

Betsi Cadwaladr University Health Board (BCUHB)

Minutes of the Stakeholder Reference Group

held in Public on 2 March 2026

**held in the Elsi Room, Conwy Business Centre, Llandudno Junction and via
Microsoft Teams**

Committee Members Present	
Name	Title
Peter Lewis	Independent Member (Chair)
Gareth Evans	St Davids Hospice
Emma Lea	Head of Business, Planning and Programmes – Central IHC
John Pritchard	Adult Social Services
Helen Stevens-Jones	Director Of Partnerships, Engagement & Communications
Sherry Weedall	Denbighshire Voluntary Services Council
Paolo Tardivel	Interim Executive Director of Transformation and Improvement
Geraint Parry	Interim Assistant Director of Transformation and Improvement
Alan Lawrie	Primary Care Associate Director
Eleri Hughes-Jones	Head Of Welsh Language Services
Committee Support	
Fiona Lewis	Minute Taker

PRELIMINARY MATTERS
<p>S26.01 Welcome and Apologies</p> <p>The Chair welcomed attendees to the meeting noting that there were insufficient stakeholders present, and the meeting was therefore declared non-quorate. All matters on the agenda would be discussed, but any decisions would be deferred until the next meeting.</p> <p>Apologies received from: Margaret Hollins, Bethan Williams, Cllr Penny Andow, Dilwyn Morgan, Dylan, Williams, Carol Shillabeer, Dyfed Edwards, Lyndsey Campbell-Williams, Steve Williams, Rebecca Hughes and Allen Bewley.</p>
<p>S26.02 Declarations of Interest</p> <p>No declarations of interest were received.</p>
<p>S26.03 Unconfirmed Minutes of the Meeting held on 1 December 2025</p> <p>Minutes of meeting held on 1 December 2025 - discussion deferred to next meeting.</p>
<p>S26.04 Matters Arising & Action Log</p> <p>Members received the action log and noted progress against the actions. All actions, proposed closures and closures to remain on Action Log until next meeting.</p>

S26.04.1 Helen Stevens-Jones, Director of Partnerships, Engagement & Communications, provided an update on guidance recently provided by Welsh Government regarding the new Welsh Health Impact Assessments being implemented in April 2026, noting that BCU was investigating ways to fully integrate it into the Health Board.

S26.04.2 The Chair asked the Director of Partnerships, Engagement & Communications to investigate the possibility of arranging a site visit for Members, to encourage active engagement. The new Llandudno Orthopaedic Unit was suggested as a venue.

ACTION:

S26.04.02 HS-J to investigate a possible venue to host a Members' site visit.

S26.05 Patient Story – All Wales Diabetes Prevention Programme

Due to low attendance, the Patient Story was not played to Members, but it was confirmed that Members could access the story via the link provided in the papers.

S26.06 Verbal Update on Appointment of Vice Chair

The Chair informed Members that Gareth Jones had put himself forward to become Vice-Chair. To formalise the appointment, this will be taken to Board at its March meeting.

STRATEGIC PRIORITIES

S26.07 IMTP Progress Update

The Interim Executive Director of Transformation and Improvement, provided his presentation, highlighting the following:

- Welsh Government has confirmed that approval of all Health Boards' IMTP will not be given until after the May 2026 Senedd elections
- Discussions with Stakeholders remain vital to ensure which IMTP area best reflects shared system priorities.

In discussing the item:

- The Chair informed Members that there was an initiative between Housing and the College, called 'Breaking the Cycle', which addresses issues in Housing that link to health. PL to talk with Paolo Tardivel outside of the meeting to discuss.
- PT agreed that he and his team will act as conduit for Members wishing to liaise with any team in the organisation. This will provide consistency as well as his team being sighted of areas of interest.
- A discussion ensued about ways to ensure all the workforce is well informed, to enable them to be advocates for the changes taking place.

ACTION:

S26.07.1 The Chair to provide PT with contact names regarding the Breaking the Cycle initiative.

S26.08 Third Sector – Verbal Update.

Paolo Tardivel, the Interim Executive Director of Transformation and Improvement, provided a verbal update, and noted the following:

- Through the Reaffirming Our Commitment to the Third Sector meetings, work is ongoing to clarify and strengthen the Organisation’s partnership approach.
- There was agreement to move forward with the development of co-produced Third Sector Partnership Framework. Workshops to be arranged in Q1.

[This item taken out of order by direction of Chair]

S26.13 Director’s Report

The Director of Partnerships, Engagement & Communications presented the report and highlighted the following:

- In the last 12 months, there had been significant improvements in reducing waiting times for outpatient appointments
- Two of the three acute general hospital sites in North Wales now have Electronic Prescribing and Medicines Administration (ePMA) systems, with Ysbyty Glan Clwyd on track to become the third. It was noted that ePMA provides a strong foundation for further digital optimisation, safety improvement and standardisation of medicine management processes across the Health Board.
- The Royal Alexander Hospital received national funding to proceed with the development of its Health and Wellbeing Centre.
- No specific concerns regarding BCU’s maternity and neonatal Assurance assessment.
- Work continues with the Foundations for the Future Programme
- The appointment of a new Executive Director of People and Organisational Development, Debbie Eyitayo.
- The ongoing challenge to find representation from the Homeless on the SRG. The possibility that meetings away from the Health Board, where views could be heard and brought back to SRG, might be the way forward. It was noted that a paper written by Public Health team and supported by Equalities team, looking at the impact on health caused by homelessness, will be brought to the next meeting

S26.09 An Organisational Approach to Change.

The Interim Assistant Director of Transformation and Improvement shared his presentation and highlighted the following:

- It was recognised that BCU has a good track record for planning but a poor track record for implementing change within the organisation and that the approach needed to change.
- Staff sometimes feel that changes are thrust upon them rather than with their engagement

- Changes should be people-centred and clearly linked to the Organisation's strategic priorities through authentic engagement with staff.
- Staff must feel informed, involved and supported through changes.
- More investigation and understanding required where change had been implemented successfully
- Conditions must exist in the Organisation for staff to feel competent when implementing change and able to contribute and share their ideas through lived experiences.
- There must be consistent and reliable processes and methodologies.
- Timely stakeholder engagement to provide input to help shape the framework

Following the presentation:

- The Chair noted that due to low Stakeholder representation at the meeting, he would email Members to urge them to read the meeting's papers and presentations, in order to provide their feedback.
- John Pritchard believed communication both between hospitals and to enable members of the public to identify the correct person to speak to, was an issue.

ACTION:

- **S26.09.1** Chair to email Members to encourage their feedback.

[Sherry Weedall joined the meeting]

S26.10 Primary Care Update – Presentation

The Primary Care Associate Director shared his presentation, highlighting the following:

- The large volume of calls per month to both GP practices and WAST, patients attending ED.
- More time needed to be spent improving patient experiences, noting that a 1% increase in Primary Care provision should result in a 20% decrease in demands on Secondary Care.
- 'Setting the Direction', written in 2010 by Chris Jones, the current Chair of Healthcare Inspectorate Wales, and Ceri Phillips, the Vice Chair in Cardiff & Vale, provided a roadmap for Primary and Community (P&C) care in Wales
- In October 2025, BCUHB declared that it spent approximately £821m on Primary and Community Care., and intended over the next 12 months to:
 - Improve the mobile/Community Diagnostics services
 - Create insulin initiation and monitoring services clusters
 - Reduce Dermatology waiting lists
 - Create hub in Llandudno to provide improved community Women's health services
 - Provide/expand Physio Assessment days in Central and East areas, to reduce long waiting lists for referrals into Orthopaedics – a service that has been successfully trialed in the West.
- In the longer term, areas for improvement are:

- Community Resource Teams
- The identification of 'rising risk' patients to reduce hospital admissions
- IT sharing of patient records
- Creating 'federations' in each patch, to deliver Primary Care at scale – as are being shown to work effectively in England
- Making better use of existing estate's properties
- Easing care pathways navigation for both patients and staff.
- Encouraging better engagement between Clusters and 3rd Sector and Local Authorities.

Sherry Weedall noted that the willingness of the 3rd Sector to engage with Primary and Community services, too many financial obstacles were placed there by BCUHB to facilitate an improved service and felt that the Health Board needed to improve its financial arrangements

Gareth Evans noted that the three hospices across North Wales were looking forward to working in partnership with BCUHB, to relieve pressures on Primary and Community care as well as reducing emergency admissions to acute sites.

The Primary Care Associate Director agreed that a higher proportion of available funds should go into P&C, which would in turn reduce pressures on Acute sites. He believed that Foundations for the Future would help by creating Primary and Community Directorate Care Group set up across the whole of North Wales, to improve delivery of services centrally.

S26.11 Welsh Language Services Update

The Head of Welsh Language Services, having provided her report, highlighted the following:

- Recent promotion and engagement elements had taken place and had a positive impact on patients' care.
- The partnership between the Welsh Language Team (WLT) and external partners to provide sessions at Children's hospitals was working well.
- The WLT had established a resources platform for all pan-BCU services, to provide a single platform for staff to access resources.
- WLT in partnership with Careers Wales attended careers events at schools to discuss the advantages of having the Welsh language as an additional skill when applying for posts within the Health Board.
- Through engagement with staff, both in-person and via survey, the work being carried out to understand the culture of the organisation and how best support staff to create a bilingual environment.
- The external work being carried:
 - The WLT had for the last two years provided a financially successful translation service to the Aneurin Bevan Health Board. A new service agreement for 2026-27 was due to be signed.
 - The annual contract with the National Centre for Learning Welsh, provides access to many online and residential courses.

- BCUHB is the only Health Board to receive funding to employ a Band 5 Support Officer, who provides additional support for staff to use Welsh when they come back to work.
- Demand for Welsh Language training had increased so much necessitating the provision of targeted sessions.
- A piece of work is taking place currently to understand how best to provide bilingual consultations. Trials are taking place.

Gareth Evans confirmed the importance of focussing on patient outcomes and front-line staff being able to converse in Welsh when a patient is ill or in a stressful situation.

S26.12 Welsh Health Impact Assessment.

The Director of Partnerships, Engagement Communication referred Members to her update provided earlier.

FOR ASSURANCE

S26.13 Director's Report

This item was discussed earlier in the meeting.

S26.14 Review Committee Terms of Reference and Cycle of Business.

The Chair advised that due to the meeting being non-quorate, Members were requested to review and forward any comments.

CLOSING BUSINESS

S26.15 Agree Items for Referral to Board/Other Committees.

There were none.

S26.16 Review Risks Highlighted in the Meeting for Referral to Risk Management Group.

This item to be removed from the Cycle of Business (COB) for future meetings, as it is not relevant.

Action:

S26.16.1 Fiona Lewis to remove this item from COB.

S26.17 Agree Items for Chair's Assurance/AAA Report

The Chair wished to note the following:

- The low Stakeholder attendance resulting in the meeting not being quorate and possible remedies.
- To review and approve Gareth Jones' Expression of Interest for the position of Vice Chair.

- Assure the Board that updates on several strategic areas continues to progress across key organisational priorities.
- The Group noted positive examples of service impact and patient experience, including the All-Wales Diabetes Prevention Programme which demonstrated measurable improvements in patient outcomes through preventative interventions delivered in Primary Care.
- The importance of sustained Stakeholder engagement as the IMTP continues to develop, particularly ensuring that partners across the third sector, local authorities and community organisations can contribute to shaping priorities and delivery approaches.
- Members also noted that discussions are ongoing regarding how best the Health Board can hear directly from people who experience homelessness, recognising the importance of ensuring their perspectives are represented within stakeholder engagement structures.
- Continued focus on prevention, community-based care and collaborative working across North Wales will be key to addressing system pressures and improving population health outcomes.

S26.18 Review of Meeting Effectiveness

It was agreed that:

- Despite low attendance, the agenda topics and presentations were excellent. The meeting ran well, and the Chair thanked the group for their updates.

S26.19 Date of next meeting

1 June 2026, 1-4pm.