regard. It was noted that the whole of Wales was undergoing a crisis in public funding pressures and that Welsh Government required the Health Board to provide balanced budgets and that with concerted effort, this targets were attainable.</p> <p>The Finance Report was noted.</p>	
<p>FOR INFORMATION</p>	

<p>L25/12 Chief Executive's Update Report..</p> <p>Carol Shillabeer, Chief Executive,</p> <p>The Chief Executive's report was noted.</p>	
<p>L25/13 Minutes of the People and Culture Committee Meeting held 10.10.24</p> <p>The Minutes of the People and Culture Committee Meeting held on 10.10.24 were noted.</p>	
<p>CLOSING BUSINESS</p>	
<p>L25/14 Review of Meeting's Effectiveness</p> <p>.</p>	
<p>L25/15 Date of next meeting</p> <p><i>1.00pm, Tuesday, 6th May 2025</i></p> <p><u>Future meetings:</u> <i>5th August 2025</i> <i>4th November 2025</i> <i>3rd February 2026</i></p>	

[Meeting closed at 16.45]

Local Partnership Forum Action Log

Action No.	Minute Ref.	Date	Agreed Action	Lead	Timescale	Status
1	L25/10.2	05.02.25	L25/10 The Workforce and Organisational Directorate Overview Report CS, GR and Jan Tomlinson to discuss outside the meeting the findings of the internal audit into Job Evaluations.	Carol Shillabeer / Georgina Roberts / Jan Tomlinson	May 2025	29.4.25 Advised meeting has taken place, with Nick Graham leading. Unsure of outcome.
2	L25/10.1	05.02.25	L25/10 The Workforce and Organisational Directorate Overview Report GR to investigate reinstating the Strategic Health and Wellbeing Group	Georgina Roberts	May 2025	Suggest Action Closed 29.04.29 – the Strategic Health & Wellbeing Group has been reinstated with the inaugural meeting scheduled for 9 th May 2025.
3	L25/09.2	05.02.25	L25/09 CEO Briefing – Organisation Progress and Special Measures Verbal Update CS to share the formal advice the Organisation had received following the discovery of RAAC in Wrexham.	Carol Shillabeer	May 2025	
4	L25/09.1	05.02.25	L25/09 CEO Briefing – Organisation Progress and Special Measures Verbal	Carol Shillabeer	May 2025	



			Update CS to share the Board's CEO reports			
5	L25/07.1	05.02.25	L25/07 Foundations for the Future CS and GR to reflect on how to pitch the approach, with simpler language to aid engagement with the majority of staff members	Carol Shillabeer / Georgina Roberts	May 2025	29.4.25 Ongoing and will give a verbal update at the meeting.
6	L24/15.2	10.09.24	L24/15 Minutes of Previous Meeting. CS to talk with JT regarding the Forum's effectiveness, its Terms of Reference and Cycle of Business	Carol Shillabeer / Jan Tomlinson	05.02.25 Revised timescale May 2025	Suggest close. 31.10.24 The Terms of Reference and Cycle of Business will be reviewed and brought back to the February meeting. PW will liaise with JT as part of the review process. 06.1.25 Pam Wenger reviewed ToR and COB. Added to February's agenda 21.1.25 Pam Wenger unable to attend February meeting, item moved to May on Forward Workplan.
7	L24/25	10.09.24	L24/25.2 Workforce Report To discuss ways of encouraging more management support for the Workforce Partnership Group	Georgina Roberts / Carol Shillabeer	6.11.24	31.10.24 Carol to include in her next video to the organisation
8	L24/24	10.09.24	L24/24.3 Issues for Discussion, raised by Trade Union Partners To ensure that the Expenses Policy is made easier to find on	Georgina Roberts / Kay Hannigan	6.11.24	Suggest close 31.10.24 GR raised with Aaron Haley, Comms, who was looking at the issue (complicated by policy being hosted via NWSSP) 5.2.25 Clarification to be sought from NWSSP



			intranet – put in Workforce Policy section?			as to the appropriate mileage reimbursement figure. Government figure is 45p/mile, however in draft Expenses Policy no figure is noted, but it redirects to the Agenda for Change, where it quotes is 59p/mile. Georgina Roberts and Kay Hannigan agreed to investigate and find when current 'draft' Expenses Policy due to be finalised. GR to talk with Martin Piggott outside of meeting regarding difficulties encountered accessing expenses information. Complete.
9	L24/22	10.09.24	L24/22.3 Update on Operating Model Review Trade Union Members were asked to discuss what they felt might be the best way to engage staff in the upcoming Design phase of the OM.	Jan Tomlinson / Billy Nichols	6.11.24	
10	L24/28	10.09.24	L24/28.1 Agree items for Referral to Board / Other Committees CS discuss the ToR and CoB with Pam Wenger, to ensure that future agendas could include fewer items, with more detail, which would enable more in-depth discussions; also to look at suitability of Closing Business items – Review Risks highlighted in meeting, for referral to Risk Mngt Group	Carol Shillabeer / Pam Wenger	6.11.24	Suggest close 6.2.24 Added to CoB



11	L24/20	10.09.24	L24/20.4 Corporate Planning Update Regarding the need for TU involvement in planning, CS to speak to JT and WN to discuss and help shape the Organisation's priorities	Carol Shillabeer	May 2025	Suggest close Conversations to be had as part of the annual planning cycle
12	L24/16	10.09.24	L24/16.1 Summary Action Plan Update. Look at action log with JT & WN to close some of the older actions and if required, put them onto the Forward Plan.	Georgina Roberts / Jan Tomlinson / Billy Nichols	6.11.24	31.10.25 - To be discussed at the TU and HR catch – up meeting on 1 st November 2024.
1	L24/16	10.09.24	L24/16.3 To share the WG Accountability Review Report once published.	Carol Shillabeer	6.11.24	Suggest close Ministerial Advisory Group: NHS Wales accountability review GOV.WALES
3	L24/24	10.09.24	L24/24.1 Issues for Discussion, raised by Trade Union Partners To speak with Martin Piggott (Unite) to look at the case of the HCSW who was advised that there was only overtime available, if this was arranged through Bank.	Georgina Roberts / Martin Piggott	6.11.24	Suggest close 31.10.24 GR discussed with RC and a response was provided to Martin.
4	L24/24	10.09.24	L24/24.2 Issues for Discussion, raised by Trade Union Partners To understand why mileage claims are paid at 35p/mile rather than the 45p/mile, as	Georgina Roberts / Russell Caldicott	6.11.24	Suggest close 31.10.24 GR discussed with RC and an explanation has been forwarded to Martin.



			recognised by HMRC.			
5	L24/16	10.09.24	L24/16.2 To share latest Chief Executive's Report and with JT's agreement ensure that this item is added to Forward Plan, to be provided at each meeting for information and assurance.	Carol Shillabeer / Fiona Lewis	20.09.24	Suggest close. Suggest we share the CEO at every meeting. Added to COB.



Teitl adroddiad: <i>Report title:</i>	Staff Story - The importance of inclusivity and ensuring equity of opportunity for under-represented groups			
Adrodd i: <i>Report to:</i>	Local Partnership Forum			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Tuesday, 06 May 2025			
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>This is the second staff story to be presented to the Forum.</p> <p>This follows consensus on the proposed approach to gathering, sharing, and (where appropriate) acting on staff stories shared at the People and Culture Committee and Local Partnership Forum meetings, plus the presentation of this story to the People and Culture Committee's March 2025 meeting.</p>			
Argymhellion: <i>Recommendations:</i>	The Forum is asked to note the themes raised in this story and consider what action might be taken to prevent similar experiences occurring.			
Arweinydd Gweithredol: <i>Executive Lead:</i>	Jason Brannan, Deputy Director of People Services			
Awdur yr Adroddiad: <i>Report Author:</i>	Katie Sargent, Associate Director, Communications & Engagement			
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input checked="" type="checkbox"/> Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	Derbyniol <i>Acceptable</i> <input type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i>
Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn: <i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i>				
Cyswllt ag Amcan/Amcanion Strategol: <i>Link to Strategic Objective(s):</i>				
Goblygiadau rheoleiddio a lleol: <i>Regulatory and legal implications:</i>	N/A			

<p>Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP7 has an EqIA been identified as necessary and undertaken?</i></p>	<p>No.</p> <p>This approach is in addition to a number of initiatives and workstreams to improve mechanisms for listening to staff and will be undertaken with support from Equality and Diversity colleagues and networks representing staff.</p>
<p>Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i></p>	<p>N/A</p>
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR)</p> <p><i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i></p>	<p>N/A</p>
<p>Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Financial implications as a result of implementing the recommendations</i></p>	<p>There is no additional financial cost attached to this proposal.</p>
<p>Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	<p>N/A</p>
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	<p>This story was presented to the People and Culture Committee's March 2025 meeting.</p>
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p><i>Links to BAF risks: (or links to the Corporate Risk Register)</i></p>	<p>N/A</p>
<p>Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol)</p> <p><i>Reason for submission of report to confidential board (where relevant)</i></p>	<p>N/A</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p>Next Steps: Preparing the next Staff Story, aligned to the Group's business wherever possible.</p> <p>Rhestr o Atodiadau: Dim</p> <p>List of Appendices: None</p>	



Trugaredd
Compassion



Agored
Openness



Parch
Respect

Our Values and Behaviours Framework Deployment Plan

Local Partnership Forum 6th May 2025



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Background

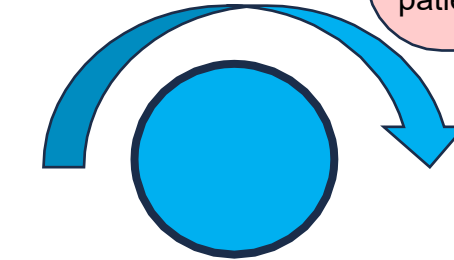
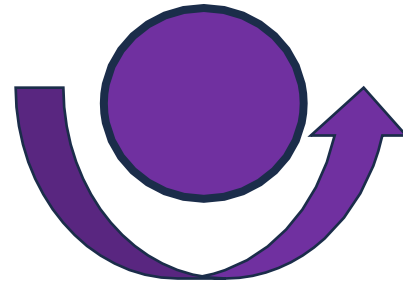
September 2023 Board approved the paper titled **Organisational Development: Culture, Leadership and Engagement.**

Co-design and collaboration with staff and external partners and following a robust evidence-based model to improve culture, leadership and engagement for long term sustainability where staff can have improved experiences at work and patients can expect great care every time.

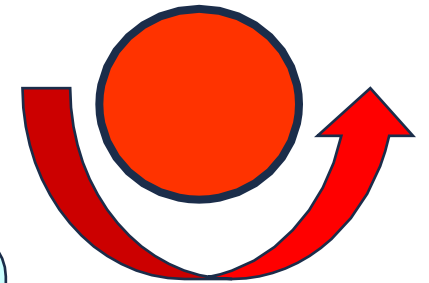
Our values are the guiding principles that together define who we are, what we do and what's most important to us. Our behaviours put our values into practice, turning them into everyday actions. They make clear how we do things as individuals, teams and the organisation and set the expectations for how staff conduct themselves and interact with colleagues, patients and partners.



Significant **shift in approach** – Board level leadership, sponsorship and support



First step along the journey was to **examine our current culture and revisit the values** of the organisation along with the development of a behaviour framework.



The NHS Culture and Leadership Programme

To help NHS organisations develop cultures that enable and sustain continuously improving, safe, high quality, compassionate and inclusive care, Professor Michael West along with NHS England and NHS Improvement developed practical resources with The King's Fund and the Centre for Creative Leadership.

The NHS Culture and Leadership programme is based on the elements and behaviours identified as necessary for high quality, equitable care cultures. They rest on the principle of 'compassionate, diverse and inclusive leadership', which empowers staff at all levels, as individuals and in teams, to take action to improve care.



Vision and Values



Goals and Performance



Learning and Innovation



Support and Compassion



Equity and Inclusion



Team Work



Board approved the final iteration of our values and behaviour framework in November 2024

Organisational Values	Organisational Behaviours	Behaviours for All	Behaviours for People Managers
Compassion	<ul style="list-style-type: none"> We take care of each other We will provide a good place to work, learn and succeed 	<ul style="list-style-type: none"> I am patient and considerate of others I take time, even if busy, to understand other people's feelings. I listen to understand the needs of others I take care of my own wellbeing and encourage others to do so I am civil and polite 	<ul style="list-style-type: none"> I care for my team and colleagues' wellbeing, showing understanding and compassion. I proactively listen to suggestions and ideas from my team I encourage my team to raise concerns I strive to understand and support my whole teams needs
Openness	<ul style="list-style-type: none"> We are honest We are accountable We empower each other We are innovative in delivering safe, quality and reliable care 	<ul style="list-style-type: none"> I am aware of my impact on others and act on feedback I am truthful and honest I strive to live the values and behaviours of the organisation every day I share ideas and knowledge for everyone's benefit I am open to being held to account for my performance and behaviour I ask for feedback to improve my work I suggest improvements to the way we do things in a constructive way I seek to learn from any mistakes and make changes 	<ul style="list-style-type: none"> I communicate openly, respectfully, and professionally. I am visible, approachable, and available to my team, colleagues, and service users. I will hold myself and others to account for performance and behaviours I act on feedback to develop my leadership skills and abilities I support my team when mistakes are made and collectively learn as a team
Respect	<ul style="list-style-type: none"> Everyone counts We work together and appreciate individual differences We say thank you and well done 	<ul style="list-style-type: none"> I recognise that people's needs are different and respect these differences I take into account and respect diverse views for better outcomes I challenge inappropriate behaviours I am approachable and welcoming to everyone, whoever they are. I take responsibility for my own learning and development 	<ul style="list-style-type: none"> I value my team collectively and as individuals I lead by example by demonstrating integrity I develop and support others so that they can bring their best selves to work and realise their potential I ensure everyone's voice is heard and is considered in any change and/or improvement



Our values and behaviour framework

Our staff, our patients, our partners



Compassion



Openness



Respect



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Our final design for our new values and behaviour framework



Compassion



Openness



Respect

Introduction

Our values and behaviours shape the way we work, how we interact with each other, our patients/ service users and our partners.

Values are beliefs or principles that are important and meaningful to us - they are what drives us.

Behaviours are what we observe, our actions that bring these values to life. Our behaviours demonstrate our values through what we say and how we say it, how we do things and how we treat others and expect to be treated ourselves.



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Our values and behaviours define how we approach our work and how we treat each other. This framework applies to all staff within BCUHB, our patients, service users, visitors and partners. Through demonstrating these behaviours, we can shape our culture to help us achieve our vision and objectives. This in turn will positively impact our patient, service user and partner experience and outcomes, staff wellbeing and continuous improvement.

Where did our values and behaviours come from?

From June 2024 to November 2024 we had extensive engagement across the organisation to refresh our existing values and develop behaviours. Staff shared stories about what a good day at work looked like which shaped the first draft of our values. Further engagement and conversations across the organisation led to the creation of our new values of Compassion, Openness and Respect. Each value is as important as the other.

How is the framework structured?

Each of our three values have key organisational behaviours linked to them that outline how we live each value.

The framework describes the behaviours that you will see, feel and hear within the organisation in every day interactions with each other, our patients, service users, visitors and our partners. When these behaviours are present, we are fostering a compassionate,

inclusive, respectful and healthy workplace. The Behaviours for All are actions, attitudes and ways of

working that we see when we are working at our best. They are relevant to all colleagues. The Behaviours for People Managers are for leaders and people managers to role model and create conditions for others to thrive. However, any colleague can develop and demonstrate these behaviours and be a positive influence.

The purpose of the framework is to clarify and describe the culture we want to see in BCUHB through the actions we take every day.

Please use the framework to help guide:

- Developments to your team practices, policies and processes.
- Your personal and professional development.
- How you perform in different situations.
- How you recruit, select and manage others.
- Your conversations and leadership approaches.
- How you help others to grow and succeed.

Our final design for our new values and behaviour framework



Our behaviours:

- We take care of each other.
- We will provide a good place to work, learn and succeed.

Compassion

What this looks like in practice:

Behaviours for all

- ✓ I am patient and considerate of others.
- ✓ I take time, even if busy, to understand other people's feelings.
- ✓ I listen to understand the needs of others.
- ✓ I take care of my own wellbeing and encourage others to do so.
- ✓ I am civil and polite.

Behaviours for people managers

- ✓ I care for my team and colleague's wellbeing, showing understanding and compassion.
- ✓ I proactively listen to suggestions and ideas from my team.
- ✓ I encourage my team to raise concerns.
- ✓ I strive to understand and support my whole teams needs.



Our behaviours:

- We are honest.
- We are accountable.
- We empower each other.
- We are innovative in delivering safe, quality and reliable care.

Openness

What this looks like in practice:

Behaviours for all

- ✓ I am aware of my impact on others and act on feedback.
- ✓ I am truthful and honest.
- ✓ I strive to live the values and behaviours of the organisation every day.
- ✓ I share ideas and knowledge for everyone's benefit.
- ✓ I am open to being held to account for my performance and behaviour.
- ✓ I ask for feedback to improve my work.
- ✓ I suggest improvements to the way we do things in a constructive way.
- ✓ I seek to learn from any mistakes and make changes.

Behaviours for people managers

- ✓ I communicate openly, respectfully, and professionally.
- ✓ I am visible, approachable, and available to my team, colleagues and service users.
- ✓ I will hold myself and others to account for performance and behaviours.
- ✓ I act on feedback to develop my leadership skills and abilities.
- ✓ I support my team when mistakes are made and collectively learn as a team.



Our behaviours:

- Everyone counts.
- We work together and appreciate individual differences.
- We say thank you and well done.

Respect

What this looks like in practice:

Behaviours for all

- ✓ I recognise that people's needs are different and respect these differences.
- ✓ I take into account and respect diverse views for better outcomes.
- ✓ I challenge inappropriate behaviours.
- ✓ I am approachable and welcoming to everyone, whoever they are.
- ✓ I take responsibility for my own learning and development.

Behaviours for people managers

- ✓ I value my team collectively and as individuals.
- ✓ I lead by example by demonstrating integrity.
- ✓ I develop and support others so that they can bring their best selves to work and realise their potential.
- ✓ I ensure everyone's voice is heard and is considered in any change and/or improvement.

Ein fframwaith gwerthoedd ac ymddygiad

Ein staff, ein cleifion, ein partneriaid



Trugaredd



Agored



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Our final design for our new values and behaviour framework - Cymraeg



Trugaredd

Ein Hymddygiadau:

- Rydym yn gofalu am ein gilydd.
- Rydym yn darparu lle da i weithio, dysgu a llwyddo.

Sut olwg sydd ar hyn yn ymarferol:

Ymddygiadau i Bawb

- ✓ Rwy'n amyneddgar ac yn ystyriol o eraill.
- ✓ Rwy'n cymryd amser, hyd yn oed os ydw i'n brysur i ddeall teimladau pobl eraill.
- ✓ Rwy'n gwrandao i ddeall anghenion pobl eraill.
- ✓ Rwy'n gofalu am fy lles fy hun ac yn annog eraill i wneud hynny.
- ✓ Rwy'n sifil and yn gwrtais.

Ymddygiadau i Reolwyr Pobl

- ✓ Rwy'n gofalu am les fy nhim a chydweithwyr, gan ddangos dealltwriaeth a thrugaredd.
- ✓ Rwy'n gwrandao'n rhagweithiol ar awgrymiadau a syniadau gan fy nhim.
- ✓ Rwy'n annog fy nhim i godi pryderon.
- ✓ Rwy'n ymdrechu i ddeall a chefnogi anghenion fy nhim cyfan.



Agored

Ein Hymddygiadau:

- Rydym yn onest.
- Rydym yn atebol.
- Rydyn ni'n rhoi grym i'n gilydd.
- Rydym yn arloesol wrth ddarparu gofal diogel, o ansawdd a dibynadwy

Sut olwg sydd ar hyn yn ymarferol:

Ymddygiadau i Bawb

- ✓ Rwy'n ymwybodol o'm heffaith ar eraill ac yn gweithredu ar adborth.
- ✓ Yr wyf yn onest.
- ✓ Rwy'n ymdrechu i fyw gwerthoedd ac ymddygiadau y sefydliad bob dydd.
- ✓ Rwy'n rhannu syniadau a gwybodaeth er budd pawb.
- ✓ Rwy'n agored i gael fy nal i gyfrif am fy mherfformiad a'm hymddygiad.
- ✓ Gofynnaf am adborth i wella fy ngwaith.
- ✓ Awgrymaf welliannau i'r ffordd yr ydym yn gwneud pethau mewn ffordd adeiladol.
- ✓ Rwy'n ceisio dysgu o unrhyw gamgymeriadau a gwneud newidiadau

Ymddygiadau i Reolwyr Pobl

- ✓ Rwy'n cyfathrebu'n agored, yn barchus ac yn broffesiynol.
- ✓ Rwy'n weladwy, yn hawdd mynd ataf ac ar gael i'm tîm, cydweithwyr a defnyddwyr gwasanaeth.
- ✓ Byddaf yn galw fy hun ac eraill i gyfrif am berfformiad ac ymddygiad.
- ✓ Rwy'n gweithredu ar adborth i ddatblygu fy sgiliau a'm galluoedd arwain.
- ✓ Rwy'n cefnogi fy nhim pan fydd camgymeriadau'n cael eu gwneud ac yn dysgu fel tîm ar y cyd.



Parch

Ein Hymddygiadau:

- Mae pawb yn cyfrif.
- Rydym yn gweithio gyda'n gilydd ac yn gwerthfawrogi gwahaniaethau unigol.
- Rydym yn dweud diolch a da iawn.

Sut olwg sydd ar hyn yn ymarferol:

Ymddygiadau i Bawb

- ✓ Rwy'n cydnabod bod anghenion pobl yn wahanol ac yn parchu'r gwahaniaeth hwn.
- ✓ Rwy'n ystyried ac yn parchu safbwyntiau amrywiol ar gyfer canlyniadau gwell.
- ✓ Rwy'n herio ymddygiadau amhriodol
- ✓ Rwy'n groesawgar i bawb pwy bynnag ydyn nhw
- ✓ Rwy'n cymryd cyfrifoldeb am fy nysgu a'm datblygiad fy hun.

Ymddygiadau i Reolwyr Pobl

- ✓ Rwy'n gwerthfawrogi fy nhim fel un ac pawb fel unigolion
- ✓ Rwy'n arwain trwy esiampl drwy ddangos uniondeb
- ✓ Rwy'n datblygu ac yn cefnogi eraill fel y gallant ddod â'u gorau i'w gwaith a gwireddu eu potensial.
- ✓ Rwy'n sicrhau bod llais pawb yn cael ei glywed ac yn cael ei ystyried mewn unrhyw newid a/ neu welliant.

High level Deployment plan – socialisation elements

Launch events

- Formal Board launch
- Roadshows
- Executive videos
- Targeting specific groups to cascade e.g. Design groups, Champions, Culture Change Leaders, L&M course participants, PM Forum
- Payslips, ESR banner

Board & Senior Leadership

- Visible modelling
- Ongoing executive videos to constantly reinforce
- Storytelling – acknowledging and sharing best practice
- Agenda item on all local P&CC's

Visible reinforcements

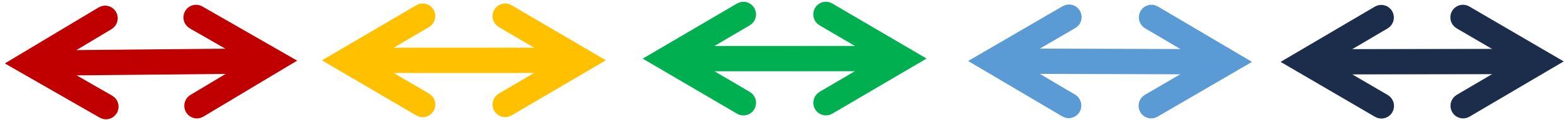
- Visually engaging representation of values; icons; photos; images; signage
- Physically visible around the organisation

Staff Recognition

- Visible modelling
- Seren Betsi
- Staff Achievement Awards
- Videos – storytelling
- Culture Change Leaders

Consistent communication

- Corporate templates
- Teams, PP, email sig, desktop visuals
- Board level templates
- External facing communication
- Intranet presence on a consistent basis



High level Deployment plan – embedding elements



Recruitment

- Strategic recruitment
- NWSSP recruitment processes
- Values-based recruitment
- Orientation
- Local Induction



Staff Development

- PADR/ Contribution Conversations
- Conversations with Care
- Compassionate Leadership Modules (HEIW)
- Integrated Leadership Development Framework
- Talent/succession management process
- Values selfie, 360 feedback, cultural health assessment
- Coaching
- All training delivered by internal colleagues and external partners



Staff Engagement

- Staff Achievement Awards
- Seren Betsi
- Great-ix
- Team-based development
- Internal communications



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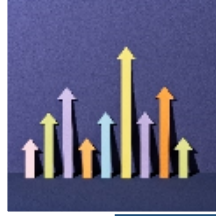
Parch
Respect

High level Deployment plan – embedding elements



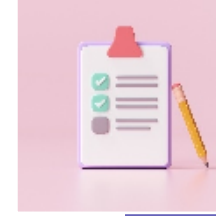
Workforce Policies & Practices

- Amend ToR for Policies group –values-based lens
- Values based statement within each policy
- Future policy development through a values-based lens with OD support
- Priority list of most impactful policies and associated documents e.g. letters to staff, to be reviewed
- Just and Restorative processes



Quality & Governance

- Corporate governance processes
- Planning processes
- Programme management & Transformation processes
- Ward accreditation
- Preceptorship and Supervision



Evidence of Deployment

- Internal audit
- Staff survey results
- Culture dashboard
- Pulse surveys
- Culture Health Assessment

Additional elements to support embedding the framework

- Compassionate Leadership Pledge has been signed by the Board in September 2024
- Compassion video developed in conjunction with HEIW - [Our Culture and Leadership Programme \(sharepoint.com\)](https://sharepoint.com)
- Our Values & Behaviour Framework toolkit – shared with our Culture Change Leadership and Design group for feedback until 21 April, final version to be launched beginning of May.
- **What we need from you –**
 - ✓ Please share the framework widely
 - ✓ Provide feedback on any element of the work but in particular the Deployment plan
 - ✓ Model the values and behaviours every day, the standard you walk past is the standard you accept.





Teitl adroddiad:	2024-25 Month 11 (February) Finance Report
Report title:	
Adrodd i:	Local Partnership Forum
Report to:	
Dyddiad y Cyfarfod:	Tuesday, 06 May 2025
Date of Meeting:	
Crynodeb Gweithredol:	This report provides a briefing on the financial performance of the Health Board for the year-to-date position as at the end of Month 11 (February 2025). In addition, the report includes an update on delivery of the approved capital programme and savings delivery against target.
Executive Summary:	<p><u>Finance Report</u></p> <p>In November 2024, Welsh Government (WG) recognised the continuing pressures reported within the Health Board and allocated a further £11.15m, on condition that the planned deficit is reduced to £8.6m. Attaining the control total £8.6m deficit outturn is key to securing the £82m received non-recurrently 2024/25 into 2025/26. Year to date adverse variance and in month performance indicates risk to delivery of c£5.5m and opportunities of c.£3.9m.</p> <p>It is of note that the 2024/25 £8.6m planned deficit outturn position does not attain the key duty of the Health Board to have a balanced financial position.</p> <p>As requested by WG, the Health Board has reviewed the treatment of the conditionally recurrent allocation of £74.6m received in 2023/24. This is now re-stated as recurrent following instruction from WG on the Monthly Monitoring Letter dated 25th February 2025 to treat as recurrent (noting the allocation tables identify this resource as non-recurrent based on the conditional nature of the award) based on the Health Board forecasting to attain the target control total of an £8.6m deficit for the 2024/25 financial year (the allocation then becoming unconditionally recurrent).</p> <p>As at close of February 2025 (Month 11) the Health Board is reporting a deficit of £10.2m, an improvement of £2.7m from previous month but still representing a £2.3m adverse variance compared to 11/12ths of the revised £8.6m full year planned deficit. This is largely driven by pressures associated with additional capacity areas remaining open (substantial patients clinically stable and medically fit awaiting discharge), Out of Area Mental Health placements, CHC increased activity and Primary & Secondary Care Drug costs.</p> <p>February (Month 11) is reporting an in-month surplus of £2.7m, (£3.4m surplus compared to the in-month planned deficit of £0.7m), an improvement of £0.8m from previous month's surplus of £1.9m.</p> <p>£1.4m Accountancy Gains were identified by the Health Board in February. Year to date Accountancy Gains totals £12.6m.</p>

Risks & Mitigations

In November 2024 the Integrated Performance and Executive Delivery Group (IPEGD) instructed all Divisions (Areas & Directorates) to reduce expenditure forecasts by 1.4%, identifying areas where expenditure could be reduced to mitigate any potential risks to delivery of the financial plan. Whilst this delivered reductions in forecast expenditure, it was not sufficient to bring the position back to the planned deficit of £8.6m.

Additional centralised controls and enhanced oversight have been implemented following endorsement at the January IPEGD meeting. Escalation meetings continue to be held for services where they do not meet their required targeted reductions and control totals.

The additional controls implemented with immediate effect include cease use of non-clinical agency, all non-clinical requests for the use of Bank, acting up and additional hours to follow the Enhanced Establishment Control process for non-clinical roles. In addition, all discretionary non-clinical expenditure to be directed to the Executive Director of Finance for scrutiny and approval.

These additional controls are designed to protect delivery of patient's services (non-clinical) and therefore avoid impacting upon patient care.

The risk of attainment of the 2024/25 financial plan assessed at Month 11 is circa £5.5m, with opportunities of circa £3.9m. Within the additional Planned Care funding received to address the 104-week waits there is a potential slippage of c.£2.4m which is reported as an opportunity. Work is ongoing in an attempt to secure additional activity which will incur additional costs and reduce potential slippage.

Capital Programme

The finance report articulates performance within the Capital Programme which consists of Discretionary funding plus specific funding for Major Projects. The approved Capital Resource Limit (CRL) for 2024/25 is £49.7m, which includes £0.9m IFRS16 and £48.8m Capital. Year to date expenditure is £20.1m against a year-to-date plan of £29.2m, reporting a year to date underspend of £9.1m as at Month 11.

The underspend is largely against Orthopaedics, Backlog Maintenance, IT equipment and Estates Discretionary which are all closely being monitored. Regularly updates are being communicated and any risks flagged with Welsh Government.

Savings

The Health Board's financial plan set a recurrent savings target of £48.0m to be delivered in 2024/25. The £48.0m target plan is profiled on an equal twelfth's basis. The 2024/25 Savings Programme has been developed through a Value & Sustainability thematic model which is to be delivered within five core domains (a) Workforce (b) Clinical Variation (c) Non-pay (d) Continuing Healthcare and (e) Medicines Management.

	<p>Full year forecast value of Green Schemes totals £44.5m with fortuitous Accountancy Gains of £12.6m, giving a combined total of £57.1m, an increase of £2.2m from January (Month 10). Of these, £29.0m have been identified as recurring, with a full year effect of £42.4m, and £28.0m identified as non-recurring savings. The recurrent shortfall to be identified is therefore £5.6m. Accountancy Gains of £1.4m were identified in month, which contributed to the in-month delivery.</p> <p>Whilst the Health Board has identified savings above the planned savings requirements through a combination of Savings Schemes and Accountancy Gains, the focus is now on containing cost overruns and recovering the year-to-date deficit above plan.</p> <p>The Value & Sustainability program is also focusing upon identification of 2025/26 improvement and saving plans, with an expectation of a total savings ask of approximately £40m for the financial year.</p>			
<p>Argymhellion:</p> <p>Recommendations:</p>	<p>LPF is asked to:</p> <ul style="list-style-type: none"> • Receive, and scrutinise this report 			
<p>Arweinydd Gweithredol:</p> <p>Executive Lead:</p>	<p>Russell Caldicott, Interim Executive Director of Finance.</p>			
<p>Awdur yr Adroddiad:</p> <p>Report Author:</p>	<p>Michelle Jones, Head of Financial Reporting Daniel Eyre, Head of Capital Development</p>			
<p>Pwrpas yr adroddiad:</p> <p>Purpose of report:</p>	<p>I'w Nodi <i>For Noting</i></p> <p><input type="checkbox"/></p>	<p>I Benderfynu arno <i>For Decision</i></p> <p><input type="checkbox"/></p>	<p>Am sicrwydd <i>For Assurance</i></p> <p><input checked="" type="checkbox"/></p>	
<p>Lefel sicrwydd:</p> <p>Assurance level:</p>	<p>Arwyddocaol <i>Significant</i></p> <p><input checked="" type="checkbox"/></p> <p>Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i></p>	<p>Derbyniol <i>Acceptable</i></p> <p><input type="checkbox"/></p> <p>Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>General confidence / evidence in delivery of existing mechanisms / objectives</i></p>	<p>Rhannol <i>Partial</i></p> <p><input type="checkbox"/></p> <p>Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>Some confidence / evidence in delivery of existing mechanisms / objectives</i></p>	<p>Dim Sicrwydd <i>No Assurance</i></p> <p><input type="checkbox"/></p> <p>Dim hyder/tystiolaeth o ran y ddarpariaeth</p> <p><i>No confidence / evidence in delivery</i></p>
<p>Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:</p> <p><i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i></p>				

<p>Cyswllt ag Amcan/Amcanion Strategol:</p> <p><i>Link to Strategic Objective(s):</i></p>	<p>This paper aligns to the strategic goal of attaining financial balance and is linked to the well-being objective of targeting our resources to those with the greatest need as per the financial plan.</p>
<p>Goblygiadau rheoleiddio a lleol:</p> <p><i>Regulatory and legal implications:</i></p>	<p>The financial plan and reporting, capital projects and discretionary programme assist the Health Board in meeting its' statutory and mandatory requirements.</p>
<p>Yn unol â WP7 (sydd bellach yn cynnwys WP68), a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP7 (which now incorporates WP68) has an EqIA been identified as necessary and undertaken ?</i></p>	<p>Naddo N</p> <p>Equality Impact (EqIA) and a socio-economic (SED) impact assessments not applicable.</p> <p>The health board continues to assess the requirement for carrying out Equality Impact Assessments and Social-Economic impact assessments on a capital project by project basis.</p>
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR)</p> <p><i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i></p>	<p>BAF – Financial Stability</p> <p>Current risks and mitigations are shown in Appendix A, Slide 13.</p> <p>From a capital perspective, the Health Board continues to experience occasions where tenders are exceeding budget estimates due to the volatility within the construction market and general inflationary pressures. The programme is monitored monthly to ensure that financial commitments align to available funding.</p>
<p>Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Financial implications as a result of implementing the recommendations</i></p>	<p>Not applicable.</p>
<p>Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	<p>Not applicable</p>
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	<p>Not applicable</p>
<p>Cysylltiadau â risgiau BAF:</p>	<p>Appendix A</p>

<p>(neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p>Links to BAF risks: (or links to the Corporate Risk Register)</p>	<p>BAF risks BAF SP14 – Estates & Capital <i>(There is a risk of failing to deliver and provide a safe and compliant built environment, equipment and digital landscape due to limitations in capital funding, adversely impacting on the Health Board's ability to implement safe and sustainable services through an appropriate refresh programme, could result in avoidable harm to patients, staff, public, reputational damage and litigation.)</i></p> <p>Link to Corporate Risk Register: CRR24-06 Suitability and Safety of Sites CRR24-05 Delivery of the 24/25 Financial Plan</p>
<p>Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol)</p> <p>Reason for submission of report to confidential board (where relevant)</p>	<p>Amherthnasol</p> <p>Not applicable</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p>Next Steps: Implementation of recommendations</p>	
<p>Rhestr o Atodiadau:</p> <p>List of Appendices:</p> <p>A - 2024/25 Finance Report (Revenue, Capital and Savings) – February (Month 11)</p>	

Finance Report February- Month 11 2024/25

Russell Caldicott
Executive Director of Finance



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board



Executive Summary

Objective	<ul style="list-style-type: none"> To provide assurance on financial performance and delivery against Health Board financial plans and objectives; and give early warning on potential performance issues. To make recommendations for action to continuously improve the financial position of the organisation, focusing on specific issues where financial performance is showing deterioration or there are areas of concern. 	
Statutory Financial Duties	Revenue	<ul style="list-style-type: none"> Health Board received an additional recurrent allocation of £11.15m in Month 8, with the planned outturn improving from a £19.8m deficit to £8.6m deficit. A condition of accepting the additional income being the improvement in outturn, the £8.6m deficit being the new control total. In-month surplus of £2.7m, an improvement of £0.8m from previous month's surplus of £1.9m. Year to date total deficit of £10.2m, which is £2.3m over the £7.9m year to date planned deficit (11/12ths of the £8.6m full year planned deficit). Full year forecast outturn position remains at £8.6m deficit. This does not attain breakeven and the key first duty to break-even.
	Cash	<ul style="list-style-type: none"> Closing cash balance as at 28th February 2025 was £14.4m, including £6.4m revenue cash and £8.0m for capital projects. The Health Board is forecasting a closing cash balance for 2024-25 of £5.6m made up of £3.1 revenue cash and £2.5m capital cash.
	Savings	<ul style="list-style-type: none"> The Health Board's financial plan has set a savings target of £48.0m to be delivered in 2024/25. Month 11 forecast is to deliver £57.1m (including £12.6m Accountancy Gains). An increase of £2.2m from Month 10 that exceeds plan requirements. Of the £57.1m forecast delivery, £29.0m is recurring schemes with a full year effect of £42.4m. The gap of recurrent savings to the target is £5.6m. Savings delivered in Month 11 totalled £5.6m, of which £2.9m is recurring. Accountancy Gains of £1.4m were also identified in month which contribute to the in-month delivery.
	Capital	<ul style="list-style-type: none"> Approved Capital Resource Limit (CRL) for 2024/25 is £49.7m. Year to date expenditure is £20.1m against a year to date plan of £29.2m.
Key Messages	<ul style="list-style-type: none"> ➤ In November 24, Welsh Government recognised the continuing pressures reported within the Health Board and allocated a further £11.15m, on condition that the planned deficit is reduced to £8.6m. ➤ Year to date financial position exceeds planned deficit by £2.3m. This will need to be recovered over the remainder of the financial year by minimising expenditure and keeping control of emerging pressures to recover the overspend against plan. Focus continues to be on containing cost overruns and recovering the year-to-date deficit above plan. All divisions and IHC's have been instructed to identify cost reductions to recover the overspend and allow sufficient headroom to mitigate any potential risks to delivery of the financial plan. ➤ Attaining the control total of £8.6m deficit outturn is key to securing the £82m received non-recurrently 2024/25 into 2025/26 and beyond. The £74.6m allocation received as conditionally recurrent in 2024/25 is also potentially at risk should the control total deficit of an £8.6m outturn deficit not be delivered. ➤ Additional controls and enhanced oversight agreed and endorsed at the January Integrated Performance Delivery Group (IPEDG) meeting. Escalation meetings are being held for services where they do not meet their required reductions and control totals. The additional controls implemented with immediate effect include cease use of non-clinical agency, all non-clinical requests for the use of Bank, acting up and additional hours will need to follow the Enhanced Establishment Control process for non-clinical roles. In addition, all discretionary non-clinical expenditure to be directed to the Executive Director of Finance for scrutiny and approval. ➤ The risk of attainment of the 2024/25 financial plan assessed at Month 11 is circa £5.5m, with opportunities of circa £3.9m. Within the additional Planned Care funding received to address the 104-week waits there is a potential slippage of c.£2.4m which is reported as an opportunity. Work is ongoing in an attempt to secure additional activity which will incur additional costs and reduce potential slippage. 	

Key Performance Indicators



Month 11 Position

In Month: £198.9m against plan of £202.4m
£3.4m favourable above Plan (Total £2.7m favourable variance)

YTD: £2,069.0m against plan of £2,066.7m
£2.3m adverse above £7.9m YTD planned deficit (Total YTD deficit is £10.2m)



Forecast

£8.6m planned deficit

There remains risk to delivery of the control total for 2024/25 (evidenced by the year to date deficit totalling £10.2m).

The Health Board (following initiation of a series of control measures for non-clinical costs) remains forecasting delivery of this forecast outturn

Month 11 Divisional Performance

West IHC	£10.9m adverse
Central IHC	£18.4m adverse
East IHC	£22.7m adverse
Womens	£0.7m adverse
MH & LD	£16.7m adverse
Commissioning Contracts	£1.5m favourable
ICD Primary Care	£4.5m favourable
ICD Regional Services	£3.9m adverse
Support Functions	£1.5m favourable
Other Budgets	£63.5m favourable



Savings

In-month: £5.6m against target of £4.0m
£1.6m favourable

YTD: £53.2m (includes £12.6m accountancy gain) against a target of £44.0m
£9.2m favourable



Savings Forecast

£57.1m against target of £48.0m

£9.1m favourable



COVID-19 Impact

£10.0m YTD cost

£11.0m forecast cost against £12.2m COVID funding allocation from Welsh Government



Year to Date Income

£151.4m against budget of £144.3m

£7.1m favourable



Year to Date Pay

£1,025.4m against budget of £994.3m

£31.1m adverse



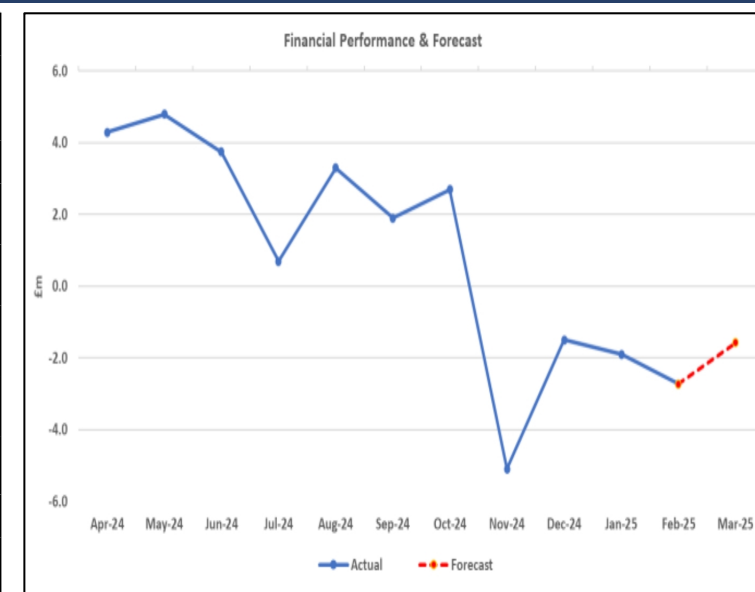
Year to Date Non-Pay

£1,195.0m against budget of £1,208.8m

£13.8m favourable

Revenue Position

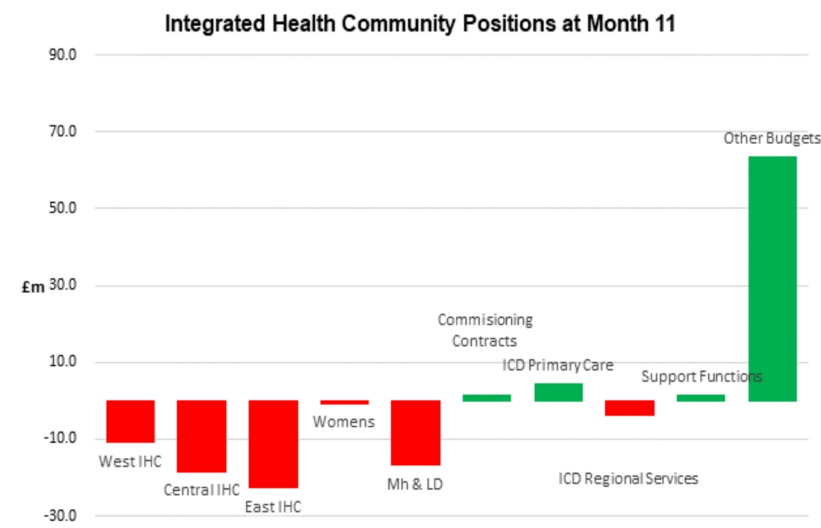
	Actual											2024/25 Cumulative against Plan				Actual Forecast
	M01	M02	M03	M04	M05	M06	M07	M08	M09	M10	M11	Budget	Actual	Variance	Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	%	
Revenue Resource Limit	(172.4)	(171.6)	(172.4)	(178.2)	(178.6)	(186.2)	(184.8)	(227.6)	(188.2)	(197.1)	(201.7)	(2,058.8)	(2,058.8)	0.0	0.00%	(2,252.7)
Miscellaneous Income	(13.1)	(12.8)	(13.5)	(13.4)	(13.7)	(13.2)	(14.5)	(13.8)	(13.4)	(14.8)	(15.2)	(144.3)	(151.4)	-7.1	4.92%	(167.5)
Health Board Pay Expenditure	86.7	87.2	86.7	87.7	87.5	96.5	88.7	122.5	92.2	96.0	93.6	994.3	1,025.4	31.1	3.13%	1,119.7
Non-Pay Expenditure	103.1	102.0	102.9	104.6	108.1	104.9	113.2	113.8	107.8	113.9	120.6	1,208.8	1,195.0	-13.8	-1.14%	1,309.0
Total Deficit / (Surplus)	4.3	4.8	3.7	0.7	3.3	1.9	2.7	(5.1)	(1.5)	(1.9)	(2.7)	(0.0)	10.2	10.2		8.6
Planned Deficit	1.6	1.6	1.6	1.6	1.6	1.6	1.6	(5.8)	0.7	0.7	0.7	7.9	0.0	7.9	100.00%	
Total Deficit / (Surplus) above Plan	2.6	3.2	2.1	(0.9)	1.6	0.3	1.0	(0.7)	(2.2)	(2.6)	(3.4)	7.9	10.2	2.3		



- Within the 2024/25 financial plan Welsh Government Strategic Support funding that was to conclude in 2023/24 (totalling £82m per year) was allocated for an additional year on a non-recurrent basis in 2024/25. The £74.6m non-recurrent additional support issued in 2023/24 was agreed as recurrent for 2024/25; giving an opening recurrent underlying deficit position of £178.2m. In November 2024, Welsh Government have recognised the continuing pressures, which were in part funded on a non recurrent basis in 23/24, and allocated a further £11.15m, on condition that the planned deficit is reduced to £8.6m.
- As requested by WG, the Health Board has reviewed the treatment of the conditionally recurrent allocation of £74.6m received in 2023/24. This is now re-stated as recurrent following instruction from WG on the MMR Reply Letter dated 25th February 2025 to treat as recurrent based on the Health Board forecasting to attain the target control total of an £8.6m deficit for the 2024/25 financial year (the allocation then becoming unconditionally recurrent).
- Month 11 position is reporting an in-month surplus of £2.7m, an improvement of £0.8m from previous month's surplus of £1.9m. Year to date is reporting a deficit of £10.2m. This represents a £2.3m adverse variance compared to 11/12ths of the revised £8.6m full year planned deficit. This is largely driven by pressures associated with additional capacity areas remaining open (substantial patients clinically stable and medically fit awaiting discharge), Out of Area Mental Health placements, CHC increased activity and Primary & Secondary Care Drug costs. Risks to delivery of the plan totals £0.5m (See Slide 14).
- Additional controls and enhanced oversight have been agreed and endorsed at the January IPEDG meeting. Escalation meetings are being held for services where they are not meeting their required reductions and control totals. The additional controls implemented with immediate effect include cease use of non-clinical agency, all non-clinical requests for the use of Bank, acting up and additional hours will need to follow the Enhanced Establishment Control process for non-clinical roles. In addition, all discretionary non-clinical expenditure to be directed to the Executive Director of Finance for scrutiny and approval.

Divisional Positions

	In Month				Cumulative				Forecast Year End Variance against the Plan £m
	Budget £m	Actual £m	Variance to Plan £m	Variance to Plan %	Budget £m	Actual £m	Variance to Plan £m	Variance to Plan %	
WG RESOURCE ALLOCATION	(201.7)	(201.7)	0.0	0%	(2,058.8)	(2,058.8)	0.0	0%	0.0
WEST INTEGRATED HEALTH COMMUNITY									
Management	0.1	0.1	0.0		1.3	1.2	0.1		0.1
West Area	20.0	19.2	0.8		190.5	192.0	(1.5)		(1.5)
Ysbyty Gwynedd	11.4	11.8	(0.4)		122.2	130.8	(8.5)		(9.3)
Facilities	1.1	1.2	(0.1)		12.0	13.0	(1.0)		(1.1)
Total West	32.6	32.3	0.3	1%	326.0	336.9	(10.9)	-3%	(11.8)
CENTRAL INTEGRATED HEALTH COMMUNITY									
Management	0.1	0.1	(0.0)		1.1	1.1	(0.0)		(0.0)
Central Area	25.1	24.6	0.5		249.0	250.1	(1.1)		(2.1)
Ysbyty Glan Clwyd	14.1	15.1	(1.1)		152.7	168.9	(16.3)		(17.8)
Facilities	1.3	1.3	(0.1)		14.2	15.2	(1.0)		(1.1)
Total Central	40.6	41.2	(0.7)	-2%	417.0	435.3	(18.4)	-4%	(21.0)
EAST INTEGRATED HEALTH COMMUNITY									
Management	0.1	0.1	(0.0)		1.1	1.1	(0.0)		(0.0)
East Area	28.8	30.9	(2.1)		276.8	290.0	(13.1)		(13.2)
Ysbyty Wrexham Maelor	12.5	12.4	0.1		133.0	141.3	(8.3)		(8.9)
Facilities	1.2	1.3	(0.1)		13.0	14.2	(1.2)		(1.4)
Total East	42.6	44.7	(2.1)	-5%	424.0	446.6	(22.7)	-5%	(23.5)
Total Midwifery and Women's Services	4.1	4.1	0.0	1%	45.5	46.1	(0.7)	-1%	(0.7)
Total Mental Health and LDS	14.8	15.3	(0.6)	-4%	162.1	178.8	(16.7)	-10%	(17.8)
Total Commissioning Contracts	27.9	27.7	0.2	1%	278.3	276.8	1.5	1%	1.6
INTEGRATED CLINICAL DELIVERY PRIMARY CARE									
Covid Programmes	0.5	0.6	(0.0)		6.6	6.5	0.1		0.1
Dental North Wales	4.7	4.0	0.7		33.1	28.7	4.4		4.6
Community Dental Services	0.6	0.5	0.1		6.2	6.4	(0.2)		(0.3)
Other Primary Care	0.1	0.1	0.0		1.5	1.3	0.2		0.2
Total Integrated Clinical Delivery Primary care	5.9	5.1	0.8	13%	47.3	42.8	4.5	9%	4.5
INTEGRATED CLINICAL DELIVERY REGIONAL SERVICES									
Provider Income	(1.9)	(2.4)	0.5		(20.6)	(22.6)	2.1		2.2
Diagnostic and Specialist Clinical Support	7.2	7.3	(0.0)		76.6	81.0	(4.3)		(3.9)
Cancer Services	5.6	5.8	(0.2)		62.3	63.9	(1.6)		(1.3)
Total Integrated Clinical Delivery	11.0	10.7	0.3	3%	118.4	122.3	(3.9)	-3%	(3.0)
Total Service Support Functions	14.8	14.7	0.0	0%	153.7	152.3	1.5	1%	0.9
Total Other Budgets	8.1	3.0	5.1	63%	94.4	30.9	63.5	67%	70.8
Total HB Position	0.7	2.7	3.4	479%	7.9	(10.2)	(2.3)	-29%	(0.0)



- In-month surplus of £2.7m (£3.4m surplus compared to the in-month planned deficit of £0.7m), an improvement of £0.8m from previous month's surplus of £1.9m.
- Year to date deficit of £10.2m and £2.3m adverse variance compared to 11/12^{ths} of the £8.6m full year planned deficit, an improvement of £3.4m from previous month. This is largely driven by pressures associated with additional capacity areas remaining open (substantial patients clinically stable and medically fit awaiting discharge), Out of Area Mental Health placements, CHC increased activity and Primary & Secondary Care Drug costs.
- Further detail on Pay and Non-Pay spend is reported in Slide 6 and 11.

Expenditure – Pay & Non-Pay

Pay Costs as per Monitoring Return Table	Actual											Cumulative			Full Year Forecast
	M01	M02	M03	M04	M05	M06	M07	M08	M09	M10	M11	YTD Budget	YTD Actual	YTD Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	
Administrative & Clerical	11.9	11.9	12.1	12.0	11.9	12.0	12.1	16.9	13.0	13.2	12.8	147.1	139.9	7.2	161.7
Medical & Dental	19.7	20.0	19.5	20.3	20.3	29.0	20.8	29.4	21.5	23.0	22.1	227.2	245.5	(18.3)	249.7
Nursing & Midwifery Registered	26.6	26.8	26.9	27.0	26.9	26.9	27.4	38.3	28.4	29.2	28.6	303.0	313.0	(10.0)	346.0
Additional Clinical Services	13.5	13.6	13.5	13.6	13.6	13.7	13.3	17.5	13.7	14.0	13.8	143.2	153.7	(10.6)	171.3
Add Prof Scientific & Technical	3.5	3.5	3.5	3.5	3.5	3.6	3.6	5.2	3.8	4.1	3.9	45.1	41.7	3.4	43.8
Allied Health Professionals	5.8	5.7	5.6	5.7	5.7	5.8	5.9	8.3	6.2	6.5	6.4	65.3	67.6	(2.2)	74.2
Healthcare Scientists	1.5	1.5	1.5	1.5	1.5	1.5	1.6	2.0	1.6	1.7	1.7	17.0	17.5	((0.4)	18.6
Estates & Ancillary	4.1	4.0	4.1	4.1	4.0	4.1	4.0	5.1	4.1	4.2	4.2	45.5	46.0	(0.5)	53.4
Students	0.1	0.1	0.1	0.1	0.1	0.0	0.0	0.0	0.0	0.1	0.1	0.9	0.6	0.3	1.0
Health Board Total	86.7	87.2	86.7	87.7	87.5	96.5	88.7	122.5	92.2	96.0	93.6	994.3	1,025.4	(31.1)	1,119.7
Other Services (Incl. Primary Care)	2.6	2.6	2.8	2.8	2.9	2.9	3.7	3.5	3.0	3.0	5.1	28.8	35.0	(6.2)	38.2
Total Pay	89.3	89.8	89.6	90.5	90.5	99.4	92.4	126.0	95.2	99.0	98.7	1,023.1	1,060.5	(37.3)	1,157.9

Non-Pay Costs as per Monitoring Return Table	Actual											Cumulative			Full Year Forecast
	M01	M02	M03	M04	M05	M06	M07	M08	M09	M10	M11	YTD Budget	YTD Actual	YTD Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	
Primary Care Contractor (excluding drugs, including non resource limited expenditure)	19.6	18.6	20.0	19.6	19.6	19.6	20.3	21.7	20.1	19.1	32.4	231.8	230.5	1.3	251.3
Primary Care – Drugs and Appliances	10.9	10.5	10.2	10.8	11.6	10.8	12.4	11.3	10.8	11.4	10.5	113.1	121.3	(8.2)	132.1
Provider Services – Non Pay (excluding drugs & depreciation)	19.0	16.1	16.6	20.2	19.0	19.0	19.4	20.7	19.1	21.5	19.1	252.9	209.6	43.3	236.3
Secondary Care - Drugs	7.9	8.2	7.8	9.0	8.3	8.1	9.3	8.0	8.9	8.9	8.4	84.7	92.7	(8.0)	101.3
Healthcare Services Provided by Other NHS Bodies	30.5	31.5	30.8	22.3	30.0	29.5	32.1	34.0	30.4	35.3	33.0	339.4	339.4	0.0	370.1
Continuing Care and Funded Nursing Care	10.6	11.9	11.6	11.3	11.9	11.2	12.5	11.6	11.7	10.8	10.0	121.7	125.0	(3.3)	136.4
Other Private & Voluntary Sector	1.2	1.5	1.6	6.8	2.6	2.6	2.7	2.3	2.2	2.2	2.9	18.0	28.6	(10.6)	31.8
Joint Financing and Other	0.0	0.3	0.2	0.3	0.5	0.1	0.3	0.2	0.4	0.3	0.3	2.9	2.9	0.0	3.3
Losses, Special Payments and Irrecoverable Dets	0.2	0.3	0.3	0.3	0.5	0.2	0.3	0.4	0.4	0.5	0.3	2.7	3.6	(0.9)	4.0
Non-Pay Costs	99.9	98.8	99.1	100.6	104.1	101.0	109.4	110.0	104.0	110.2	116.8	1,167.4	1,153.7	13.6	1,266.7
AME/DEL Depreciation	3.2	3.2	4.0	4.0	3.9	3.9	3.9	3.9	3.9	3.9	3.9	41.4	41.4	0.0	42.5
Total Non-Pay	103.1	102.0	103.0	104.5	108.1	104.9	113.2	113.8	107.8	114.0	120.6	1,208.8	1,195.1	13.6	1,309.2

Health Board Pay:

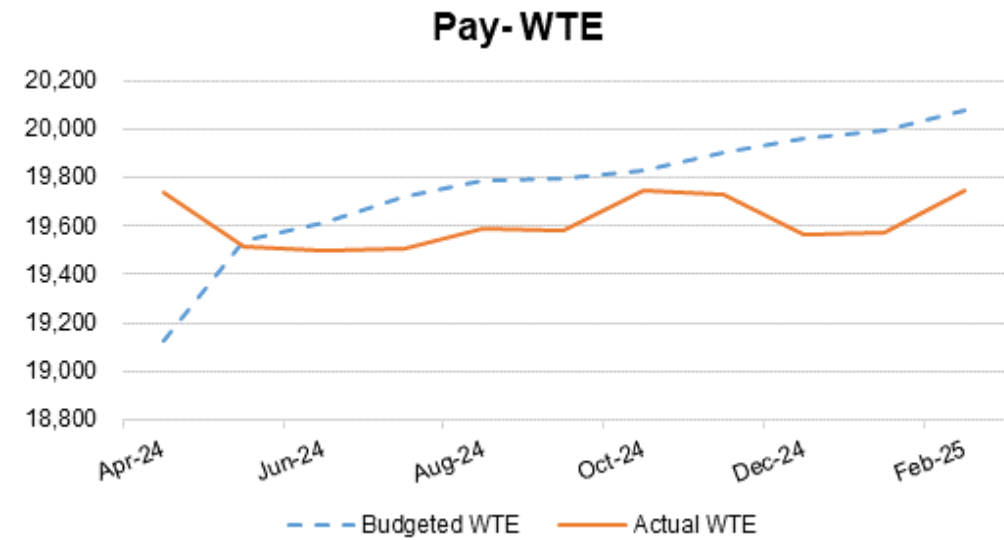
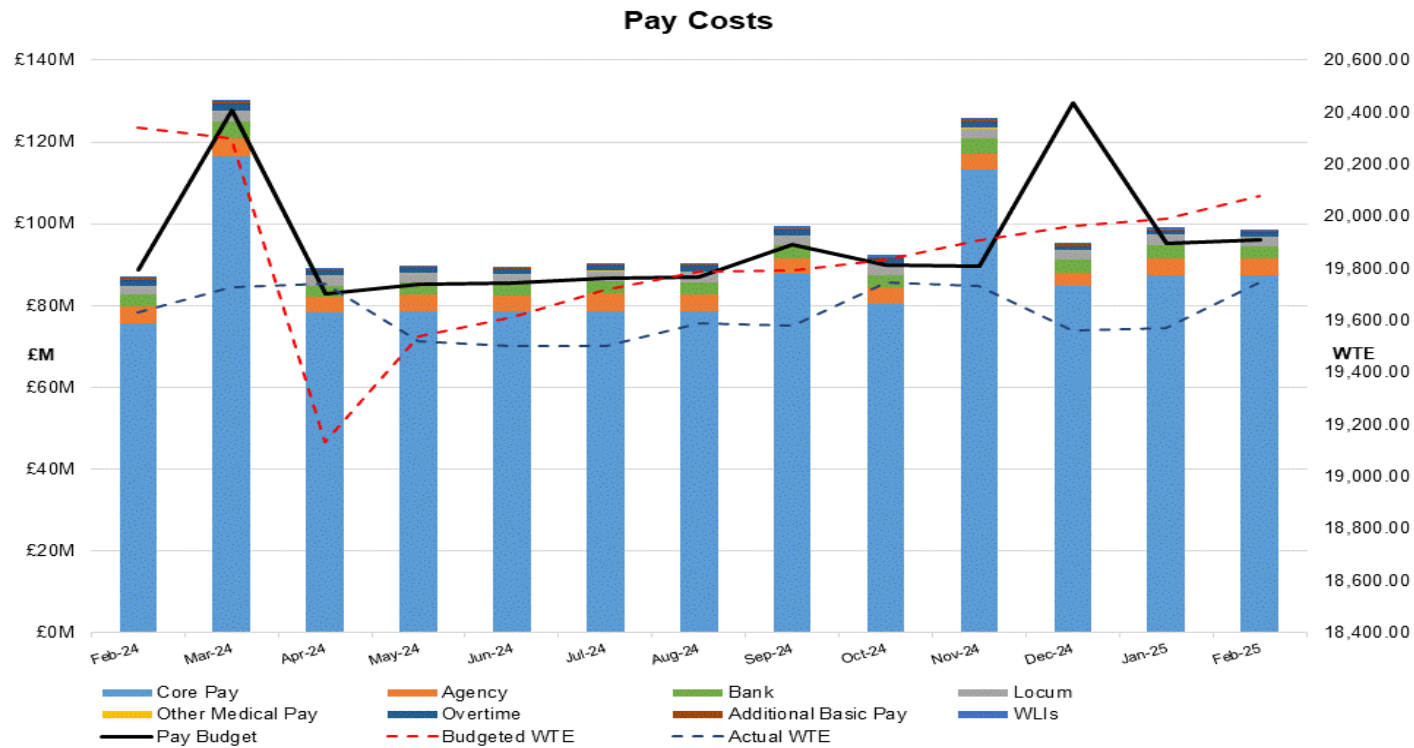
- Month 11 Provider Services Pay decreased by £2.5m (2.6%), however £1.4m of the movement relates to the year-to-date impact of the Band 8a and above incremental progression and £0.9m M&D pay award on fees and allowances paid in January.
- February Pay costs reported an increase of £0.4m when compared to previous months monthly average.
- Provider Services Pay - £31.1m year to date adverse variance.

- Total updated cost of the Pay Award as at Month 11 is £73.8m (including M&D, Band 8 incremental pay points, RLW and additional costs outside of payroll). See Slide12 for further detail.

Non-Pay Expenditure (excluding Depreciation):

- Non-Pay expenditure increased by £6.6m from previous month, which is predominately made up of a £13.2m increase in Primary care contractor, this is offset by reductions in other areas.
- Further detail on Non-Pay expenditure movements is reported in Slide 11.

Expenditure – Pay



2024-25	Actual												YTD
Variable Pay	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25		£m
	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m	£m		
Agency	4.0	4.2	3.8	4.2	4.2	3.7	4.2	3.9	3.4	3.9	3.9		43.4
Overtime	1.1	1.3	1.2	1.4	1.3	1.4	1.2	1.7	1.0	1.0	1.1		13.7
Locum	2.6	2.3	2.3	2.5	2.6	2.4	2.8	2.6	2.3	2.6	2.4		27.3
WLI's	0.3	0.2	0.2	0.3	0.3	0.4	0.4	0.4	0.3	0.4	0.3		3.6
Bank	2.6	2.9	2.8	3.0	3.1	3.2	3.0	3.7	3.1	3.2	3.0		33.6
Other Non Core	0.0	0.0	0.0	0.0	0.1	0.2	0.1	0.1	0.1	0.0	0.1		0.7
Additional Hours	0.4	0.3	0.3	0.4	0.4	0.3	0.4	0.5	0.4	0.3	0.4		4.1
Total	11.1	11.1	10.8	11.8	11.9	11.6	12.1	12.8	10.5	11.5	11.2		126.4

- Variable Pay totals £11.2m for February, a reduction of £0.3m from previous month driven by a fall of £0.2m in Locum, £0.2m in Bank and £0.1m in WLI's.



Pay - WTE

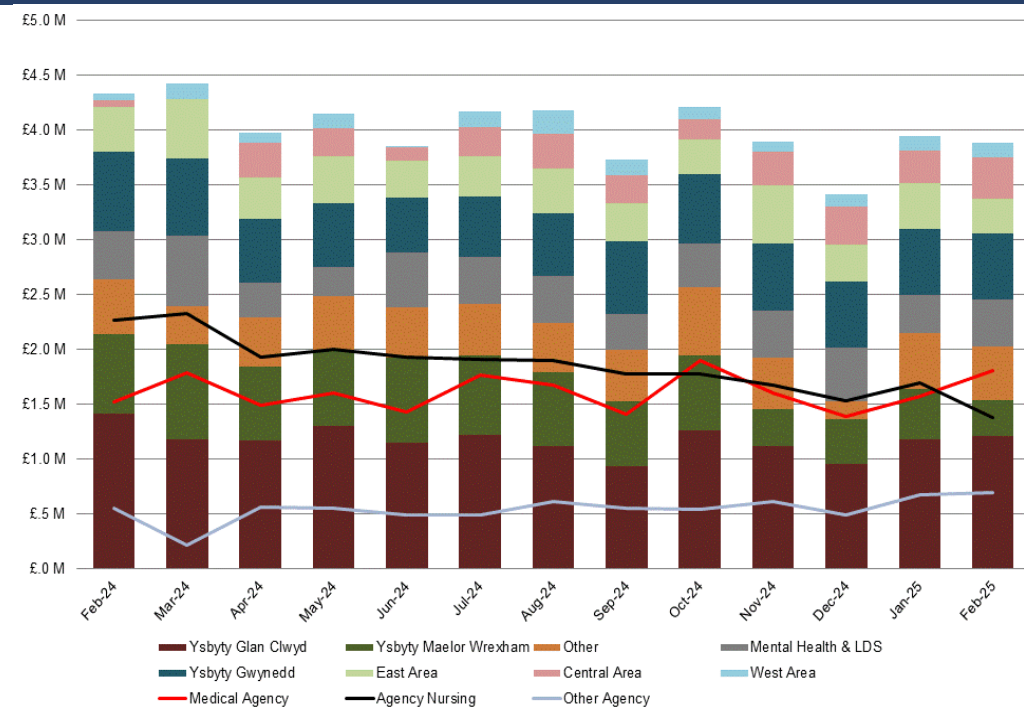
	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sept-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Movement M11 v M10
Budgeted WTE	19,130	19,537	19,611	19,721	19,789	19,792	19,833	19,906	19,962	19,992	20,086	94
Actual WTE	19,740	19,518	19,500	19,503	19,590	19,580	19,746	19,731	19,562	19,571	19,745	174

- Actual worked in February is 19,745, an increase of 174 WTE from January.
- Budgeted WTE increased by 94 WTE between February and January.
- Below table provides a breakdown of Budgeted WTE movement by Division from Months 1 to 11:

BUDGETED WTE	Apr WTE	May WTE	June WTE	July WTE	Aug WTE	Sept WTE	Oct WTE	Nov WTE	Dec WTE	Jan WTE	Feb WTE	Movement M11 v M10	Explanation of M11 v M10 Key movements
West IHC	3,636	3,664	3,685	3,700	3,716	3,711	3,712	3,722	3,724	3,715	3,715	-1	
Centre IHC	4,631	4,737	4,737	4,758	4,798	4,818	4,828	4,862	4,878	4,857	4,861	4	
East IHC	4,493	4,513	4,535	4,567	4,581	4,581	4,586	4,589	4,608	4,610	4,674	63	YWM – Reserves and NSA adjustments to match agreed funding
COVID Response	33	168	134	134	134	134	134	134	137	137	139	2	
Dental GDS	14	14	16	16	16	14	14	14	14	14	14	0	
Dental CDS	173	173	173	173	173	172	172	172	172	172	172	0	
Women's	685	691	694	694	697	697	698	698	698	697	697	0	
Diagnostics	935	964	964	974	977	979	979	980	982	980	980	0	
Cancer Services	370	392	392	399	400	401	405	411	419	417	417	0	
Mental Health & LDS	2,245	2,247	2,255	2,255	2,262	2,265	2,273	2,278	2,277	2,277	2,289	12	9WTE Band 5 posts funded by HMPPS & North Wales APB via WCBC
Other Primary Care	14	15	15	15	15	15	15	15	15	15	15	0	
Corporate	1,900	1,958	2,011	2,037	2,020	2,007	2,017	2,031	2,041	2,102	2,116	14	Chief Digital Information Officer – 8WTE Budget for MH Project
TOTAL	19,130	19,538	19,611	19,721	19,789	19,792	19,833	19,906	19,962	19,992	20,086	94	

Pay Costs – Agency

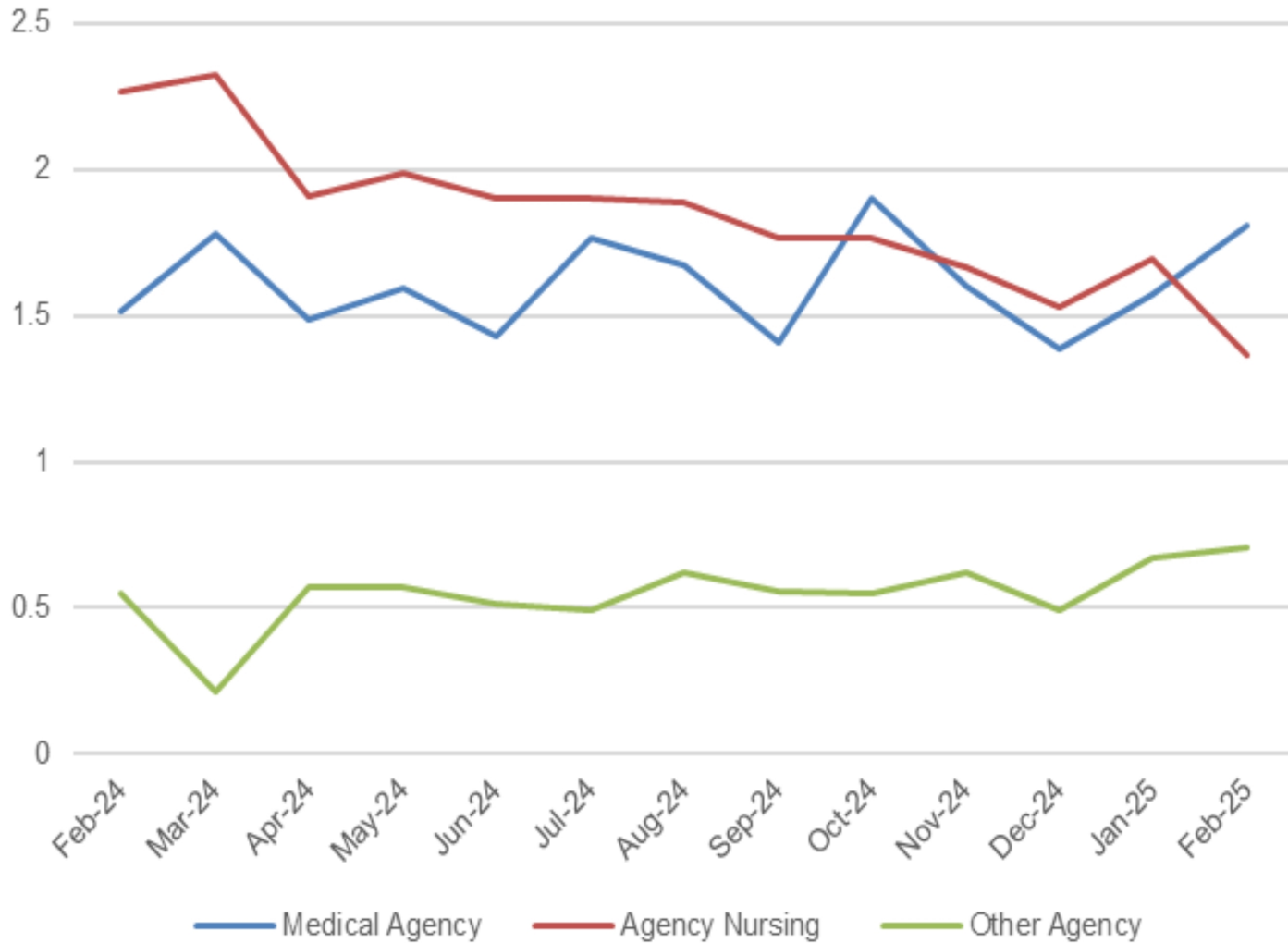
	2024-25 Agency Spend £'m											Total Year to Date £m	Total Forecast £m
	Actual												
	M01	M02	M03	M04	M05	M06	M07	M08	M09	M10	M11		
West Area	0.1	0.1	0.0	0.1	0.2	0.1	0.1	0.1	0.1	0.1	0.1	1.3	1.4
Central Area	0.3	0.3	0.1	0.3	0.3	0.2	0.2	0.3	0.4	0.3	0.4	3.1	3.5
East Area	0.4	0.4	0.3	0.4	0.4	0.4	0.3	0.5	0.3	0.4	0.3	4.2	4.5
Ysbyty Gwynedd	0.6	0.6	0.5	0.6	0.6	0.7	0.6	0.6	0.6	0.6	0.6	6.5	7.1
Ysbyty Glan Clwyd	1.2	1.3	1.2	1.2	1.1	0.9	1.3	1.1	0.9	1.2	1.2	12.6	13.9
Ysbyty Maelor Wrexham	0.7	0.7	0.8	0.7	0.7	0.6	0.7	0.3	0.4	0.5	0.3	6.3	6.7
Mental Health & LDS	0.3	0.3	0.5	0.4	0.4	0.3	0.4	0.4	0.5	0.3	0.4	4.4	4.8
Womens	0.1	0.2	0.2	0.2	0.2	0.2	0.3	0.2	0.1	0.2	0.2	1.9	2.1
Other inc pan BCU Cancer Services and Corporate	0.3	0.3	0.3	0.3	0.2	0.3	0.3	0.3	0.1	0.4	0.3	3.1	3.5
Total Agency	4.0	4.2	3.8	4.2	4.2	3.7	4.2	3.9	3.4	3.9	3.9	43.4	47.5



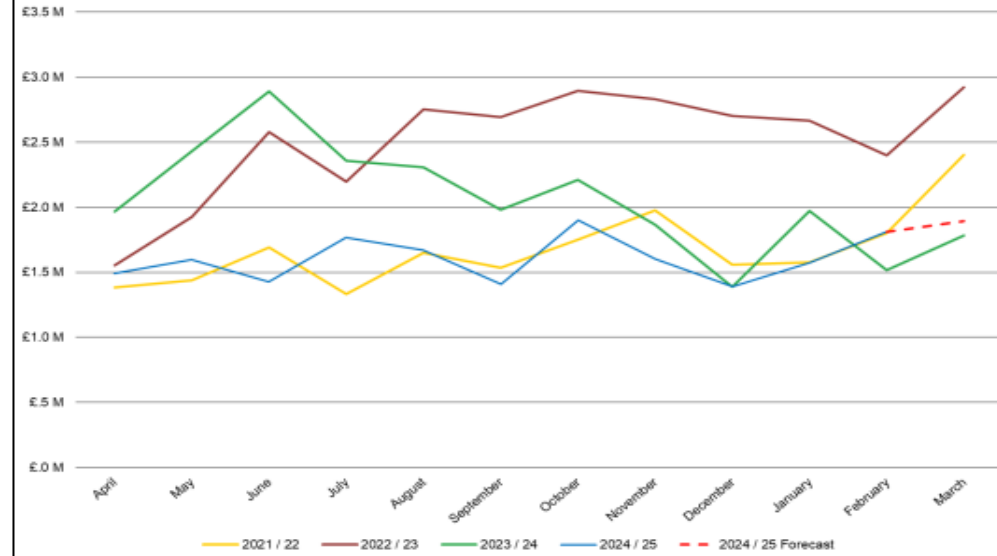
- Agency expenditure for Month 11 is £3.9m the same as last month representing 3.9% of total pay. 2024/25 monthly average Agency spend is £3.9m compared to a monthly average of £5.6m in 2023/24. The 2024/25 total Agency year end forecast outturn has increased by £0.4m, from £47.1m reported at Month 10 to £47.5m reported at Month 11.
- Month 11 Medical Agency expenditure is £1.8m, an increase of £0.2m from previous month and in line with 24/25 previous months monthly average. The monthly average medical agency expenditure for 2023/24 was £2.1m. In-month Medical Agency spend is predominantly within Ysbyty Glan Clwyd (£0.6m), Ysbyty Gwynedd (£0.4m) and Mental Health (£0.2m) covering Medical vacancies and sickness.
- Nurse agency costs totalled £1.4m for the month, a reduction of £0.3m from previous month spend. Month 11 Nurse Agency spend is £1.4m lower than the 2023/24 monthly average costs of £2.8m. The use of agency nurses is predominantly within Ysbyty Glan Clwyd (£0.5m), Ysbyty Maelor Wrexham (£0.2m), Ysbyty Gwynedd (£0.2m), Mental Health (£0.2m) and East Area (£0.1m) to staff escalated beds and cover ward vacancies to ensure the Nurse Staffing Act ward staffing levels are maintained.
- Other agency costs totalled £0.7m in Month 11 the same as in month 10. Other Agency costs mainly consist of Allied Health Professionals (£0.6m).

Pay Costs – Agency

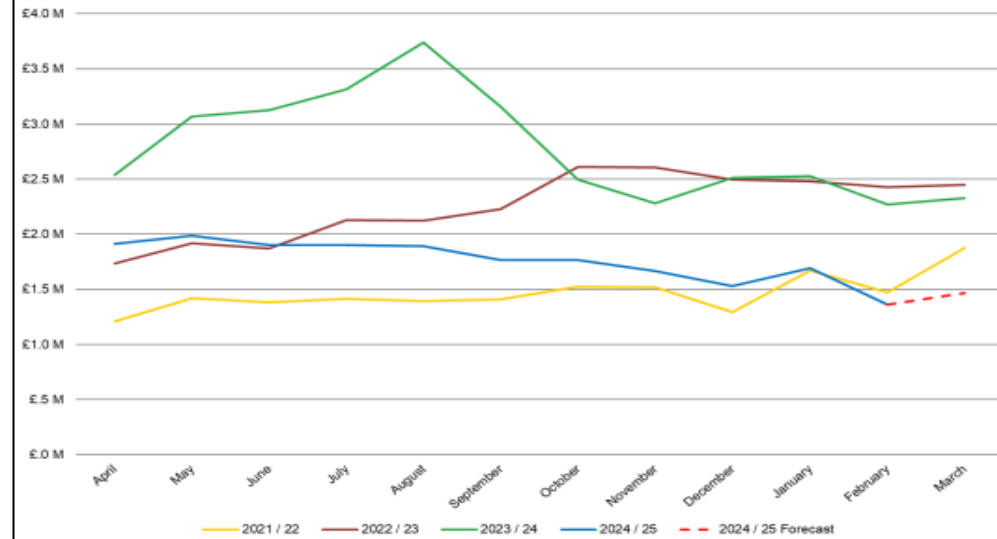
Agency Costs



Medical Agency Costs

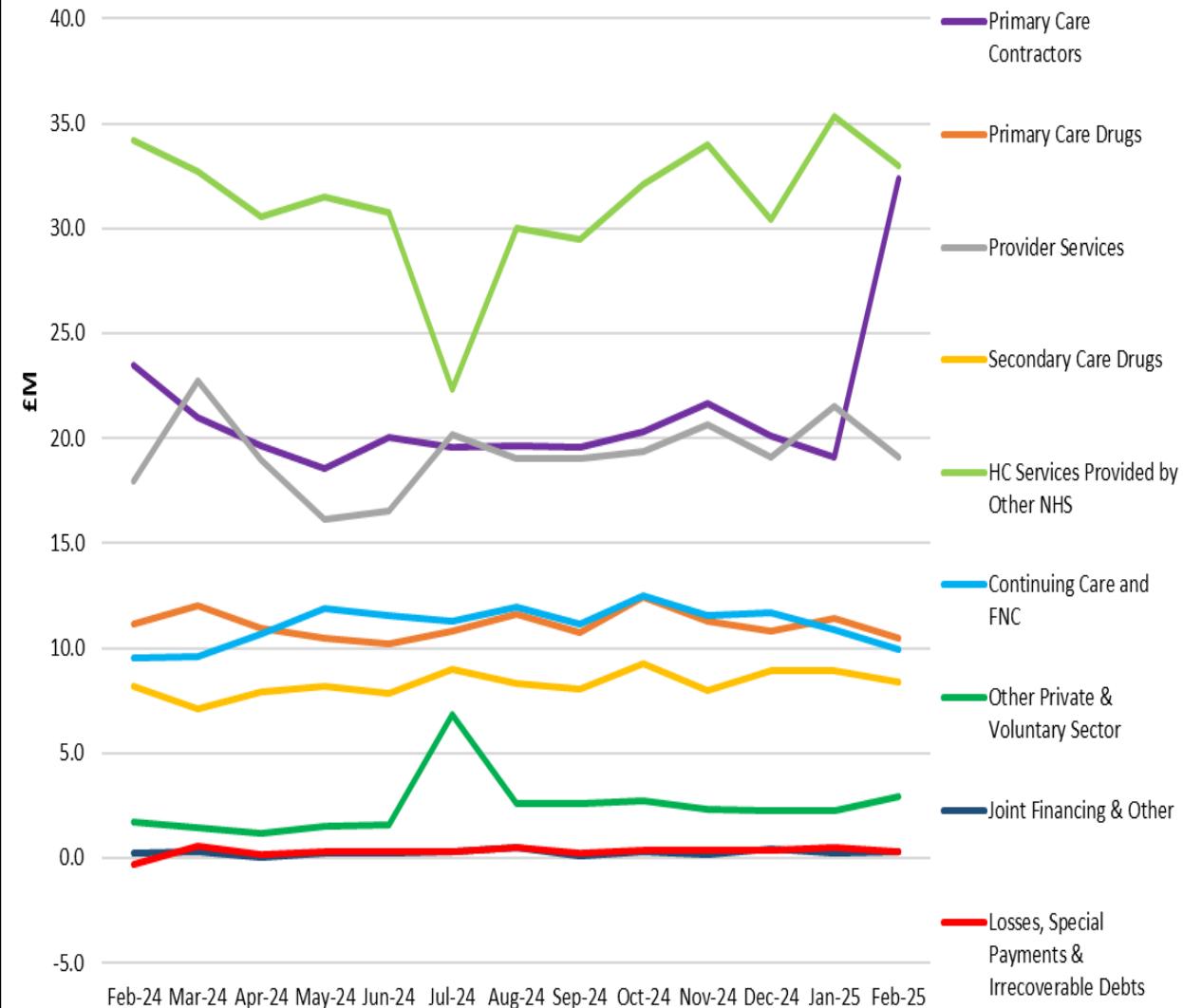


Nursing Agency Costs



Expenditure - Non Pay

Non Pay Expenditure (Excluding Capital Costs)



- Primary Care Contractor:** February expenditure is £13.2m (69.9%) higher than previous month due to additional WG allocation received in month 11 for Dental Contract Pay Award uplift, GMS Contract agreement and IT Support System & Services Contract.
- Primary Care Drugs:** Expenditure is £0.9m (8.1%) less than the previous month due to a reduction in prescribing days in February compared to January and cost per prescribing day being down by 4% and c.1.1% down on a cost per item basis.
- Provider Services Non-Pay:** Expenditure decreased by £2.4m (11.3%) due to a £0.8m reduction in Clinical Services & Supplies, £0.2m reduction in External Contract staffing & consultancy costs, £0.7m reduction in General Services & Supplies and £0.7m reduction in Energy costs.
- Secondary Care Drugs:** Expenditure decreased by £0.5m (6.1%) from previous month with the reduction being reported across all specialties due to February having fewer prescribing days compared to January plus an additional £0.1m savings reported for Secondary Care Drugs.
- Healthcare Services provided by Other NHS Bodies:** A decrease of £2.4m (6.7%) from previous month (which also included the impact of £6.9m JCC backdated spend). When comparing February spend to previous months monthly average the increase is £2.3m, of which £2.6m is additional Vertex spend funded by WG, offset by a reduction in English provider contracts spend and in-year creditor writebacks.
- Continuing Health Care (CHC) and Funded Nursing Care (FNC):** Expenditure is £0.9m (8.1%) less than previous month being predominantly due to a £1.2m CHC accountancy gain reported in month.
- Other Private & Voluntary Sector:** Spend increased by £0.7m from previous month due to the insourcing and outsourcing activity being mobilised late January.

Allocations

Description	£m
Allocations Received	2,254.4
Total Allocations Received	2,254.4

Description	£m
Allocations anticipated	
AME/DEL Capital Adjustments	0.7
Removal of IFRS-16 Leases (Revenue)	-4.7
Pay Award 2024-25	1.3
International Recruitment QTR's 3 & 4	0.4
Other	0.5
Total Allocations Anticipated	1.8

	£m
Total Allocations Received	2,254.4
Total Allocations Anticipated	-1.8
Total Welsh Government Income	2,252.6

COVID-19 Funding	£m
Total 23/24 COVID-19 Forecast Expenditure	12.2
Received	12.2
Anticipated	0.0

- Total Revenue Resource Limit (RRL) for the year is £2,252.6m. £2,058.8m of the RRL has been profiled into the cumulative position, £6.1m less than 11/12ths of the RRL (£2,064.9m).
- Confirmed allocations to date is £2,254.4m, offset by a (£1.8m) reversal of anticipated allocations. Total COVID-19 funding allocation is £12.2m, with £10.9m of the COVID-19 funding profiled into the cumulative position. It is forecast that a surplus of £1.2m can be retained as confirmed within the Month 8 response letter.
- Total cost of Pay Award impact is c.£73.8m, of which £68.6m is recurrent costs and £5.2m is non-recurrent. £72.5m Pay Award funding allocation has been received from WG non recurrently to date, with the remaining balance of £1.3m reported as anticipated income.

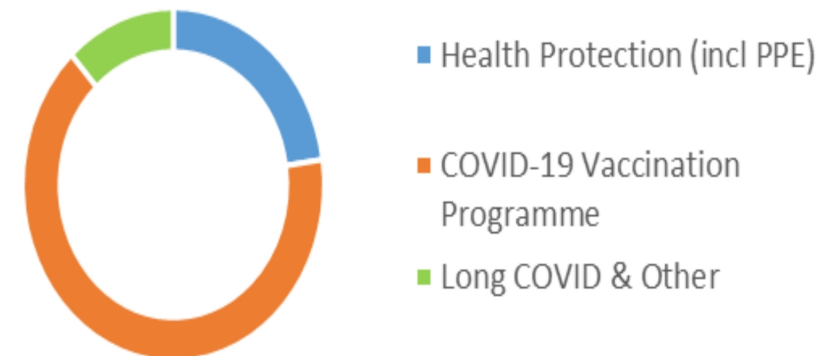
2024/25 Pay Award impact	Total £'m
November Pay Award Costs	£51.5m
RLW Bank	£0.7m
Real Living Wage (RLW) Adjustments	£3.8m
September M&D Pay Award	£14.2m
Additional costs outside of direct payroll (English rotational Doctors) and Apprenticeship Levy	£0.5m
Band 8a and above additional increments	£1.7m
M&D Intensity fees and allowances pay award paid in January	£1.0m
February M&D Salaried GP Pay Award Costs	£0.4m
Total	£73.8m

- Pay award impact on centrally held balance sheet accrual and provisions is estimated at c.£1.5m and is excluded from the above calculation. Welsh Government have confirmed that they have not funded such issues historically and therefore expect organisations to manage the impact on accruals as part of the annual planning and meet these costs from existing resources

Impact of COVID-19

	Actual											Year to Date Expenditure £m	Forecast 2024/25 £m
	M01 £m	M02 £m	M03 £m	M04 £m	M05 £m	M06 £m	M07 £m	M08 £m	M09 £m	M10 £m	M11 £m		
Health Protection (incl PPE)	0.2	0.1	0.2	0.2	0.2	0.2	0.2	0.3	0.3	0.3	0.2	2.3	2.5
COVID-19 Vaccination	0.5	0.6	0.5	0.5	0.5	0.5	0.7	0.9	0.6	0.6	0.6	6.6	7.2
Long COVID & Other	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.1	1.1	1.3
Total COVID-19 Expenditure	0.8	0.8	0.8	0.8	0.8	0.8	1.0	1.4	1.0	1.0	0.9	10.0	11.0
Welsh Gov COVID-19 Income	0.8	0.8	0.8	0.8	0.8	0.8	1.0	1.4	1.3	1.2	1.2	10.9	12.2
Impact of COVID-19 on Position	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	(0.3)	(0.2)	(0.3)	(0.9)	(1.2)

COVID-19 Cost Distribution 2024/25



Total COVID-19 Expenditure Per Month



- Total COVID expenditure for WG funded programmes in Month 11 is £0.9m, with an year-to-date total cost of £10.0m. Total full year forecast spend is £11.0m against a COVID funding allocation of £12.2m for 2024/25. It is forecast that the projected surplus of £1.2m can be retained.
- Month 11 Health Protection expenditure is £0.2m, with an annual forecast expenditure of £2.5m.
- COVID-19 Vaccination Programme expenditure for Month 11 is £0.7m and annual forecast expenditure is £7.2m.
- Month 11 Long COVID expenditure is £0.1m, with an annual forecast expenditure is £1.3m.
- All COVID programmes expenditure plans continue to be assessed and refined. The COVID-19 forecast at Month 11 is projecting slippage of c.£1.2m against the COVID funding allocation (Health Protection including PPE £0.3m, Vaccination Programme £0.3m and Long Covid £0.6m). WG have confirmed that the Health Board can retain slippage against the 2024/25 COVID funding allocation to support the delivery of sustainable services.

Risks and Opportunities (not included in position)

- Following further assessment of Risks at Month 11, a number of risks have been revised as per below table. The remaining risks will continue to be monitored and managed throughout the year.
- The below are current risks and opportunities to the Health Board's financial position for 2024/25 as at Month 11.

	Risks	£m	Level
1	Prescribing – growth above original plan expectation	0.5	Medium
2	Medicines (secondary and prescribing)	1.0	Medium
3	Attainment of targeted expenditure reductions	2.7	Medium
4	Receipt in full of the pay award impact 2024/25	1.3	Low
	Total Quantifiable Risks	5.5	

	Opportunities	£m	Level
1	Targeted expenditure reductions exceed that modelled	1.5	Low
2	Potential slippage against Planned Care Funding	2.4	Medium
	Total Opportunities	3.9	

- The additional Health Care support workers ongoing discussions have not been incorporated into either the risk tables or the Health Board's financial position.
- WG have confirmed that the underspend against the Dental ringfenced allocation can be retained by the Health Board, therefore the risk of potential clawback has been removed from the risk table in Month 10.
- Within the additional Planned Care funding received to address the 104-week waits there is a potential slippage of c.£2.4m which is reported as an opportunity in the above table. Work is ongoing in an attempt to secure additional activity which will incur additional costs and reduce potential slippage.

Balance Sheet

- The closing cash balance as at the 28th February 2025 was £14.4m, this includes £6.4m cash held for revenue expenditure and £8.0m for capital projects. This closing balance was significantly higher than the £5.7m forecast in the January Monitoring Return due to:

- Revenue receipts of £1.958m being received from NHS and local government bodies in the last two days of the month following closure of the Health Board's final BACS payment run.
- Delays in receiving both contractor's final certificates for capital expenditure and delivery of IT equipment.

- The Health Board is currently forecasting a closing cash balance for 2024-25 of £5.6m made up of £3.1m revenue cash and £2.5m capital cash.

	Opening Balance Beginning of Apr-24 £m	Closing Balance End of Feb-25 £m	Forecast Closing Balance End of Mar-25 £m
Non-Current Asset			
Property, plant and equipment	724.0	704.4	732.6
Intangible assets	1.2	0.8	1.2
Trade and other receivables	84.6	84.9	84.6
Non-Current Assets sub total	809.7	789.6	818.3
Current Assets			
Inventories	20.9	21.0	20.9
Trade and other receivables	107.7	149.3	156.2
Cash and cash equivalents	5.0	14.4	5.6
Non-current assets classified as held for sale	0.4	0.4	0.0
Current Assets sub total	134.0	185.1	182.8
TOTAL ASSETS	943.7	974.7	1,001.1
Current Liabilities			
Trade and Other Payables	209.6	202.1	201.6
Provisions	47.1	104.4	104.8
Current Liabilities Sub Total	256.7	306.5	306.4
NET ASSETS LESS CURRENT LIABILITIES	687.1	668.2	694.7
Non-Current Liabilities			
Trade and Other Payables	27.5	27.4	28.4
Provisions	85.9	85.8	85.8
Non-Current Liabilities Sub Total	113.4	113.2	114.2
TOTAL ASSETS EMPLOYED	573.7	555.0	580.5
FINANCED BY:			
Taxpayers' Equity			
General Fund	353.6	334.9	360.4
Revaluation Reserve	220.1	220.1	220.1
Total Taxpayers' Equity	573.7	555.0	580.5



Capital

- The approved Capital Resource Limit (CRL) for 2024/25 is £49.7m, which includes £0.9m IFRS16 and £48.8m Capital. Year to date expenditure is £20.1m against a year-to-date plan of £29.2m. The Month 11 position is reporting an year to date underspend of £9.1m.
- The underspend is largely against Orthopaedics, Backlog Maintenance, IT equipment and Estates Discretionary which are all being closely monitored. Regular updates are being communicated and any risks flagged with Welsh Government.

BUDGET 2024/25

1) Capital Resource Limit 2024/25	£m	Brief Overview / Update
WG Discretionary Capital	12.4	The purpose of this dashboard is to brief the committee on the delivery of the approved capital programme to enable appropriate monitoring and scrutiny. The report provides an update, by exception, on the status and progress of the major capital projects and the agreed capital programmes. The report also provides a summary on the progress of expenditure against the capital resources allocated to the Heath Board by the Welsh Government through the Capital Resource Limit (CRL).
All Wales Scheme	36.4	
Total CRL	48.8	

CAPITAL PROGRAMME 2024/25	Initial Programme (£m)	Year to Date (£m)	Forecast Outturn (£m)	Current Over/Under Commitment (£m)	Comments
Divisions	4.9	1.9	4.5	0.4	Programmed planned works progressing supported by tenders/purchase orders.
Operational Estates	1.4	0.9	1.4	0.0	Programmed planned works progressing supported by tenders/purchase orders.
Medical Devices	1.9	2.3	2.2	-0.3	Programmed planned works progressing supported by tenders/purchase orders.
Informatics	3.4	2.0	3.4	0.0	Programmed planned works progressing supported by tenders/purchase orders.
All wales funding brokerage to be re-provided from discretionary	0.8	0.0	0.0	0.8	Brokerage managed within the programme.
WG Discretionary Capital	12.4	7.125	11.5	0.9	Under Commitment

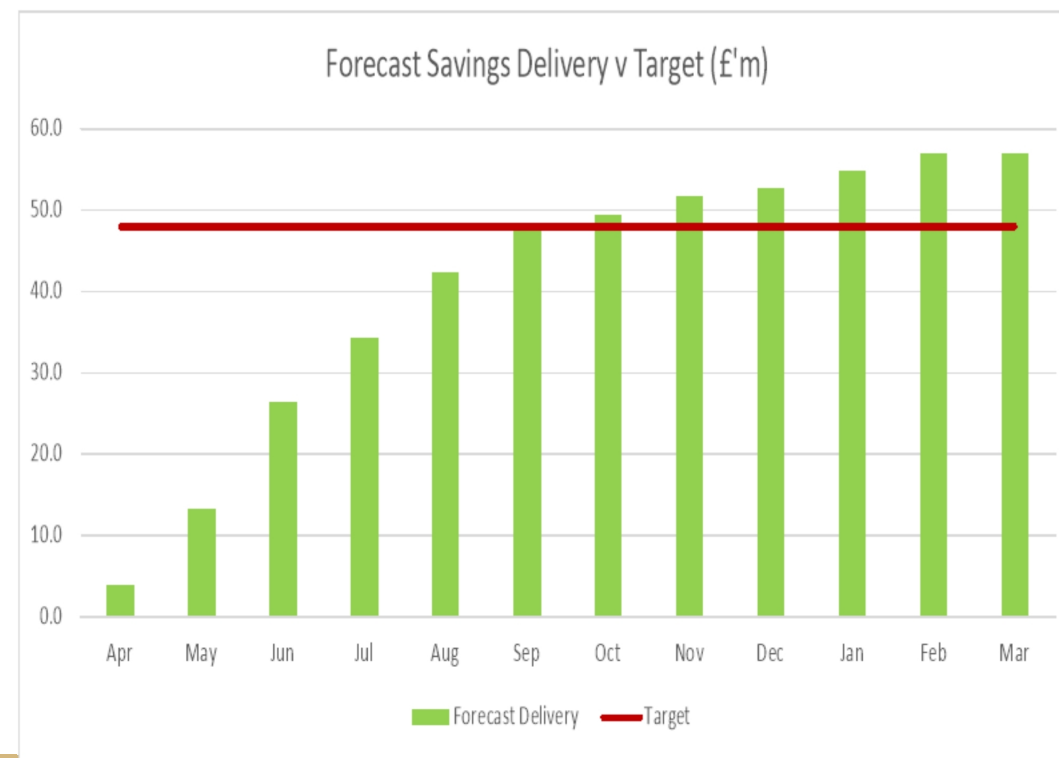
Capital

MAJOR CAPITAL SCHEMES (with in year spend)	Programme (£m)	Year to Date (£m)	Forecast Outturn (£m)	Current Over/Under Commitment (£m)	Comments
Conwy & Llandudno Junction Health & Social Care Centre	0.2	0.1	0.3	-0.1	BCUHB has received approval to proceed with the design and FBC proposal.
Estates Facility Advisory Board - Fire	2.8	1.3	2.6	0.2	Planned works are in situ with all project closely monitored and reviewed to achieve the forecast outturn to meet the CRL.
Estates Facility Advisory Board - Infrastructure	0.7	1.0	1.3	-0.6	Planned works are in situ with all project closely monitored and reviewed to achieve the forecast outturn to meet the CRL.
Estates Facility Advisory Board - Decarbonisation	0.4	0.3	0.4	-0.1	Planned works are in situ with all project closely monitored and reviewed to achieve the forecast outturn to meet the CRL.
Regional Orthopaedic Hub at Llandudno Hospital	11.3	6.4	11.6	-0.2	Contractors on site and programme of works are progressing to handover in 2025/26. There is a continuous process to review the works and cashflow to meet the critical path. It is acknowledged and has been communicated to WG that the project is currently behind the spend profile with formal commercial meetings taking place to mitigate risks.
Substance Misuse Building, Llandudno	0.1	0.1	0.1	0.0	The tenders has been received and there is current value engineering (VE) exercise taking place. The planning approval for change of use has now been received. However, as result of the VE the CRL has been revised and brokered into 2025/26 to manage the delay.
CAMHS Crisis Hub	0.3	0.2	0.3	0.0	Project is now completed and final account is being agreed.
Diagnostic Equipment 2024-25 - YG CT	2.9	0.5	2.9	0.0	Allocation for YG CT, fully implemented in the last quarter of the financial year.
Development of Flucloxacillin OPAT and Automation	0.1	0.1	0.1	0.0	The capital purchase of equipment to be delivered by the 31st March 2025
Backlog Maintenance	5.0	0.9	5.0	0.0	There has been a small delay in getting all the tenders issued and instructed. Planned works are due to be completed in March 2025.
Year End Funding – October 2024	1.7	0.1	1.7	0.0	Additional slippage monies has been received in month 6. The majority of the allocation is for 3 x DR Rooms, purchase orders are in place and delivery is time for March 2025.
Diagnostic and Medical Equipment 2024-25	2.5	1.4	2.5	0.0	Various medical equipment items form part of the £2.5m allocation. All purchase orders have been raised with delivery by the 31st March 2025.
Digital Equipment - December 2024-25	1.5	0.5	1.5	0.0	The funding is for additional hardware equipment and the transaction will complete by March 2025.
End of Year Funding - January 2025	0.9	0.0	0.9	0.0	The equipment has been ordered and deliveries due to take place throughout March 2025.
End of Year Funding - January - Imaging 2025	0.5	0.0	0.5	0.0	The equipment has been ordered and deliveries due to take place throughout March 2025.
End of Year Funding - January - Digital - 2025	0.2	0.0	0.2	0.0	The Tripleplay Patient Signeage will be procurement by the 31st march 2025.
YGC Electrical Infrastructure	1.9	0.2	2.0	-0.1	The Electrical Infrastructure will be done over a couple of years. The expenditure in year is the first instalment for the energy centre.
Year End Digital Funding - February 2025	0.5	0.0	0.5	0.0	The hardware equipment has been procured and the budget will be fully spent by the 31st March 2025
DPIF - Electronic Prescribing and Medicines Administration (EPMA) Implementation	1.0	0.0	1.0	0.0	The EPMA project implementation is over 2 years. The CRL forecast will be spent by the of the financial year.
DPIF - All Ages Mental Health Digital Solution	0.6	0.0	0.6	0.0	The IT project is being implemented over a couple of year and this allocation if for hardware that will be procure by March 2025.
HCF – Bladder Scanners	0.0	0.0	0.0	0.0	The equipment has been delivered and project is complete.
IRCF - Waunfawr Primary Care Hub – Fees to develop BJC	0.1	0.0	0.0	0.0	The project is in design stage and the fees will be spent as forecasted.
IRCF - Caledfryn, Denbigh Health and Wellbeing Hub – acquisition costs and related fees	1.1	0.0	1.1	0.0	The purchase of the building will be in March 2025.
All Wales Capital	36.4	13.0	37.3	-0.9	Over commitment
Total Capital Funding Available	48.8	20.1	48.8	0.0	

Savings Performance against Target

- The Health Board's financial plan has set a recurring savings target of £48.0m to be delivered in 2024/25, profiled on an equal twelfth's basis.
- Savings identification, reporting and monitoring has been developed through a Value and Sustainability thematic model, with work progressing well to identify opportunities. A large number of these opportunities have been converted to deliverable forecasts.
- Full year forecast value of Green Schemes totals £57.1m (including £42.4m Savings, £1.4m Income Generation, £12.6m Accountancy Gains and £0.7m Cost Avoidance), a forecast increase of £2.2m from Month 10. Of these, £29.0m have been identified as recurring, with a full year effect of £42.4m, and £28.0m are non-recurring savings. Accountancy Gains of £12.6m are fortuitous non-recurring reductions in expenditure resulting from reviews of accruals from the previous financial year. The gap of recurrent savings to the target is £5.6m, an improvement of £0.5m.
- In-month delivery includes Savings of £4.0m, £0.1m Income Generation and £1.4m Accountancy Gains totalling £5.6m, against a £4.0m Target
- The combined year to date delivery is £53.2m, of which £26.3m is recurring, against a £44.0m Target.

Service Performance against Target	Annual			Full Year Effect	Year to Date		
	Target	Forecast Delivery	Delivery v Target (+ve = adverse)		Target	Delivery	Delivery v Target (+ve = adverse)
West Integrated Health Community	8.7	6.7	2.0	8.7	8.0	6.2	1.8
Central Integrated Health Community	10.9	8.3	2.6	8.1	10.0	7.7	2.3
East Integrated Health Community	11.2	10.8	0.4	9.3	10.3	9.9	0.4
MHLD	4.2	7.8	-3.6	12.8	3.9	6.6	-2.7
Womens Services	1.4	1.4	-0.1	0.7	1.2	1.3	-0.1
Diagnostic and Specialist Clinical Support	2.1	1.2	0.9	0.2	1.9	1.2	0.8
Cancer Services	1.6	1.2	0.3	1.1	1.4	1.2	0.3
Dental North Wales	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Community Dental Services	0.2	0.1	0.1	0.0	0.2	0.1	0.1
Other Primary Care	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Contracts & Provider Income	0.0	1.1	-1.1	0.0	0.0	1.0	-1.0
Corporate & Support Services	3.7	4.4	-0.7	1.5	3.4	4.1	-0.7
Reserves	4.0	1.4	2.6	0.0	3.7	1.4	2.3
Saving Total	48.0	44.5	3.5	42.4	44.0	40.6	3.4
Accountancy Gains		12.6	-12.6			12.6	-12.6
Total		57.1	-9.1	42.4	44.0	53.2	-9.2



Savings Performance by Category

Savings - V&S Annual Performance against Target (£'m)	Target £m	Forecast Delivery								Delivery v Target (+ve = adverse) £m	
		V&S Board Categories									
		Workforce £m	Medicines Management £m	Procurement & Non-pay £m	CHC £m	Pathway £m	Other – Commissioning £m	Other - Primary Care £m	Income £m		Total £m
West Integrated Health Community	8.7	2.6	2.8	0.5	0.5	0.0	0.0	0.3	6.7	2.0	
Central Integrated Health Community	10.9	2.6	4.1	0.4	0.8	0.0	0.4	0.0	8.3	2.6	
East Integrated Health Community	11.2	5.4	3.8	0.8	0.7	0.0	0.0	0.1	10.8	0.4	
MHLD	4.2	1.1	0.1	0.1	2.5		4.1		7.8	-3.6	
Womens Services	1.4	1.4	0.0	0.0					1.4	-0.1	
Diagnostic and Specialist Clinical Support	2.1	0.1		1.1				0.0	1.2	0.9	
Cancer Services	1.6	0.4	0.8	0.0					1.2	0.3	
Dental North Wales	0.0			0.0					0.0	0.0	
Community Dental Services	0.2	0.1		0.0					0.1	0.1	
Other Primary Care	0.0			0.0	0.0				0.0	0.0	
Contracts & Provider Income	0.0						1.1		1.1	-1.1	
Corporate & Support Services	3.7	2.6	0.0	1.8	0.0	0.0	0.0	0.0	4.4	-0.7	
Reserves	4.0		0.4	1.0					1.4	2.6	
Total Cash Releasing Savings	48.0	16.2	12.0	5.7	4.5	0.0	5.6	0.0	0.5	44.5	3.5
Accountancy Gains		0.3	2.2	3.4	3.1		1.8	1.7		12.6	-12.6
Total		16.6	14.3	9.0	7.6	0.0	7.4	1.7	0.5	57.1	-9.1

Recurring Performance against Target	Annual			Year to Date		
	Target	Forecast Delivery	Delivery v Target (+ve = adverse)	Target	Delivery	Delivery v Target (+ve = adverse)
	£m	£m	£m	£m	£m	£m
Recurring	48.0	29.0	19.0	44.0	26.3	17.7
Non Recurring	0.0	28.0	-28.0		26.9	-26.9
Total	48.0	57.1	-9.1	44.0	53.2	-9.2



Savings Variance

			Full Year			Year to Date		
Service	Scheme / Opportunity Title	Recurrent / Non Recurrent	Plan	Forecast	Variance Forecast vs Plan	Plan	Achieved	Variance Achieved vs Plan
Cancer	Agency 6 Month Review of Accruals	NR	125,433	125,433	0	125,433	125,433	0
Cancer	Biosimilar Initiation, switching	R	17,952	47,761	29,809	16,456	46,520	30,064
Cancer	Clatterbridge EOY Contract Reconciliation	NR	143,000	143,000	0	143,000	143,000	0
Cancer	DOAC prescribing	R	39,156	37,027	-2,129	35,893	36,403	510
Cancer	Medical Agency	R	83,865	96,568	12,703	77,244	89,947	12,703
Cancer	National agreed contracts for secondary care drugs	R	888,869	577,471	-311,398	803,539	551,341	-252,198
	Optimising medicine prescribing within clinical pathways (NICE TA)	R	33,372	2,781	-30,591	30,591	2,781	-27,810
Cancer	Outsourcing savings (aseptics SACT)	R	17,550	1,950	-15,600	15,600	1,950	-13,650
Cancer	Outsourcing savings (homecare)	R	325,110	169,382	-155,728	298,017	169,382	-128,635
Contracts & Income	NCA unused 23/24 provision	NR	900,000	900,000	0	840,000	840,000	0
Contracts & Income	NHS E 2023/24 Contract Drugs Challenges	NR	597,042	597,042	0	597,042	597,042	0
Contracts & Income	RAH Contract Underperformance	NR	600,000	600,000	0	600,000	600,000	0
Corporate	AG Venue Cymru	NR	115,000	115,000	0	115,000	115,000	0
Corporate	CCS Framework Rebate	NR	23,444	23,444	0	23,444	23,444	0
Corporate	Cessation of RPO (Medacs) Gain share Contract	R	387,000	387,000	0	354,750	354,750	0
	Cessation of RPO (Medacs) Gain-share contract: VAT & credit notes	NR	92,823	92,823	0	92,823	92,823	0
	DDaT - Hold on scanning patient paper records due to EPR review	NR	80,000	80,000	0	73,333	73,333	0
Corporate	DDaT - McAfee Subscription & CISCO DUO	R	66,590	66,590	0	60,536	60,536	0
Corporate	DDaT - Pay Savings	NR	241,887	241,887	0	240,298	240,298	0
	DDaT - Reduction in external storage of records - Oasis	NR	30,000	30,000	0	27,500	27,500	0
Corporate	Director of Primary Care (vacancy)	NR	80,772	61,860	-18,912	80,772	61,860	-18,912
Corporate	Executive Vacancy - Chief Operating Officer 24/25	NR	112,602	80,430	-32,172	112,602	80,430	-32,172
Corporate	Finance Departement Staff Savings 24/25	R	134,845	134,845	0	108,666	108,666	0
Corporate	Finance Departement Staff Savings 24/25	NR	345,347	345,347	0	331,556	331,556	0
Corporate	Free of Charge Drugs	NR	406,963	406,963	0	406,963	406,963	0
	New Medacs Contract - Medical Bank & Medical Agency Optimisation	R	261,625	261,625	0	224,250	224,250	0
	Non recurrent vacancy slippage, Local Public Health team 24/25	NR	121,713	121,713	0	121,713	121,713	0
Corporate	Review of Invoices on Hold	NR	448,239	448,239	0	448,239	448,239	0
Corporate	RSUK - VAT Recovery - Prior Year	NR	729,365	729,365	0	729,365	729,365	0
Corporate	Staff savings oppurtuinities 24/25	R	127,193	127,193	0	116,594	116,594	0
Corporate	VAT Recovery	NR	963,882	963,882	0	963,882	963,882	0
DSCS	Contract Monitoring - Radiology AML	NR	24,316	24,316	0	24,316	24,316	0
DSCS	Financial Accounting Gains	NR	86,641	86,641	0	86,641	86,641	0
DSCS	Financial Accounting Gains - Roche Contract	NR	190,430	190,430	0	190,430	190,430	0
DSCS	FIT Testing Endoscopy PHW Contract	R	52,680	52,680	0	48,290	48,290	0
DSCS	LINC Project	NR	453,000	875,148	422,148	415,250	823,344	408,094
DSCS	Powys SLA Audiology Adults	R	38,306	38,306	0	35,114	35,114	0
DSCS	Radiotherapy Linear Accelerator Warranty	NR	36,490	36,490	0	36,490	36,490	0
DSCS	Recruit substantive staff instead of using agency	R	21,555	21,555	0	19,160	19,160	0
DSCS	Toxicology Service	R	29,202	29,202	0	26,769	26,769	0
Estates	23/24 Gas energy accruals	NR	431,893	431,893	0	431,893	431,893	0
Estates	Director of Estates (vacancy)	NR	176,716	196,351	19,635	176,716	196,351	19,635
Estates	Disposal of Ala Road	R	60,738	6,746	-53,992	53,992	0	-53,992
Estates	Disposal of Buildings - Cilan	R	4,969	4,969	0	4,416	4,416	0
Estates	Rates Rebate - Preswylfa	NR	185,612	185,612	0	185,612	185,612	0
HC - Centre	Biosimilar Initiation, switching	R	538,273	1,187,603	649,330	516,399	1,105,560	589,161

Savings Variance

Service	Scheme / Opportunity Title	Recurrent / Non Recurrent	Full Year			Year to Date		
			Plan	Forecast	Variance Forecast vs Plan	Plan	Achieved	Variance Achieved vs Plan
HC - Centre	CAMHS Non-Recurrent Vacancy Savings	NR	547,985	547,985	0	502,319	502,319	0
HC - Centre	CAMHS OOA Acccountancy Gains	NR	626,000	626,000	0	626,000	626,000	0
HC - Centre	Closure of 4 X GP Beds - Holywell Community Hospital	NR	19,092	19,092	0	17,501	17,501	0
HC - Centre	Community Hospital Management Support	NR	48,997	48,997	0	44,914	44,914	0
HC - Centre	Continuing Health Care (CHC) AG	NR	517,013	517,013	0	517,013	517,013	0
HC - Centre	Continuing Health Care Schemes	R	734,000	771,110	37,110	672,837	771,110	98,273
HC - Centre	De-commissioning of Ward 11 as escalation space	R	680,814	222,394	-458,420	595,712	137,292	-458,420
HC - Centre	DOAC prescribing	R	1,353,976	1,252,607	-101,368	1,308,077	1,245,648	-62,429
HC - Centre	Dressings review	R	80,000	18,769	-61,231	73,333	18,769	-54,564
HC - Centre	GMS Accountancy Gain	NR	130,992	130,992	0	130,992	130,992	0
HC - Centre	GMS Accountancy Gain - Roche Contract	NR	397,997	397,997	0	397,997	397,997	0
HC - Centre	LAC Income over-achievement	NR	400,000	400,000	0	333,330	400,000	66,670
HC - Centre	National agreed contracts for secondary care drugs	R	135,968	98,824	-37,144	122,257	91,922	-30,335
HC - Centre	Nurse Agency Run Rate Reduction	R	268,705	270,831	2,126	235,117	237,243	2,126
HC - Centre	Optimising medicine prescribing within clinical pathways (NICE TA)	R	38,496	189,389	150,893	35,288	153,054	117,766
HC - Centre	Optomisation of generic prescribing	R	121,666	135,664	13,998	118,497	117,911	-586
HC - Centre	P&MM Accountancy Gains (March data lower than national and local forecasts)	NR	604,110	604,110	0	604,110	604,110	0
HC - Centre	PC&C Services - Contingency Reserve	R	10,000	10,000	0	9,167	9,167	0
HC - Centre	PC&C Services - Telehealth	NR	50,000	50,000	0	45,833	45,833	0
HC - Centre	PC&C Services - Temporary Vacancies	NR	245,906	245,906	0	225,415	225,415	0
HC - Centre	Polypharmacy medication reviews	R	300,000	622,960	322,960	275,000	583,580	308,580
HC - Centre	Review low value medicines prescribed including liothyronine	R	135,432	12,301	-123,131	124,146	12,301	-111,845
HC - Centre	Review of Blood glucose test strips, optimise product selection	R	40,084	75,020	34,936	33,917	75,020	41,103
HC - Centre	Scriptswitch & Optomise savings	R	250,000	526,391	276,391	229,167	483,034	253,867
HC - Centre	YGC NR Vacancies	NR	55,338	55,338	0	55,338	55,338	0
HC - East	Accountancy Gain - Locum Medical	NR	63,764	63,764	0	63,764	63,764	0
HC - East	Accountancy Gain - Renal PO	NR	83,000	83,000	0	83,000	83,000	0
HC - East	Accountancy Gain - ED PO	NR	24,091	24,091	0	24,091	24,091	0
HC - East	Accountancy Gain - Locum Medical Surgery	NR	51,083	51,083	0	51,083	51,083	0
HC - East	AHP Agency Reduction - Therapies	R	240,000	199,000	-41,000	220,000	186,948	-33,052
HC - East	Biosimilar Initiation, switching	R	442,735	215,575	-227,160	382,034	177,429	-204,605
HC - East	Catering Consumables	R	92,169	180,000	87,831	84,002	165,000	80,998
HC - East	Cease inco sheet usage	R	4,215	4,215	0	3,794	3,794	0
HC - East	CHC Cost containment	R	604,512	571,944	-32,568	554,512	559,944	5,432
HC - East	Childrens - Medical Agency Reduction	R	250,000	500,000	250,000	229,167	431,253	202,086
HC - East	Childrens CHC Package Review	R	120,000	106,858	-13,142	112,500	106,858	-5,642
HC - East	Consultant sessions and Intensity Bandings	R	56,628	56,628	0	49,800	49,800	0
HC - East	Continuing Health Care (CHC) AG	NR	480,267	480,267	0	480,267	480,267	0
HC - East	DOAC prescribing	R	1,489,958	1,376,198	-113,760	1,448,864	1,359,262	-89,602
HC - East	Dressings review	R	60,000	10,778	-49,222	55,000	10,778	-44,222
HC - East	GMS Accountancy Gain	NR	209,465	209,465	0	209,465	209,465	0
HC - East	GMS Accountancy Gain - Roche Contract	NR	393,501	393,501	0	393,501	393,501	0
HC - East	Increase of catering income	R	88,698	88,698	0	81,301	81,301	0
HC - East	Increased Income from Residences	R	75,521	28,320	-47,201	66,081	18,880	-47,201
HC - East	Medical Agency & Locum Reduction - Primary Care - Managed Practices	R	350,000	310,000	-40,000	319,000	291,248	-27,752
HC - East	Medical Agency Reduction - Community Services	R	261,163	460,000	198,837	239,399	394,183	154,784

Savings Variance

Service	Scheme / Opportunity Title	Recurrent / Non Recurrent	Full Year			Year to Date		
			Plan	Forecast	Variance Forecast vs Plan	Plan	Achieved	Variance Achieved vs Plan
HC - East	National agreed contracts for secondary care drugs	R	157,451	126,521	-30,930	141,838	120,986	-20,852
HC - East	Nurse Staffing - Agency Reduction	NR	453,996	453,996	0	363,197	363,197	0
HC - East	Optimising medicine prescribing within clinical pathways (NICE TA)	R	40,704	70,249	29,545	37,312	66,342	29,030
HC - East	Optomisation of generic prescribing	R	223,666	280,855	57,189	218,636	260,817	42,181
HC - East	Outsourcing savings (homecare)	R	118,128	146,185	28,057	103,362	145,696	42,334
HC - East	P&MM Accountancy Gains (March data lower than national and local forecasts)	NR	783,657	783,657	0	783,657	783,657	0
HC - East	Pico dressings	NR	7,511	7,511	0	7,511	7,511	0
HC - East	Polypharmacy medication reviews	R	350,004	746,919	396,915	320,837	699,505	378,668
HC - East	Portering Staffing	R	30,996	30,996	0	28,413	28,413	0
HC - East	Recharging AMD drug costs for out of area patients	R	60,000	58,400	-1,600	55,000	53,400	-1,600
HC - East	Reduce B3 Cook/Team Leader at weekends	R	6,996	6,996	0	6,413	6,413	0
HC - East	Reduce window cleaning from twice to one per annum in hospitals	R	5,700	5,700	0	5,225	5,225	0
HC - East	Reduction in spend on Nursing Agency - EC	R	169,000	333,540	164,540	158,000	309,895	151,895
HC - East	Reduction in spend on Nursing Agency - Medicine	R	240,000	764,555	524,555	220,000	724,555	504,555
HC - East	Reduction in spend on Nursing Agency - Surgery	R	230,719	366,764	136,045	213,370	333,764	120,394
HC - East	Renal PD Accountancy Gain	NR	98,000	98,000	0	98,000	98,000	0
HC - East	Renal VAT - Mold Clinic	NR	245,869	245,869	0	245,869	245,869	0
HC - East	Review low value medicines prescribed including liothyronine	R	96,684	10,625	-86,059	88,627	10,625	-78,002
HC - East	Review of Blood glucose test strips, optimise product selection	R	47,125	74,077	26,952	39,875	72,277	32,402
HC - East	RSUK - VAT Recovery - In Year	R	138,012	138,012	0	119,001	119,001	0
HC - East	Scriptswitch & Optomise savings	R	350,004	639,237	289,233	320,837	594,677	273,840
HC - East	Theatre Consumable Savings	R	34,854	34,854	0	30,944	30,944	0
HC - East	Urology Scope Stacker	R	75,000	38,700	-36,300	65,625	29,325	-36,300
HC - West	Accruals Released - Area	NR	12,992	12,992	0	12,992	12,992	0
HC - West	Accruals Released - Area GMS	NR	211,000	211,000	0	211,000	211,000	0
HC - West	Accruals Released - YG	NR	26,154	26,154	0	26,154	26,154	0
HC - West	Acute paediatric medical staffing - Efficiencies	R	244,569	74,897	-169,672	222,797	57,375	-165,422
HC - West	BCU Accommodation for CHC West team	R	9,876	1,646	-8,230	9,876	0	-9,876
HC - West	Biosimilar Initiation, switching	R	169,915	254,590	84,676	152,341	226,138	73,798
HC - West	CAMHS - Temporary clinical efficiencies	NR	134,088	112,000	-22,088	119,933	103,000	-16,933
HC - West	Childrens CHC Package Review	R	100,000	100,000	0	91,667	91,667	0
HC - West	Continence Products	R	50,000	4,613	-45,387	45,837	0	-45,837
HC - West	Continuing Health Care (CHC) AG	NR	1,449,947	1,449,947	0	1,449,947	1,449,947	0
HC - West	Conversion of Cryocool to Ice Machine	R	2,880	2,880	0	2,520	2,520	0
HC - West	Director Post Vacancy	NR	67,000	67,000	0	67,000	67,000	0
HC - West	Directorate Grip and Control - Pay related	NR	96,500	107,000	10,500	91,320	102,000	10,680
HC - West	DOAC prescribing	R	1,095,519	995,029	-100,490	1,038,628	940,743	-97,885
HC - West	Dressings review	R	30,000	3,329	-26,671	27,500	3,329	-24,171
HC - West	Flexible Job Plan Sessions	NR	83,603	83,602	-0	73,152	73,152	-0
HC - West	GMS Accountancy Gain	NR	162,857	162,857	0	162,857	162,857	0
HC - West	GMS Accountancy Gain - Roche Contract	NR	394,344	394,344	0	394,344	394,344	0
HC - West	Grip and control measures - Acute Med Locum Reduction	R	248,000	188,000	-60,000	225,000	169,000	-56,000
HC - West	Grip and control measures - pay SDEC	R	241,500	153,000	-88,500	207,000	133,000	-74,000
HC - West	Home Enteral Tube Feeding (Ancilliary items)	NR	20,000	20,000	0	18,326	17,500	-826
HC - West	Implement Workforce Plan for Health Board Managed Practices	R	90,000	5,900	-84,100	60,000	0	-60,000
HC - West	Implement Workforce Plan for Health Board Managed Practices	NR	234,104	214,100	-20,004	224,684	200,000	-24,684

Savings Variance

			Full Year			Year to Date		
Service	Scheme / Opportunity Title	Recurrent / Non Recurrent	Plan	Forecast	Variance Forecast vs Plan	Plan	Achieved	Variance Achieved vs Plan
HC - West	Increase of catering income	R	218,024	205,000	-13,024	199,848	205,000	5,152
HC - West	Llandudno Decant - Pay	NR	150,000	133,000	-17,000	150,000	133,000	-17,000
HC - West	Medicine Grip and Control - Non-Pay	R	80,000	29,000	-51,000	70,000	29,000	-41,000
HC - West	National agreed contracts for secondary care drugs	R	165,855	118,821	-47,034	149,386	115,599	-33,787
HC - West	Ophthalmology Private Patient Income	R	53,000	82,000	29,000	48,583	82,000	33,417
HC - West	Optimising medicine prescribing within clinical pathways (NICE TA)	R	30,800	107,929	77,129	28,233	103,324	75,090
HC - West	Optomisation of generic prescribing	R	107,361	127,651	20,290	104,762	123,040	18,278
HC - West	Outsourcing savings (homecare)	R	28,893	89,082	60,189	26,485	89,082	62,597
HC - West	P&MM Accountancy Gains (March data lower than national and local forecasts)	NR	556,230	556,230	0	556,230	556,230	0
HC - West	Polypharmacy medication reviews	R	250,000	606,825	356,825	229,167	553,288	324,121
HC - West	Reduction in Agency Pay - Therapies	NR	186,000	84,000	-102,000	164,500	74,000	-90,500
HC - West	Residential Accommodation rental increase (West)	R	65,416	26,000	-39,416	54,513	26,000	-28,513
HC - West	Review low value medicines prescribed including liothyronine	R	48,156	6,458	-41,698	44,143	6,215	-37,928
HC - West	Review of Blood glucose test strips, optimise product selection	R	24,375	66,642	42,267	20,625	63,874	43,249
HC - West	Review of GP Bed Fund Contract 24.25	NR	24,024	13,500	-10,524	22,022	13,250	-8,772
HC - West	RSUK - VAT Recovery - In Year	R	60,093	60,093	1	52,929	49,244	-3,685
HC - West	SACC - Efficiency - Reduce Escalated Beds	R	160,000	370,000	210,000	140,000	335,000	195,000
HC - West	SACC - Grip & Control - Medical Pay	R	260,000	319,000	59,000	210,167	296,000	85,833
HC - West	Scriptswitch & Optomise savings	R	200,000	401,882	201,882	183,333	372,685	189,352
HC - West	West IHC - Continuing Health Care Schemes	R	661,000	439,399	-221,601	605,917	402,783	-203,134
MH&LDS	Continuing Health Care (CHC) AG	NR	481,284	481,284	0	481,284	481,284	0
MH&LDS	Director of Nursing Recruitment Vacancy	NR	64,981	73,104	8,123	64,981	73,104	8,123
MH&LDS	Medical Agency Reduction	R	95,184	95,184	0	83,368	83,368	0
MH&LDS	National agreed contracts for secondary care drugs	R	71,965	21,567	-50,398	61,162	20,577	-40,585
MH&LDS	Outsourcing savings (primary care dispensed)	R	60,996	50,833	-10,163	55,913	45,750	-10,163
MH&LDS	Reduction in Nursing Agency Spend	R	254,388	218,426	-35,962	233,189	196,145	-37,044
MH&LDS	Reduction in Out of Area Placements	R	5,450,544	4,083,063	-1,367,481	4,649,832	3,282,351	-1,367,481
MH&LDS	Reduction in Unfunded Posts - Director of transformation	NR	124,128	124,128	0	113,784	0	-113,784
MH&LDS	Right Care Programme	R	2,500,000	2,500,000	0	2,263,889	2,299,249	35,361
Midw & Womens	Ceasing of Pay Protection	R	10,548	10,548	0	9,669	9,669	0
Midw & Womens	Consultant OOHs Intensity Allowance Review	R	25,925	25,925	0	23,266	23,266	0
Midw & Womens	E-roster Housekeeping	NR	53,073	53,073	0	53,073	53,073	0
Midw & Womens	Medical Agency Expenditure Reduction	R	15,259	15,259	0	13,464	13,464	0
Midw & Womens	Medical Commitment Award	NR	40,259	40,259	0	36,904	36,904	0
Midw & Womens	National agreed contracts for secondary care drugs	R	31,022	45,926	14,904	27,781	43,211	15,430
Midw & Womens	Non Recurrent BFI Re-Assessment Spend Reduction	NR	11,400	11,400	0	10,450	10,450	0
Midw & Womens	Womens BFI Accreditation	NR	11,400	11,400	0	10,450	10,450	0
Midw & Womens	Nursing & Midwifery Agency Exp Run Rate Reduction	R	65,076	41,068	-24,008	59,653	39,492	-20,161
Midw & Womens	Pay Expenditure Run Rate Reduction	NR	266,652	642,626	375,973	263,041	609,884	346,842
Midw & Womens	Vacancy Factor	R	500,000	529,685	29,685	458,333	485,544	27,211
Primary Care	Accountancy Gain - Integrated Clinical Delivery	NR	147,794	147,794	0	147,794	147,794	0
Primary Care	Primary Care	NR	147,794	147,794	0	147,794	147,794	0
Primary Care	Continuing Health Care (CHC) AG	NR	187,029	187,029	0	187,029	187,029	0
Subtotal			47,030,457	47,995,428	964,971	43,915,617	44,968,751	1,053,135
Procurement			1,208,051	1,657,639	449,588	979,847	1,459,580	479,734
Close of PO's AG			868,532	868,532	0	868,532	868,532	0
Enhanced mileage rates			229,230	334,142	104,912	210,127	315,040	104,912
Enhanced Recruitment Control Savings			2,272,251	6,185,656	3,913,405	2,272,251	5,548,127	3,275,876
Telephone Line Rental			12,914	12,981	67	11,838	11,893	56
Total			51,621,436	57,054,380	5,432,944	48,258,212	53,171,924	4,913,712



Teitl adroddiad: <i>Report title:</i>	Corporate Planning Update			
Adrodd i: <i>Report to:</i>	Local Partnership Forum			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	6th May 2025			
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>The purpose of this paper is to provide an update on key areas of corporate planning including:</p> <ol style="list-style-type: none"> 1. Annual Delivery Plan for 2024/25 2. 2025/28 IMTP and Ministerial Priority Templates for 2025/26 3. Development of the 2025/26 Annual Delivery Plan 4. Next steps for development the IMTP Planning for 2026/29. 			
Argymhellion: <i>Recommendations:</i>	The Local Partnership Forum is asked to NOTE the updates provided, along with the next steps going forward.			
Arweinydd Gweithredol: <i>Executive Lead:</i>	Paolo Tardivel, Interim Executive Director of Transformation and Strategic Planning			
Awdur yr Adroddiad: <i>Report Author:</i>	Dylan Pierce Williams, Interim Assistant Director of Corporate Planning			
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	<p>Arwyddocaol <i>Significant</i> <input type="checkbox"/></p> <p>Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i></p>	<p>Derbyniol <i>Acceptable</i> <input type="checkbox"/></p> <p>Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>General confidence / evidence in delivery of existing mechanisms / objectives</i></p>	<p>Rhannol <i>Partial</i> <input type="checkbox"/></p> <p>Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol</p> <p><i>Some confidence / evidence in delivery of existing mechanisms / objectives</i></p>	<p>Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/></p> <p>Dim hyder/tystiolaeth o ran y ddarpariaeth</p> <p><i>No confidence / evidence in Delivery</i></p>
<p>Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:</p> <p><i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i></p>				
Cyswllt ag Amcan/Amcanion Strategol: <i>Link to Strategic Objective(s):</i>	Links to national strategic objectives, including A Healthier Wales and the updated Ministerial priorities, as well as addressing local priorities			

	<p>and strategic objectives as described within the HB's long term strategy.</p> <p>The Plan is also required to respond to requirements following the escalation into Special Measures in March 2023.</p> <p>The Plan also reflects shared priorities within the strategic partnerships in North Wales and nationally.</p>
<p>Goblygiadau rheoleiddio a lleol:</p> <p><i>Regulatory and legal implications:</i></p>	<p>There is a statutory duty to develop an IMTP under the NHS (Wales) Act 2006, as amended by the NHS Finance (Wales) Act 2014. The Health Board must prepare a plan which sets out its strategy for securing financial balance, whilst improving the health of the population and providing healthcare to meet needs.</p> <p>The Health Board has submitted a balanced and approvable IMTP for 2025/28, and has therefore met its statutory duty.</p>
<p>Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP7 has an EqIA been identified as necessary and undertaken?</i></p>	<p>An Integrated Impact Assessment Template was included within the papers presented to the Board meeting on 27th March 2025 and summarises key issues.</p>
<p>Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i></p>	<p>An Integrated Impact Assessment Template was included within the papers presented to the Board meeting on 27th March 2025 and summarises key issues.</p>
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR)</p> <p><i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i></p>	<p>Failure to fulfil the statutory duties as described above. This links to BAF risk 2.4 (see below.)</p> <p>Risks in relation to the financial position are noted within the Plan.</p> <p>Individual service areas are accountable for ensuring any risks within service delivery areas are identified and recorded, and mitigations set in place as far as is feasible.</p>
<p>Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Financial implications as a result of implementing the recommendations</i></p>	<p>The financial implications are set out in the Finance section of the IMTP and reflect the organisations agreed Financial Plan.</p>
<p>Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	<p>The workforce projections for 2024-25 are set out within the IMTP.</p>

<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	<p>The approach to the development of the IMTP, and sharing of outline priorities has been presented and discussed at the Health Local Partnership Forum (LPF), Health Professionals Forum (HPF, Stakeholder Reference Group (SRG) and PFIG Committee. This has shaped the approach in formulating the annual plan.</p>
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p><i>Links to BAF risks:</i> (or links to the Corporate Risk Register)</p>	<p>Failure to deliver an approved integrated medium term plan incorporating service, workforce, financial balance and delivery of key performance targets to Welsh Government (to ensure statutory duties are met) resulting in a regulatory audit opinion.</p>
<p>Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol)</p> <p><i>Reason for submission of report to confidential board (where relevant)</i></p>	<p>Not applicable</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p>Next Steps: Implementation of recommendations</p>	

Corporate Planning Update

▪ Introduction

The Health Board recognises that the Local Partnership Forum (LPF) plays a critical role in supporting corporate planning responsibilities by bringing together stakeholders to collaborate, share expertise, and align goals.

The purpose of this paper is to update the LPF on the following areas of work relating to corporate planning:

- The 2024/25 Annual Delivery Plan (ADP)
- Board approval of the 2025/28 IMTP and 2025/26 Ministerial Priority Templates
- The development and monitoring of the 2025/26 ADP
- Review of the integrated planning process and next steps for development of the 2026/29 IMTP

▪ 2024/25 Annual Delivery Plan

The 2024/25 Annual Delivery Plan contained 314 milestones set within the context of the 5 previously agreed Strategic Objectives. At the time of writing the end of year assurance activity has not yet completed, however the team are forecasting an 80%+ delivery rate for the year as a whole.

In acknowledging the high level of overall completion, it is important to recognise that not all objectives are equal and some of the outstanding elements represent significant challenges for the Health Board. In particular, this includes work pertaining to Strategic Objective 4 which will require continued focus in 2025/26 to ensure delivery expectations are met and clinical services are strengthened.

It should also be noted that a number of the commitments delivered in the 2024/25 ADP were foundational in nature. Subsequent actions, which have been included in the 2025/26 ADP, intend to increase the pace of delivery and improvements to patient care.

▪ 2025/28 IMTP and Ministerial Priority Templates

On the 27th March 2025 the Health Board approved a financially balanced three-year IMTP which was submitted to Welsh Government (WG) on the 31st March 2025. This is the first time that the Health Board has been able to submit a financially balanced plan, albeit with a quantified level of financial risk associated with delivery.

The IMTP builds on the 5 strategic objective areas in the 2024/25 Annual Plan with more focussed and targeted priorities, see below.

Objective 1: Building an effective organisation		Objective 4: Improving quality, outcomes and experience	
1A	Effective systems of governance	4A	Prevention and Early Intervention
1B	Establishing the Foundations for the Future	4B	Primary Care including Clusters
1C	Responding to Legislative Requirements	4C	Community Care
1D	Implementing the Quality Management System	4D	Planned Care, Cancer & Diagnostics
Objective 2: Developing strategy and long-lasting change		4E	Urgent and Emergency Care
2A	Developing & delivering a Health Board Strategy & Clinical Services Plan	4F	Adult Mental Health & Learning Disability
2B	Strengthening Planning and Commissioning	4G	CAMHS
2C	Improving the Environment, Estate and Facilities	4H	Neurodevelopment
2D	Enhancing digital, data and technology approaches	4I	Dementia
2E	Developing and delivering value and sustainability	4J	Currently 'Challenged Services'
2F	Improving workforce planning and development	4K	Women's services
2G	Working with regional partners	4L	Children & Young People
Objective 3: Compassionate culture, leadership & engagement		4M	Pharmaceutical services
3A	Culture Development	4N	Palliative, End of Life and Bereavement Care
3B	Leadership Development	4O	Dental services
3C	Citizen engagement and partnership working	4P	Diabetes
3D	Welsh language and culture	Objective 5: Effective environment for Learning and skills development	
		5A	University & Further Education Partnership
		5B	Research, Development and Innovation
		5C	Academic Careers
		5D	Intelligence Led
		5E	Learning Organisation

The 2025/28 IMTP increases the emphasis on longer term strategic pieces of work and is much more focused on the specific improvements in key patient facing areas, whilst recognising the importance of the other objectives in enabling the required growth in organisational capability.

In addition to the IMTP and in line with the 2025/28 WG Planning Framework the Health Board also submitted detailed plans, in the form of Ministerial Priority Templates, to deliver the priorities and targets for 2025/26 as set by the Cabinet Secretary for Health and Social Care, as below:



These 5 priorities are accompanied by a set of delivery expectations and supported by a series of enabling actions, detail of both of which can be found in Annex 1 and 2. All of these elements will be tracked as part of the overarching IMTP tracking process.

▪ **The development and monitoring of the 2025/26 ADP**

Supplementary to the 2025/2028 IMTP the Health Board has produced an Annual Delivery Plan for 2025/2026, which sets out the critical milestones required to deliver the priorities for each strategic objective area. All critical milestones which will be monitored on a quarterly basis with progress reported to the Board.

In addition, arrangements are being put in place to cascade the priorities in the plan throughout the organisation via annual objective setting as part of the Performance and Appraisal Development Review (PADR) process.

The ADP will be central to our proposed continuous planning processes, allowing adjustments and changes to be made quickly to meet challenges identified via ADP reporting throughout the planning year.

▪ **Review of the integrated planning process and next steps for the development of the 2026/29 IMTP**

The Health Board Corporate Planning Team is conducting a review of learning from the most recent planning cycle with stakeholders, updating the Integrated Planning Framework with any associated improvements.

Initial feedback from staff, partners and stakeholder who were directly involved in contributing to the development of the IMTP include:

- **Engagement** allowing for input and feedback from staff, partners and wider range of stakeholders throughout the year, ensuring the right level of strategic input from appropriate stakeholders.
- **Moving to a continuous planning cycle** with early identification of priorities and resources, and timely planning process that allow for better engagement and planning, not waiting until Q3 to commence the 'once a year' cycle.
- **Activity, performance, finance, workforce integration** within a single model, early in the process and kept up to date through the year, rather than attempting to triangulate separate sources of information towards the end of the process.
- **Prioritisation of resources and decision-making** improvements through greater clarity on information required and the approach being employed, earlier in the process.
- **Increase planning support and build planning capability** across the Health Board including but not limited to – development and management of service change plans, business case development, prioritisation/de-prioritisation, expanding the use of data and analytics.
- **Structure, coverage and focus of the plan** to be agreed at the outset, ensuring that the resultant plan meets a tight brief and the number of deliverables is achievable.

The next steps will be to focus on the development of proposals to enhance capacity and capability for organisational wide planning, building upon the action plan produced following the BCUHB Independent Review of Planning published in 2024/25.

Stakeholder participation within the Health Board corporate planning structures is crucial for ensuring that healthcare workers' voices are heard in the planning and decision-making processes. As advocates for employee rights and well-being, LPF stakeholders have provided valuable insights on workforce planning issues such as staffing levels, working conditions, pay, training, and occupational health and safety. Continued engagement with LPF will be facilitated through the planning cycle.

Learning gathered from staff, stakeholders and partners will also support the development of the next Integrated Planning Framework. The focus will be to implement a continuous planning process, with emphasis on ongoing review, responsiveness to change, and integration of real-time data and feedback. This will help ensure that care delivery, service models and organisational strategy remain relevant and effective within a constantly evolving environment.

▪ Recommendations

The Local Partnership Forum is asked to **NOTE** the updates provided, along with the next steps going forward.



j Teitl adroddiad: <i>Report title:</i>	Workforce and Organisational Directorate Overview Report			
Adrodd i: <i>Report to:</i>	Local Partnership Forum			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Tuesday, 06 May 2025			
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>This report provides an update on key activities within the following Workforce functions:</p> <ul style="list-style-type: none"> • Workforce Partnership Group • Job Evaluation • Workforce Policies • Employee Relations • Workforce Culture, Organisational Development and Engagement • Equality and Human Rights • Health & Wellbeing 			
Argymhellion: <i>Recommendations:</i>	The Forum is asked to NOTE this report.			
Arweinydd Gweithredol: <i>Executive Lead:</i>	Jason Brannan - Deputy Director of People Services			
Awdur yr Adroddiad: <i>Report Author:</i>	Gill Querci, Business Support Manager to the Executive Director for People Services			
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input type="checkbox"/> Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	Derbyniol <i>Acceptable</i> <input type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i>
<p>Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:</p> <p><i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i></p>				
Cyswllt ag Amcan/Amcanion Strategol: <i>Link to Strategic Objective(s):</i>				

Goblygiadau rheoleiddio a lleol: <i>Regulatory and legal implications:</i>	Compliance with Employment Law
Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal? <i>In accordance with WP7 has an EqIA been identified as necessary and undertaken?</i>	N/A
Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal? <i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i>	N/A
Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR) <i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i>	CRR 2836 – Stress-related absence CRR 2376 – Sickness absence
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	There are no direct financial implications as a result of this report.
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	There are no direct workforce implications as a result of this report.
Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori <i>Feedback, response, and follow up summary following consultation</i>	N/A
Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol) <i>Links to BAF risks: (or links to the Corporate Risk Register)</i>	N/A
Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol) <i>Reason for submission of report to confidential board (where relevant)</i>	N/A
Camau Nesaf: Gweithredu argymhellion <i>Next Steps: Implementation of recommendations</i>	
Rhestr o Atodiadau: <i>List of Appendices:</i>	

The Workforce Partnership Group

The Workforce Partnership Group was established to promote and deliver a regular dialogue between the People Services Directorate, senior managers and Trade Union partners on matters relating to the BCU workforce. It enables managers and Trade Unions to put forward issues affecting the workforce for discussion and decision-making.

Attendance Management

The workforce partnership group receives a monthly update on employee sickness absence. As at the end of March 2025 monthly sickness absence was 5.58% a decrease on the 6.76 % recorded in December 2024

The rolling figure saw a slight increase from 6% to 6.05%. The National target level for absence is 4.2% and BCUHB remains significantly above that level. It is reported anecdotally from both management and trade union partners that we are witnessing younger people with much more serious conditions.

As at the end of March 2025 there were 1271 staff off work due to sickness, 618 staff had been off work for more than 28 days. The highest recorded rate of sickness at 8.12% was health care support workers.

29% of all sickness is recorded as being due to stress, anxiety and depression.

The application of temporary injury allowance continues to be undertaken in partnership. A regular report is submitted to the Workforce Partnership Group.

The Managing Attendance in Work module of the ASIM (A Step into Management) training programme has been updated by a small group of workforce and trade union representatives. This reinforces the message around compassionate leadership and the need to make reasonable adjustments to facilitate an early return to work.

Professor Michael Rees has been requested to undertake analysis on reasons for absence and recommendations on process and policy changes. Staff side partners will form part of this review.

Finally, we have been able to appoint a new Head of Staff Wellbeing and Support, an experienced psychologist from a large group hospital has been appointed and will commence in August 2025.

Organisational Change

The Workforce Partnership Group continues to engage with and consult upon matters relating to organisational change. The progress of ongoing organisational change issues continues to be monitored and all Change Proposals and Outcome documents are posted on BetsiNet. Reports have been received on proposed changes to:

- West CHC and ND Service
- Llandudno Orthopaedic Centre
- Realignment of Shift patterns on ward 11 YGC
- Relocation of the Immunisation team school nursing service, currently based in Intec, Parc Menai.

An update was provided in relation to the Living Wage Pay Circular. This raised the minimum hourly rate to £12.60 per hour in line with the Living Wage Foundation rate. This is equivalent to a full-time salary of £24,638, and is an advanced pay award and does not form a new baseline from which any future pay award will be calculated

Employment Case Management

The People Services Operational teams support the management of formal employee relations cases across the Health Board. The operations teams continue to advise on all capability (health) cases. The operations teams also advise upon all informal and formal Respect and Resolution cases. Work on Employment Tribunal cases is progressively managed by the People Operations teams.

The numbers of cases have seen a significant reduction from the same period last year, from 51 live cases at the end of March 2024 to 19 at the end of March 2025 (37% reduction). This is testament to the work of the People Services teams to support managers to resolve cases as quickly as possible, alongside adoption of the principles of Aneurin Bevan University Health Board and HEIW's Reducing Harm approach and Mersey Care's Four-Step process as part of the implementation of a restorative just and learning culture. The aim of adopting these approaches in our employee relations cases is to reduce both the number of cases and the negative impact these have on individuals, teams, and services.

The table below reports the live disciplinary cases (Policy WP9) position on 31st March 2025. The overall number has decreased from 22 at the time of the last report.

IHC/Pan BCU/Support Service	12 weeks or less	13- 24 Weeks	24 weeks plus	total
West	1	0	1	2
Centre	3	1	2	6
East	0	2	5	7
Pan BCU (CDIO, ICD Primary and Regional)	0	0	0	0
Mental Health & Learning Disabilities	0	1	1	2
Estates	0	0	0	0
Office of Medical Director	0	0	0	0
Womens	0	0	1	1
Diagnostic & Clinical Support Services	0	0	0	0
Other corporate	1	0	0	1
Total	5	4	10	19

Workforce Policies

The Workforce Policy Group has reviewed, developed and approved a number of policies in partnership with Trade Unions and Health Board stakeholders.

Since the January 2025 LPF update, the list of Written and Control Documents (W&CD) below identifies all those W&CD that have been updated and are live documents on BetsiNet:

WP11 - Managing Attendance at Work – Return to Work Form - Cymraeg	Replacement Welsh Version Document formatted so that it's easier to use
WP11 - Managing Attendance at Work – Return to Work Form	Replacement English Version Document formatted so that it's easier to use
WP11 - Managing Attendance at Work – Phased Return Form	Replacement Welsh version Document formatted so that it's easier to use
WP11 - Managing Attendance at Work – Phased Return Form	Replacement English Version Document formatted so that it's easier to use
WP4a - Procedure for Staff to Raise Concerns - Atodiad 3 - Cymraeg	Revised Document Welsh version All Wales Document formatted so that it's easier to use
WP4a - Procedure for Staff to Raise Concerns - Atodiad 4 - Cymraeg	Revised Document Welsh version All Wales document formatted so that it's easier to use
WP4a - Procedure for Staff to Raise Concerns	Revised Document English Version All Wales document formatted so that it's easier to use
WP4a -Procedure for Staff to Raise Concerns - Cymraeg	Revised Document Welsh Version All Wales document formatted so that it's easier to use
WP4a -Procedure for Staff to Raise Concerns - Appendix 3 -	Revised Document English Version All Wales document formatted so that it's easier to use
WP4a -Procedure for Staff to Raise Concerns - Appendix 4 -	Revised Document English Version All Wales Document formatted so that it's easier to use

WP5 - All Wales Respect and Resolution Policy - Cymraeg	Revised Document Welsh Version Additional para 2.3 & 2.2 All Wales Document formatted so that it's easier to use
WP5 - All Wales Respect and Resolution Policy	Revised Document English Version Additional para 2.3 & 2.2 All Wales Document formatted so that it's easier to use
WP5 - All Wales Respect and Resolution Policy Appendix - Cymraeg	Revised Document Welsh Version of flowchart (all Wales Policy)
WP5 - All Wales Respect and Resolution Policy Appendix .pdf	Revised Document English Version of flow chart (all Wales Policy)
WP78 - Pensions Flexibilities Policy	New Document All Wales Policy which replaces WP2 and WP2b
WP79 - All Wales Recovery of Overpayments Procedure.	New Document New all Wales policy
WP79 - Worksheet in All Wales Overpayment	New Document New all Wales policy
WP14 Annual Leave Policy	Revised Document Unpaid leave inclusion which was in the old version of the policy see page 8 section 12
WP51 - Bilingual Skills Policy	General update to statistical information
WP73 - Relationships at Work Policy	New policy
WP23 - Professional Registration Policy	Revised Document
WP35 - Time Off in Lieu (TOIL) Procedures	
WP41 - Protocol Taliadau Recriwtio a Chadw - Cymraeg	Revised Document Welsh version All Wales Document formatted so that it's easier to use
WP14c - Shared Parental Leave Procedure WP14c Appendix 1 Maternity Adoption Leave Curtailment Notice WP14c Appendix 2 Shared Parental Leave Application Form WP14c Appendix 3 Variation of Period of Leave Notice WP14c Appendix 4 Examples of Shared Parental Leave WP14c Appendix 5 Shared Parental Leave Frequently Asked Questions	Revised Document, updated to gender neutral language
WP66 - All Wales Menopause Policy WP66 - All Wales Menopause Policy - Appendix 1	Revised front cover

WP49 - All Wales Pay Progression Policy .	Revised front cover
WP13 - All Wales Flexible Working Policy	Revised front cover Removal of paper application form, all applications to work flexibly must be via ESR
WP21a - Entitlement to Breaks for All NHS Staff Employees and Workers Covered By Agenda For Change Wales Procedure WP21a Appendix 1 Frequently Asked Questions	Revised Procedure
WP81 - Neonatal Leave and Pay Policy	New legislation
WP75 - NHS Wales Harmonising On Call Arrangements	Revised front cover
WP63 - Death in Service Procedure WP63 - Appendix 1 - Pro Forma - Employee Death in Service Guideline - Read only WP63 - Appendix 2 - Letter - Employee Death in Service Guideline - Read only	General update

W&CDs Due to Published on BetsiNet

The list below details the approved Written and Control Documents (W&CD) currently under Quality Assurance(QA) by the Corporate Governance team. The People Service teams will work closely with Corporate Governance to reduce QA issues that can sometimes lead to a delay in approved policies being published.

WP1 3	NHS Wales Flexible Working Policy Welsh
WP1 4	Forms Final v5 (Maternity and Adoption Forms)
WP1 4e	Adoption Leave Procedure
WP1 4h	Maternity and Adoption forms
WP2 5	Adverse Weather Conditions Transport Disruption Procedure
WP3 0	Statutory Mandatory Training Procedure
WP3 6	Appendix B Flexi Time Attendance Record Sheet -
WP3 6	Appendix A - Flexi Diagram
WP3 6	Flexi Time Guidelines
WP3 7	Appendix 1 - Childcare Vouchers Procedure - Edenred-Childcare-Vouchers-and-Tax-Free-Childcare-FAQs
WP3 7	Childcare Vouchers Procedure
WP3 8	Reserve Forces - Training and Mobilisation Policy - Welsh Version

WP3 8	Reserve Forces - Training and Mobilisation Policy
WP4 0	All Wales Employment Break Scheme
WP4 0	All Wales Employment Break Scheme (Welsh Version)
WP4 6	Appendix A (Additional Annual Leave Purchase Scheme - Record of hours)
WP4 6	BCU Additional Annual Leave Purchase Scheme Procedure
WP4 9	All Wales Pay Progression Policy (Cymraeg)
WP6 6	All Wales Menopause Policy - Cymraeg (1)
WP8 2	Temporary Injury Allowance
WP1 4g	Parental Leave Procedure
WP1 5	BCUHB Partnership and Recognition Agreement
WP1 5a	Time Off and Facilities Agreement For Trade Union Duties And Activities

All Wales Policies in Development or Under Review:

- All Wales Managing Attendance at Work Policy
- All Wales Disciplinary Policy

In partnership with the People Services Team, Trade Unions and Equalities, the following W&CD are in the pipeline for development and will provide clear and concise guidance to BCU staff, as well as outlining compliance with relevant legislation or regulations:

- Honorary Contracts Procedure
- National Clinical Impact Awards Procedure
- Managers Guide to Supporting Employees with a Terminal Illness
- BCU Redeployment Process

The Policy, Process and Compliance Team are working with the authors to update the following Written and Control Documents:

- Exit Interview Procedure

BCU's New Values and Behaviours

We have commenced work in reviewing the current W&CDs to ensure that they contain reference to the new Values and Behaviours. The People Services team will work with Corporate Governance to update live policies to embed the new values and behaviours as efficiently as possible.

All Wales Policies

NHS Employers have confirmed that all Wales policies are considered extant and will be reviewed/updated for specific reasons, i.e. changes to legislation and regulation, or when particular issues need to be addressed.

Key points to raise on People Policy Development

Work is on-going with the Office of the Medical Director and Join Local Negotiating Committee (JLNC) to review policies that are specifically Medical and Dental Polices which are listed below:

- MD10 Medical and Dental Staff Study Leave Policy
- MD11 Medical and professional leave policy
- MD13 Annual leave and special leave policy for Medical and Dental
- MD09 Medical and Dental Sabbatical Leave Policy

Below is a list of all WP Polices which are either out of date or require an update in 2025. The author of each W&CD has been contacted to provide a date of when they will be tabled at a future Workforce Policy Group for approval:

WP1 2	Orientation Appendices	Organisational Development
WP1 2	BCUHB Induction Procedure	Organisational Development
WP2 4b	BCUHB Gateway Protocol for the NHS Knowledge & Skills Framework	Organisational Development
WP2 4c	PADR Form - V1	Organisational Development
WP3 3	Stress Risk Assessment	Occupational Health and Safety
WP3 3a	Wellness Action Plan	Occupational Health and Safety
WP3 3b	Wellness Action Plan - Welsh	Occupational Health and Safety
WP4 2	Guidance on Dealing with Hate Incidents/Crimes Against BCUHB Staff	Equalities
WP4 3	Guidelines to Support Trans and Gender Diverse Staff in BCUHB	Equalities
WP5 2	Study Leave Policy - (Applies to all staff apart from Medical & Dental)	Organisational Development
WP5 4	Appendix 1 - Study Leave Application Form	Organisational Development
WP5 4	Study Leave Process (Applies to all staff apart from Medical & Dental)	Organisational Development
WP6 0	Exit Interview Procedure & Questionnaire	Organisational Development
WP6 0	Guidance for Exit Interview Flow Chart	Organisational Development
WP6 9	Employer Pension Contributions – Alternative Payment Policy	People Services

WP6 9	Alternative Payment Policy (Jul 2022) Welsh Version	People Services
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Job Evaluation Performance Update

As of **14th April 2025**, there are a total of **37** requests waiting to be matched in the backlog. 22 of these requests are JDs for new/vacant posts. 15 are postholder re-bandings/reviews requests.

16 of these jobs have been seen by at least one panel, but have been sent back to management with panel queries. We are now awaiting further clarification or revised job descriptions to be resubmitted. Due to the standard of JD's being submitted panels have been forced to ask for clarification and additional information, which adds to the matching time.

Out of the 37 jobs waiting, 13 have been waiting over 4 weeks to be seen at their **first panel**.

Received for processing so far during April (excludes track changes): 6

Approvals Achieved in April to date:

- 9 track change requests approved
- 13 jobs approved at consistency checking

Failure to Agree

There are 3 Failure to Agree processes that are in progress. Reasons for these include:

- Unable to agree to the content of JD
- Issues with Manager sign off

Longest Running Case

- The longest running case as at the date of this report was for 60 days awaiting its first panel. This JD is set to be seen at the planned panel for week commencing 14th April 2025.

Challenges affecting performance against KPIs include:

- When a panel has to be cancelled or cut short to only a half day, due to matcher availability/sickness absence. During February 1 full day panel was cancelled and 3 full day panels were shortened to half days. This was due to unforeseen matcher sickness and IT issues. In addition, the JE leads cannot attend the job matching panels as well as the consistency checking panel that approves the same jobs.
- Due to the standard of JDs being submitted panels have been forced to ask for clarification and additional information, which adds to the matching time as the JDs are sent back to the submitting manager for updating.
- When a JD is sent back for clarification as a result of a consistency checking panel, even for a simple enquiry, it may take some time for the manager to respond and as a result the target could be breached.

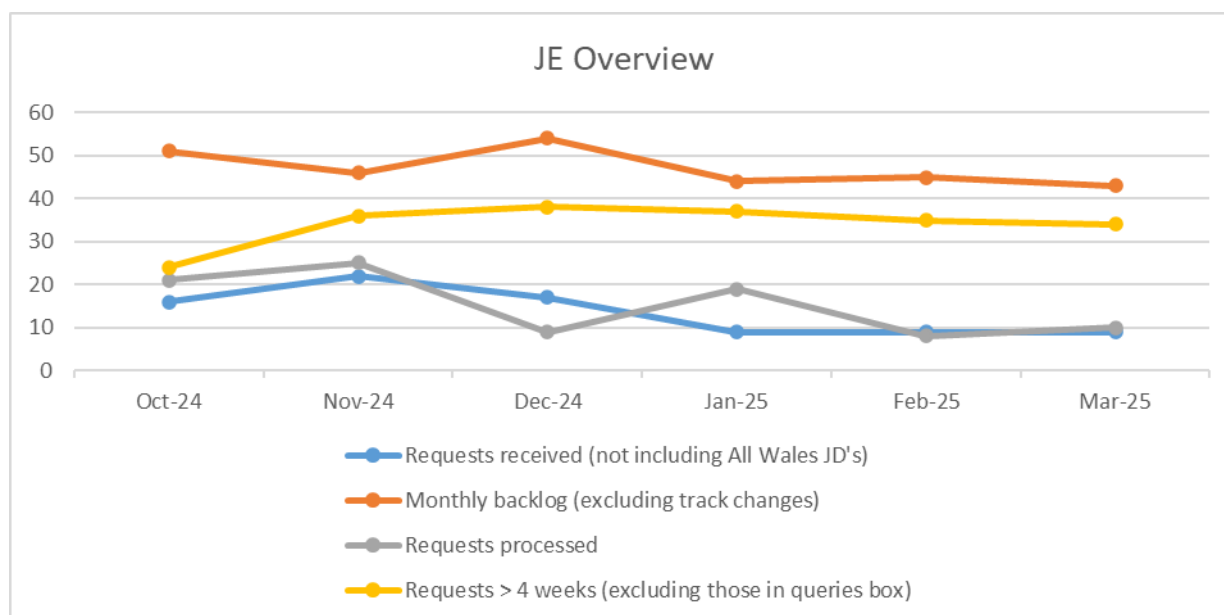
- Full matching is taking approximately 12 weeks at present.

Running KPI Table

Month	Requests received (not including All Wales JD's)	Monthly backlog (excluding track changes)	Requests processed	Requests > 4 weeks (excluding those in queries box)	In Queries Box	Longest case waiting in working days (excluding those in queries box)	Track changes approved	All Wales JD's copied over	Panels Planned for the next month
Mar-25	9	43	10	34	14	88	7	0	7 full day panels and 1 half day panel
Feb-25	9	45	8	35	7	86	12	1	5 full day panels and 1 half day panel
Jan-25	9	44	19	37	8	80	27	0	3 full day panels and 2 half day panels
Dec-24	17	54	9	38	10	70	10	0	3 full day panels and 2 half day panels
Nov-24	22	46	25	36	9	59	15	0	6 full day panels
Oct-24	16	51	21	24	12	55	10	2	6 full day panels

April 2025 to date:

- The average number of days to process a request (excluding track changes): 67
- The longest number of days to process a request (excluding those which had queries and went to numerous panels): 88
- Average number of days to process a track change request: 5 days



Culture, Organisational Development and Engagement Update

A whole organisation approach is being taken to our culture, leadership and engagement work, linking the principles and values to other applicable areas e.g. our recruitment and retention, employee health and wellbeing and commissioning processes.

Culture Workstream

Values & Behaviours Framework

The Values & Behaviours Framework was approved by the Board on the 28th November 2024. Thereafter was a period of co-design with Culture Change Leaders and the Culture & Leadership Programme Design Group members to inform the deployment plan, ensuring the Framework is socialised and embedded into all our policies, procedures and ways of working

To support the embedding of the Values & Behaviours from day to day, feedback from staff suggested that an additional resource in the form of a toolkit would be useful. The toolkit provides resources, links, guides and examples of best practice from staff to support teams across the Health Board to support the development of the behaviours required within the Framework. The final version will be launched early May.

Culture Change Leaders (CCL's)

All 5 cohorts of the Culture Change Leaders Induction sessions have come to an end with 87 Culture Change Leaders having completed the programme, staff members continue to come forward to express an interest in future cohorts.

Feedback from the first 5 cohorts include:

- We have been equipped with knowledge, skills and techniques that will be useful for the Culture Change work, but also a wider culture change within our local areas;
- I feel more confident than ever now about changing the culture for the better in BCU;
- I feel up to speed with the tools available now to implement culture change within my team;
- It is so nice to be part of positive work with like-minded individuals, all working to improve the environment and culture of the organisation that we work in;
- Feel inspired that the future of Betsi is brighter because of the project.

All IHC, PAN and Corporate Services Directors and Senior Leadership Teams have been informed of who their CCL's are with suggestions of how they could be included to support wider divisional work e.g. staff survey action plans, members of local People & Culture Committees.

Board and Senior Leadership Culture Conversations

Board/Senior Leadership Teams conversations are well underway. All Board and all Senior Leadership Team conversations are facilitated and scribed by the Culture Change Leaders and should be complete in Q1 2025/26. Feedback of the process to date has been positive. 80% of Board/Senior Leadership Teams conversations have taken place or are scheduled to take place.

The conversation tool is part of a suite of diagnostics being undertaken to look at our current culture, which will inform our compassionate culture and leadership approaches for the future. The tool is based on the national tool available to us and has been amended and co-produced with our Culture & Leadership Design Group members to ensure it is relevant to the context of our organisation. To accompany the tool, there is a draft Key Messages Information sheet which gives the context to the conversation, confidentiality and next steps.

Culture Focus Groups

Culture Focus Groups will take place in Q1 and will be undertaken through various approaches e.g. integrated into local team meetings/events, via Teams, face to face events across the Health Board.

Leadership Behaviours Survey

Work to cross reference questions from the national NHS Wales Staff Survey to the questions in the leadership behaviours survey tool has been completed. The data from the national NHS Wales Staff Survey 2024 will be used as baseline data for the Leadership Behaviours survey, this will also provide us with a mechanism to track improvements on an annual basis rather than issuing an additional survey year on year. An external partners survey is also available, discussion with the Director of Partnerships, Communications & Engagement is underway to discuss this in more detail.

Organisational Development

Leadership

Integrated Leadership Development Framework (ILDF)

Work is continuing to develop a Leadership Development offer that will provide a range of opportunities that support our leaders in developing their leadership capabilities. This is described in our Integrated Leadership Development Framework (ILDF), which provides leadership opportunities for all staff within the Health Board. Progress to date is below:

Venture Leadership Hub

The new Venture Leadership Hub was launched in November 2024. The hub is hosted on HEIW's Leadership Portal, Gwella. It hosts all leadership development activities, including both informal and formal routes to leadership development.

Work has continued to socialise the hub and share widely across the organisation. Following feedback and review, Phase II changes have been implemented in the main, including a new 'Further Support' and 'contact details' tab. Meetings to take place in April with Health Education Improvement Wales to discuss outstanding actions and next phase plans, which will include integrating new values and behaviours into all pathways.

People Managers Forum

The People Managers Forum is a space for all people managers to network and share their experience. The forum supports our people managers in developing their skills and competence, helps them keep up to date with recent changes in policies and processes and aims to build a community of practice that is an engaging and supportive space.

The fifth session on "Enabling Organisational Improvement" took place on the 20th March 2025. Jason Brannan (Deputy Director of People) attended to introduce the session and give an overview of his leadership journey. The next session will be held on the 17th April 2025, with introduction by Carol Shillabeer (Chief Executive) and a focus on "Staff Engagement" delivered by Katie Sargent. Attendance for this forum is growing with 160 staff booked to attend and 195 booked to attend in May 2025.

Programme Development within the ILDF:

Aspiring Programme – Leadership for All / Moel Famau

- The draft programme has been finalised following consultation with key stakeholders.

- The first pilot programme will commence at the end of April 2025 with 24 delegates.

Foundations Programme – Mynydd Mawr:

12 cohorts of the Foundations Leadership Programme have been delivered over the last year. An end of year review has commenced to evaluate feedback and implement improvements. The next cohorts due to start in Summer 25.

Senior Leadership – Advanced Clinical Leadership Programme / Glyder Fawr

Second North Wales cohort to commence end of April 2025 with 25 delegates. Module one will focus on the new values & behaviours framework and an introduction to improvement methodology.

Retention Programme

A focus on workforce retention continues with Administrative/ Clerical roles in Endoscopy Services (East), using a stay conversation approach to reduce staff turnover. Further meetings with Endoscopy Services are scheduled for quarter one to discuss progress to date and introduce additional interventions if required.

The review, update and improvement of BCUHB Exit Interview Policy & Procedures continues at pace, with a steering group having met 3 times in the last 2 months. The policy is being changed to a procedure with the aim of fast tracking an improved exit questionnaire across all staff disciplines. A recent meeting also took place concerning issues affecting the strategic recruitment and retention of medics/consultants in order to aid improvement.

Health Education and Improvement Wales hosted 'Retention Self-Assessment Tool' (and dashboard facility) has been adopted by nursing teams across BCUHB. Work continues on furthering its use in conjunction with the BCUHB Nurse Retention Plan and development of retention improvement interventions will be rolled out throughout the year in accordance with findings.

Mental Health & Learning Disability 'Staff Voice Seminars' are taking place over the next three months based on the outcomes of the Wellness Work & Us survey of last autumn. A staff retention seminar is being held on Tuesday 13th May as a result of staff interest and need.

Mandatory Training

Oxygen training went live in February 2025 and has been attached to clinical staff who administer oxygen to patients. Competency reporting will be available for this training in May 2025.

To offer an additional methodology of learning for staff who have limited access to IT, a Workbook Working group, to standardise the workbook template for mandatory training subjects has been established. First draft of the workbooks will be sent out for consultation Summer 2025.

Specialist OD

POD Meetings

POD meetings have now been established for all three IHCs and Pan services. POD meetings act as a point of contact for POD colleagues working with teams and services and allow for intelligence sharing, informal support, case consultation and requests for direct intervention and support from POD colleagues.

Team Intervention Work

The Specialist OD team are actively involved in a current total of 11 service/team level pieces of consultation and intervention work across all 3 IHCs and with Pan services too. This is across a range of clinical team/service and corporate team settings. Intervention work ranges from early-stage diagnostics work (e.g., surveys, 1:1 interviews, team inquiries), interventional work with teams and services through to the design and development of bespoke team coaching interventions for senior leadership teams.

Speaking Up Safely (SUS)

This update covers activity within SUS from January to March 2025.

- The SUS Lead Guardian has commenced rollout of a recruitment drive for SUS Champions.
- Implemented an all-Wales group of Speak up Safely Guardians, with an early focus on networking and aligning reporting data similar to data reported to the National Guardians office (NGO) in England.
- Commencing development of a JD for SUS seconded Guardians in preparation for recruitment of two new seconded guardians as currently there are no seconded Guardians in post within BCUHB.
- Establishing what other resources are available within the Working in Confidence (WiC) anonymous platform and how we can obtain suitable data for reporting.
- Refreshed engagement and promotion of the service with planned roadshows throughout both community and acute settings across BCUHB, with future plans to include video/podcast work for intranet and electronic communication.

Activity Update

Overall high-level data – Work in Confidence:

Work in Confidence, the independent anonymous concerns raising platform that allows staff in BCUHB to engage in anonymous two-way conversation with a member of the SUS Multi-disciplinary Team or Speak up Safely Guardian launched in July 2021. Since its launch, **439** staff have registered on the platform and **256** conversations around concerns have been raised. The platform notes a consistent increase of around 7-13% new registrations each month. Of the **256** conversations, **236** have been closed (**92%**).

Category of Concern	Number Received	% total concerns
Leadership & Management issues	67	26.2%
Bullying & Harassment	46	18%
Patient Safety & Quality	41	16%
Other	27	10.5%
Behavioural/Relationship	27	10.5%
Staff Safety	21	8.2%

Equality, Diversity & Inclusion	13	5.1%
Systems & Processes	12	4.7%
Infrastructure & Environmental	1	0.4%
Sexual Safety	1	0.4%
Total Cases	256	100%

Specific data for the time period 1st January 2025 – 31st March 2025 – Work in Confidence:

During this period there has been **29** new staff members who have registered for the platform (as part of the 439 total number of staff members). 28 conversations have been raised during this time (as part of the overall 256 conversations above) and of these **15** have been closed (**55%**) and **13** remain open.

Category of Concern	Number Received	% total concerns
Leadership & Management Issues	8	27.6%
Patient Safety & Quality	5	17.2%
Other	4	13.8%
Equality, Diversity & Inclusion	3	10.3%
Behavioural/Relationships	3	10.3%
Staff Safety	3	10.3
Bullying & Harassment	1	3.4%
Sexual Safety	1	3.4%
Total Cases	28	100%

Overall high-level data – Concerns raised with SUS Guardian:

There have been **84** cases raised directly with the SUS Guardians (outside of referrals via Work in Confidence) since the launch of the SUS Guardian function in October 2021. Of these, **82** have been closed (**97%**).

Category of Concern	Number Received	% total concerns	Activity from last quarter
Leadership & Management Issues	27	33%	No change
Behavioural/Relationships	12	14%	1% Increase
Bullying & Harassment	11	9%	4% Decrease
Systems & Processes	10	10%	2% Decrease
Patient Safety & Quality	9	11%	1% Decrease
Equality, Diversity & Inclusion	6	7.0%	No change
Other	9	9%	2% Increase
Staff Safety	2	3%	No change
Total Cases	86	95%	

Engagement

NHS Wales Staff Survey 2024

Initial survey findings were available to NHS Wales staff survey leads at the end of January 2025. Detailed qualitative data was expected to be shared by HEIW the end of March 2025. However, this was received by Health Board staff survey leads earlier than anticipated on 27th February.

Survey Headlines:

- we achieved a Staff Engagement Index score of 71 per cent, compared with the 72 per cent NHS Wales average. This percentage point decline is in line with comparable Health Boards. In 2023, the BCUHB score was 72 per cent and in 2020, it was 73 per cent;
- we have made improvements in seven out of the 10 themes in the last twelve months;
- seven in 10 staff feel positively about their team and line manager, higher than the NHS Wales average;
- our biggest improvement was in the patient safety positivity score, which went up 6.7% from 52.3% to 59% and is just above the Wales average of 58.7%;
- 70% of respondents agree with the statement 'we are stronger together', up from 68.7% last year and just above the Wales average of 69.4%;
- morale is lower than the Wales average and there are increased reports of high work pressures;
- 58% of respondents feel safe to speak up and report unethical behaviour or unsafe clinical practice and confident the Health Board would act on their concerns. This is a 1.8% increase on 2023, but remains the lowest score in Wales; and
- only 52% would recommend BCUHB as a place to work.

The qualitative data referred to above consists of 1,085 separate free text comments, of which 43.9% were negative, 40.2% were positive and 15.9% were mixed. We have grouped key topics and themes from this data to provide an overview of what colleagues have told us. The top five positive themes are as follows:

pride and commitment - many employees express pride in working for the NHS and their respective teams, highlighting their dedication and commitment to their roles.

supportive colleagues and management - positive comments about supportive and understanding management, as well as the strong sense of teamwork and collaboration among colleagues.

opportunities for development - employees appreciate the opportunities for professional development and career progression available to them.

positive work environment – some departments are described as having a welcoming and nurturing environment, contributing to a positive work atmosphere.

teamwork and collaboration - the importance of teamwork and collaboration is frequently mentioned, with employees valuing the support and cooperation of their colleagues.

The themes that are less favourable are:

management and leadership - significant concerns about poor management practices, lack of transparency and ineffective leadership with reports of bullying, favouritism and lack of support from managers.

staffing and workload - issues with understaffing, high workloads and the negative impact on patient care and staff well-being. Delays in recruitment and the strain on existing staff due to unfilled vacancies cited.

work environment and conditions - complaints about inadequate facilities, lack of proper equipment, poor working conditions and frustration with outdated or inefficient systems and processes.

bullying and discrimination - reports of bullying, harassment, and discrimination, including racism and ageism and concerns about the handling of grievances and the lack of timely and satisfactory responses.

concerns about the future of the NHS - worries about the sustainability of the NHS without adequate government support and financial constraints impacting patient care and staff well-being.

Following on from this, along with senior leaders, local People and Culture Committees are reviewing findings and developing plans to share and address the issues raised – both good and bad. If colleagues see that what they said has been heard and has made a difference, their engagement will increase, supporting further involvement and improvement.

Foundations for the Future

Focus groups for the next phase of the Foundations for the Future programme are due to take place at the end of April and into May. These will build on the design workshops held in December 2024 and January 2025.

Participants include senior staff from key groups including operational teams, IHCs, medical leadership, nursing, MHL, corporate, clinical network managers and women's, cancer and North Wales clinical services. These online sessions are being facilitated by Ffion Johnstone, Programme Director and Georgina Roberts, Associate Director of People Services.

Seren Betsi Launch

As part of our refreshed corporate approach to rewarding and recognising staff, Seren Betsi is being launched this month to promote colleagues and teams who demonstrate and live the new organisational values of compassion, openness and respect.

A different individual staff member or team will be chosen each month from existing pipelines (including Greatix, Executive Director of Nursing awards nominations and annual Staff Achievement Awards nominations) and promoted across the Health Board. This connects to the plan to promote and embed the new values across the organisation.

Staff Achievement Awards

[Nominations are now open](#) for the annual Staff Achievement Awards with ten categories to choose from:

- Extra Mile Award
- Research, Transformation, Improvement and Innovation Award

- Leadership Award
- Diversity, Equality and Inclusion Award
- Volunteer Award
- Partnership Award
- Welsh Language Award
- Rising Star Award
- Environmental Sustainability Award
- Team of the Year Award

The nomination form is very simple to complete and is on BetsiNet. In the first two weeks, over 100 nominations have been made and we are seeing some very strong nominations across the ten awards categories.

After the nomination period closes on 11th May, all submitted nominations will be judged by a panel and three finalists will be shortlisted in each of the ten awards categories.

Winners will be announced at the awards ceremony on 26th September.

We are currently in the process of securing sponsorship to fund the event.

Equality and Human Rights Update

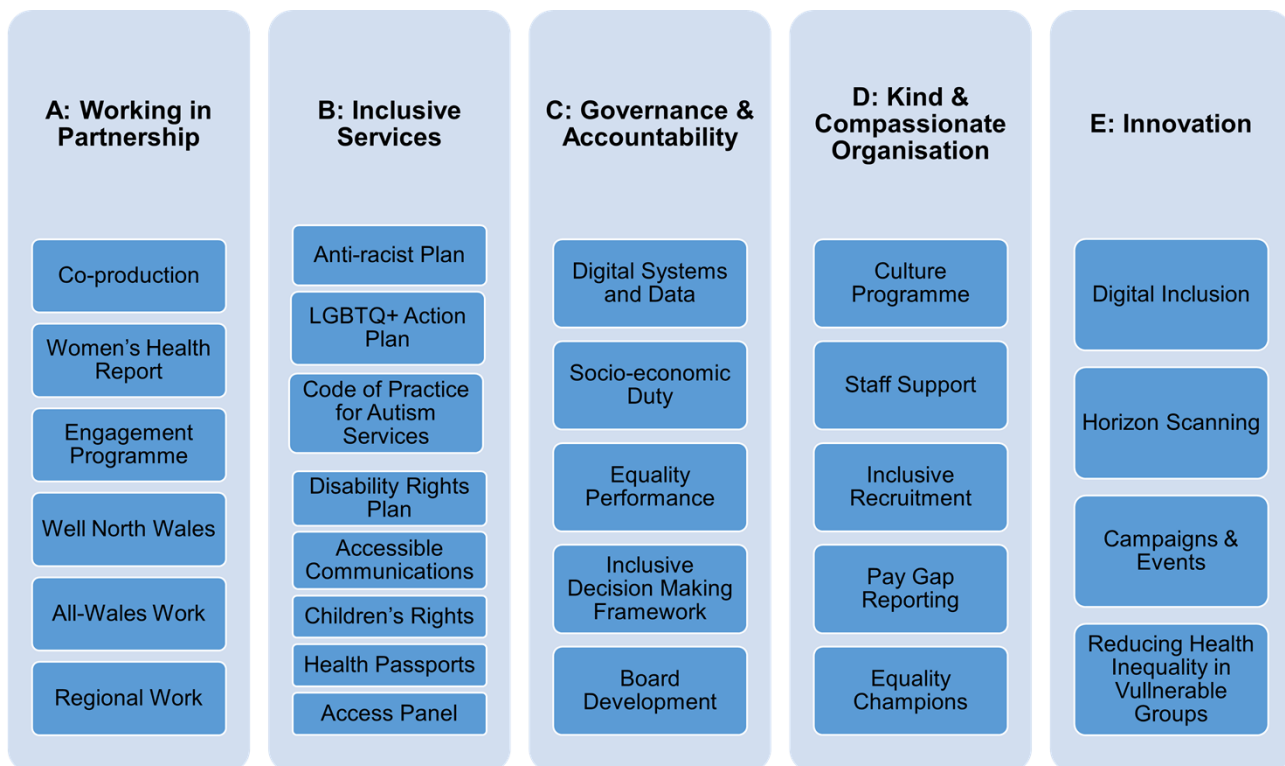
This update gives a brief overview of some of the Equality, Diversity and Inclusion activities and progress to date this year.

1. Activities

Strategic Equality Objectives and Action Plan (SEP) 2024-2028

The Health Board is currently in the first year of its Strategic Equality Objectives for 2024-28.

Achieving Equity: Strategic Equality Plan 2024-2028



The action plan, focusing on the first year’s activities has been published with the objectives. <https://bcuwb.nhs.wales/about-us/governance-and-assurance/strategic-equality-plan-2024-2028/>

The actions for the Welsh Government Anti-racist Wales Action Plan and LGBTQ+ Action Plan are incorporated in the SEP.

Support from the LPF is critical in ensuring that our staff are supported and the objectives and actions are embedded over the next 4 years.

Year 1 Quarter 4

Each quarter a progress report on the 28 Actions is produced and will be presented to the Equality and Human Rights Strategic Forum, LPF, and People and Culture Committee.

This is a summary, and a full report is available.

End of Year	Count	%
Complete	0	0%
On Track	27	96.5%
Off Track	1	3.5%
At Risk	0	0%

Priority Reference	Priority Name	Equality Team Lead	Year 1 Quarter 4	Year 1 Quarter 4	Current Status	End of Year Projection/ Forward Look
			Current RAG	Forecast RAG		

B1	To implement BCUHB Anti racist Action Plan.	ALL	Off Track	Off Track	<p>This action is currently off track, in part due to the size of the action and whole Health Board approach needed. The Welsh Government Anti-racist Action plan was recently revised and the timeline for actions need to be amended to reflect these changes. This action is a 4 year plus action. It links to the Culture and value work being led from WOD, challenging attitudes and behaviours, reviewing our policies through</p>	<p>There is a risk that the Health Board will not deliver its obligations under the Anti-Racist Wales Action Plan. Resourcing and capacity alongside the scale of the change required, a lack of a structured approach to the senior ownership of the plan and a lack of clarity on the objectives and measurable outcomes. This has been included on the Health Board's Risk Register. Work in Year 2 will focus on identifying barriers to inclusive care, improving ethnicity</p>
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				an anti-racist lens and meeting the recommendations from the initial Workforce Race Equality Standards report.	recording in data systems and improving community engagement. A separate priority is being developed to meet the needs of the Wales Workforce Race Equality Standard.
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As we complete the first year of our current Strategic Equality Plan, we can reflect on the challenges of capacity and resourcing as well as ownership. Combined with the need to align the actions within the plan deep within the IMTP. During year 2, there will be a focus on achieving this.

Welsh Workforce Race Equality Scheme (WRES)

In March the Health Board met again with Welsh Government to reflect on the progress that has been made. During January there was a campaign to increase staff ethnicity data, this was via payslip messaging, Health Board Bulletins, newsletters, intranet articles and a video from the Chief Executive. The outcome of this campaign will be demonstrated in the upcoming WRES report that is expected in May/June 2025.

One of the focus areas from the meeting with Welsh Government was the need to focus on the processes that create the barrier and experiences of our ethnically diverse staff, such as recruitment, progression and unconscious bias.

The Health Board is part of an all-Wales group looking at recruitment practices and within those conversations the push that all interview applicants receive the interview questions prior to the interview. This would support staff whose first language is not Welsh or English, to give them the processing time to prepare and answer and therefore bring their best self to the interview.

The Equality and Workforce team are also looking to develop regular training sessions, with three modules:

- Supporting Document/ CV writing
- NHS Job Application
- Interview skills

This is following several staff examples of international staff applying for over 20+ jobs in the Health Board and either not being shortlisted or not giving a good interview, due

to lack of understanding of what the Health Board looks at and how interviews are scored. This support will enable our ethnically diverse and wider staff groups to gain the skills needed to apply and progress throughout the Health Board.

The recruitment of a new role within the Equality team of Culture, Education and Training Lead – Equality, will enable the wider role out of Active Bystander training, as well as other equality training, to challenge negative cultures and behaviours in the Health Board that has previously led to many of our diverse staff to leave. It will align with the culture work as well as link to patient experience and improving health outcomes.

Ramadan Support and Staff Iftar Events

Last year the Health Board for the first time provided 3 Iftar events, breaking of the faste, during Ramadan. These were open to staff and patients to attend and were supported by the chaplaincy department. The feedback from staff, both Muslim and non-Muslim has been overwhelmingly positive with staff thanking us for recognising spiritual needs and explaining what support managers can give staff and patients during the holy month.

These were repeated this year, with an increase in attendance from both Muslim and non-Muslim staff. The feedback from many staff on the Ramadan resource page has demonstrated how staff felt a sense of recognition and belonging with many staff sharing their thanks and appreciate on the page here. [Come and Celebrate Staff Iftar 2025](#)

Worker Protection (Amendment of Equality Act 2010) Act 2023

In October last year there was an amendment to the Equality Act where Employers in the UK will include a legal duty to work preventatively — and not retrospectively — to address sexual harassment in the workplace. Employers must take “*reasonable steps to prevent sexual harassment of employees in the course of their employment.*” This extends to when employees are working outside of their office, and when they are attending social events that are considered an extension of work.

The Equality Team have been part of an all-Wales group leading on the development of an all-Wales policy. The final draft is currently with this group for approval.

2. Financial Implications

Budgetary implications for all the areas of work within this report are recognised and are partially mitigated through funding applications or the Equality budget as appropriate. There are gaps in funding for some of the area and it is hoped that partnership working with other departments or organisations can support some of the additional plans going forward.

3. Risk Management

The current risk of non-compliance with the Public Sector Equality Duty and the Socio-economic Duty rests solely within the Risk Register of the Equality Team. The Equality Team currently has two risks on its risk register:

- 1971: Duties under the Equality Act (Statutory Duties) (Wales) Regulations 20(11)
- 3111: Risk of Failure to comply with The Socio-economic Duty under The Equality Act (2010)

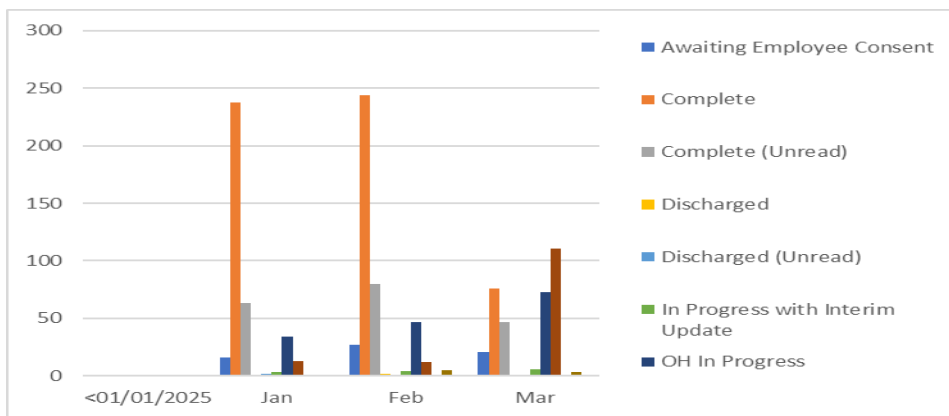
These risks are both currently rated as a 12 and are updated regularly by the Equality Team.

Health & Wellbeing Update

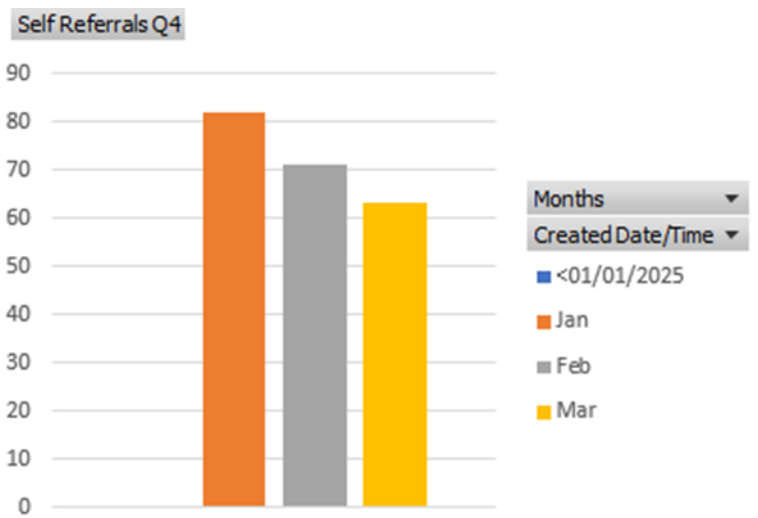
The department continues to see sustained high activity in relation to staff support generally, of which the majority are being seen within KPI of 14 days. Quarter 4 is traditionally high post-Christmas and New Year.

Occupational Health & Wellbeing Referrals

1.0 Management Referrals Q4



1.1 Self Referrals Q4

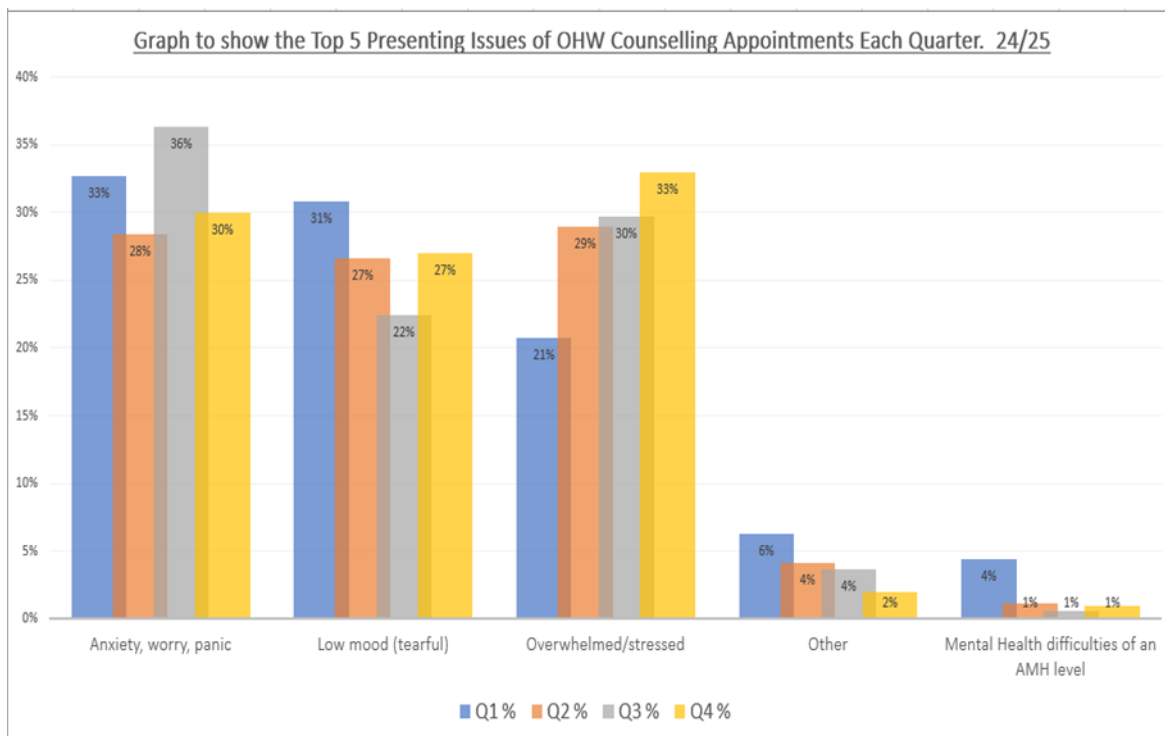


1.2 Self referrals Year End



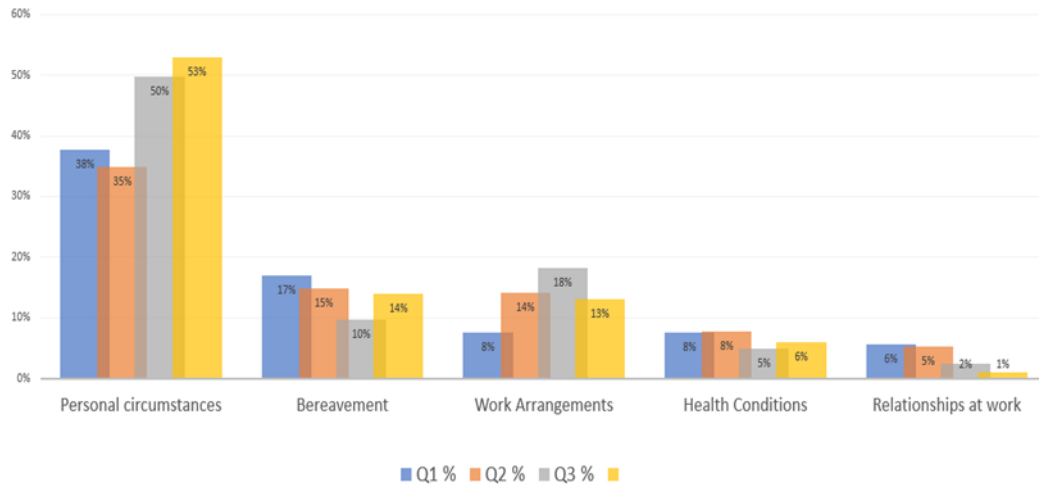
A change to the self-referral process along with data guided structure change to the Occupational Health BetsiNet page has shown an increase in self-referrals into the service.

2.0 Counselling

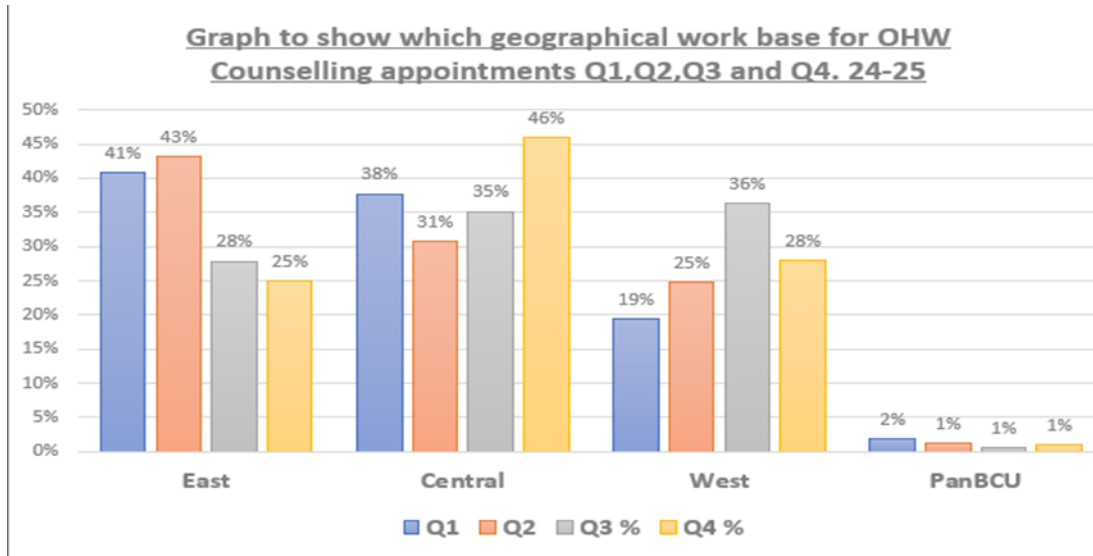


2.1: Contributing Factors

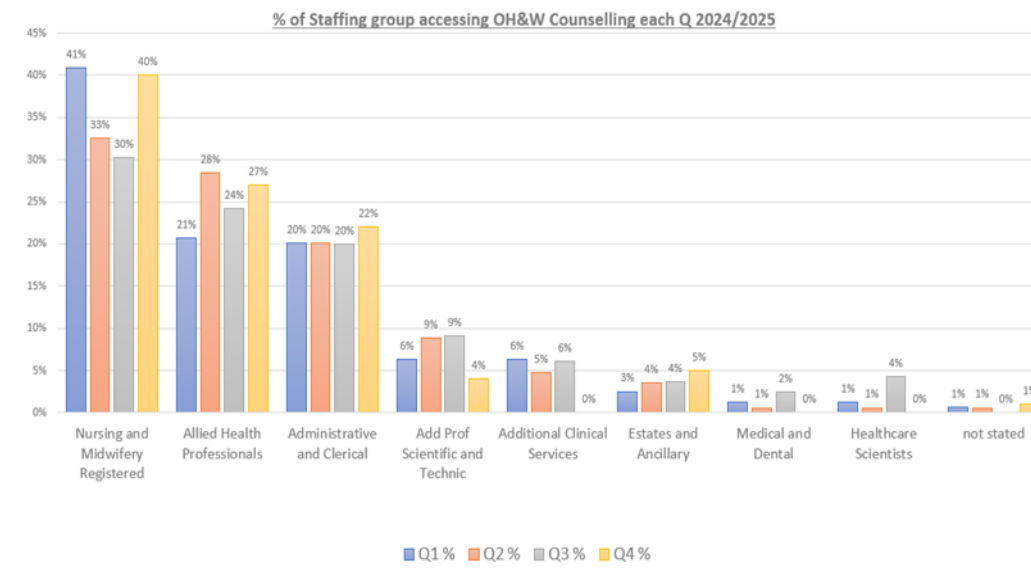
Graph to show the Top 5 Contributing Factors of those presenting to OHW Counselling Appointments Each Quarter 24/25



2.3: Counselling by area



2.4: As a percentage of Referrals received by staff group

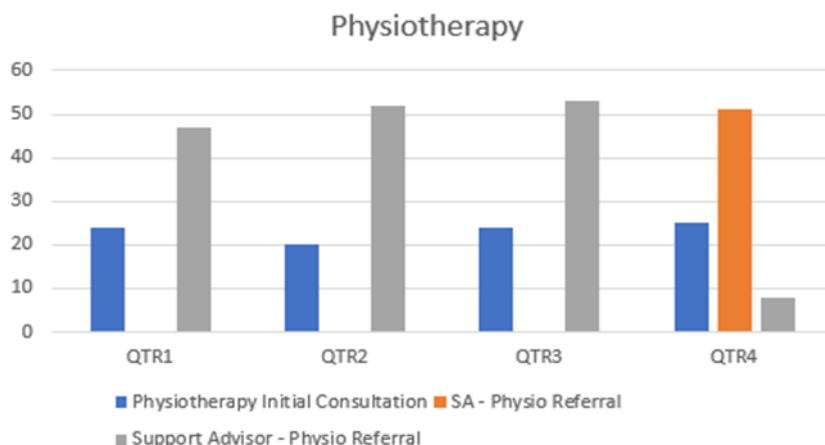


Brief Overview of Activities of the Counselling Service for OH (Occupational Health) Over the Last 24 Months:

Our counselling service provides one-on-one support to Health Board staff through a structured six-session model. At any given time, we have up to 125 staff members actively receiving counselling, with an additional 161 individuals currently on our waiting list.

Despite being a small team of six counsellors (equivalent to 4.8 full-time positions), the effectiveness of the service is consistently demonstrated through quarterly feedback.

3.0 Physiotherapy



Current average waiting times from referral to consultation is 2 weeks.

There continues to be an inequity in access to OH&W physiotherapy across the Health Board. East and Central areas currently benefitting from embedded Physiotherapist on a part time basis. West region remains unsupported. Discussions are ongoing to recruit a specialised OH&W Physiotherapist for the West area. This additional post will reduce waiting times from referrals received and enable the practitioners to support collaborative work with our manual handling teams in identifying hot spot areas and devise rapid intervention strategies for MSK issues.

4.0 National Wellbeing Programme

The staff health and wellbeing best practice guide was launched in April 2024. This Best Practice Guide has been developed in collaboration with professional leads in staff health and wellbeing in NHS Wales, with advice from experts in workforce and organisational development, clinical psychologists, Social Care Wales and Welsh Government and in partnership with Trade Union colleagues. Compassionate Leadership has been embedded in every aspect of this Best Practice Guide. This Best Practice Guide is an enabler to NHS Wales local organisation staff health and wellbeing and workforce and organisational development strategies and should be used alongside these and other national enablers.

4.1 Initiatives

Menopause

- Attendance at the BCUHB Menopause cafes for Q4 (January & February) were 30 attendances. The next virtual menopause café is on 26th March
- 2025 Menopause roadshow dates planned in for Q1, Q2 & Q3
- Following the menopause roadshow in November 2024, 5/7 requests from various BCUHB departments for menopause awareness sessions in to support staff and also to help staff support their patients better with menopause have been scheduled & a further 2 sessions arranged because of word of mouth
- 12 staff have expressed an interest in the menopause champion role. Training is scheduled for 7th May 2025
- Menopause toolkit for line managers has been written and will go through policy group for sign-off on 21st March

Occupational Health & Wellbeing Roadshows

- 2025 Occupational Health & Wellbeing Roadshow schedule published & commenced in February & in partnership with Money Works to support financial wellbeing, dates of workshops this Q;

Occupational Health & Wellbeing Service Information Sessions

- Occupational Health & Wellbeing presentation delivered to 47 Practice Managers across North Wales as part of the orientation process
- Presentation to CAMHS workforce plan implementation group on health & wellbeing champions on 25.2.25
- Health & Wellbeing champion presentation scheduled for 17th March to Information Management team

Healthy Lifestyle

- Continued work on the ongoing Healthy Food Healthy Staff (HFHS programme) maintaining existing and developing wider opportunities that support and engage staff in the provision and promotion of healthy food and drink choices, as part of the BCUHB staff catering provision (within financial constraints).
- Continued implementation and monitoring of the staff meal of the day, reviewing meal plans and additional recipes, exploring innovative approaches for staff to access healthy food and drink choices whilst in work.
- Contributing to the wider development and achievement of the BCUHB food and drink retail policy with Public Health colleagues.

Tailored Wellbeing Action Plans

- Bespoke wellbeing plan co-produced with the Famau ward matron to be implemented in the ward and wellbeing drop-in session on the ward scheduled on 25th March
- Work has commenced with the Critical Care team at YG to look at wellbeing support options for the team with possible wellbeing survey to be conducted to inform an action plan
- Relaxation for Compliance & Business management team away day completed as part of additional request to provide wellbeing support to the team.

Health & Wellbeing Champions

- New signing up process has been implemented along with a new Champions BetsiNet page which includes case studies and resources section and role information
- Data cleanse has been conducted to identify 'active' champions, this hasn't been done since I have been in post (Oct 2021) 146/366 champions have re-enrolled & further recruitment drive to be done in staff bulletin next week
- Bi-monthly induction sessions in place for all 146 champions to book onto
- Bi-monthly peer support sessions in place with guest speakers

Womens Health Conference

- Attended on 4th March to showcase menopause support and Occupational Health wellbeing support & engaged with over 100+ people

- Links made with the Menstrual Health Project charity and 3 x menstrual health workshops planned with them for 2025 for BCU staff to support women's health

Planning

- Nursing & Midwifery conference planning for stress & anxiety and self-care workshop for attendees – 12th May 2025
- Financial wellbeing session with Money and Pensions Service (MaPS) & Money Works Wales scheduled for 3rd April

Staff Health and Wellbeing Grant

- The staff health and wellbeing grant fund closed on the 19th February 2025 for cohort one.
- A total of £243,000 of funding is available for this grant scheme
- The grant application received 350 applications with over £1.5 million in total requests.
- Applications are currently under review by the supporting panel and decisions on the applications are expected to be made in early April 2025.

Strategic Collaboration

Continued working with Health strategy and planning team on the fair work legislation and broader engagement on the development of the Health Board's strategy, reviewing the well-being objectives to ensure continued alignment with the requirements of the Wellbeing of Future Generations (Wales) Act, the Social Partnership and Public Procurement (Wales) act (SPPP) and BCUHB's long-term strategy.

The primary focus of the review has been on fair work and socially responsible procurement and contracting, however consideration has been given to the broader well-being objectives to ensure they remain fit for purpose. This was in line with the audit review of the process for reviewing our well-being objectives which formed part of the scope of the Auditor General carried out in Autumn 2024 in accordance with statutory functions section 61(3) (b) of the Public Audit Wales Act 2004.

A Task and Finish Group was established in July 2024 to oversee the work to review the well-being objectives. The outcome from the review will be presented to the Executive Team on the 2nd April, PPHP on the 1st May and submitted to Board for approval on 29th May. A paper will be presented for information purposes to the People and Culture Committee at their next meeting on the 12th June.

We are aiming to demonstrate alignment between the strategic objectives, well-being objectives and key strategic plans, setting out a framework for the Three-year Plan / IMTP.

5.0 Policy

The Smoke free policy WP31 has been updated to include reference to the current legislation on the ban on smoking on all Health Board grounds and work continues in the background to monitor the effectiveness of the policy in preventing smoking within Health Board premises. Work has now moved over to all the IHCs who will be responsible for the management and evaluation of their work in ensuring that the Health Board upholds its duty to prevent smoking on sites, including the management of the environment officers

who are monitoring smoking on sites as part of the legislation requirements. Further work is planned for later in quarter 2 to review the policy and current work that is in place.

The staff health and wellbeing guidelines OHW02 is currently under review and will be updated to reflect all the current work and changes within the health and wellbeing programme. Currently in draft, once completed the guidelines will be approved at Occupational Health service leads group and then sent on to policy and ratification groups for inclusion within the Health Board's policies and procedures processes.

6.0 SEQOHS

The Occupational Health & Wellbeing service has once again been successful in meeting the standards of SEQHOS at annual renewal (April 2025)

The Requirements to meet the standard on an annual basis are to produce evidence of both Clinical and records audit's which are an ongoing planned activity within the department and to monitor manager and client satisfaction within the service.

Full re-accreditation will be required in April 2026

Matters of Concern

Re-evaluation of the Occupational Health Department at YGC has been undertaken by the Infection Control team, the outcome of the report changed from not fit for purpose to fit for purpose with minor works. The minor works indicated in the report have begun with the department being refreshed throughout with new flooring and decorating,

This will not however solve the fundamental issue that the department is on the first floor of the building with no disabled access (this was commented on at the last SEQOHS accreditation visit).

Following a Health & Safety audit it was identified that 2 of our rooms were overpopulated, with one room being suitable for 3 members of staff, but actually holds 4. The second room being used was indicated to be too small for the one person that currently occupies this space.

There remains a 40 day wait for face-to-face counselling sessions where virtual or telephone support is declined. Additionally, Staff may also be forwarded on to on-line publicly accessible CBT and support programmes. The demand on services is being exacerbated by GPs referring staff (patients) to the Wellbeing services in the mistaken belief that they will be seen more quickly.

End of Report

Local Partnership Forum – Annual Cycle of Committee Business

(1st April 2025 to the 31st March 2026)

The Annual Cycle of Committee Business has been developed to help plan the management of Advisory Group matters and facilitate the management of agendas and committee business. The Annual Cycle of Committee Business will be complemented by a “Non-Routine Committee Business (Forward Work Plan)” for ‘one-off’ Ad-hoc items raised during the course of meetings.

The role of the Advisory Group is set out in the Health Board’s standing orders and the Terms of Reference, both of which are available here: [.....](#)

The **Local Partnership Forum** meets quarterly.

<p>Committee Chair:</p> <ul style="list-style-type: none"> Carol Shillabeer and Jan Tomlinson (alternate meetings) <p>Committee Vice Chair</p> <ul style="list-style-type: none"> Catherine Jones (RCN steward) 	<p>Members</p>	<p>In Attendance</p> <ul style="list-style-type: none"> Executive Director of People Services and Organisational Development Executive Director of Nursing and Midwifery Executive Director of Finance Chief Operating Officer Representative IHC Director Assistant Director – Organisational Development Director of Environment and Estates Executive Director of Allied Health Professions and Health Sciences Other Executive Directors and others may also be members or may be co-opted dependent upon the agenda 	<p>Preliminary matters to be included on agenda:</p> <ul style="list-style-type: none"> Welcome & Apologies Declarations of Interest Unconfirmed minutes of meeting held on xxxx Matters Arising & Action Log Patient / Staff Story
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AGENDA ITEM	MAY 2025	AUGUST 2025	NOVEMBER 2025	FEBRUARY 2026
PRELIMINARY MATTERS				
As above				
LEAD ITEM FOR MEETING				
IMTP / Annual Planning Cycle (to include Special Measures progress reports)	There is a wider piece of work being undertaken developing workplans which will determine when and how often items need to be presented to the various Committees / Advisory Groups and we will be advised of this in due course.			
Values and Behaviours	Values and Behaviour Deployment Plan			
HR Assessment Update / Progress – Next Steps and Priorities	Foundations for the Future			
Welsh Language and Culture				
Workforce Race Equality Standard (WRES)				
Risk Management				
Social Partnerships	Update on Social Partnership Bill			
NHS Staff Survey Results				
Culture, Leadership and Engagement		Leadership Update – including PADR and Induction	Specialist Organisational Development and Speaking up Safely	Retention update
ROUTINE REPORTING				
People Services and OD Directorate Overview Report to include: <ul style="list-style-type: none"> Employee Relations Report 				

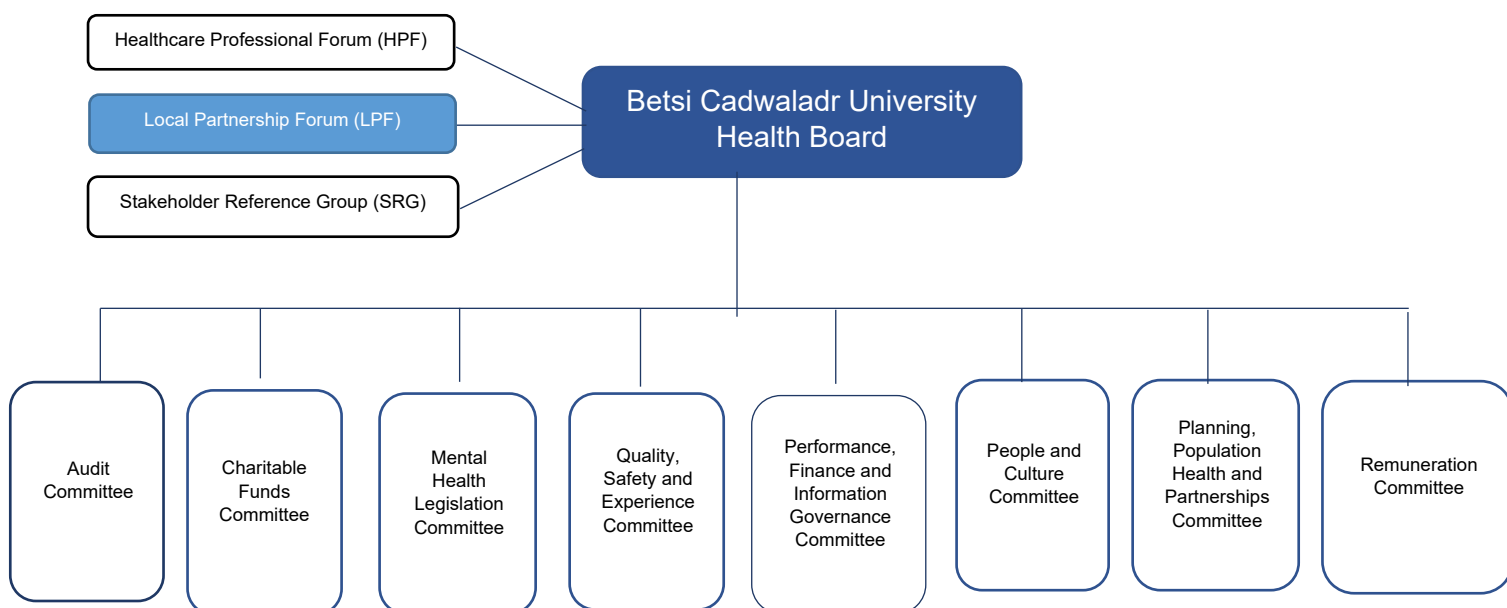
<ul style="list-style-type: none"> • Workforce Policies Group Report • Workforce Partnership Group • Workforce Engagement Update • Job Evaluation Programme Report • Equality and Human Rights Update • Speak Out Safely • Health & Wellbeing 				
Items from Trade Union Partners / Escalations				
Organisational Development				
Finance Report				
Corporate Planning Update: <ul style="list-style-type: none"> • Corporate Plans • Annual Operating Plan 				
FOR APPROVAL				
Advisory Group Annual Report to Board				
Review Of Terms of Reference and Cycle of Business				
FOR INFORMATION				
Minutes of the People and Culture Committee Meeting held on				
Quality and Performance Report (Board paper link)				
Welsh Partnership Forum Minutes				
Chief Executive's Report to the Board				
Strategic Occupational Health and Safety Group (issues of significance)				
ANNUAL REPORTS for information				
Staff Wellbeing Support Service (SWSS) Annual Report				
Equality and Diversity				
Ombudsman				
Health and Safety Management				
Gender Pay Act Annual report				
Welsh Language				

CLOSING BUSINESS				
Agree Items for referral to Board / other Committees				
Agree items for Chairs Assurance Report to the Board				
Review risks highlighted in the meeting for referral to the Risk Management Group				
Review of Meeting Effectiveness				
Date of Next Meeting				

WORKING DRAFT

LOCAL PARTNERSHIP FORUM

TERMS OF REFERENCE



Version	Issued to	Date	Comments
V0.01 Draft	Audit Committee	16/11/23	Developed as a first draft for review by Audit Committee on 16/11/23
V0.02 Draft	TOR meeting with Committee Chair & Executive Lead	09/01/24	Developed as a draft for review with Committee Chair and Executive Lead
V0.03 Draft	Health Board	18/01/24	Final Draft for consideration by the Health Board to be held on 25/01/24
V9.00 Approved		25/01/24	Approved by the Health Board
V10.01 Draft	For LPF meeting May 2025	14.04.25	

1 INTRODUCTION

- 1.1 The Board has a statutory duty to take account of representations made by persons who represent the interests of the communities it serves. To help discharge this duty the Board has appointed Advisory Groups to provide advice to the Board in the exercise of its functions. The Board Advisory Groups include the Local Partnership Forum. The detailed operating arrangements in respect of this Advisory Group are set out below.
- 1.2 The BCUHB Local Partnership Forum is the formal mechanism through which management and trade unions and professional bodies (hereafter referred to as staff organisations) work together to improve health services for the people of Wales. It is the forum where key stakeholders engage with each other to inform, debate and seek to agree local priorities on workforce and health service issues.
- 1.3 At the earliest opportunity, the Board will engage with staff organisations in key discussions at Health Board, Local Partnership Forum and Locality/Divisional level.
- 1.4 All members are full and equal members of the Forum and collectively share responsibility for the decisions made. Should any party be in disagreement with decisions taken, a note will be included within the minutes of the meeting.
- 1.5 The Local Partnership Forum provides the formal mechanism for consultation, negotiation and communication between the staff organisations and management. The TUC principles of partnership will apply. These principles are attached at Appendix 1.

2 PURPOSE

- 2.1 The purpose of the Local Partnership Forum is to:
 - Establish a regular and formal dialogue between the Board's Executive and staff organisations on matters relating to workforce and health service issues.
 - Enable employers and staff organisations to put forward issues affecting the workforce.
 - Provide opportunities for staff organisations and managers to input into organisation service development plans at an early stage.
 - Consider the implications on staff of service reviews and identify and seek to agree new ways of working.
 - Consider the implications for staff of NHS reorganisations at a national or local level and to work in partnership to achieve mutually successful implementation.
 - Appraise and discuss in partnership the financial performance of the organisation on a regular basis.
 - Appraise and discuss in partnership the Board services and activity and its implications.
 - Provide opportunities to identify and seek to agree quality issues, including clinical governance, particularly where such issues have implications for staff.
 - Communicate to the partners the key decisions taken by the Board and senior management.
 - Consider national developments in NHS Wales Workforce and Organisational Strategy and the implications for the Board including matters of service re-

profiling.

- Negotiate on matters subject to local determination.
- Ensure staff organisation representatives are afforded reasonable paid time off to undertake trade union duties; and
- Develop in partnership appropriate facilities arrangements using A4C Facilities Agreement as a minimum standard.

3 GENERAL PRINCIPLES

- 3.1 The Health Board and Local Partnership Forum accept that partnerships help the workforce and management work through challenges and to grow and strengthen their organisations. Relationships are built on trust and confidence and demonstrate a real commitment to work together.
- 3.2 The principles of true partnership working between staff organisations and management are that they should:
- Show joint commitment to the success of the organisation with a positive and constructive approach.
 - Recognise the legitimacy of other partners and their interests and treat all parties with trust and mutual respect.
 - Demonstrate commitment to employment security for workers and flexible ways of working.
 - Share success – rewards must be felt to be fair.
 - Practice open and transparent communication – sharing information widely with openness, honesty and transparency.
 - Bring effective representation of the views and interests of the workforce; and
 - Demonstrate a commitment to work with and learn from each other.
- 3.3 All members must:
- Be prepared to engage with and contribute fully to the Forum’s activities and in a manner that upholds the standards of good governance set for the NHS in Wales;
 - Comply with their terms and conditions of appointment.
 - Equip themselves to fulfil the breadth of their responsibilities by participating in appropriate personal and organisational development programmes; and
 - Promote the work of the Local Partnership Forum within the professional discipline they represent.
- 3.4 A Code of Conduct is attached as Appendix 2.

4 MEMBERSHIP

- 4.1 All members of the Local Partnership Forum are full and equal members and share responsibility for the decisions of the Local Partnership Forum. The NHS organisation shall agree the overall size and composition of the Local Partnership Forum in consultation with those staff organisations the Health Board recognises for collective bargaining. The Trade Union member of the Health Board will be expected to attend the Local Partnership Forum in an ex-officio capacity.

4.2 As a minimum, the membership of the Local Partnership Forum shall comprise:

MEMBERS
Chair (The Health Board Chief Executive and Staff Organisation Chair will co-chair the Local Partnership Forum, and this will be done on a rotational basis)
Health Board Management Representation shall consist of the following post holders (or nominated deputy):
Chief Executive (co-Chair)
Executive Director of People Services and Organisational Development
Executive Director of Nursing and Midwifery
Executive Director of Finance
Chief Operating Officer
Representative IHC Director
Assistant Director – Organisational Development
Director of Estates and Environment
Director of Mental Health
Other Executive Directors and others may also be members or may be co-opted dependent upon the agenda
Staff Representation shall consist of:
The Board recognises those staff organisations listed in Appendix 3 for the representation of members who are employed by the organisation
Staff representatives must be employed by the organisation and accredited by their respective organisations for the purposes of bargaining. If a representative ceases to be employed by the Board or ceases to be a member of a nominating organisation then they will automatically cease to be a member of the Local Partnership Forum. Full time officers of the staff organisations may attend meetings subject to prior notification and agreement
Members of the Local Partnership Forum who are unable to attend a meeting may send a deputy, providing such deputies are eligible for appointment to the Local Partnership Forum

5 QUORUM, ATTENDANCE AND ROLE OF THE ADVISORY GROUP

5.1 Quorum

- 5.1.1 Every effort will be made by all parties to maintain a stable membership. There should be 50% attendance of both parties for the meeting to be quorate.
- 5.1.2 There should be a minimum of 5 Health Board Management representatives and 5 Staff representatives at a meeting for it to be quorate.
- 5.1.3 If a meeting is not quorate no decisions can be made but information may be exchanged. Where joint chairs agree, an extraordinary meeting may be scheduled with 7 calendar days' notice.
- 5.1.4 Consistent attendance and commitment to participate in discussions is essential. Where a member of the Local Partnership Forum does not attend on 3 consecutive occasions, the Joint Secretaries will write to the member and bring the response to the next meeting for further consideration and possible removal.

5.2 Officers

5.2.1 The Staff Organisation Chair, Vice Chair and Secretary will be elected from the Local Partnership Forum. Best practice requires these three officers to come from different staff organisations.

5.3 Chairs

5.3.1 Both the Management (CEO), and Staff Organisation Chair, will chair the Local Partnership Forum. This will be done on a rotational basis. In the absence of the Chair(s), the Vice Chair(s) will act as Chair. The Chairs shall work in partnership with each other and, as appropriate, with the Chairs of the Board's other advisory groups. Supported by the Director of Corporate Governance, Chairs shall ensure that key and appropriate issues are discussed by the Local Partnership Forum in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.

5.4 Joint Secretaries

5.4.1 Each side of the Local Partnership Forum should appoint/elect its own Joint Secretary. The Management and Staff Organisation Secretary will be responsible for the preparation of the agendas and minutes of the meetings held, and for obtaining the agreement of the Management and Staff Organisation Chairs.

5.4.2 The Executive Director of People Services and Organisational Development will act as Management Secretary and will be responsible for the maintenance of the constitution of the membership, the circulation of agenda and minutes and notification of meetings.

5.5 Other Groups

5.5.1 When it is considered appropriate, the Local Partnership Forum can decide to appoint a Group to hold detailed discussion on a particular issue(s). Nominated representatives to Groups will communicate and report regularly to the Local Partnership Forum.

6 AGENDA AND PAPERS

6.1 The Committee Secretary is to hold an agenda setting meeting with the Chair and/or Vice Chair and the Executive Lead (Executive Director of People Services and Organisational Development) at least six weeks before the meeting date.

6.2 The agenda will be based on the Advisory Group's work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year, and requests from Advisory Group members. Following approval, the agenda and timetable for request of papers will be circulated to all Advisory Group members.

6.3 All papers must be approved by the Executive Lead.

6.4 The agenda and papers will be distributed / published seven days in advance of the meeting.

- 6.5 A draft Action Log will be issued within two working days of the meeting. The minutes and Action Log will be circulated to the Advisory Group Chair and Executive Lead within seven days to check the accuracy, prior to sending to Members to review within the next seven days.
- 6.6 Members must forward amendments to the Advisory Group Secretary within the next seven days. The Advisory Group Secretary will then forward the final version to the Advisory Group Chair for final review.
- 6.7 **Relationship with the Board and others**
- 6.7.1 The LPFs main link with the Board is through the Executive members of the LPF.
- 6.7.2 The Board may determine that designated Board members or Health Board officers shall be in attendance at LPF meetings. The LPF's Chairs may also request the attendance of Board members or Health Board officers, subject to the agreement of the Health Board Chair.
- 6.7.3 The Board shall determine the arrangements for any joint meetings between the Health Board and the LPF's staff representative members.
- 6.7.4 The Board's Chair shall put in place arrangements to meet with the LPF's Joint Chairs on a regular basis to discuss the LPF's activities and operation.
- 6.7.5 The LPF shall ensure effective links and relationships with other groups / fora at local and, where appropriate, national level.

7 PRIVATE SESSION

- 7.1 The Local Partnership Forum can operate with a 'closed' function to receive updates on the management of sensitive and/or confidential information.

8 MEETINGS

- 8.1 Meetings will be held quarterly however this may be changed to reflect the need of either Health Board Management or Staff Representatives.
- 8.2 The business of the meeting shall be restricted to matters pertaining to Local Partnership Forum issues and should include local operational issues. Board wide strategic issues and issues that have all Wales wide implications shall be referred to the Welsh Partnership Forum via the Board.
- 8.7 The Local Partnership Forum has the capacity to co-opt others onto the Local Partnership Forum or its Group as deemed necessary by agreement.

9 REPORTING

- 9.1 The Advisory Group, through its Chair and members, shall work closely with the other Committees and Advisory Groups to provide advice and assurance to the Board through joint planning and co-ordination of Board and Advisory Group business including sharing of information.
- 9.2 The Advisory Group Chair, supported by the Advisory Group Secretary, shall:

- Report formally, regularly and on a timely basis to the Board on the Advisory Group's activities.
- Bring to the Board's specific attention any significant matter under consideration by the Committee; and
- Ensure appropriate escalation arrangements are in place to alert the Health Board's Chair, Chief Executive and / or Chairs of other relevant Committee, of any urgent / critical matters that may affect the operation and / or reputation of the Health Board.

9.3 The Advisory Group will undertake an annual review of the effectiveness of its arrangements and responsibilities. The Director of Corporate Governance will oversee this review.

10 ACCOUNTABILITY, RESPONSIBILITY AND AUTHORITY

10.1 Although the Board has delegated authority to the Local Partnership Forum for the exercise of certain functions, as set out in these Terms of Reference, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens through the effective governance of the organisation.

10.2 The Local Partnership Forum is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.

10.3 The requirements for the conduct of business as set out in the Health Board's Standing Orders are equally applicable to the operation of the Local Partnership Forum.

11 REVIEW DATE

11.1 These Terms of Reference and operating arrangements shall be reviewed on at least an annual basis by the Advisory Group for approval by the Board.

Appendices

Appendix 1

Six Principles of Partnership Working

- A shared commitment to the success of the organisation.
- A focus on the quality of working life.
- Recognition of the legitimate roles of the employer and the trade union.
- A commitment by the employer to employment security.
- Openness on both sides and a willingness by the employer to share information and discuss the future plans for the organisation.
- Adding value – a shared understanding that the partnership is delivering measurable improvements for the employer, the union and employees.

Appendix 2

Code of Conduct

A code of conduct for meetings sets ground rules for all participants:

- Respect the meeting start time and arrive punctually.
- Attend the meeting well-prepared, willing to contribute and with a positive attitude.
- Listen actively; allow others to explain or clarify when necessary.
- Observe the requirement that only one person speaks at a time.
- Avoid 'put downs' of views or points made by colleagues.
- Respect a colleague's point of view.
- Avoid using negative behaviours e.g. sarcasm, point-scoring, personalisation.
- Try not to react negatively to criticism or take as a personal slight.
- Put forward criticism in a positive way.
- Be mindful that decisions have to be made and it is not possible to accommodate all individual views.
- No 'side-meetings' to take place.
- Respect the Chair.
- Failure to adhere to the Code of Conduct may result in the suspension or removal of the member.

Appendix 3

List of Recognised Trade Unions / Professional Bodies referred to as 'staff organisations'

The following Staff Organisations (Trade Union and Professional Organisations) are recognised as staff organisations for the purposes of the Local Partnership Forum.

- Britain's General Union (GMB)

- British Association of Occupations Therapists
- British Dental Association
- British Dietetic Association
- British Medical Association
- British Orthoptic Society
- Chartered Society of Physiotherapy
- Federation of Clinical Scientists
- Royal College of Midwives
- Royal College of Nursing
- Society of Chiropodists & Podiatrists
- Society of Radiographers
- Unison
- Unite

LOCAL PARTNERSHIP FORUM

Annual Report for 2024/25

FOREWORD

I am pleased to present the Annual Report of the Local Partnership Forum which outlines the activity for the period 1st April 2024 to 31st March 2025.

TO BE COMPLETED

**Carol Shillabeer, Chief Executive and Jan Tomlinson, Staff Organisation Chair
Joint Chairs of the Local Partnership Forum**

DRAFT

Local Partnership Forum Annual Report 2024/25

1. Introduction

- 1.1 This report summarises the key areas of business activity undertaken by the Local Partnership Forum between 1st April 2024 and 31st March 2025 and highlights some of the key issues which the Forum intend to give further consideration to over the next 12 months.
- 1.2 The Forum's Annual 'Business Cycle' is a key component in ensuring that the Forum effectively carried out its role over the course of the year.
- 1.3 This report reflects the Forum's key role in the development and monitoring of the Governance and Assurance framework within its remit.

2. Role and Responsibilities

- 2.1 The primary purpose of the Local Partnership Forum is to:
 - Establish a regular and formal dialogue between the Board's Executive and staff organisations on matters relating to workforce and health service issues.
 - Enable employers and staff organisations to put forward issues affecting the workforce.
 - Provide opportunities for staff organisations and managers to input into organisation service development plans at an early stage.
 - Consider the implications on staff of service reviews and identify and seek to agree new ways of working.
 - Consider the implications for staff of NHS reorganisations at a national or local level and to work in partnership to achieve mutually successful implementation.
 - Appraise and discuss in partnership the financial performance of the organisation on a regular basis.
 - Appraise and discuss in partnership the Board services and activity and its implications.
 - Provide opportunities to identify and seek to agree quality issues, including clinical governance, particularly where such issues have implications for staff.
 - Communicate to the partners the key decisions taken by the Board and senior management.
 - Consider national developments in NHS Wales Workforce and Organisational Strategy and the implications for the Board including matters of service re-profiling.
 - Negotiate on matters subject to local determination.
 - Ensure staff organisation representatives are afforded reasonable paid time off to undertake trade union duties; and
 - Develop in partnership appropriate facilities arrangements using A4C Facilities Agreement as a minimum

3. Agenda Planning Process

- 3.1 The Chairs of the Forum, in conjunction with the Executive Lead and Meeting Secretary develops the final agenda for the Forum meetings.
- 3.2 The venue, location and other administrative arrangements are organised a year in advance where possible, and are hybrid meetings to enable members to attend.
- 3.3 The secretariat for the meeting is provided by Fiona Lewis, Corporate Business Officer.
- 3.4 The agenda and papers are disseminated to Forum members prior to the date of the meeting. Where appropriate all papers are accompanied by a cover sheet which provides an executive summary and guidance to the Forum on the action required.

4. Operating Arrangements

- 4.1 Only very minor amendments were considered necessary in respect of the Terms of Reference and Operating arrangements for 2024/25.
- 4.2 The Forum's Cycle of Business for 2024/25 was reviewed and approved in February 2025, however the agenda for each meeting is sufficiently flexible to allow the Forum to consider any emerging issues.

5. Membership, Frequency and Attendance

- 5.1 The Terms of Reference for the Forum sets out its membership by staff side groups and BCU representatives.
- 5.2 During the year the Forum met twice, with Membership attendance as follows:

Members of the Local Partnership Forum	10/09/2024	05/02/2025
British Dental Association	P	A
British Dietetics Association	x	P
British Association of Physiotherapists	X	A
Royal College of Midwives	x	Px2
Royal College of Nursing	Px2	Px2
Royal College of Orthoptics	X	A
Society of Radiographers (See also Independent Member)	P	X
UNISON	Px2	P, Ax2
UNITE	Px3	Px2
Formally In attendance (as per Terms of Reference)	10/09/2024	05/02/2025
Chief Executive	P (Chair)	P (Chair)
Chairman	A	P
Executive Director of Workforce and Organisational Development	P (Georgina Roberts deputising)	P (Georgina Roberts deputising)

Independent Members (TU) and SoR	P	P
Executive Director of Nursing & Midwifery	P (Sam Watson Deputising)	P*
Executive Director of Public Health	X	P
Director of Transformation & Improvement	P	P*
Area Directors / IHC's	Px2	Px3
Workforce & Organisational Development	Px2	Px2
Director of Nursing, Mental Health and Learning Disabilities	X	P
Director Of Primary Care	X	A
Interim Executive Director of Finance	P	P (Joanna Garrigan deputising)
Director of Partnerships, Engagement & Communications	P	P
Head of Occupational Health & Wellbeing	P	P
Director of Governance	P (Helen Roberts deputising)	A

Key:

P - Present

A - Apologies submitted

◆ Not a member of the LPF at this time.

P* - Present for part meeting

X - Not present

In addition, a separate informal briefing was held on 6th November 2024, with updates provided on the following:

- Values and Behaviours
- Staff Survey
- Integrated Leadership Development
- Partnership Forum
- Staff Story

5.3 The Forum has been delighted to have in attendance a range of staff side organisations at all its meetings over the course of the year.

5.4 The Forum requires the attendance of other Health Board Officers for advice, support and information routinely at meetings. It may also co-opt additional independent 'external' members from outside the organisation to provide specialist skills, knowledge and expertise.

6. Forum Activity

6.1 Despite having only two meetings rather than the scheduled four, the Forum fulfilled its work plan for 2024/25 covering a wide range of activity. This work can be summarised under the following headings

- Staff / Patient Stories
- Range of issues brought forward by Staff Side
- Culture Change Programme - Values and Behaviour Framework
- Annual Planning Cycle
- Workforce and Organisational Development
- Special Measures
- Foundations for the Future

In addition, the Forum routinely receives the following information:

- Workforce overview reports which include:
 - Employee Relations
 - Workforce Policies Group
 - Workshop Partnership Group
 - Workforce engagement
 - Job Evaluation Programme
 - Gender Pay Action Plan
 - Speak Out Safely updates
 - Health and Well-Being
 - Equality and Human Rights updates
 - Organisational Development Team updates
 - Strategic Occupational health and Safety Group issues of significance
- Chief Executive's Board Report
- Finance Reports
- Corporate Planning updates
- Quality and Performance Report
- Minutes of the People and Culture Committee

6.1a) Governance Development & Assurance Activity

7. Key Achievements / Benefits:

7.1 As a reader you will see from this report what a successful and varied year the Forum has had during 2024/25. Although detailed more fully above and within the Forum papers, some of the key highlights were:

- Consultation and engagement on the new Values and Behaviours Framework
- Engagement on Foundations for the Future (Operating Model review)

8. Key Challenges

8.1 As indicated earlier in the report a focus for the Forum in 2025 and going forward into 2026, will be the work which is underway on Foundations for the Future and monitoring progress of the Annual Plan, including Special Measures to ensure that progress is being made. Work would be undertaken with Staff Side to ensure that issues of significance are brought to the Forum for discussion.

8.2 Finally, although these challenges remain the Forum will continue to monitor activity and develop innovative ways to support new developments and opportunities.

9. Forum Effectiveness & Performance

- 9.1 The Forum regularly reviews its own performance by completing this report on an annual basis, reviewing the cycle of business which provides the Forum with the basis on which it will monitor its progress during the year, and also provide clarity for all of those who contribute to the agenda as to the expectations of them.
- 9.2 A Forum effectiveness questionnaire will be issued in 2025/26; the outcome of which will be reported to the Forum in respect of recommendations and subsequent actions in response to areas identified for improvement.

9. Reporting the Forum's Work

- 9.1 The Forum Chairs report the key issues discussed at each of its meetings by way of an Assurance Report to the Board.
- 9.2 These reports are supported by the relevant and more detailed Forum minutes, which are available on request. Forum papers, including minutes are routinely published on the Health Board's website.

10. Conclusion and way forward

- 10.1 The Forum is very grateful to all those involved in the work of the Forum for their support over the past 12 months, and for the constructive and positive way in which they have contributed to the activity.
- 10.2 The Forum will continue to ensure that it conducts its business in accordance with legislation and best practice.
- 10.3 It will provide the assurance that the Forum has in place the appropriate governance arrangements and resources to ensure success in achieving its objectives.

11. Further Information

Please visit the Health Board's websites for further information as outlined below:

[Local Partnership Forum \(LPF\) - Betsi Cadwaladr University Health Board \(nhs.wales\)](https://www.nhs.uk/healthboards/betsi-cadwaladr-university-health-board/)



Teitl adroddiad:	Review of Well-being Objectives
Report title:	
Adrodd i:	Local Partnership Forum
Report to:	
Dyddiad y Cyfarfod:	Tuesday, 06 May 2025
Date of Meeting:	
Crynodeb Gweithredol: Executive Summary:	<p>In July 2023, Health Boards in Wales received correspondence from the Minister for Social Justice and Chief Whip confirming changes to the Social Partnership and Public Procurement (Wales) Act 2023 (SPPP Act) which places social partnership duties on public bodies and substitutes 'fair work' for 'decent work' in the 'A Prosperous Wales' well-being goal within the Well-being of Future Generations (Wales) Act 2015 (WCFG Act).</p> <p>Health Boards were advised to plan for a general review of their well-being objectives, noting that this should consider how its objectives contribute to 'fair work'. The fair work provisions commenced on 1st April 2024.</p> <p>Whilst the primary focus of the review has been on fair work and socially responsible procurement and contracting, consideration has also been given to the broader well-being objectives to ensure that they remain fit for purpose and in accordance with an audit review of the process for reviewing our objectives which formed part of the scope of the Auditor General carried out in August 2024.</p> <p>This paper provides:</p> <ul style="list-style-type: none">• An overview of the approach taken to review the Health Board's well-being objectives to ensure alignment with WG legislation and to ensure that the Health Board's contribution to all seven of the sustainable development goals described within the WCFG Act (2015) is maximised.• A description of the proposed changes to the well-being objectives <p>Comments received at the Executive Committee on 2nd April have been incorporated into this paper. This paper was presented to the Planning, Population Health and Partnerships Committee on the 1st May and will be presented to Board for approval on the 29th May. It will also be shared for information purposes with the People and Culture Committee.</p>
Argymhellion: Recommendations:	This paper is submitted to the Local Partnership Forum for information and noting.

Arweinydd Gweithredol: <i>Executive Lead:</i>	Paolo Tardivel Interim Executive Director of Transformation & Strategic Planning			
Awdur yr Adroddiad: <i>Report Author:</i>	Wendy Hooson Head of Health Strategy & Planning			
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input type="checkbox"/> Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	Derbyniol <i>Acceptable</i> <input checked="" type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran ddarpariaeth <i>No confidence / evidence in delivery</i>
Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:				
Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:				
Cyswllt ag Amcan/Amcanion Strategol: Link to Strategic Objective(s):	This work aligns to the 'developing strategy and long lasting change' strategic objective for the Health Board - one of the five main areas where improvement is most necessary.			
Goblygiadau rheoleiddio a lleol: Regulatory and legal implications:	The Social Partnership and Public Procurement (Wales) Act 2023 (SPPP Act) was passed by the Senedd in March 2023 and received Royal Assent in May 2023. The SPPP Act substitutes 'fair work' for 'decent work' in the 'A Prosperous Wales' well-being goal within the Well-being of Future Generations (Wales) Act 2015 (WFG Act). An Audit Review of the process for reviewing the well-being objectives formed part of the scope of the Auditor General carried out in Autumn 2024 in accordance with statutory functions section 61(3) (b) of the Public Audit Wales Act 2004.			
Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal? In accordance with WP7 has an EqIA been identified as necessary and undertaken?	Yes.			
Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal?	Yes.			

<p><i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i></p>	
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR)</p> <p><i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i></p>	<p>Failure to fulfil the statutory duties as described above.</p> <p>Individual service areas are accountable for ensuring any risks within their specific areas of delivery are identified and recorded, and mitigations set in place as far as is feasible.</p>
<p>Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Financial implications as a result of implementing the recommendations</i></p>	<p>There are no cost implications or budget required for implementation in respect of this paper.</p>
<p>Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	<p>There are no workforce implications currently.</p> <p>Any workforce requirements relating to the Social Partnership Duty and the Procurement Act 2023 will be determined as the impact of the new regulations on workforce capacity become known.</p> <p>Actions to advance fair work and the non-pay parts of the 2022 to 2024 Collective Agreement are being undertaken within existing resources or in partnership with Local Authorities, Higher Education or the third sector.</p>
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	<p>Discussions have taken place with WG, the Office of the Future Generations Commission, Public Service Boards and other Local Health Boards in Wales.</p> <p>A Public and Staff Survey were published on social media and links with Trade Unions continued throughout the review. A desk-top review of engagement pertinent to the well-being objectives has been produced and themes taken from on-going citizen engagement have been reviewed.</p>
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p><i>Links to BAF risks:</i> (or links to the Corporate Risk Register)</p>	<p>The review of the well-being objectives links to the following Corporate Risks:</p> <p><i>CRR 24-16: Leadership:</i> There is a risk of traditional models of leadership which do not define the expectations, values and behaviours of our leaders to transform the organisation.</p>

	<p><i>CRR 24-01: People, Culture and Well-being: There is a risk that BCU does not have a highly skilled, engaged and motivated workforce which could impact on safe delivery of care.</i></p>
<p>Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol)</p> <p><i>Reason for submission of report to confidential board (where relevant)</i></p>	<p>Not applicable</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p><i>Next Steps:</i> <i>Implementation of recommendations</i></p> <ul style="list-style-type: none"> • As part of the broader engagement on the development of the Health Board's long-term strategy - review the well-being objectives to ensure continued alignment with the requirements of the WBFG Act, the SPPP Act and the emerging long-term strategy • Following the outcome from the broader engagement described above, develop an agreed set of strategic indicators that are aligned to the Health Board's strategic vision and that will track progress against implementation of the well-being objectives in the long-term. • Ensure that the Health Board's long-term strategy demonstrates alignment between the strategic objectives, well-being objectives and key strategic plans, setting out a framework for the Three Year Plan / IMTP. 	
<p>Rhestr o Atodiadau: <i>Dim</i> <i>List of Appendices: None</i></p>	

Local Partnership Forum 6th May 2025

Review of Well-being Objectives

This paper provides an overview of the approach taken to review the Health Board's well-being objectives to ensure alignment with Welsh Government legislation and to ensure that the Health Board's contribution to all seven of the sustainable development goals described within the WBFG Act (2015) is maximised. A description of the proposed changes to the well-being objectives is provided.

▪ **Background**

Since the Health Board published its long-term strategy Living Healthier, Staying Well (LHSW) in 2018 there have been on-going conversations with our staff, public and partners. A **desktop review of engagement** pertinent to our well-being objectives has been completed and a summary produced. Feedback has been drawn from engagement that took place when developing the Clinical Services Strategy, the Strategic Equality Plan, the Staff Survey 2023, the Operating Model and work currently underway to strengthen BCUHB's culture, leadership and engagement. Themes taken from on-going citizen engagement have also been reviewed.

A Well-being Task and Finish Group was established in July 2024 to oversee the work to review the well-being objectives.

In order to ensure a structured and proportionate approach to refreshing the well-being objectives discussions have taken place with:

- **Welsh Government and the Office of the Future Generations Commission**
Discussions have taken place with both Welsh Government and the Office of the Future Generations Commission to ensure alignment with the rest of Wales. Feedback from the discussions helped inform BCUHB's approach to the review.
- **Public Service Boards**
Questionnaires were distributed to Anglesey and Gwynedd PSB; Flintshire and Wrexham PSB; and Conwy and Denbighshire PSB. Responses were received from Wrexham County Borough Council, North Wales Fire and Rescue Service and Conwy County Borough Council. A summary of the feedback received has been produced.
- **Other Local Health Boards**
Discussions have taken place with Swansea Bay University Health Board, Aneurin Bevan University Health Board and Hywel Dda University Health Board. Feedback has helped BCUHB learn from the approaches taken elsewhere and ensure good practice.
- **Public / Staff Survey**
A public and staff survey were published on social media and in the staff bulletin - 55 people responded. The highest number of respondents were from Gwynedd followed by Conwy

and Anglesey. The remaining responses were fairly representative across the other three counties. A summary of the feedback has been produced, the main messages of which have helped inform the refresh of the objectives.

- **Trade Unions**

Links with Trade Unions have continued throughout the review. Trade Union representation on the Task and Finish Group has ensured that the workforce voice is captured. Links have also been made with the Workforce Partnership Group and a discussion relating to the well-being objectives took place on 22nd November.

Progress updates have been provided to the Planning, Population Health and Partnership Committee in August and October 2024 and the feedback received has informed the review. A briefing paper was also shared with the Stakeholder Reference Group in October 2024 with a link to the public / staff survey provided.

- **Key areas of work**

In addition to the engagement work described above, the review has been informed by evidence gathered from the following areas of work:

- An assessment of current 'fair work' practice and socially responsible 'procurement and contracting'. Gaps have been identified and actions to advance 'fair work', procurement and contracting have been agreed.
- A summary of key Health Board and partnership well-being activities that address health inequalities, prevention, the wider determinants of health and decarbonisation.
- A BCUHB Plan to implement non-pay parts of the 2022 to 2024 Collective Agreement.

This work, along with the engagement feedback, has provided the basis upon which the well-being objectives have been reviewed and helped to identify gaps in alignment with the seven sustainable development principles described in the WCFG Act (2015).

- **Proposals to amend the Health Board's Well-being objectives**

The Health Board's current well-being objectives (2018 – 2024):

- Improve physical, emotional and mental health and well-being for all
- Target our resources to those with the greatest needs and reduce inequalities
- Work in partnership to support people – individuals, families, carers, communities – to achieve their own well-being
- Improve the safety and quality of services
- Respect people and their dignity
- Listen to people and learn from their experience

Proposed well-being objectives:

A review of the evidence and engagement feedback has been undertaken. Whilst the primary focus of the review has been on fair work and socially responsible procurement and contracting, consideration has also been given to the broader well-being objectives to ensure that they remain fit for purpose. The Task and Finish Group has:

- ensured alignment with the Health Board’s Values and Behaviours Framework
- maximised the Health Board’s contribution to all seven of the sustainable development goals described within the WCFG Act (2015)
- strengthened the wording of three of the current well-being objectives and added two objectives in direct response to Welsh Government legislation. Two of the current well-being objectives have not changed:

The Health Board has:	PROPOSED CHANGES TO THE CURRENT WELL-BEING OBJECTIVES:	Alignment with the sustainable development well-being goals
Not made changes to two of the current well-being objectives:	<p>Improve physical, emotional and mental health and well-being for all</p> <p>Target our resources to those with the greatest needs and reduce inequalities</p>	<p>A Healthier Wales</p> <p>A more equal Wales</p>
Strengthened the wording of three of the current well-being objectives:	<p>Work in partnership to support people and develop communities to manage their health and prevent ill health</p> <p>Continuously improve the safety and quality of services</p> <p>Listen and learn from people’s experiences</p>	<p>A Wales of more cohesive communities</p> <p>A Healthier Wales</p> <p>A Healthier Wales</p>
Added an objective that ensures compliance with changes made to the WCFG Act (2015) which substitutes fair work for decent work in the ‘a Prosperous Wales’ well-being goal.	<p>Workers are fairly rewarded, heard and represented, secure and able to progress in a healthy, inclusive working environment where rights are respected</p>	<p>A Prosperous Wales</p>
Added an objective that ensures compliance with the SPPP Act (2023) and the WCFG Act (2015) by: - strengthening the Health Board’s	<p>Contribute to the environmental, economic, social and cultural well-being of North Wales</p>	<p>A resilient Wales</p> <p>A Wales of vibrant culture and thriving Welsh language</p>

The Health Board has:	PROPOSED CHANGES TO THE CURRENT WELL-BEING OBJECTIVES:	Alignment with the sustainable development well-being goals
<p>procurement and contracting processes</p> <ul style="list-style-type: none"> - embedding social partnership - implementation of the Decarbonisation Action Plan - promoting and protecting the Welsh language 		<p>A globally responsible Wales</p>

▪ Long term strategy

The well-being of BCUHB’s staff and the population of North Wales will be at the heart of the next iteration of the long-term strategy. The Health Board will work together with its partners, setting out a vision for a healthier future for the next 10 years. This will include a framework which delivers measurable improvements and an agreed set of indicators that will be aligned to the strategic vision and set against the well-being objectives and national outcomes frameworks.

The long-term strategy will describe BCUHB’s vision as a high-quality organisation articulating:

- what it will want to achieve as an organisation
- what it will look and feel like for its staff and population and
- what indicators will show achievement of the strategic and well-being objectives long-term

The strategy will bring together the Health Board’s strategic objectives, well-being objectives and key strategic plans into one place, setting out a framework for the Integrated Medium Term Plan (IMTP).

▪ Budgetary / Financial Implications

There are no cost implications or budget required for implementation in respect of this paper.

▪ Risk Management

Risks associated with improving population well-being include socio-economic inequalities, lack of access to resources, poor health behaviours and the impact of external factors such as climate change.

Implementation of the the Health Board's well-being objectives will however provide the foundation for how the Health Board works to improve health and well-being and address inequalities for its workforce and the population of North Wales.

▪ **Equality and Diversity Implications**

An Integrated Equality Assessment and Socio-Economic Impact Assessment has been completed. Proposals to up-date the well-being objectives are overwhelmingly positive and as a result, no unintended consequences have been identified. Whilst the primary focus of the review has been on 'fair work', socially responsible procurement and contracting, consideration has also been given to the broader well-being objectives to ensure that they remain fit for purpose.

Evidence has been provided that demonstrates BCUHB's commitment (with partners) to proactively addressing issues that will:

- advance fair work opportunities
- strengthen procurement and contracting processes in accordance with the Procurement Act 2023 (which came into force on 24th February 2025) and the Health Services (Provider Selection Regime) (Wales) Regulations 2025
- enhance well-being for employees and the local population
- boost employee morale
- enhance compliance with the social partnership duty in accordance with the SPPP Act

Respect, quality and safety are embedded in the proposed well-being objectives and the Health Board's Strategic Equality Plan (SEP) also sets out detailed actions to address equality and human rights matters. The overarching objectives in the SEP resonate and support BCUHB's proposed well-being objectives.

Betsi Cadwaladr University Health Board (BCUHB)
Confirmed Minutes of the People & Culture Committee
held in Public on 3 March 2025
in the Boardroom, Carlton Court, St Asaph and via Teams

Committee Members Present	
Name	Title
Dyfed Jones	Independent Member (Chair of People & Culture Committee)
Billy Nichols	Independent Member (Vice Chair of People & Culture Committee)
Karen Balmer	Independent Member (<i>via Teams – part meeting</i>)
In Attendance	
Carol Shillabeer	Chief Executive (<i>via Teams</i>)
Pam Wenger	Director of Corporate Governance
Teresa Owen	Executive Director of Allied Health Professionals & Health Science
Georgina Roberts	Senior Associate Director People Services
Nick Graham	Associate Director of Workforce Optimisation (<i>via Teams</i>)
Dave Harries	Head of Internal Audit
Katie Sargent	Associate Director – Employee Experience & Engagement
Ceri Harris	Head of Equality & Human Rights
Nia Thomas	Head of Culture and Development
James Johnson	Staff Retention Lead
Nesta Collingridge	Head of Risk Management (<i>via Teams – part meeting</i>)
Committee Support	
Philippa Peake-Jones	Head of Corporate Affairs
Laura Jones	Project Support Manager (Corporate Governance)

Agenda Item
OPENING BUSINESS
PC25/01 Welcome and Apologies
Apologies were noted for Clare Budden and Jason Brannan.
PC25/02 Declarations of Interest
No declarations of interest were raised.
PC25/03 Unconfirmed Minutes of Meeting held on 19.12.24
It was agreed that the minutes of the meetings held on 19.12.24 were a true and accurate record.
PC25/04 Matters Arising & Action Log
The Committee reviewed the action log and agreed to close the actions that were proposed for closure.

STAFF STORY

PC25/05 Staff Story

The Committee received the staff story and the Associate Director of Employee Experience & Engagement highlighted:

- This is the second staff story to be received by the Committee and as we move forward the stories will align with items for discussion included on the agenda.
- The theme for this staff story was based around inclusivity, equality and diversity and the staff members were thanked for giving their time to express their experiences.
- This provides the organisation with an opportunity to review how underrepresented groups can be supported going forward.
- One of the staff members provided suggestions around how the organisation can support different communities and staff with different cultures and backgrounds, this is an area that needs to be addressed by the Health Board.

In discussing the staff story, the Committee:

- Stated the importance of the Committee to receive challenging staff stories to allow the Health Board to discuss how the issues raised can be addressed.
- Confirmed that this story links in to the organisation's values, behaviours and culture programme.
- Acknowledged that where staff stories link to strategic items, this allows the Committee to understand current issues to inform discussion.
- Suggested a letter of thanks is sent from the Chair to the staff thanking them for their support.
- Queried how this links back into the wider strategic view of the organisation.
- Stated that staff support networks are crucial and the need to embed opportunities and protect time for staff to join these networks is important.
- Confirmed the need to balance initiatives and develop a strategic approach to changing and embedding culture across the Health Board.
- Agreed the need to demonstrate the strategic intent and systematic approach to the Board in March to provide a clear direction on how to drive this forward.

Action:

- **PC25/05.1** The Chair to write and thank staff who have shared their experience.

It was resolved that the Committee:

- **NOTED** the experiences of colleagues & considered the impact of these experiences on them & the wider workforce.

STRATEGIC PRIORITIES

PC25/06 Equality Update Report

In presenting the report, the Head of Equality & Human Rights highlighted:

- The Health Board is required to publish an Equality Annual Report and any comments received from the Committee will be included in the final draft.
- The Statutory Employment Report, the Gender Pay Gap Report and the Race Pay Gap Report have been included in the appendices.



- The report includes an update on the Strategic Equality Plan highlighting that 28 actions have been identified, there are currently 5 actions off track and 1 at risk. The action at risk relates to equality training for Board members and this is currently being addressed.
- The report also included an update on the recommendations relating to the Workforce Race Equality Scheme (WRES) and there is a focus on creating opportunities for staff to be recruited into roles and address diversity on recruitment panels.

In discussing the report, the Committee:

- Stated the need to provide Independent Members with the opportunity to comment on the report for onward consideration at the Board and suggested the report is shared with Independent Members not present at the meeting for their feedback.
- Confirmed that discussions are taking place in relation to Board member training requirements and the Board Development Programme.
- Suggested the need to streamline the appendices ahead of the report being presented to the Board to understand the requirements needed to ensure actions are completed.
- Agreed the need for clarity on what the data is telling us and what action is required to receive the greatest impact in specific areas.
- Highlighted the need to spend time developing a collaborative approach to these actions to help form plans going forward stating that the Board in March will be a great opportunity to publicly outline the commitment of the organisation to improve in this area.

Action:

- **PC25/06.1** Email Clare Budden and Karen Balmer requesting feedback on the report.

It was resolved that the Committee:

- **NOTED** the contents of the Draft Equality report.
- **CONSIDERED, REVIEWED** and **DISCUSSED** the proposed content of the Equality report.

PC25/07 Foundations for the Future Programme

The Chief Executive provided a verbal update highlighting:

- The scope of the work is to create a more effective organisation.
- The programme is not primarily focused on structures but based around five key pillars which include strategy, culture, people, processes and structure and work is underway to ensure these align with the Annual Plan.
- The strategy element will focus on the 10 Year Plan and Clinical Services Plan, the Culture element is underway with the Values & Behaviours Programme, the People element will focus on leadership and development, the Processes element will be focused around the Scheme of Reservation and Delegation (SoRD) and the Structures element is a new feature which will be a focus going forward.
- The Discovery Report was issued in November 2024 and following discussions with staff, provides a clear evidence base as a guide.

- The Design phase commenced in December 2024 and a number of design workshops have now taken place.
- The Design principles have been agreed by the Board and final Design documentation will be formalised prior to consideration by the Board.
- It may be helpful to have a briefing session with Independent Members to discuss the design around the Programme.
- As part of the programme approach, discussions are taking place around leadership in key areas, risks, resourcing and scope to ensure staff are engaged and communication is shared.
- The programme is not be driven on a financial basis, the aim is to make the organisation more effective, taking into consideration the outcome of the Internal Audit review.

In discussing the report, the Committee:

- Highlighted the link to Audit Committee in terms of accountability, decision making and ensuring clarity on key documents such as the SoRD to enable the production of a toolkit to support staff, it was confirmed that work in this area has commenced.
- Suggested colleagues would benefit from an update on the programme in terms of progress and timelines, it was agreed that the Chief Executive would produce a video update for staff.

Action:

- **PC25/07.1** Arrange a briefing session with Independent Members to discuss the design around the Foundations for the Future Programme.
- **PC25/07.2** The Chief Executive to produce a video update on the Foundation for the Future Programme to update staff within the organisation.

It was resolved that the Committee:

- **NOTED** the update.

Karen Balmer joined the meeting

PC25/08 People Operations Report

Members received the report and noted the progress. In presenting the report, the Associate Director of Workforce Optimisation highlighted:

- Staff turnover continues to have a solid trend of reduction over time and the Retention Lead is starting to focus on wider staff groups.
- Staff absence continues to increase on a regular basis, the organisation compare well with other Health Boards however a deep dive is required in this area to develop a more targeted approach.
- PADR compliance continues to improve and the process is being discussed by the Integrated Performance Executive Delivery Group (IPEDG) to further increase performance in this area.
- Time to Recruit has seen a significant decrease over the past 12 months this is due to improvements in the system however further work is required.

- There is a need to triangulate what the data in the report is telling us and work is taking place with the Director of Performance & Commissioning to ensure the data feeds into a wider piece of work.

In discussing the report, the Committee:

- Stated the importance of the information included in the report to feed into all parts of the remit of the Committee.
- Queried the process for PADRs, it was confirmed that these need to be scheduled by managers and those services that follow this process have a better rate of delivery. It was suggested that learning could be shared across the organisation by those services that have a higher rate, in particular for operational areas where this may be difficult.
- Referred to staff engagement results and queried whether any data is available, it was confirmed that the information has not been processed to date but will be included in the report going forward.
- Discussed exit interviews and it was confirmed that participation in this area is low, there is a need to review this with the Retention Lead to establish how improvements can be made and ensure staff are offered an exit interview before they leave the organisation.
- Considered the data received via the Wales Staff Survey and confirmed that over 1000 free text comments had been received noting that staff may feel more comfortable providing comments anonymously.
- Confirmed that the results of the Staff Survey are being reviewed and compared across Wales, there has been an improvement in returns and this will be discussed by the Executive Committee. It was agreed that there is a need for the Committee to discuss the results and proposed priority actions and this links to action PC24/96.2 already included on the action log.

It was resolved that the Committee:

- **NOTED** the current position provided and feedback regarding **ASSURANCE** required as a result of the reported positions contained in the report.

PC25/09 Culture, Organisational Development & Engagement Update

Members received the report and noted the progress. In presenting the report, the Head of Culture and Development, the Staff Retention Lead and the Associate Director – Employee Experience & Engagement highlighted:

- In terms of culture, the Values & Behaviours Framework was approved by the Board in November 2024.
- The Communication and Embedding Plans have now been merged into a Deployment Plan and this will be discussed further by the Organisation Development Steering Group.
- A formal launch is due to take place in March 2025.
- There are currently 94 Culture Change Leaders in place who commenced their induction in January 2025. These leaders include a cross sections of bandings, professions and Clinicians and bespoke sessions have been made available taking into account clinical and time commitment for staff.

- A 12-month plan is being developed with support from the Chief Executive along with a tool kit that is being co-produced with the Culture and Leadership Design Group to support leaders.
- A leadership behaviour survey is also being developed to cross reference with the NHS survey and will provide a baseline to compare information received as we move forward.
- In terms of Organisational Development, work is continuing on the Integrated Leadership Development Framework (ILDF).
- A Venture Leadership Hub has been launched to host leadership development activities and feedback has been received from 400 colleagues.
- The People Manager Forum is progressing well and focusing on areas including retention and attendance and the Aspiring Programme is currently being finalised.
- Improvements are being made in relation to retention, underlying issues are being addressed as a key area of focus and work is taking place to increase the use of exit interviews to ensure learning is gained to improve job satisfaction.
- In terms of Engagement, the data has been received following the Staff Survey and there is a need to ensure the key messages are shared across the organisation.
- The Team are reviewing how Pulse Survey can be utilised to gain important feedback from staff.
- An induction video has been produced to welcome staff to the organisation ahead of commencing employment and it was agreed to share this outside of the meeting.
- The Team are also proposing to re-launch the Seren Betsi Award to spotlight colleagues who demonstrate the values and behaviours that are being promoted.

In discussing the report, the Committee:

- Acknowledged that the values and behaviours should be business as usual however recognition for staff who excel in this area is important.
- Queried whether the induction video is bilingual, it was confirmed that contact has been made with the Welsh Language team, and it was agreed to include Welsh subtitles.
- Highlighted the progress made and the focus on areas of improvement which provides assurance to the Board on the approach being taken.
- Discussed the amount of actions included in the documentation and queried delivery against the timescales. It was confirmed that the information is being transferred over to the Deployment Plan and a new Plan addressing this is due to be issued shortly.

Actions:

- **PC25/09.1** Share induction video with the Committee outside of the meeting.

It was resolved that the Committee:

- **NOTED** the information provided in the report.

PC25/10 Education & Training Plan 2026/27

Members received the report and noted the progress. In presenting the report, the Associate Director of Workforce Optimisation highlighted:

- Health Education and Improvement Wales (HEIW) is the strategic workforce and education body for NHS Wales and the annual Education and Training Plan (ETP) is a statutory requirement for HEIW.
- The detail included is being discussed further with HEIW to summarise what is being presented.
- There is a workforce planning element included in the Plan however further work is required in this area.
- There has been an improvement in engagement and assurance was provided in terms of visibility and transparency.

In discussing the report, the Committee:

- Acknowledged the breadth of education and training across the organisation.
- Highlighted that a new Education Steering Group is being established to provide a multi professional organisational approach to education and training. This will also address under graduate, post graduate and opportunities with Further Education to provide training within the organisation.
- Suggested a Committee Development Session is arranged to discuss this in more detail.
- Agreed that this should be included in the AAA Report to the Board to confirm the Plan has been received by the Committee.
- Queried how this links in to the training provided internally, it was confirmed that this is classed as formal external training and will feed into the Education Steering Group.

Action:

- **PC25/10.1** Arrange a P&C Committee Development session to focus on Medical Education and Training.

It was resolved that the Committee:

- **NOTED** the report.

GOVERNANCE & ASSURANCE

PC25/11 Corporate Risk Register Report

Members received the report and the Head of Risk Management highlighted:

- The Corporate Risk Register has been to the Risk Scrutiny Group and the Executive Committee and there has been no movement in score for the Committee.
- In relation to the People, Culture and Wellbeing risk it was confirmed that work is taking place to understand the data to ensure progress can be made.
- In relation to the Health & Safety risk, the new Director of Environment & Estates will take on the responsibility of this risk. A meeting has taken place with the Head of Health & Safety, further work is required in this area and a deep dive will take place at the Risk Scrutiny Group.
- Agreed that Stuart Keen, Director of Environment & Estates is invited to join the Committee as Health & Safety is a key objective for the Committee.

In discussing the report, the Committee:

- Queried the governance in terms of pushing back deadline dates for deliverables. It was confirmed that more realistic actions with reasonable dates should be being developed and any areas of concern will be highlighted from the Risk Scrutiny Group to the Executive Committee by the Director of Corporate Governance and the Head of Risk Management.
- Confirmed that the key message going forward will be to balance ambition and understand whether the risks being developed will provide the required assurance. It was confirmed that risks need to be signed off by Lead Executive in terms of accountability and the Executive Committee can then provide a level of assurance.

Action:

- **PC25/11.1** Invite Stuart Keen, Director of Environment & Estates to join the Committee to advise on the remit of Health & Safety.

It was resolved that the Committee:

- **RECEIVE ASSURANCE** for the progression of the corporate risks to which the Committee has overall accountability.

PC25/12 Final Internal Audit Report on Consultant Job Planning

Members received the report and the Associate Director of Workforce Optimisation highlighted:

- A Task & Finish Group has been established, this will be led by the Interim Executive Medical Director and will report via the Audit Committee.
- Significant work is required in this space, this is an important area for the organisation to address in terms of medical colleagues and key actions will need to be delivered.
- The Audit Committee will track the actions from this review and the P&C Committee will need to monitor and seek assurance against those actions. This item will be included on the forward workplan for this Committee and the level of reporting frequency will be agreed as we move forward.

Action:

- **PC25.12.1** Include the Consultant Job Planning review on the forward workplan.

It was resolved that the Committee:

- **NOTED** the report.

FOR INFORMATION

PC25/13 Summary of Business to be Reported from Private

It was resolved that the Committee **NOTED** the report.

PC25/14 Committee Forward Workplan

It was resolved that the Committee **NOTED** the forward workplan for information.



PC25/15 Thematic Report on Equality Matter (Improving Inclusion and Accessibility in Public Services in Wales)

It was resolved that the Committee **NOTED** the report.

CLOSING BUSINESS

PC25/16 Agree Items for Referral to Board / Other Committees

It was agreed that there were no items to be referred to the Board.

PC25/17 Review of Meeting Effectiveness

As part of the discussion, the Committee:

- Agreed there had been some good discussion, items are being refined and key issues are being addressed.
- Suggested further work is required at a strategic level to move forward in terms of performance and assurance.

PC25/18 Date of next meeting

Thursday 10th April 2025, 9.30-12.30pm

Resolution to Exclude the Press and Public

'Those representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960.'



Teitl adroddiad: <i>Report title:</i>	Chief Executive Report			
Adrodd i: <i>Report to:</i>	BCUHB Board			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Thursday, 27 March 2025			
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>This report has been developed to provide an overview of key activity, progress and issues by the Chief Executive. It covers the period end of January to 21st March 2025. Some of the content is further expanded in other reports on the Board agenda.</p> <p>The report outlines some of the key engagement activities undertaken both within the health board and more broadly with partners and the public.</p>			
Argymhellion: <i>Recommendations:</i>	The Board is asked to DISCUSS and NOTE the report.			
Arweinydd Gweithredol: <i>Executive Lead:</i>	Chief Executive			
Awdur yr Adroddiad: <i>Report Author:</i>	Chief Executive			
Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input checked="" type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input type="checkbox"/> Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	Derbyniol <i>Acceptable</i> <input type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i>
<p>Cyfiawnhad dros y gyfradd sicrwydd uchod. Lle bo sicrwydd 'Rhannol' neu 'Dim Sicrwydd' wedi'i nodi uchod, nodwch gamau i gyflawni sicrwydd 'Derbyniol' uchod, a'r terfyn amser ar gyfer cyflawni hyn:</p> <p><i>Justification for the above assurance rating. Where 'Partial' or 'No' assurance has been indicated above, please indicate steps to achieve 'Acceptable' assurance or above, and the timeframe for achieving this:</i></p>				
Cyswllt ag Amcan/Amcanion Strategol:	Relates to all objectives			
Link to Strategic Objective(s):				
Goblygiadau rheoleiddio a lleol: <i>Regulatory and legal implications:</i>				
Yn unol â WP7, a oedd EqIA yn angenrheidiol ac a gafodd ei gynnal? <i>In accordance with WP7 has an EqIA been identified as necessary and undertaken?</i>	N/A			

<p>Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP68, has an SEIA identified as necessary been undertaken?</i></p>	N/A
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR)</p> <p><i>Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)</i></p>	
<p>Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Financial implications as a result of implementing the recommendations</i></p>	No recommendation results in a financial decision or implication
<p>Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	No recommendation results in a workforce decision or implication
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	N/A
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p><i>Links to BAF risks: (or links to the Corporate Risk Register)</i></p>	
<p>Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol)</p> <p><i>Reason for submission of report to confidential board (where relevant)</i></p>	N/A
<p>Camau Nesaf: Gweithredu argymhellion</p> <p>Next Steps:</p> <p>There are a range of actions continue relating to the content of the report.</p> <p>Implementation of recommendations</p> <p>Recommendations are to discuss and note.</p>	
<p>Rhestr o Atodiadau:</p>	

Introduction

This report has been developed to provide an overview of key activity, progress and issues by the Chief Executive which may or may not be subject of other more detailed reports. It covers the period end of January to 20th March 2025.

2.0 Key Developments/Updates

2.1 Special Measure Progress Report (March 2025)

The [Welsh Government Progress Report](#) reflects on two years since Betsi Cadwaladr University Health Board was put into special measures. The report states that the Health Board has stabilised and started to put in place the building blocks to become a sustainable organisation over the course of the last 2 years under the current level 5 (special measures) arrangements. Progress has been made in relation to corporate governance, financial control and governance, leadership, culture and quality.

The report recognises that there are still challenges, especially in relation to planned care performance and timely access to urgent and emergency care, as well as drawing out some encouraging signs of improvement including:

- the number of people waiting more than two years for orthopaedic treatment has fallen by two-thirds since February 2023
- mental health performance for adults and young people has improved
- the health board has the highest number of consultations carried out under the pharmacist independent prescribing service in Wales
- new NHS dental contracts worth more than £5 million have been agreed

A series of new developments in North Wales were highlighted in the report:

- the new North Wales Medical School has opened
- the community audiology van is the first of its kind in Wales
- Ysbyty Glan Clwyd has been chosen as one of eight sites across the UK to take part in a new STEPS II Parkinson's trial
- surgeons in Abergele Hospital trialling augmented reality technology for knee surgery
- Ysbyty Gwynedd's emergency department ranked best place to train in Wales

The health board will continue to be assessed at regular intervals within the Escalation and Intervention Arrangements of Welsh Government.

2.2 Executive Team Recruitment update

There are a number of developments to report in relation to the Executive Team, all of which are overseen by the Remuneration Committee of the Board.

Executive Director of Finance

Russell Caldicott has been appointed as the Executive Director of Finance. Russell has been in the role as interim Executive Director of Finance since July 2023 and will now continue in the role on a substantive basis.

Interim Executive Director of Transformation and Strategic Planning

Paolo Tardivel has been appointed as the interim Executive Director of Transformation and Strategic Planning. Paolo will take on the role until the end of the year while recruitment for a substantive post-holder takes place.

Interim Chief Operating Officer

Imran Devji, Interim Chief Operating Officer leaves the Health Board at the end of March 2025 to take up post as Chief Operating Officer at North Cumbria Integrated Care NHS Foundation Trust.

Tehmeena Ajmal has been appointed as the Chief Operating Officer for the Health Board and takes up post on 1st April 2025. Tehmeena joins the organisation from Berkshire Healthcare NHS Foundation Trust where she has been Chief Operating Officer.

Director of Environment and Estates

Stuart Keen has now joined the Health Board and is welcomed to his first meeting of the Board. Stuart joins the organisation from The Christie NHS Foundation Trust where he was Director of Capital.

2.3 Delivering key commitments – Planned care

Given the significant challenges relating to access to planned care (outpatients, diagnostics and surgery), a key focus has been on accelerating access has been in place particularly over the last 6 months, with intensive deployment over the last 12 weeks.

At the beginning of January 2025 approximately 16,000 people had extended waits of over 2 years for either a first outpatient appointment or an intervention. A goal of treating approximately 11,000 people by the end of March 2025 was set, although recognising the stretch this would bring. Additional activity was commissioned from external providers particularly in the specialties of dermatology and ophthalmology, where high volumes of patients have been waiting for routine appointments. Good progress is being made and the Board will be updated on progress during the meeting.

Progressing planned care improvements into 2025/26 will be a critical priority.

2.4 Education Steering Group

The first meeting of a newly formed Education Steering Group has been held. This marks a key step forward is a focus on developing the education and training approach in the health board. A 'Discovery' report has been commissioned by the Steering Group to fully understand all aspects for the current position in relation to education and training. Following receipt of the draft in may an organisational Education Strategic Plan will be developed. The scope of the work will cover all staff groups and presents an opportunity to progress learning and career opportunities for all. The work will connect to the People and Culture Committee workplan.

3.0 Meeting/Visits/Events

3.1 Ministerial Advisory Group

On 20 January the health board was pleased to host a visit from the Ministerial Advisory Group commissioned to provide external assurance on the effectiveness of current arrangements which aim to improve performance and productivity in NHS Wales and observe how current arrangements could be strengthened to further improve performance and productivity. This was an opportunity for the health board to discuss areas of progress and excellence as well as areas of challenge, and to set out what could make the NHS in Wales more effective and productive to ultimately improve performance. We were please to take part in this visit and look forward to reading their report due with the Cabinet Secretary for Health and Social Services at the end of March.

3.2 Llandudno Hospital

During February I visited the external structure of the new £29m Elective Planned Care Hub at Llandudno Hospital which is really starting to take shape. This hub will transform elective orthopaedic services for the people of north Wales by increasing annual surgical activity and delivering a planned 1,900 procedures a year.

I look forward to seeing the next steps involving internal works, with decorating already underway inside Aberconwy Ward with the floors, cladding and roofing installed within the next month. It's an exciting development and I'd like to thank staff at Llandudno Hospital and the neighbours nearby for their patience during these works.

While I was in Llandudno I also met with colleagues from cardiology who have received national recognition for taking a lead in delivering their services closer to people's homes. The heart failure team have set up a mobile cardiology clinic in a purpose-built van, thanks to support from Awyr Las, our North Wales NHS charity. The van allows them to bring clinics to rural locations, improving patients' access to services. It's a fantastic example of the sort of innovation which comes direct from staff who lead their services and know their patients, and I know is being looked at as a potential way to support rural residents with access to other services

3.3 Meeting with Her Honour Judge Wendy Owen and District Judge Dylan Jones

Together with the Chair and the Deputy Director for Legal Services we met with a local Circuit Court Judge and District Judge in the West to discuss improvements to way the Health Board engages with the Family Court including improved information sharing and timely health records disclosure. A further meeting will be arranged in six months to review progress and to maintain strong relationships with the Court.

3.4 Visit to West End Medical Centre

On my recent visit to West End Medical Centre with local politician Darren Miller MS, it was fantastic to hear first-hand the hard work from the team which have led to significant improvements made at the clinic. Darren Miller MS was pleased to note a substantial reduction in patient complaints to his office, related to the surgery.

We heard from the staff that such were the improvements the Medical Centre was now a training practice they are also developing a research profile for the practice.

The practice has 3 GP trainers and have taken on their first GP registrar (ST2). They have also welcomed their first intake of 1st year medical students from North Wales Medical School, they will visit the practice on 5 afternoons, each afternoon covering a specific system to learn consultation and examination skills. It was good to hear that the patients have been very enthusiastic and happy to help, their involvement is key in shaping future doctors and improving patient care. The practice has also applied for foundation doctors, Year 3 and 5 Cardiff Medical and Pharmacy students.

The Academy and WEMC are also working to develop the research profile of the practice. The practice is looking to recruit for 9 research studies covering a variety of subjects, patients again are keen to engage and will hopefully benefit from this.

Teaching and research are key for the future of Primary Care, and as well as providing high quality care for our patients, the practice is working hard to build a practice to support the future and growth of future medical professionals. The collaboration with the Academy, the welcoming of medical students, and the recruitment for research studies are all excellent ways to contribute to a strong foundation for primary care in the future.

3.5 Visit to the North Wales Adolescent Centre (NWAS)

Last week I visited the North Wales Adolescent Centre (NWAS) in Abergele, which is part of the Children and Adolescent Mental Health Services (CAMHS). NWAS supports young people 12 to 18 years old who need specialist mental health support either in hospital or at home. There has been significant investment recently to upgrade the bedrooms to make sure they are safe and to make them as 'homely' as possible. I also had the opportunity to meet some of the staff from the Specialist Eating Disorder team and at the KITE centre at NWAS which provides young people with intensive community Child and Adolescent Mental Health support with a number of specialist staff including nurses, clinical psychologists, psychiatrists and a teacher. They work closely with education staff to support young people with their education and training needs. It is always inspiring to visit facilities like this and see first-hand the tremendous work our staff do to support our young people.

3.6 Working with Partners

A range of meetings have been held with key stakeholders including:

- Meetings with Politicians
Darren Miller
Mabon ap Gwynfor
Rhun ap Iorwerth
Sam Rowlands
MS Briefing of Progress of the Health Board at 2 years post Special Measures escalation
- Public Briefing session on Special Measures
- Staff Briefing session on Special Measures

4.0 Conclusion

The report intends to give an overview of key activities undertaken by the Chief Executive as well as important matters to draw attention to which may or may not be subject of other more detailed reports. Feedback on the report is welcome.

5.0 Recommendations

Members of the Board are asked to note.

- **NOTE** the updates provided in this report;