

Bundle Stakeholder Reference Group 2 December 2024

Agenda attachments

SRG Agenda 2.12.24 V1.0 Eng

SRG Agenda 2.12.24 V1.0 Cym

1 PRELIMINARY MATTERS

1.1 13:00 - S24.24 Welcome and Apologies

Chair

Apologies received from:

Paolo Tardivel, Director of Transformation and Improvement

Geraint Parry, Quality Improvement Fellow - Fiona Mash, Head of Organisational Portfolio Management Office, to deputise

Geoff Ryall-Harvey, Llais - Roger Seddon to deputise

Cllr. John Pritchard, Wrexham

1.2 13:01 - S24.25 Unconfirmed Minutes of Meeting held on 3rd June 2024

Chair

S24 25.1 Unconfirmed Minutes SRG 03.06.24 v0.2

1.3 13:03 - S24.26 Matters Arising and Summary Action Plan

Chair

S24 26.1 Summary Action Plan

2 STRATEGIC PRIORITIES

2.1 13:05 - S24.27 Planning for 2025-28

Dylan Williams, Assistant Director - Health Strategy

S24 27.1 Integrated Planning Process 2024-25 Coversheet Eng

S24 27.2 Cyflwyniad Proses Gynllunio Integredig 2024-25 Cym

S24 27.3 Integrated Planning Process 2024-25 Presentation Eng

S24 27.4 Proses Gynllunio Integredig 2024-25 Cym

2.2 13:15 - S24.28 Special Measures Update

Fiona Mash, Head of Organisational Portfolio

S24 28.1 Special Measures Update Eng

S24 28.2 Diweddariad ar y Mesurau Arbennig Special Measures Update Cym

2.3 13:20 - S24.29 Partner Update - verbal

Margaret Hollings, Commercial Director, St David's Hospice

2.4 13:35 - S24.30 Update on Royal Alexander Hospital, Llandudno Hub Business Case

Gareth Evans, Integrated Health Community Director (Centre)

S24 30.1 Update on RAH Llandudno Hub Business Case coversheet Cym&Eng

S24 30.2 Update on RAH Llandudno Hub Business Case Presentation Cym&Eng

3 FOR ASSURANCE

3.1 13:45 - S24.31 Update regarding Volunteering within the Health Board

Kirsty Thomson, Head Of Charitable Funds And Charitable Partnerships: Awyr Las

S24 31.1 Update on Volunteering Eng

S24 31.2 Diweddariad ar Wirfoddoli yn BIPBC Update on Volunteering Cym

3.2 13:55 - S24.32 Process of Appointments to SRG

Pam Wenger, Director of Corporate Governance

S24 32.1 Process for Appointments to the SRG Eng

S24 32.3 Expression of Interest Proforma Bilingual

3.3 14:05 - S24.33 Update on Culture Change Programme - Values and Behaviour

Nia Harris, Organisational Development Manager

S24 33.1 Values and Behaviours Framework Nov 2024 v0.3 Eng

- 3.4 14:15 - S24.34 Director's Report
Helen Stevens-Jones, Director Of Partnerships, Communications and Engagement
S24 34.1 SRG Directors Report December 2024 Eng
S24 34.2 Adroddiad y Cyfarwyddwr SRG Directors Report December 2024 Cym
- 4 CLOSING BUSINESS
- 4.1 14:25 - S24.35 Agree Items for Referral to Board or other Committees
Chair
- 4.2 14:26 - S24.36 Review of Risks Highlighted in the Meeting, for Referral to Risk Management Group
Chair
- 4.3 14:27 - S24.37 Agree items for Chair's Assurance Report
Chair
- 4.4 14:28 - S24.38 Review of Meeting's Effectiveness
Chair
- 4.5 Date of Next Meeting
Monday, 3rd March 2025



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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Agenda Stakeholder Reference Group

Date 02/12/2024
Time 13:00 - 14:29
Location Conwy Business Centre, Llandudno Junction LL31 9XX
Chair Mike Parry

1 PRELIMINARY MATTERS

1.1 Welcome and Apologies

13:00
Chair

1.2 Draft Notes of Previous Meeting held on 3rd June 2024

13:01
Chair

1.3 Matters Arising and Action Log

13:03
Chair

2 STRATEGIC PRIORITIES

2.1 Planning for 2025-28

13:05
Dylan Williams, Assistant Director - Health Strategy

2.2 Special Measures Update

13:15
Fiona Mash, Head of Organisational Portfolio

2.3 Partner Update

13:20
Margaret Hollings, Commercial Director, St David's Hospice

2.4 Update on Royal Alexander Hospital Llandudno Hub Business Case

13:35
Gareth Evans, Integrated Health Community Director (Centre)

3 FOR ASSURANCE

3.1 Update regarding Volunteering within the Health Board¹⁰

13:45
*Kirsty Thomson, Head Of Charitable Funds And Charitable Partnerships:
Awyr Las*

3.2 Process of Appointments to SRG

13:55
Pam Wenger, Director of Corporate Governance

- 3.3** **Update on Culture Change Programme - Values and Behaviour**
14:05 *Nia Harris, Organisational Development Manager*
- 3.4** **Director's Report**
14:15 *Helen Stevens-Jones, Director Of Partnerships, Communications and Engagement*
- 4** **CLOSING BUSINESS**
- 4.1** **Agree Items for Referral to Board or other Committees**
14:25 *Chair*
- 4.2** **Review of Risks Highlighted in the Meeting, for Referral to Risk Management Group**
14:26 *Chair*
- 4.3** **Agree items for Chair's Assurance Report**
14:27 *Chair*
- 4.4** **Review of Meeting's Effectiveness**
14:28 *Chair*
- 4.5** **Date of Next Meeting**
Monday, 3rd March 2025



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Bwrdd Iechyd Prifysgol
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University Health Board

Agenda'r Grŵp Cyfeirio Rhanddeiliaid

Dyddiad 02 Rhagfyr 2024
Amser 13:00 - 14:29
Lleoliad Canolfan Busnes Conwy, Cyffordd Llandudno LL31 9XX
Cadeirydd Mike Parry

1 MATERION RHAGARWEINIOL

1.1 Croeso ac Ymddiheuriadau

13:00

Cadeirydd

1.2 Nodiadau Drafft o'r Cyfarfod Blaenorol a gynhaliwyd ar 3ydd Mehefin 2024

13:01

Cadeirydd

1.3 Materion yn Codi a'r Camau Gweithredu

13:03

Cadeirydd

2 BLAENORIAETHAU STRATEGOL

2.1 Cynllunio ar gyfer 2025-28

13:05

Dylan Williams, Cyfarwyddwr Cynorthwyol – Strategaeth Iechyd

2.2 Diweddariad ar y Mesurau Arbennig

13:15

Fiona Mash, Pennaeth Portffolio Sefydliadol

2.3 Y Diweddaraif gan Bartneriaid

13:20

Margaret Hollings, Cyfarwyddwr Masnachol, Hosbis Dewi Sant

2.4 Y diweddaraif am Achos Busnes Canolfan Ysbyty Brenhinol Alexander Llandudno

13:35

Gareth Evans, Cyfarwyddwr Cymuned Iechyd Integredig (Canolfan)

3 I ROI SICRWYDD

3.1 Y diweddaraif am Wirfoddoli yn y Bwrdd Iechyd10

13:45

Kirsty Thomson, Pennaeth Cronfeydd Elusennol a Phartneriaethau Elusennol: Awyr Las

3.2 Y Broses Benodiadau i'r Grŵp Cyfeirio Rhanddeiliaid

13:55

Pam Wenger, Cyfarwyddwr Llywodraethiant Corfforaethol

- 3.3** **Diweddariad ar y Rhaglen Newid Diwylliant - Gwerthoedd ac Ymddygiad**
14:05
Nia Harris, Rheolwr Datblygu Sefydliadol
- 3.4** **Adroddiad y Cyfarwyddwr**
14:15
Helen Stevens-Jones, Cyfarwyddwr Partneriaethau, Cyfathrebu ac Ymgysylltu
- 4** **MATERION I GLOI**
- 4.1** **Cytuno ar Eitemau i'w Cyfeirio at y Bwrdd neu Bwyllgorau eraill**
14:25
Cadeirydd
- 4.2** **Adolygiad o Risgiau y Tynnwyd Sylw Atynt yn y Cyfarfod i'w Cyfeirio at y Grŵp Rheoli Risg**
14:26
Cadeirydd
- 4.3** **Cytuno ar eitemau ar gyfer Adroddiad Sicrwydd y Cadeirydd**
14:27
Cadeirydd
- 4.4** **Adolygu Effeithiolrwydd y Cyfarfod**
14:28
Cadeirydd
- 4.5** **Dyddiad y Cyfarfod Nesaf**
Dydd Llun, 3ydd Mawrth 2025



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Betsi Cadwaladr University Health Board (BCUHB)
Stakeholder Reference Group (SRG)

Notes of the meeting held on 03.06.24

Present:	Representative of:
Cllr. Mike Parry	One Voice Wales (Chair)
Sherry Weedall	Denbighshire Voluntary Services Council
Cllr Penny Andow	Conwy County Borough Council
Cllr Dilwyn Morgan	Gwynedd County Council
Linda Kinani	Carers Outreach Service
Allen Bewley	Flintshire Local Voluntary Council
Steve Williams	Locality Manager, WAST
In Attendance:	
Dyfed Edwards	Chair, BCUHB
Helen Stevens Jones	Director of Partnerships, Engagement and Communications, BCUHB
Llinos Roberts	Executive Business Manager (Chair's Office), BCUHB
Paolo Tardivel	Director Of Transformation & Improvement, BCUHB
Geoff Ryall-Harvey	Llais
Pam Wenger	Director of Corporate Governance, BCUHB
Dylan Roberts	Chief Digital & Information Officer
Fiona Lewis	Corporate Governance Officer, BCUHB. Minute taker.

Agenda item	Action
<p>S24/12 Welcome and apologies</p> <p>S24/12.1 The Chair welcomed all to the meeting. Apologies were received from Trystan Pritchard, Peter Lewis, Samuel Mfikela, Jenny Murphy, Lyndsey Campbell-Williams and Bethan Russell Williams.</p>	
<p>S24/13 Declarations of Interest</p> <p>S24.13.1 None were raised.</p>	

<p>S24/14 Draft minutes from previous meeting held on 04.03.24 and Summary Action Log</p> <p>S24/14.1 The minutes were agreed as a true and accurate record.</p> <p>S24/14.2 The table of actions was updated, and the agreed actions were closed. All updates were noted on the Action Log.</p>	
<p>S24/15 Organisational Design Principles.</p> <p>S24/15.1 Dylan Roberts presented his draft report to the meeting, and wished to note that this was an organisational white paper which had come out of the work of the Organisational Development Group (ODG), which included Digital, Transformation and Workforce & Organisational Development personnel. Members were consulted for their thoughts and input.</p> <p>S24/15.2 It was noted that the function of strategic organisational design principles was to guide, inform and challenge when strategic decisions needed to be reached across the organisation and to ensure that when these decisions are made, they are aligned to the organisation's ultimate direction. The ten best-practice principles, as stated within the report, were discussed.</p> <p>S24/15.3 Dylan Roberts agreed to return to Members once the final report becomes available, to provide Members with an insight into how the organisation will ensure that these practices are being adopted. Helen Stevens-Jones agreed to formally meet with Dylan and other members of the ODG, to support the work and to provide evidence that the organisation has listened</p> <p>S24/15.4 The report was noted.</p>	<p>DR</p> <p>HS-J</p>
<p>S24/16 Organisation Update from an SRG Member</p> <p>S24/16.1 Cllr. Haydn Jones thanked Members for inviting him to join the Stakeholder Reference Group as representative of the North Wales Cancer Patients' Forum (NWCPF).</p> <p>S24/16.2 The NWCPF offers a wide range of opportunities for the voices of people with personal experiences of cancer to be heard and used to help improve local cancer services; it also provides an information hub to take back to local support groups. Formed in 1999, by cancer patients wishing to have their voices heard, it is now funded by BCUHB, who provide a facilitator to coordinate meetings between Members and professionals representing the various cancer services.</p> <p>S24/16.3 Cllr. Haydn Jones described the damage caused to the identification of the Forum, when firstly Covid hit and face-to-face meetings ceased and secondly the long-standing and effective facilitator retired. Only recently have meetings restarted, now that a new facilitator has been provided to them.</p>	

<p>S24/16.4 Dyfed Edwards was very keen to restore the organisation to being the best Health Board in Wales, with regards to patients' cancer waiting times and asked what the interaction was between the Health Board and the NWCPF, hoping that the experience of service users could help shape services going forward. Cllr. Haydn Jones hoped that the new facilitator would provide that link, along with his new role with the SRG.</p> <p>S24/16.4 Cllr. Haydn Jones was thanked for attending the meeting and providing an insight into the work of the NWCPF.</p>	
<p>S24/17 Director's Report</p> <p>S24/17.1 Helen Stevens-Jones presented her report to the meeting. Members were advised that the Chief Executive continued apace with her programme of engagement events across north Wales.</p> <p>S24/17.2 Following on from recent Board approval of three new options for the development of The Royal Alexandra Hospital in Rhyl, it was noted that these were being shared with Welsh Government to seek approval of developing of a new Full Business Case to access funding. Helen Stevens-Jones agreed to provide a progress update at the September meeting.</p> <p>S24/17.3 It was noted that following January's SRG Workshop, Members' comments regarding the Integrated Three Year Plan (ITYP) had been incorporated into the Plan, which had since been signed off by the Health Board. The organisation was mid-way through providing a simplified summary version of the ITYP, which will set out the Health Board's delivery programme over the next three years; when complete, this summary to be shared with Members and made available to the general public.</p> <p>S24/17.4 On reviewing the Prevention of Future Deaths (PFD) section of her report, Helen Stevens-Jones wished to reiterate the Health Board's intention to learn from the past, noting that the Chief Executive had personally written to patients, and/or families of patients, who were subject of PFD notices.</p> <p>S24/17.5 The report was noted.</p>	<p>HS-J</p> <p>HS-J</p>
<p>S24/18 Special Measures and how this works as part of the Annual Planning Process.</p> <p>S24/18.1 Paolo Tardivel presented his report, confirming that a great deal of progress had been made but that there was still a lot of work left to do. Following receipt of formal notification from Welsh Government as to their expectations of the Health Board over the coming months and years, it was noted that this was being incorporated into the Annual Delivery Plan (ADP).</p>	

<p>S24/18.2 Previously the Special Measures Plan (SMP) and the ADP were two separate entities that were aligned but separate. This financial year the SMP was more integrated into the ADP, as evidenced within the report.</p> <p>S24/18.3 Paolo Tardivel summarised the progress made - Special Measures had been integrated into the organisation's three year plan and had become part of the ADP; that the Health Board was continuing to learn from its new approach to monitoring, reporting and assurance and that regular updates were being provided to Board, showing how each of the five elements of Special Measures were being addressed.</p> <p>S24/18.4 Assurance was received that ensured that no information, learning and new practices brought about by Special Measures intervention would be lost if and when the organisation comes out of Special Measures.</p> <p>S24/18.5 Pam Wenger confirmed that the Executive Team remained committed to reducing the number of interims appointments within the organisation and that Welsh Government continued to regularly monitor the Health Board to ensure the organisation continues to work to the agreed plan and that using one single stream of reporting provided clarity of direction, which had not always been the case, as noted by Audit Wales previously.</p> <p>S24/18.6 Paolo Tardivel was thanked for attending the meeting and providing updates. The report was noted.</p>	
<p>S24/19 Stakeholder Reference Group Annual Report to the Board.</p> <p>S24/19.1 Helen Stevens-Jones presented the report, which formally stated the Group's activities over the previous year (1st April 2023 – 31st March 2024).</p> <p>S24/19.2 The report noted that the former SRG Chair, Clare Budden, stepped down as Chair to become an Independent Member of the Health Board early in the year. Mike Parry stepped into that role, first as Chair Elect and then formally through due process.</p> <p>S24/19.3 In summarizing the report, the key areas that had been discussed through the year included:</p> <ul style="list-style-type: none"> • a presentation by the Air Ambulance Service regarding alteration proposals to their service • regular updates regarding Special Measures • an exploration of volunteering within the Health Board. Helen Stevens-Jones agreed to provide an update regarding this to the next meeting • presentations and discussions took place around the Phase 1 of the Planned Care Business case for the Llandudno Hub, for the onsite development of additional capacity for orthopaedic planned care procedures and to constructively help reduce the extensive waiting lists. Following on from the successful early engagement surrounding Phase 1, it was agreed that propositions regarding the anticipated 	HS-J

<p>had decided to reduce the frequency of her meetings with the Health Board from bi-monthly to quarterly.</p> <p>S24/21.3 The Chair referred to the May Board meeting, where a member of the Tawel Fan Families group addressed the Board. Once again the Chief Executive apologised for the time taken for the organisation to deal with these long-standing issues, and this apology was accepted with good grace.</p>	
<p>S24/22 Any Other Business</p> <p>S24/22.1 There was none.</p>	
<p>S24/23 Date of the next meeting</p> <p>2nd September 2024 in person. Venue to be confirmed.</p> <p>Dates for forthcoming SRG Meetings:</p> <p>02.12.24 03.03.25 - Workshop</p>	

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Attendance Register

Name	Organisation Represented	4.9.23	4.12.23	4.3.24	3.6.24
Mike Parry (Cllr)	One Voice Wales (Vice Chair)	✓	✓	✓	✓
Alan Morris	Assistant Director of Partnerships & Public Affairs	x	x	x	x
Allen Bewley	Flintshire Local Voluntary Council	x	x	✓	✓
Alun Roberts (Cllr)	Anglesey County Council	x	x	x	x
Christine Marston (Cllr)	Denbighshire County Council	x	x	x	x
Clive Nadin	Care Forum Wales	✓	x	x	x
Dilwyn Morgan (Cllr)	Gwynedd County Council	x	x	✓	✓
Dylan Williams	Assistant Director Health Strategy, BCUHB		✓	x	x
Fiona Evans	Conwy Voluntary Services Council	x	✓	✓	x
Frank Bradfield (Cllr)	Conwy County Council	Attempted to join – tech. issues	✓	✓ Cllr Penny Andow	✓ Cllr Penny Andow
Gwilym Ellis Evans	Mantell Gwynedd	Tenure Ended			
Helen Stevens-Jones	Director of Partnerships, Communications & Engagement – BCU Lead Executive	✓	Andrew Rogers deputised	✓	✓
Hilary McGuill (Cllr) Arnold Woolley (Cllr) – from Jan 2024	Flintshire County Council	HMG Tenure ended		✓	x
Jackie Allen	AVOW Wrexham Third Sector	✓	x	x	x
Jackie Allen / Adrian Drake-Lee	NWCHC Chair / NWCHC Vice Chair	✓	x	x	x
John Pritchard (Cllr)	Wrexham County Council	x	x	✓	x
Linda Kinani	Carers Outreach Service		✓	✓	✓

Peter Lewis	Housing Associations	✓	✓	✓	X
Robert Moore (Prof)	North Wales Regional Equality Network	Tenure Ended			
Sally Baxter / Dylan Williams	Assistant Director Health Strategy, BCUHB	DW	DW		
Sherry Weedall	Denbighshire Voluntary Services Council	X	✓	✓	✓
Sian Purcell / Lyndsey Campbell-Williams	Medrwn Mon Voluntary Services Council	X	✓ LC-W	✓ LCW	X
Steve Sheldon / Steve Williams	Welsh Ambulance Services Trust	✓ SW	X	✓ SW	✓
Trystan Pritchard	North Wales Hospices	✓	✓	Apols	X
Samuel Mfikela					X
Haydn Jones	North Wales Cancer Patients Forum				

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**Advisory Group:
Stakeholder Reference Group
Table of actions log - updated 09.09.24**

STAKEHOLDER REFERENCE GROUP Summary Action Log				
Officer	Minute Reference and Action Agreed	Original Timescale	Latest Update Position	Revised Timescale
Actions from meeting held on 4.12.23				
Dylan Williams	<p>S23/45 Planning Verbal Update</p> <p>S23/45.2 DW to ensure that knowledge will be shared on a weekly/monthly basis and not purely for the meetings alone.</p>	4.3.24	<p>A programme of work being developed which will extend throughout the financial year, for the 2025/26 planning cycle. There will be regular updates and workshop engagement with SRG, a live teams channel will be created which will ensure that SRG (and other sub committees) have access to planning information throughout the planning cycle.</p> <p>18.04.24 – DW to consider options which will ensure all SRG members are kept updated by both quarterly updates and real time updates. Real time being the preferred as they would have more value.</p>	

Actions from meeting held on 4.3.24				
Mike Parry / Helen Stevens- Jones	S24/07.3 SRG Cycle of Business Members requested to consider items for discussion at future meetings	3.6.24 and on-going	Suggest close 18.04.24 Update email sent SRG members from MP. 18.04.24 requesting feedback from the Board re areas for SRG to prioritise to feed into 10 year planning cycle. Query whether this would form basis of Autumn SRG Workshop Board task SRG with areas of work, ie, priorities for 10 year cycle ? (Autumn Workshop) 03.06.24 HSJ confirmed that discussions were ongoing with Chief Executive. Suggested possible area to look into being Urgent and Emergency Care. HSJ will report back. 09.09.24 Confirmed UEC is an area of focus, along with strategy and values and behaviours (As per SRG workshop agenda September 2024).	
Actions from meeting held on 03.06.24				
Dylan Roberts	S24/15 Organisational Design Principles. DR agreed to provide Members with the final ODP paper becomes available	2.9.24	Suggest close 09.09.24 Shared draft final version with SRG for any final comments before the principles are discussed at Board in September.	
Helen Stevens- Jones	S24/15 Organisational Design Principles. HS-J to formally meet with Dylan	2.9.24	Suggest close 09.09.24 HSJ and DR met and engagement work has taken place	

	Roberts and other members of the ODG to support work and provide evidence that the organisation has listened.		to involve staff and partners in shaping the principles before creating final draft. To close?	
Helen Stevens-Jones	S24/17 Director's Report To provide an progress update regarding Phase 2 of the Llandudno Improvement project .	2.9.24	Suggest close 09.09.24 Report on progress and opportunity for involvement at the December 2024 meeting.	
Helen Stevens-Jones	S24/17 Director's Report When summary version of ITYP available to be shared with public, to circulate to Members.	2.9.24	Suggest close 09.09.24 Three year plan launch took place in mid-August. Some members will have received via the partner bulletin but some members are new and so we will distribute the Three Year Plan by email w/c 09.09.24. 11.09.24 Details of link to 3 year plan circulated. Link to the Three Year Plan S24/17 Our Vision: Three Year Plan, 2024-27 - Betsi Cadwaladr University Health Board	
Helen Stevens-Jones	S24/19 Stakeholder Reference Group Annual Report to the Board. To provide an update regarding Volunteering to next meeting	2.9.24	Suggest close 09.09.24 Defer to December meeting. Request for Kirsty Thomson to join to give the update. Placed on Dec. agenda.	
Helen Stevens-Jones	S24/19 Stakeholder Reference Group Annual Report to the Board. Propositions regarding anticipated Llandudno Phase 2 project should be added to the next meeting's	2.9.24	Suggest close. 09.09.24 Report on progress and opportunity for involvement at the December 2024 meeting.	

	agenda for Members' input and early engagement.			
Actions from Workshop on 2.9.24				
Julie Ward-Jones / Helen Stevens-Jones	2.9.24 Workshop – Urgent and Emergency Care. To look at providing a forum / a suggestion box where patients / third sector can put forward and share suggestions for improvements and look at creating an inventory of all good pieces of work taking place across the Health Board.	3.12.24		
Helen Stevens-Jones	2.9.24 Workshop – Health Board Strategy & Clinical Services. To look at what would be the best forum to have detailed third-sector discussions around services.	3.12.24	Suggest close. 25.11.24 Following discussions with stakeholders, it is felt that the 'Reaffirming Our Commitment' meeting is an established forum which is best suited to these discussions. There is an organisational commitment to improving relationships and contracting arrangements.	
Paolo Tardivel / Julie Ward-Jones / Angela Wood (Exec lead) / Fiona Lewis	2.9.24 Workshop – Health Board Strategy & Clinical Services. Bring QMS update to December meeting, assuring Members examples of good practice would be incorporated into the emerging QMS approach. Add to forward planner.	3.12.24		
Fiona Lewis	2.9.24 Workshop To circulate all presentations to Members	2.9.24	Suggest close. 09.09.24. Actioned.	
Fiona Lewis	S24/19 Stakeholder Reference Group Annual Report to the Board.	4.6.24	Suggest close. .6.24. Draft Report circulated to	

	To circulate a copy of the Draft SRG Annual Report to Members		Members	
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Teitl adroddiad: <i>Report title:</i>	Integrated Planning Process 2024-25 – Presentation		
Adrodd i: <i>Report to:</i>	Stakeholder Reference Group (SRG)		
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024		
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>In response to the Independent Review of Planning, the Health Board has implemented a revised planning process for the 2024-25 planning cycle. The process reflects feedback received from within the organisation, including our services, corporate teams, Executive Directors, Independent members, Committees and Forums.</p> <p>The Health Board recognises that the Stakeholder Reference Group (SRG) plays a critical role in supporting corporate planning responsibilities, including development of the Three Year Plan and Annual Delivery Plan. Feedback received from SRG stakeholders requested earlier engagement in the planning process, with opportunity to support priority setting.</p> <p>The purpose of this paper is to:</p> <ul style="list-style-type: none">▪ Highlight the key changes to the revised integrated planning process and relevance to the SRG.▪ Seek SRG support in continued Three Year Plan development.▪ Provide clarity for SRG in supporting the Health Board Integrated Planning Framework.		
Argymhellion: <i>Recommendations:</i>	The SRG is asked to note the revised planning process.		
Arweinydd Gweithredol: <i>Executive Lead:</i>	Dr Chris Stockport – Executive Director of Transformation & Strategic Planning		
Awdur yr Adroddiad: <i>Report Author:</i>	Dylan P Williams – Assistant Director of Corporate Planning (Interim)		
Pwrpas yr adroddiad:	I'w Nodi <i>For Noting</i>	I Benderfynu arno <i>For Decision</i>	Am sicrwydd <i>For Assurance</i>

Purpose of report:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lefel sicrwydd: Assurance level:	Arwyddocaol Significant <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 Acceptable <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 Partial <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 No Assurance <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: 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):	Support the Three Year Plan, Annual Delivery Plan and Special Measures. Supporting 10 Year Strategy, Well-being objectives and A Healthier Wales / National/Ministerial Priorities.			
Goblygiadau rheoleiddio a lleol: Regulatory and legal implications:	Not applicable			
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?	No - A full EqIA will be undertaken in Support of the Final Three Year Plan.			
Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal? In accordance with WP68, has an SEIA identified as necessary been undertaken?	No – a full SEIA will be undertaken in support of the Final Three Year Plan			
Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR) Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)	Not applicable			
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith Financial implications as a result of implementing the recommendations	Not applicable			
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith Workforce implications as a result of implementing the recommendations	Not applicable			

<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: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)</p> <p><i>Links to BAF risks: (or links to the Corporate Risk Register)</i></p>	<p>Not applicable</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:</p> <ul style="list-style-type: none"> ▪ Implementation of recommendations 	
<p>Rhestr o Atodiadau: Planning Process Presentation</p> <p>List of Appendices:</p>	

Teitl yr adroddiad: <i>Report title:</i>	Cyflwyniad Proses Gynllunio Integredig 2024-25
Adrodd i: <i>Report to:</i>	Grŵp Cyfeirio Rhanddeiliaid
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>Mewn ymateb i'r Adolygiad Annibynnol o Gynllunio, mae'r Bwrdd Iechyd wedi rhoi proses gynllunio ddiwygiedig ar waith ar gyfer cylch cynllunio 2024-25. Mae'r broses yn adlewyrchu adborth a dderbyniwyd gan y sefydliad, gan gynnwys ein gwasanaethau, timau corfforaethol, Cyfarwyddwyr Gweithredol, Aelodau Annibynnol, Pwyllgorau a Fforymau.</p> <p>Mae'r Bwrdd Iechyd yn cydnabod bod y Grŵp Cyfeirio Rhanddeiliaid (GCR) yn chwarae rhan hollbwysig wrth gefnogi cyfrifoldebau cynllunio corfforaethol, gan gynnwys datblygu'r Cynllun Tair Blynedd a'r Cynllun Cyflawni Blyneddol. Roedd adborth a dderbyniwyd gan rhanddeiliaid y GCR yn gofyn am ymgysylltiad cynharach â'r broses gynllunio, gyda chyfle i gefnogi gosod blaenoriaethau.</p> <p>Diben y cyflwyniad yw:</p> <ul style="list-style-type: none"> ▪ Nodi'r newidiadau allweddol i'r broses gynllunio integredig ddiwygiedig a pherthnasedd i'r GCR. ▪ Nodi meysydd lle gall y GCR gefnogi datblygiad Cynllun Tair Blynedd yn uniongyrchol. ▪ Darparu eglurder i GCR wrth gefnogi Fframwaith Cynllunio Integredig y Bwrdd Iechyd.
Argymhellion: <i>Recommendations:</i>	Gofynnir i'r GCR nodi'r broses gynllunio ddiwygiedig.
Arweinydd Gweithredol: <i>Executive Lead:</i>	Dr Chris Stockport, Cyfarwyddwr Gweithredol Trawsnewidiad a Chynllunio Gofal Strategol
Awdur yr Adroddiad:	Dylan P Williams – Cyfarwyddwr Cynorthwyol Cynllunio Corfforaethol (Dros Dro)

Report Author:				
Pwrpas yr adroddiad: Purpose of report:	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: Assurance level:	Arwyddocaol Significant <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 Acceptable <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 Partial <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 No Assurance <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>				
Cysylltiad ag Amcan/Amcanion Strategol: Link to Strategic Objective(s):	Cefnogi'r Cynllun Tair Blynedd, y Cynllun Cyflawni Blyneddol a'r Mesurau Arbennig. Cefnogi Strategaeth 10 Mlynedd, amcanion Llesiant a Chymru Iachach / Blaenoriaethau Cenedlaethol/Gweinidogol.			
Goblygiadau rheoleiddio a chyfreithiol: Regulatory and legal implications:	Nid yw'n berthnasol			
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?	Na - Cynhelir EqIA llawn i Gefnogi'r Cynllun Tair Blynedd Terfynol.			
Yn unol â WP68, a oedd SEIA yn angenrheidiol ac a gafodd ei gynnal? In accordance with WP68, has an SEIA identified as necessary been undertaken?	Nac oes – cynhelir SEIA llawn i gefnogi'r Cynllun Tair Blynedd Terfynol			
Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan gynnwys risgiau newydd (croesgyfeirio at y BAF a'r CRR) Details of risks associated with the subject and scope of this paper, including new risks(cross reference to the BAF and CRR)	Nid yw'n berthnasol			
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith Financial implications as a result of implementing the recommendations	Nid yw'n berthnasol			
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith	Nid yw'n berthnasol			

<p>Workforce implications as a result of implementing the recommendations</p>	
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p>Feedback, response, and follow up summary following consultation</p>	<p>Nid yw'n berthnasol</p>
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risgiau Corfforaethol)</p> <p>Links to BAF risks: (or links to the Corporate Risk Register)</p>	<p>Nid yw'n berthnasol</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>Nid yw'n berthnasol</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p>Camau Nesaf/Next Steps:</p> <ul style="list-style-type: none"> ▪ Rhoi'r argymhellion ar waith 	
<p>Rhestr o Atodiadau: Cynllun Tair Blynedd 2024/27 a Chynllun Cyflawni Blyneddol 2024/25 Agenda Gweithdy Proses Gynllunio</p> <p>List of Appendices:</p>	

Stakeholder Reference Group (SRG) Integrated Planning Process 2024/25

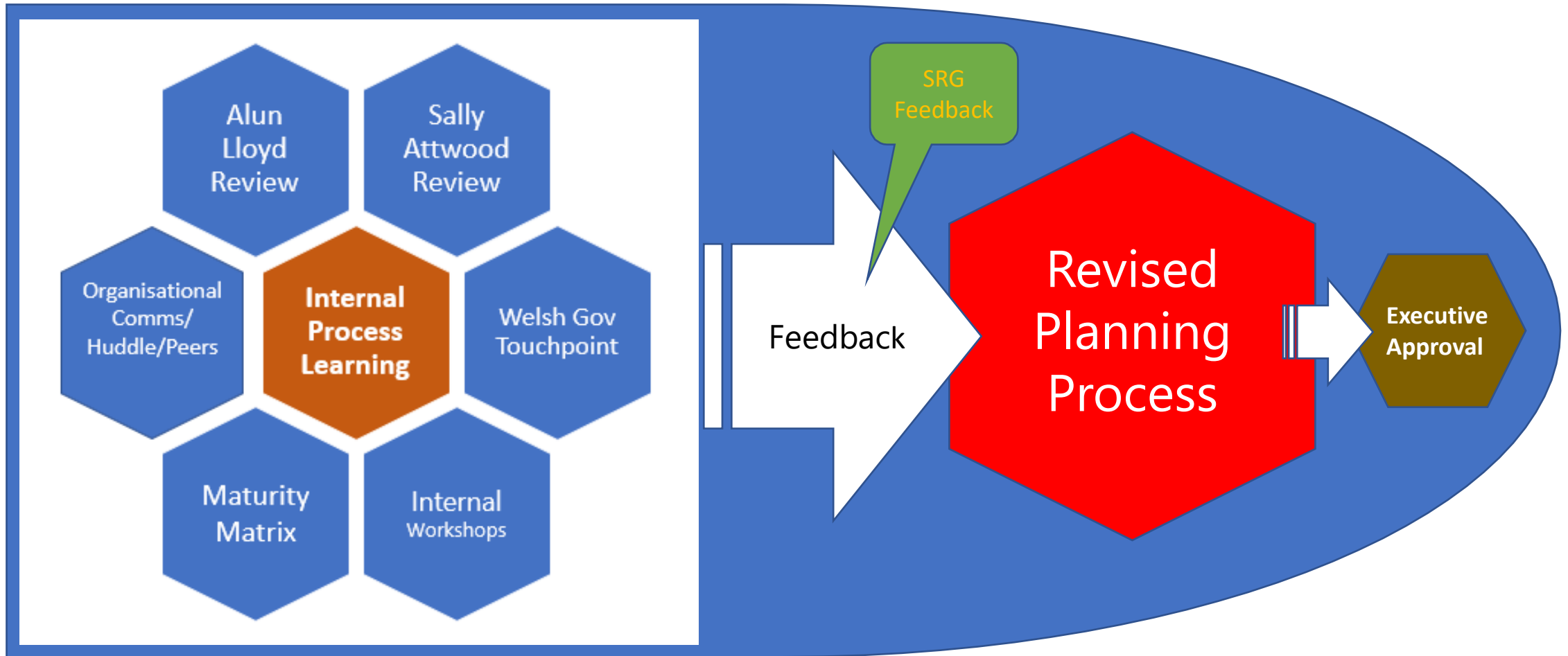


Purpose

The purpose of today's presentation is to:-

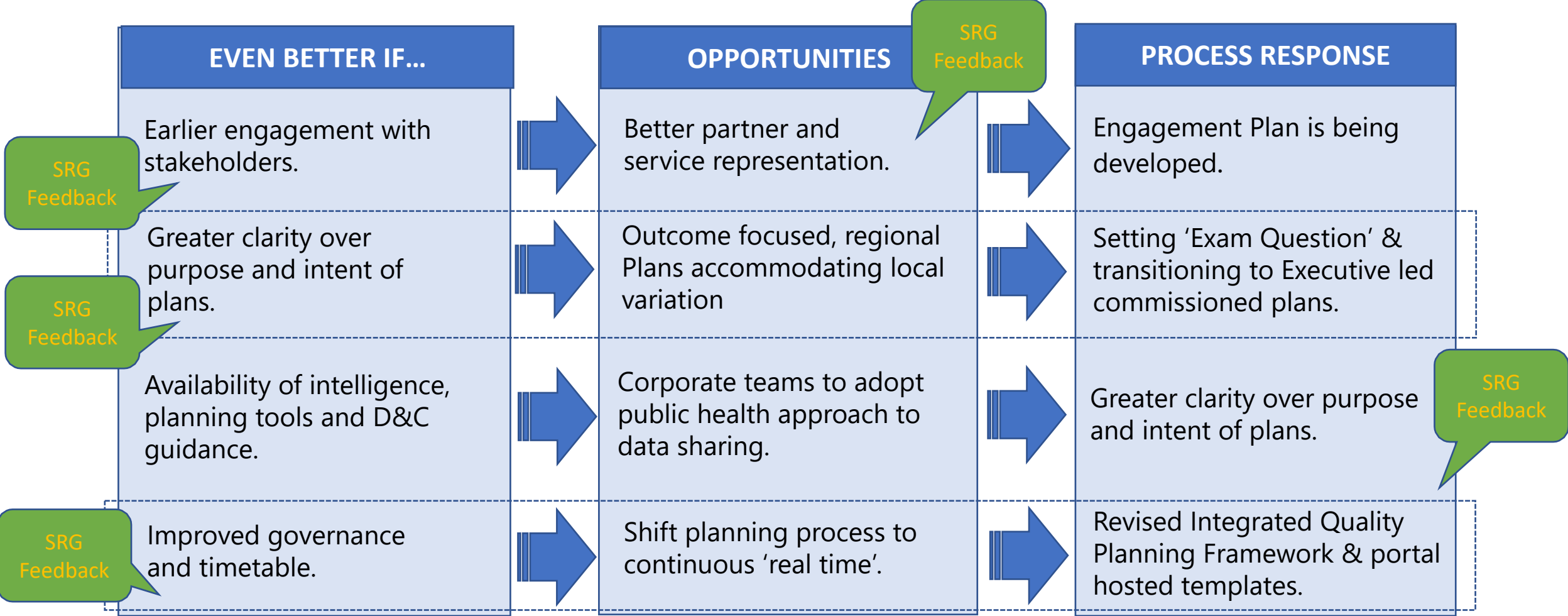
- 1. Highlight key changes to the Health Boards integrated planning process**
- 2. Engage with SRG on 3 Year Plan Development**

Planning process influences



Developing the revised planning process

.....just some of the key issues from debriefs, workshops and previous SRG discussions



5 key planning process changes

Previously	Proposed Change
<i>Output</i> focused plans	Outcome focused plans delivering Health Board and National Priorities.
Crowd sourced plans	Executive led 'top down' to <u>'bottom up'</u> plans
Fragmented planning timeline	Portal hosted 'live template' real time planning
Lack of timely stakeholder engagement	Shift to engagement and co-design of future plans (Well-being Planning)
Lack of clarity around purpose and deliver	Setting the right questions to aid delivery

Response to SRG

Response to SRG

Response to SRG

Response to SRG

Response to SRG

LH-SW, Well-being and our key strategic priorities



Objective 1: Building an effective organisation

- 1A Board Effectiveness
- 1B Risk Management
- 1C Operating Model
- 1D Performance and Accountability Framework
- 1E Value and Sustainability
- 1F Legislative Improvements
- 1G Workforce Planning
- 1H Quality Management System
- 1I Welsh Language
- 1J Decarbonisation

Objective 2: Developing strategy and long-lasting change

- 2A 10 year Strategy
- 2B Clinical Services Plan
- 2C Commissioning
- 2D Capital Priorities: supporting change to happen
- 2E Digital, Data and Technology (DDaT)
- 2F Prioritisation
- 2G Effectively delivering Major Change
- 2H Strengthening Planning
- 2I Finance Governance Environment
- 2J Early identification and support of Challenged Services

Objective 3: Compassionate culture, leadership & engagement

- 3A Compassionate Leadership & Organisational Development
- 3B Citizen Engagement
- 3C Being a Good Partner

Objective 4: Improving quality, outcomes and experience

- 4A Patient Experience
- 4B Prevention
- 4C Primary Care and Early Intervention
- 4D Community Care and Clusters
- 4E Planned Care
- 4F Cancer Care
- 4G Urgent and Emergency Care
- 4H Diagnostics
- 4I Adult Mental Health, Learning Disability, CAMHS & ND
- 4J Currently 'Challenged Services'
- 4K Women's Services
- 4L Children
- 4M Pharmaceutical services

Objective 5: Effective environment for Learning

- 5A University Partnership
- 5B Research, Development and Innovation
- 5C Academic Careers
- 5D Intelligence Led
- 5E Learning Organisation

Our organisational sub-objectives have been structured to reflect both LHB and Welsh Government reporting requirements. The sub-objectives are mirrored in our annual delivery plan and will become our key programmes of work for 2025/26.

Our approach

....in the context of an evolving and adapting integrated planning process that also places focus on engagement, we are pursuing:

- 1) A planning approach which is better aligned to SRG expectations.**
- 2) A planning approach that sets the right level of ambition in meeting our overall strategic direction.**
- 3) Plans that in time will deliver the required impact for our communities.**

Next Steps

- 1) Delivery of credible first working draft plan by the end of December.**
- 2) Maintain engagement with SRG throughout the planning process.**
- 3) Preparedness and course correction for any influences that may arise.**

Grwp Cyfeirio Rhanddeiliaid (GCR) Proses Gynllunio Integredig 2024/25

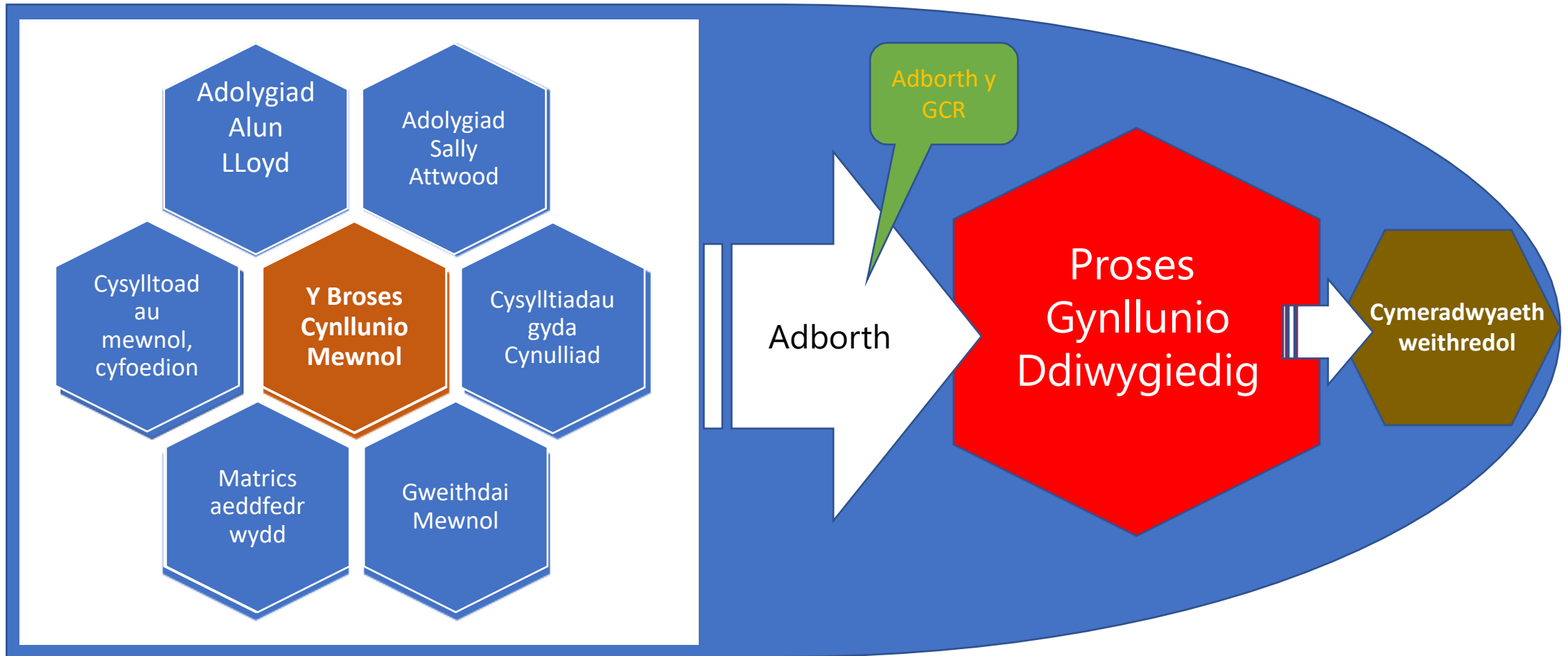


Pwrpas

Pwrpas y gweithdy heddiw yw:-

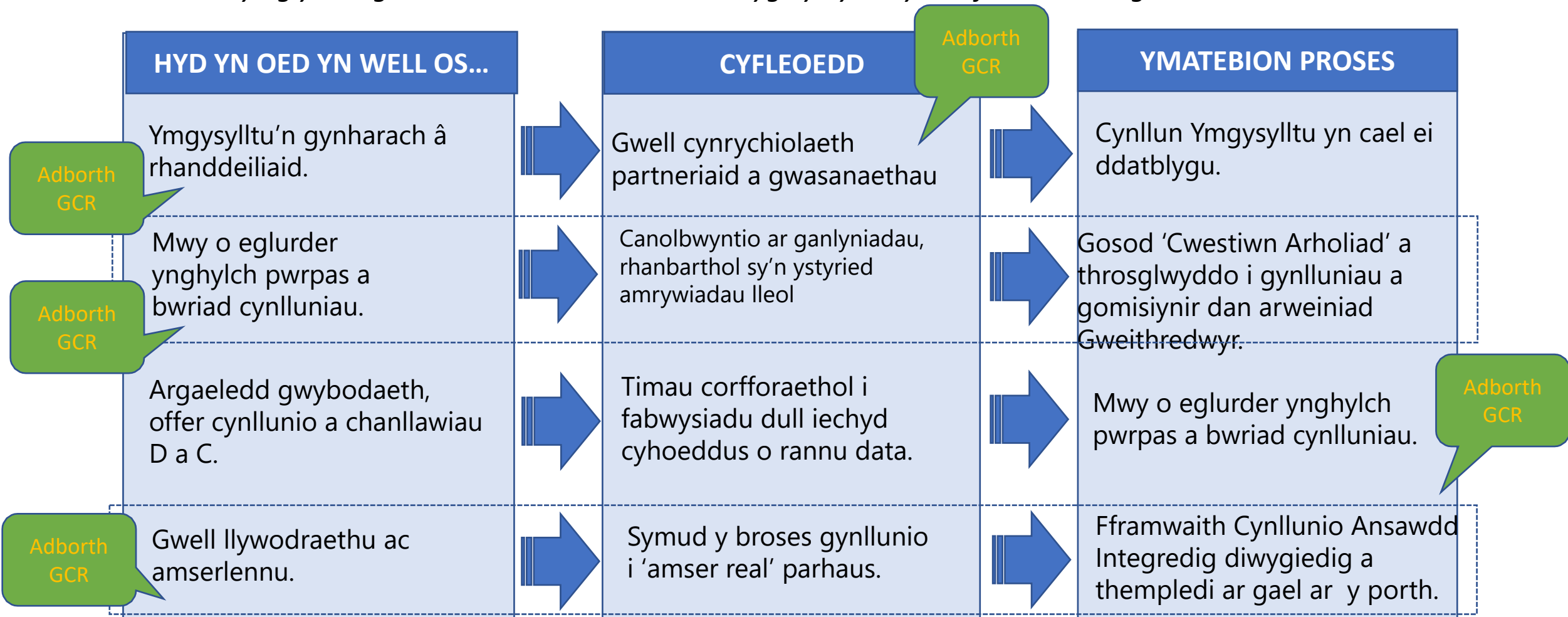
- 1. Amlygu newidiadau allweddol i broses gynllunio integredig y Bwrdd Iechyd**
- 2. Ymgysylltu â'r CGR er mwyn Datblygu Cynllun 3 Blynedd**

Dylanwadau ar y broses gynllunio



Datblygu'r broses gynllunio ddiwygiedig

.... Ychydig yn unig o'r materion allweddol a amlygwyd yn dilyn trafodaethau a gweithdai



5 newid allweddol i'r broses gynllunio

Yn flaenorol	Newid arfaethedig	
Cynlluniau sy'n canolbwyntio ar <i>allbynnau</i>	Cynlluniau sy'n canolbwyntio ar Ganlyniadau er mwyn cyflawni Blaenoriaethau'r Bwrdd Iechyd a Blaenoriaethau Cenedlaethol.	Ymateb i'r GCR
Cynllunio torfol	Arweiniad Gweithredol 'o'r gwaelod i'r brig' yn hytrach nag 'o'r brig i'r gwaelod'	Ymateb i'r GCR
Amserlen gynllunio dameidiog	Porth yn cynnal 'tempel byw' ar gyfer cynllunio 'amser real'	Ymateb i'r LPF
Diffyg ymgysylltu amserol â rhanddeiliaid	Symud i ymgysylltu a chyd-ddylunio cynlluniau'r dyfodol (Cynllunio Llesiant)	Ymateb i'r GCR
Diffyg eglurder ynghylch pwrpas a gweithred	Gosod y cwestiynau cywir i gynorthwyo gweithredu	Ymateb i'r GCR

Byw'n iach, Aros yn iach, Llesiant a'n blaenoriaethau strategol allweddol



Amcan 1: Creu sefydliad effeithiol

1A	Effeithiolrwydd y Bwrdd
1B	Rheoli Risg
1C	Model Gweithredu
1D	Fframwaith Perfformiad ac Atebolrwydd
1E	Gwerth a Chynaliadwyedd
1F	Gwelliannau Deddfwriaethol
1G	Cynllunio'r Gweithlu
1H	System Rheoli Ansawdd
1I	Y Gymraeg
1J	Datgarboneiddio

Amcan 2: Datblygu strategaeth a newid hirdymor

2A	Strategaeth 10 mlynedd
2B	Cynllun Gwasanaethau Clinigol
2C	Comisiynu
2D	Blaenoriaethau Cyfalaf: helpu newid i ddigwydd
2E	Digidol, Data a Thechnoleg
2F	Blaenoriaethu
2G	Cyflawni Newid Mawr yn Effeithiol
2H	Cryfhau'r Gwaith Cynllunio
2I	Amgylchedd Llywodraethu Cyllid
2J	Canfod a chefnogi Gwasanaethau â heriau yn gynnar

Amcan 3: Diwylliant, arweinyddiaeth ac ymgysylltu tosturiol

3A	Arweinyddiaeth Dosturiol a Datblygu Sefydliadol
3B	Ymgysylltu â Dinasyddion
3C	Bod yn Bartner Da

Amcan 4: Gwella ansawdd, canlyniadau a phrofiad

4A	Profiad Cleifion
4B	Atal
4C	Gofal Sylfaenol ac Ymyrraeth Gynnar
4D	Gofal Cymunedol a Chlystyrau
4E	Gofal wedi'i Gynllunio
4F	Gofal Canser
4G	Gofal Brys a Gofal Argyfwng
4H	Diagnosteg
4I	Iechyd Meddwl Oedolion, Anabledd Dysgu, CAMHS a Niwroamrywiaeth
4J	'Gwasanaethau â heriau' ar hyn o bryd
4K	Gwasanaethau Merched
4L	Plant
4M	Gwasanaethau fferyllo

Amcan 5: Amgylchedd Dysgu Effeithiol

5A	Partneriaeth Prifysgol
5B	Ymchwil, Datblygu ac Arloesi
5C	Gyrfaoedd Academiaidd
5D	Seiliedig ar Wybodaeth
5E	Sefydliad sy'n Dysgu

Mae ein his-amcanion sefydliadol wedi'u strwythuro i adlewyrchu gofynion adrodd y BILI a Llywodraeth Cymru. Caiff yr is-amcanion eu hadlewyrchu yn ein cynllun cyflawni blynyddol a dyma fydd ein rhaglenni gwaith allweddol ar gyfer 2025/26.

Ein dull gweithredu

...yng nghyd-destun proses gynllunio integredig sy'n esblygu ac addasu ac sydd hefyd yn canolbwyntio ar ymgysylltu, rydym yn mynd ar drywydd:

- 1) Dull cynllunio sy'n cyd-fynd yn well â disgwyliadau GCR.**
- 2) Dull cynllunio sy'n gosod y lefel gywir o uchelgais wrth gyflawni ein cyfeiriad strategol cyffredinol.**
- 3) Cynlluniau sy'n cyflawni'r effaith angenrheidiol i'n cymunedau.**

- 1) Cyflwyno cynllun drafft credadwy erbyn diwedd mis Rhagfyr.**
- 2) Cynnal ymgysylltiad ag SRG drwy gydol y broses gynllunio.**
- 3) Parodrwydd a chywiro'r cwrs ar gyfer unrhyw ddylanwadau a allai godi.**

BCU Stakeholder Reference Group

Special Measures Update

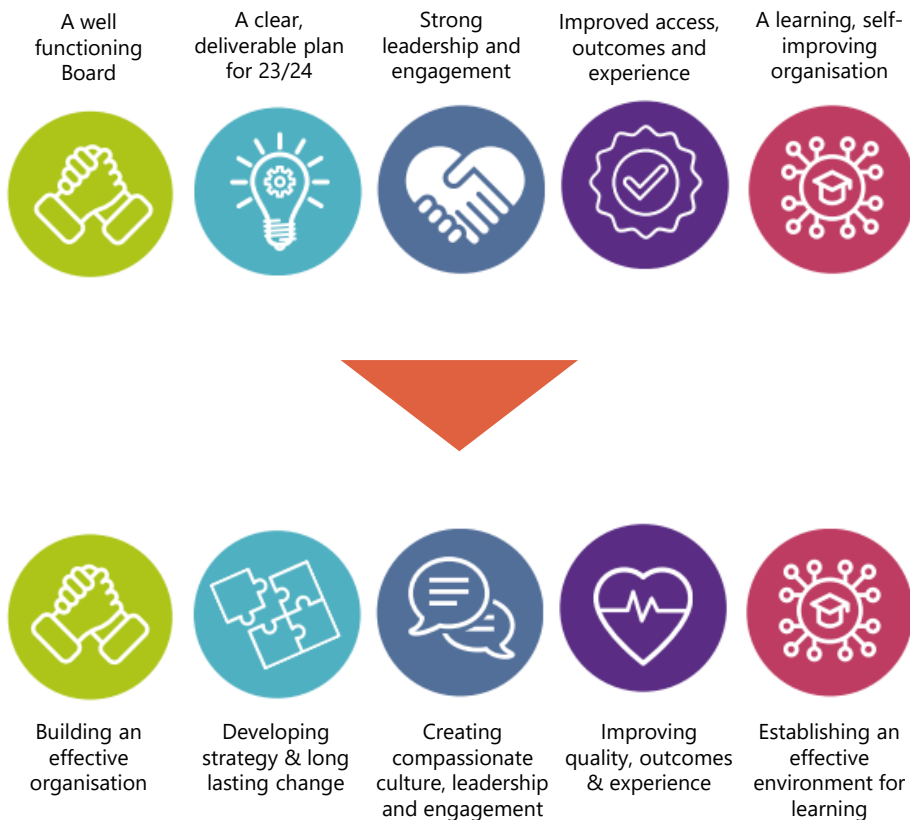
2nd December 2024



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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Reminder – Special Measures integrated into 3 Year Plan



Objective 1: Building an effective organisation

1A	Board Effectiveness	SM
1B	Risk Management	SM
1C	Operating Model	SM
1D	Performance and Accountability Framework	SM
1E	Value and Sustainability	
1F	Legislative Improvements	
1G	Workforce Planning	
1H	Quality Management System	SM
1I	Welsh Language	
1J	Decarbonisation	

Objective 2: Developing strategy and long-lasting change

2A	10 year Strategy	
2B	Clinical Services Plan	
2C	Commissioning	
2D	Capital Priorities: supporting change to happen	
2E	Digital, Data and Technology (DDaT)	
2F	Prioritisation	
2G	Effectively delivering Major Change	
2H	Strengthening Planning	SM
2I	Finance Governance Environment	SM
2J	Early identification and support of Challenged Services	

Objective 3: Compassionate culture, leadership & engagement

3A	Compassionate Leadership & Organisational Development	SM
3B	Citizen Engagement	
3C	Being a Good Partner	

Objective 4: Improving quality, outcomes and experience

4A	Patient Experience	SM
4B	Prevention	
4C	Primary Care and Early Intervention	
4D	Community Care and Clusters	
4E	Planned Care	SM
4F	Cancer Care	
4G	Urgent and Emergency Care	SM
4H	Diagnostics	
4I	Adult Mental Health, Learning Disability, CAMHS & ND	SM
4J	Currently 'Challenged Services'	SM
4K	Women's Services	
4L	Children	
4M	Pharmaceutical services	

Objective 5: Effective environment for Learning

5A	University Partnership	
5B	Research, Development and Innovation	
5C	Academic Careers	
5D	Intelligence Led	SM
5E	Learning Organisation	SM



Building an Effective Organisation

- Governance and Committee structures fully implemented
- Chairs (of committees) Advisory Group established to promote cross referencing
- Audit Committee overseeing compliance with the Corporate Governance Code
- Board Development Plan published
- QMS being rolled out following Board approval – maturity assessments underway for early implementers (Vascular and Urology)
- Integrated Performance and Accountability Framework being deployed to highlight issues to the Board and Committees



Strategy and Long Lasting Change

- Revised Planning process endorsed by the Board in September
- Good progress in response to review of planning
- Clinical Services plan progressing; key session planned during December

3 Year Plan Strategic Objective to Special Measures Domains Mapping

- 1) Building an Effective Organisation - Governance
- 2) Strategy & Long Lasting Change – Planning & Service Transformation + Financial Governance & Management
- 3) Leadership, Culture & Engagement - Leadership, capability and culture
- 4) Improving Quality, Outcomes & Experience - Quality of Care + Performance and Outcomes
- 5) Effective environment for learning – Quality of Care



Leadership, Culture and Engagement

- Leadership and Development Framework progressing
- Culture change programme well underway – 3rd large leadership event during November
- Foundations for the Future Programme now moving into design phase
- Values and Behaviours framework going to November Board



Improving Quality, Outcomes and Experience

- Reductions in the most extreme waits within planned care
- Real focus on eliminating these waits with a commitment to treat in turn, implement efficiency measures and improve productivity
- RTT Orthopaedic pathways > 104 weeks reduced by 48%
- Diagnostic pathways reduced by 20%
- Improvements within Complaints Performance (Putting Things Right)



Effective environment for learning

- North Wales medical school opened and first intake of students
- Integrated Concerns policy approved by Board

- Governance is improving with positive feedback received from Welsh Government
- Financial Governance and Control improving
- Strong focus on Compassionate Culture and Behaviours and laying the Foundations for the Future
- Following Board approval in May our Quality Management System is progressing with our Early Adopters in Vascular and Urology
- Funding approved for Mental Health Electronic Healthcare Record (EHR) as precursor to Health Board wide EHR helping to deliver Great Care, Every Time
- Worked with Welsh Government around our next 6 months expectations and embedding existing progress
- De-escalation criteria will now be directly incorporated into the Annual Delivery Plan as the next step in Integrating Special Measures into BAU



Grŵp Cyfeirio Rhanddeiliaid PBC

Diweddariad ar y Mesurau Arbennig

2^{ail} Rhagfyr 2024



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University Health Board

Nodyn Atgoffa – Mesurau Arbennig wedi'u hintegreiddio i'r Cynllun 3 Blynedd



Amcan 1: Creu sefydliad effeithiol

1A	Effeithiolrwydd y Bwrdd	MA
1B	Rheoli Risg	MA
1C	Model Gweithredu	MA
1D	Fframwaith Perfformiad ac Atebolrwydd	MA
1E	Gwerth cynaliadwyedd	
1F	Gwelliannau Deddfwriaethol	
1G	Cynllunio'r Gweithlu	
1H	System Rheoli Ansawdd	MA
1I	Iaith Gymraeg	
1J	Datgarboneiddio	

Amcan 2: Datblygu strategaeth a newid hirdymor

2A	Strategaeth 10 Mlynedd	
2B	Cynllun Gwasanaethau Clinigol	
2C	Comisiynu	
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2E	Digidol, Data a Thechnoleg (DDaT)	
2F	Blaenoriaethu	
2G	Cyflawni Newid Mawr yn Effeithiol	
2H	Cryfhau Cynllunio	MA
2I	Amgylchedd Llywodraethu Cyllid	MA
2J	Canfod a chefnogi'n gynnar y Gwasanaethau â Heriau	

Amcan 3: Diwylliant, arweinyddiaeth ac ymgysylltu tosturiol

3A	Arweinyddiaeth Dosturiol a Datblygu Sefydliadol	MA
3B	Ymgysylltu â Dinasyddion	
3C	Bod yn Bartner Da	

Amcan 4: Gwella ansawdd, canlyniadau a phrofiad

4A	Profiad Cleifion	MA
4B	Atal	
4C	Gofal Sylfaenol ac Ymyrraeth Gynnar	
4D	Gofal Cymunedol a Chlystyrau	
4E	Gofal wedi'i Gynllunio	MA
4F	Gofal Canser	
4G	Gofal Brys ac Argyfwng	MA
4H	Diagnosteg	
4I	Iechyd Meddwl Oedolion, Anabledd Dysgu, CAMHS a Niwroamrywiaeth	MA
4J	Gwasanaethau â heriau' ar hyn o bryd	MA
4K	Gwasanaethau Merched	
4L	Plant	
4M	Gwasanaethau fferyllol	

Amcan 5: Amgylchedd Dysgu Effeithiol

5A	Partneriaeth Prifysgol	
5B	Ymchwil, Datblygu ac Arloesi	
5C	Gyrfaoedd Academaidd	
5D	Cael ei Arwain gan Wybodaeth	MA
5E	Sefydliad sy'n Dysgu	MA



Creu Sefydliad Effeithiol

- Strwythurau Llywodraethu a Phwyllgorau wedi'u rhoi ar waith yn llawn
- Sefydlu Grŵp Cynghori Cadeiryddion (pwyllgorau) i hyrwyddo croesyfeirio
- Pwyllgor Archwilio yn goruchwylio cydymffurfriad â'r Cod Llywodraethu Corfforaethol
- Cyhoeddi Cynllun Datblygu'r Bwrdd
- System Rheoli Ansawdd yn cael ei chyflwyno yn dilyn cymeradwyaeth y Bwrdd – asesiadau aeddfedrwydd ar waith ar gyfer gweithredwyr cynnar (Fasgwlaidd ac Wroleg)
- Fframwaith Perfformiad ac Atebolrwydd Integredig yn cael ei ddefnyddio i dynnu sylw'r Bwrdd a'r Pwyllgorau at faterion



Strategaeth a Newid Hirdymor

- Y broses Gynllunio ddiwygiedig wedi'i chymeradwyo gan y Bwrdd ym mis Medi
- Cynnydd da mewn ymateb i adolygiad o gynllunio
- Cynllun Gwasanaethau Clinigol yn mynd rhagddo; sesiwn allweddol wedi'i chynllunio yn ystod mis Rhagfyr

Mapio Amcan Strategol i Ardaloedd Mesurau Arbennig y Cynllun 3 Blynedd

- 1) Creu Sefydliad Effeithiol - Llywodraethu
- 2) Strategaeth a Newid Hirdymor – Cynllunio a Thrawsnewid Gwasanaethau + Llywodraethu a Rheoli Ariannol
- 3) Arweinyddiaeth, Diwylliant ac Ymgysylltu - Arweinyddiaeth, gallu a diwylliant
- 4) Gwella Ansawdd, Canlyniadau a Phrofiad – Ansawdd Gofal + Perfformiad a Chanlyniadau
- 5) Amgylchedd effeithiol ar gyfer dysgu – Ansawdd y Gofal



Arweinyddiaeth, Diwylliant ac Ymgysylltu

- Fframwaith Arweinyddiaeth a Datblygu yn dod yn ei flaen
- Rhaglen newid diwylliant yn mynd rhagddi'n dda – 3^{ydd} digwyddiad arweinyddiaeth mawr ym mis Tachwedd
- Rhaglen Sylfeini ar gyfer y Dyfodol nawr yn symud i'r cam dylunio
- Fframwaith Gwerthoedd ac Ymddygiadau yn mynd i'r Bwrdd ym mis Tachwedd



Gwella Ansawdd, Canlyniadau a Phrofiad

- Gostyngiad yn yr amseroedd aros mwyaf eithafol mewn gofal wedi'i gynllunio
- Canolbwyntio'n wirioneddol ar ddileu'r amseroedd aros hyn gydag ymrwymiad i drin yn ei dro, rhoi mesurau effeithlonrwydd ar waith a gwella cynhyrchiant
- Llwybrau Orthopedig Rhwng Atgyfeirio a Thriniaeth > 104 wythnos wedi gostwng 48%
- Llwybrau diagnostig wedi gostwng 20%
- Gwelliannau o fewn Perfformiad Cwynion (Gweithio i Wella)



Amgylchedd effeithiol ar gyfer dysgu

- Agor ysgol feddygol Gogledd Cymru a derbyn y garfan gyntaf o fyfyrwyr
- Y Bwrdd yn cymeradwyo'r polisi Pryderon Integredig

- Llywodraethu'n gwella gydag adborth cadarnhaol wedi'i dderbyn gan Lywodraeth Cymru
- Llywodraethu a Rheolaeth Ariannol yn gwella
- Ffocws cryf ar Ddiwylliant ac Ymddygiadau Tosturiol a gosod y Sylfeini ar gyfer y Dyfodol
- Yn dilyn cymeradwyaeth y Bwrdd ym mis Mai, mae ein System Rheoli Ansawdd yn mynd rhagddi gyda'n Mabwysiadwyr Cynnar yn y maes Fasgwlaidd ac Wroleg
- Cyllid wedi'i gymeradwyo ar gyfer Cofnod Gofal Iechyd Electronig Iechyd Meddwl (EHR) fel rhagflaenydd i EHR ar draws y Bwrdd Iechyd gan helpu i ddarparu Gofal Gwych, Bob Tro
- Wedi gweithio gyda Llywodraeth Cymru ar ein disgwyliadau ar gyfer y 6 mis nesaf a gwreiddio'r cynnydd presennol
- Bydd meini prawf dad-ddwysáu nawr yn cael eu hymgorffori'n uniongyrchol yn y Cynllun Cyflawni Blynyddol fel y cam nesaf tuag at Integreiddio Mesurau Arbennig yn Busnes Fel Arfer





Teitl adroddiad: <i>Report title:</i>	Papur Briffio Ysbyty Frenhinol Alexandra
Adrodd i: <i>Report to:</i>	Grŵp Cyfeirio Rhanddeiliaid
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Dydd Llun, 02 Rhagfyr 2024
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>Beth yw pwrpas y papur, a yw'n eitem sefydlog/untro? Pa gamau sydd angen i'r Bwrdd eu cymryd gyda'r adroddiad hwn?</p> <p>Papur briffio yw hwn i'r Grŵp Cyfeirio Rhanddeiliaid am gynnydd gyda Datblygiad Ysbyty Frenhinol Alexandra</p> <p>Gofynnir i'r Grŵp Cyfeirio Rhanddeiliaid godi unrhyw Ymholiadau yn y cyfarfod.</p> <p>Mae'r adroddiad yn darparu'r wybodaeth ganlynol i'r Grŵp Cyfeirio Rhanddeiliaid:</p> <ul style="list-style-type: none">• Crynodeb o'r gwaith hyd yma• Cwmpas• Dyddiadau Allweddol• Rhaglen Lywodraethu• Cyfleoedd i ymgysylltu'n barhaus. <p>This paper is a briefing for the Stakeholder Reference Group (SRG) on progress with the RAH Development</p> <p>The SRG is asked to raise any Queries at the meeting. Background and The report provides the SRG with information as follows:</p> <ul style="list-style-type: none">• Summary of work to date• Scope• Key Dates• Programme Governance <p>Opportunities for ongoing engagement.</p>
Argymhellion: <i>Recommendations:</i>	<p>Gofynnir i'r Bwrdd: Nodi/cymeradwyo</p> <p><i>Gofynnir i'r Grŵp Cyfeirio Rhanddeiliaid nodi'r cynllun a thynnu sylw at faterion neu Bryderon i'w hystyried gan y prosiect.</i></p> <p><i>The SRG is asked to note the scheme and highlight and issues or Concerns for the project to consider.</i></p>
Arweinydd Gweithredol:	Chris Stockport

Executive Lead:				
Awdur yr Adroddiad:	Steph O'Donnell			
Report Author:				
Pwrpas yr adroddiad: Purpose of report:	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 checked="" type="checkbox"/>	
Lefel sicrwydd: Assurance level:	Arwyddocaol Significant <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 Acceptable <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 Partial <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 No Assurance <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: 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):		Mae'n galluogi gwelliannau i gynllun 2024/25 mewn nifer o feysydd, gan gynnwys: <ul style="list-style-type: none"> • Datblygu strategaeth a newid hirdymor • Cydweithio a gweithio'n rhanbarthol gyda phartneriaid: "Bod yn Bartner Da" • Gwella ansawdd y profiad a'r canlyniadau • Cydymffurfio â threfniadau llywodraethu ariannol ym maes caffael gyda chefnogaeth Llywodraeth Cymru • Cefnogi ein cynlluniau ynghylch datgarboneiddio Enables improvement in a number of areas from the 2024/25 plan including: <ul style="list-style-type: none"> • Developing a strategy and long lasting change • Collaboration and regional approaches with partners: "Being a Good Partner" • Improving quality outcomes and experience • Complies with financial governance around procurement and supported by WG Supports our plans around decarbonisation		
Goblygiadau rheoleiddio a lleol: Regulatory and legal implications:		e.e. Yr Awdurdod Gweithredol Iechyd a Diogelwch Bydd yn cydymffurfio â'r fframwaith deddfwriaethol adeiladu ac yn cefnogi'r gwaith o atal heintiau mewn meysydd clinigol newydd.		

	Will be compliant with building legislative framework and supports infection prevention in new clinical areas.
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>	Do/Naddo Y
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>	Do/Naddo Y
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>	Risg na fydd y prosiect o bosibl yn gallu cyflawni'r rhan fwyaf o'r manteision o fewn y terfyn cyfalaf. Risg na fydd y prosiect o bosibl yn bodloni'r disgwyliadau gyda'r amserlen. Risk that the project may not be able to deliver the majority of the benefits within the capital ceiling. Risk that the project may not meet the expectations around the timeline.
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	Bydd yn rhaid i'r Adendwm i'r Achos Busnes Llawn ddangos fforddiadwyedd refeniw'r cynllun. Mae'r broses gaffael yn rheoli'r Risgiau Cyfalaf a'r risg i BIPBC. The FBC Addendum will have to demonstrate revenue affordability of the scheme. The Capital Risks are mitigated and BCUHB's exposure managed through the procurement approach.
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	Mae goblygiadau'r prosiect o safbwynt y gweithlu yn cael eu hasesu ac rydym wedi cysylltu â Sir Ddinbych yn Gweithio i ystyried y sylfaen gyflogaeth leol. The project's workforce implications are being assessed and we have linked with Working Denbighshire to consider the local employment base.
Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori <i>Feedback, response, and follow up summary following consultation</i>	(crynodeb o sut mae'r papur wedi cael ei adolygu, yr ymateb a pha newidiadau a wnaed ar ôl cael adborth) Ddim yn berthnasol i'r papur hwn. Not applicable in relation to this paper.
Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol)	Lluniwyd cofrestr risg prosiect. Ar hyn o bryd nid yw'r prosiect yn effeithio ar BAF na CRR.

<p>Links to BAF risks: (or links to the Corporate Risk Register)</p>	<p>A project Risk register has been established. At this stage the project does not affect corporate BAF and CRR.</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 Pwrpas yr adroddiad yw rhoi gwybodaeth i'r Grŵp Cyfeirio Rhanddeiliaid am y prosiect. Byddem yn falch o glywed barn y cyfarfod am eu cyfraniad a'u cysylltiad parhaus</p> <p>Next Steps: The report is for informing the SRG about the project. We would welcome the meeting's thoughts about ongoing involvement and engagement.</p>	
<p>Rhestr o Atodiadau: Dim</p> <p>List of Appendices: None</p>	

Guidance:

**CYFARFOD CYHOEDDUS BWRDD Y CYFARWYDDWYR
RHOWCH Y DYDDIAD
TEITL YR ADRODDIAD**

**BOARD OF DIRECTORS MEETING IN PUBLIC
INSERT DATE
REPORT TITLE**

1. Cyflwyniad / Cefndir

Y cyd-destun sy'n esbonio pam fod yr adroddiad yn cael ei gyflwyno i'r Bwrdd/Pwyllgor, unrhyw gamau ymgynghori blaenorol, a'r pwrpas o'i gyflwyno i'r Bwrdd

Introduction/Background

Set the scene on why the report is submitted to the Board/committee, where it has been previously in terms of consultation, and the aim for its submission to Board

2. Corff yr adroddiad / Body of report

3. Goblygiadau Cyllidebol / Ariannol / Budgetary / Financial Implications

3.1 Nid oes goblygiadau cyllidebol yn deillio o'r papur hwn. Mae'r adnoddau ar gyfer cynnal cydymffurfiaeth yn cael eu goruchwyllo gan ...

There are no budgetary implications associated with this paper. Resources for maintaining compliance oversight are overseen by ...

3.2 NEU Mae'r goblygiadau cyllidebol yn cael eu lliniaru'n llawn/rhannol drwy ...

OR Budgetary implications are and fully/partially mitigated via....

4. Rheoli Risg / Risk Management

Mae un risg ar Datix sy'n gysylltiedig â'r maes hwn, sef risg ID xxxx. Mae hon yn risg rannol

There is one risk on Datix linked to this area which is risk ID xxxx. This risk is partially

5. Goblygiadau Cydraddoldeb ac Amrywiaeth / Equality and Diversity Implications

5.1 Os yw'r adroddiad hwn yn ymwneud â 'phenderfyniad strategol', h.y. bydd y canlyniad yn effeithio ar sut mae'r Bwrdd lechyd yn cyflawni ei bwrpas statudol dros gyfnod sylweddol o amser ac ni ystyrir iddo fod yn benderfyniad 'o ddydd i ddydd', mae'n rhaid i chi gynnwys Dyletswydd Economaidd-gymdeithasol (SED), Asesiad o Effaith Cydraddoldeb (SEIA) yn ogystal ag asesiad Effaith Cydraddoldeb (EqIA) fel atodiad.

If this report relates to a 'strategic decision', i.e. the outcome will affect how the Health Board fulfils its statutory purpose over a significant period of time and is not considered to be a 'day to day' decision, then you must include a Socio-economic Duty (SED) Impact Assessment (SEIA) as well as a completed Equality Impact (EqIA) as an appendix.

5.2 Mae angen cydymffurfiaeth EqIA yn unol â Gweithdrefn WP7 er mwyn sicrhau bod cydraddoldeb a hawliau dynol yn cael eu hymgorffori i brosesau penderfynu a datblygu polisi'r sefydliad.

EqIA compliance is required in accordance to Procedure WP7 to ensure equality and human rights are embedded into organisational decision-making and policy development processes.

Ysbyty Frenhinol Alexandra Royal Alexandra Hospital (RAH)

Briffio'r Grŵp Cyfeirio Rhanddeiliaid
2^{il} Rhagfyr 2024

Briefing for Stakeholder Reference Group
2nd December 2024

Fersiwn/Version 1



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Cynnwys

- Cefndir a Chrynodeb o'r Gwaith Hyd Yma
- Cwmpas
- Dyddiadau Allweddol
- Trefn Lywodraethu'r Rhaglen
- Cyfleoedd ar gyfer Cydweithio

Contents

- Background and Summary of work to Date
- Scope
- Key Dates
- Programme Governance
- Opportunities for collaborative working



Cefndir

- Mae yna ddyhead ers blynyddoedd i ddatblygu'r safle
- Cyflwynwyd achos busnes yn 2021 ond nid oedd digon o gyfalaf ar gael i gyllido'r gwaith angenrheidiol
- Ar ôl Arfarnu'r Opsiynau, ym mis Gorffennaf cytunwyd ar ddatblygiad am gost is gyda Llywodraeth Cymru
- Cytunwyd i fwrw ymlaen â'r gwaith cwmpasu drwy:
 - Caffael y dylunio'n arloesol
 - Cyflwyno Atodiad i'r Achos Busnes Llawn yn 2021 ar gyfer yr opsiwn newydd

Background

- Our aspiration to develop the site has a long history
- A business case was submitted in 2021 but there is insufficient capital available to fund the scale of work
- An Option Appraisal for a lower cost development was agreed with Welsh Government in July
- It was agreed to progress the scope through:
 - Innovative procurement of design
 - Submission of an Addendum to the 2021 FBC for the new option



Cwmpas

- Rhaid i'r dyluniad flaenoriaethu gwasanaethau newydd mewn adeilad clinigol newydd sy'n llai o faint
- Rhaid i ni flaenoriaethu'r gwaith o adnewyddu adeilad Rhestredig Gradd II Ysbyty Frenhinol Alexandra fel canolfan gymorth
- Fel blaenoriaeth, rhaid i ni ddarparu'r canlynol mewn adeilad newydd i leddfu'r pwysau ar YGC a chefnogi'r boblogaeth leol:
 - Uned newydd ar gyfer Mân Anafiadau a Mân Anhwylderau
 - Rhywfaint o welyau "Gofal yn Nes at y Cartref"
 - Mwy o gyfleoedd i gydweithio â phartneriaid ar y safle

Scope

- The design must prioritise new services in a new, smaller clinical building
- We must prioritise the refurbishment of the existing Grade II Listed RAH building as a support centre
- As a priority we have to provide the following in the new building to alleviate pressure at YGC and support the local population:
 - A new Minor Injuries and Ailments unit
 - Some "Care Closer to Home" beds
 - Increased opportunities for collaborative working with partners at site



Adeilad Newydd

- Uned newydd ar gyfer Mân Anafiadau a Mân Anhwylderau
- Ail-leoli ac ehangu'r gwasanaethau Radioleg
- Symud ac ehangu'r gwasanaethau deintyddol
- Uned â 14 gwely gyda thîm cymunedol integredig yn ei gwasanaethu
- Derbynfya a hyb trydydd sector
- Caffi bach
- Ardaloedd gorffwys a llesiant i staff
- Ardaloedd gorffwys a thoiledau i gleifion

New Building Accommodation

- A Minor Injuries and Ailments unit
- Relocated and expanded Radiology services
- Repatriated and expanded dental services
- A 14 bedded unit supported by an integrated community team
- Reception and third sector hub
- A small café
- Staff Rest areas and welfare
- Patient rest areas and WCs



Adeilad Presennol yr Ysbyty

- Adnewyddu'r adeilad rhestredig Gradd II presennol, gan gynnwys:
 - Atgyweirio strwythur y llawr a'r ffabrig allanol
 - Adnewyddu'r ardaloedd sydd ddim yn cael eu defnyddio ar hyn o bryd
 - Seilwaith drydanol a system wres newydd
- Cyd-leoli'r Trydydd Sector nesaf at y Tîm Cymunedol
- Posibilrwydd symud ac ehangu iechyd rhywiol
- Posibilrwydd ehangu'r gwasanaethau Awdioleg
- Ail-leoli ac ehangu Orthoteg o bosib
- Posibilrwydd diweddaru adeiladau eraill ar y safle

The Existing RAH Building

- Refurbishment of the existing, Grade II listed building to include:
 - Repairs to the floor structure and external fabric
 - Refurbishment of current unoccupied areas
 - New electrical and heating infrastructure
- Co-location of Third Sector adjacent to Community Team
- Potential repatriation and expansion of sexual health
- Potential expanded Audiology services
- Possible relocation and expansion of Orthotics
- Potential updates to other buildings at site



Initial Indicative Site Layout



Ground Floor Initial High Level Design Mock-Up



First Floor Initial High Level Design Mock-Up



Dyddiadau Allweddol yn Fras

- **Rhagfyr 2024:** Caffael (ar y gweill eisoes)
- **Ebrill 2025:** Cwblhau dyluniad a chostau'r Achos Busnes Llawn (amcangyfrifon costau ar gyfer Adnewyddu Ysbyty Frenhinol Alexandra)
- **Mai 2025:** Bwrdd Betsi Cadwaladr yn cymeradwyo wedyn cyflwyno i Lywodraeth Cymru
- **Awst 2025:** diweddaru cyfanswm y gost ar gyfer adnewyddu'r Ysbyty
- **Rhagfyr 2025:** dechrau adeiladu
- **Hydref 2026:** gorffen y gwaith adeiladu
- **Mawrth 2026:** dechrau adeiladu'r Ysbyty
- **Mawrth 2028:** gorffen adnewyddu'r Ysbyty

Indicative Key Dates

- **December 2024:** Procurement (currently in progress)
- **April 2025:** Completion of FBC design and costs (cost estimates for the RAH Refurbishment)
- **May 2025:** Approval by BCU Board then submit to WG
- **August 2025:** total cost update for RAH refurbishment
- **Dec 2025:** start new build
- **October 2026:** complete new build
- **March 2026:** start RAH construction
- **March 2028:** complete RAH refurbishment



RAH Governance Framework

Sponsoring Group: Investment and Strategic alignment

Executive Team

SRO/Executive Lead: Chris Stockport

Project Board: Drives change, monitors progress, unblocks issues and risks

Project Director: Gareth Evans

External Assurance: WG, NWSSP, Audit

Operational Lead:
Elaine Hodgson

Clinical Leads: Nicola
Hughes; Steve Grayston;

Snr. Supplier:
Iolo Jones

Deputy Project Director
Steph O'Donnell
Asst.PM: Llew Davies

Risk Management, Assurance and Involvement in Design

Project Team
Lead: Steph O'Donnell/Iolo Jones

Clinical Stakeholder Reference Group

Project Workstreams: Deliver the products

Capital, Estates, Procurement
Lead: Iolo Jones

Digital Enablement
Lead: Dave Slocombe

Financial & Economic Modelling
Lead: Paula Jones

Clinical Model, Workforce & Operational Readiness
Lead: Nicola Eatherington

Decant & Site Management
Lead: Elaine Hodgson

Communication & Engagement
Lead: Karen Owen

Ymgysylltu'n Barhaus â Rhanddeiliaid

- Parhau â'r digwyddiadau ymgysylltu "Cnoi Cil ar Iechyd"
- Digwyddiadau yng nghanolfan siopa'r Rhosyn Gwyn yn y Rhyl yn 2025
- Datblygu'r buddion economaidd ehangach i'r gymuned gyda rhanddeiliaid llywodraeth leol a'r sector Gwirfoddol
- Parhau â'r digwyddiadau ymgysylltu â staff – 4 hyd yma a mwy yn y Flwyddyn Newydd
- Mynd yn ôl i'r Grŵp Rhanddeiliaid Cydraddoldeb
- Grŵp Cyfeirio Clinigol wedi'i sefydlu

Ongoing Stakeholder Engagement

- Continue "Bite Sized Health" engagement events
- Rhyl White Rose centre events in 2025
- Develop the wider economic benefits to the community with stakeholders in local government and the Voluntary sector
- Continue staff engagement events – 4 by the time of the meeting and more in the New Year
- Return to the Equalities Stakeholder Group
- A Clinical reference Group has been established





Teitl adroddiad: <i>Report title:</i>	BCUHB Volunteering Update			
Adrodd i: <i>Report to:</i>	Stakeholder Reference Group			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024			
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p><i>This paper is a one off item. This document is for noting.</i></p> <p><i>This paper aims to give the Stakeholder Reference Group an update on plans to develop the Health Board's Volunteering Services.</i></p>			
Argymhellion: <i>Recommendations:</i>	The Stakeholder Reference Group is asked to note this report.			
Arweinydd Gweithredol: <i>Executive Lead:</i>	<i>Helen Stevens Jones, BCUHB Director of Communications and Engagement</i>			
Awdur yr Adroddiad: <i>Report Author:</i>	<i>Kirsty Thomson, Charitable Support Team</i>			
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/evidenc</i>	Derbyniol <i>Acceptable</i> <input checked="" type="checkbox"/> Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol	Rhannol <i>Partial</i> <input type="checkbox"/> Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i>

	<i>e in delivery of existing mechanisms/objectives</i>	<i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	<i>Some confidence / evidence in delivery of existing mechanisms / objectives</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>				
<p>Cyswllt ag Amcan/Amcanion Strategol:</p> <p><i>Link to Strategic Objective(s):</i></p>	<p>BCUHB 2024-2027 3 Year plan</p> <p>BCUHB's Charity's strategic objectives are included within the Charity Strategy 2024-28</p>			
<p>Goblygiadau rheoleiddio a lleol:</p> <p><i>Regulatory and legal implications:</i></p>	<ul style="list-style-type: none"> ▪ Volunteer opportunities, rights and expenses: Volunteers' rights - GOV.UK ▪ Charities Acts 1993, 2006 and 2022 ▪ NHS Charitable Trusts (etc) Act 2016 			
<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>Do/Naddo Y</p> <p>The Equalities Act 2010 and its implications have and will be considered throughout the development of a new BCUHB Volunteering Strategy.</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>Do/Naddo Y</p> <p>BCUHB and the charity's public sector equality duty will be considered throughout the development of a new BCUHB Volunteering Strategy. Formal SEIAs are conducted for all volunteering activity plans.</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</i></p>	<p>Workforce and OD Risk: <i>The Governance Framework for BCUHB Volunteers needs to be strengthened to protect volunteers, patients & staff</i></p>			

<i>new risks(cross reference to the BAF and CRR)</i>	
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	Financial implications will be included within the BCUHB Volunteering plan. The Welcome and Support Volunteering Service budget was approved by the Charitable Funds Committee, 12/11/24.
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	BCUHB is expecting to grow its volunteering functions, subject to budget, operational structure and strategy approval from the Board.
Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori <i>Feedback, response, and follow up summary following consultation</i>	This paper is presented to assist in the development of a long-term volunteering plan for the Health Board.
Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol) <i>Links to BAF risks:</i> (or links to the Corporate Risk Register)	Risks associated with volunteering are under review.
Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol) <i>Reason for submission of report to confidential board (where relevant)</i>	Not applicable
<i>Atodiadau / Appendices: N/A</i>	
<p>Situation</p> <p>The benefits of volunteering in healthcare are well documented, with evidenced wellbeing benefits for those volunteering as well as NHS staff, patients and visitors (see: Adding Value: A Strategic Vision For Volunteering In NHS Trusts The King's Fund (kingsfund.org.uk)). The Health Board has a number of volunteering schemes including the Robins Volunteers, Welcome and Support Service Volunteers, Chaplaincy volunteers and Audiology Volunteers. Colleagues have requested that volunteering programmes be established for specific services, for example, Children's Services are keen to establish a parental accommodation support volunteers service.</p> <p>BCUHB commissioned a 'Scoping of BCUHB Volunteering Programmes and Partnerships' study to review and benchmark BCUHB volunteering services across BCUHB from June to October 2023 (see: page 123 bcuhb.nhs.wales/about-us/committees-and-advisory-groups/board-committees/charitable-funds-committee/cf031023-agenda-compressed-1/). The resulting report has been presented to the Executive Team. It has subsequently been agreed that the lead Executive for the Health Board's Volunteering Service will be the Executive Director of Nursing.</p> <p>The 'Scoping of BCUHB Volunteering Programmes and Partnerships' report identified a number of benefits of embedding a culture that embraces volunteering within BCUHB,</p>	

as other NHS Health Boards and Trusts have done in recent years. The report provided ten recommendations to address BCUHB's volunteering challenges, including:

- The establishment of a BCUHB Volunteering Task Group
- The development of a BCUHB Volunteering Strategy
- The creation of a Volunteer Charter
- An Annual Plan
- The adoption of a corporate volunteering function providing oversight across the organisation

A plan to enact the recommendations laid out in the 'Scoping of BCUHB Volunteering Programmes and Partnerships' report is in progress. In the meantime, volunteering activity continues across the Health Board. This report focusses on developments regarding the Welcome and Support Volunteers, managed by the Health Board's Charitable Support Team.

Background

In January 2023, the Royal Voluntary Service (RVS) confirmed it would cease funding for its Volunteering schemes in BCUHB's hospitals from March 2023, due to the decrease in its fundraising income. RVS had been responsible for the Welcome Service in Ysbyty Glan Clwyd and Ysbyty Gwynedd for over 15 years.

The closure of RVS' services provided a threat to the Health Board as the Welcome Service is considered to be an integral part of the hospital, but core funding has never been available to maintain it. It was agreed that the Charitable Support Team would take on the service, with the existing staff and volunteers.

A flaw within the Health Board's 'Welcome and Support Volunteering Service' has been the lack of equity of the support across the region. Now the 12-month trial of the service has been assessed, this is now being addressed, and the service that's currently only available in West and Central acute sites will now be extended to the East, and the possibility of extending it into primary care settings will be considered.

The recent retirement of the Welcome Desk staff member in Wrexham Maelor Hospital provided a challenge for the hospital, and an opportunity to develop the 'Welcome and Support Volunteering Service'. It has been agreed by the Health Board's Charitable Funds Committee that the existing Welcome Service in Ysbyty Gwynedd and Ysbyty Glan Clwyd will be replicated in Wrexham Maelor Hospital. A paid Volunteer Coordinator will oversee the new volunteer service in the hospital.

Assessment

The Welcome and Support Service provides the Health Board with trained volunteers on hand to:

- Welcome patients and visitors
- Supporting staff with signposting patients to their appointments and to different services and activities
- Provide additional support for visitors to the hospital
- Manage a signing in and out process for the hospital wheelchairs
- Deal with a wide variety of issues including notifying security if an issue arises at the entrance and alerting staff when a healthcare staff member is required by a patient

The Welcome and Support Service also provides the Health Board with a resource to support other support services, as required.

The Welcome and Support Service Coordinators (established 0.6 FTE in Ysbyty Gwynedd, 0.3 FTE in Ysbyty Glan Clwyd and a 0.5 FTE will be recruited in Q4 2024/25) oversee the recruitment of volunteers; regular check-ins and supervision with the volunteers; organise the monthly rota, and act as a liaison with the hospital team on behalf of the volunteers. The Welcome and Support Service currently has 66 registered volunteers.

Currently, in an average week, the Welcome Service volunteers in Ysbyty Gwynedd and Ysbyty Glan Clwyd together respond to over 1,000 enquiries. These interactions include general enquiries, requests for directions and support with finding relatives within the hospital. Patient and staff feedback indicates that it is an appreciated service, with colleagues and visitors describing it as: 'invaluable', 'providing a wonderful smile just when I needed one', 'knowledgeable and thoughtful'. The number of interactions per week is expected to increase to 1,500 per week by the end of 2025/26, which equates to a total of 78,000 interactions by the Welcome and Support Service volunteers per year.

Anticipated costs per annum (2025/26):

Annual costs for the service are anticipated to increase in 2025/26 with the introduction of the service in the East and a new recruitment drive in the West and Central.

Total anticipated costs of £66,110 for 2025/26 breakdown as follows:

- Volunteer Coordination staff costs: £41,170
- Volunteer Expenses £14,940 (anticipated monthly average of £1,245 travel expenses for 150 volunteers, at £8.30 per person)
- Uniforms, recruitment and additional costs £10,000

Importantly, the Charitable Support Team plans to launch a continuous fundraising campaign, with a target of £100,000 per annum, to raise money to support this and other BCUHB volunteering services from April 2025.

Every interaction provided by the Welcome Service costs under 85p. The benefits of that interaction are significant:

- A volunteer receives valuable work experience, improves their confidence or gives them a sense of connection to others in the community
- A staff member doesn't need to answer the patients' queries, enabling them to focus on their planned work without interruption
- A patient or visitor has clarity on where they need to go, or how they can raise a concern, or they have a helping hand in a difficult moment

Risks

Welcome and Support Volunteering Service	Risk description	Risk Mitigation	Responsibility	Level (R: High, A: Medium, G: Low) [Priority, likelihood and impact considered]

W&SVS Risk 1	Capacity risk: insufficient human resource to effectively manage the volunteering service.	Dedicated Coordinator for West & Central, no expansion without dedicated coordination. Management prioritised by Communications Officer, fortnightly meetings to assess team requirements and volunteer recruitment.	Charitable Support Team: Officer	
W&SVS Risk 2	Compliance and regulatory risk: not adhering to rules / regulation	Close working with WCVA, BCUHB Robins and other NHS Charities for advice and guidance.	Volunteering Coordinators	
W&SVS Risk 3	Financial risk: insufficient funds to commit to the service	Included within the Charity Operational budget. Introduce fundraising plan with aim of full cost recovery by April 2027.	Charitable Support Team: Head	

A well-managed, effective, equitable Welcome and Support Volunteering Service will complement the work that colleagues across the Health Board are doing to build on our citizens' experience of healthcare in North Wales. The insights gathered by the volunteers and coordinators within the service will provide useful intelligence for the Health Board. The Welcome and Support Volunteering Service itself has the potential to aid both patient and staff engagement, two drivers of performance that featured prominently in the recently published Darzi Report on the state of the NHS.

Recommendation:

The Stakeholder Reference Group is asked to note the information included within this report and raise any questions that members have on:

- Plans for volunteering across the Health Board more generally
- The Welcome and Support Volunteering Service



Teitl yr adroddiad:	Diweddariad ar Wirfoddoli yn BIPBC			
Report title:				
Adrodd i:	Grŵp Cyfeirio Rhanddeiliaid			
Report to:				
Dyddiad y Cyfarfod:	Dydd Llun, 02 Rhagfyr 2024			
Date of Meeting:				
Crynodeb Gweithredol:	<i>Eitem untro yw'r papur hwn. Dylid nodi'r ddogfen hon.</i>			
Executive Summary:	<i>Nod y papur yw rhoi diweddariad i'r Grŵp Cyfeirio Rhanddeiliaid ar gynlluniau i ddatblygu Gwasanaethau Gwirfoddoli'r Bwrdd Iechyd.</i>			
Argymhellion:	Gofynnir i'r Grŵp Cyfeirio Rhanddeiliaid nodi'r adroddiad hwn.			
Recommendations:				
Arweinydd Gweithredol:	<i>Helen Stevens-Jones, Cyfarwyddwr Partneriaethau, Ymgysylltu a Chyfathrebu BIPBC</i>			
Executive Lead:				
Awdur yr Adroddiad:	<i>Kirsty Thomson, Tîm Cymorth Elusennol</i>			
Report Author:				
Pwrpas yr adroddiad:	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"/>	
Purpose of report:				
Lefel sicrwydd:	Arwyddocaol <i>Significant</i> <input type="checkbox"/>	Derbyniol <i>Acceptable</i> <input checked="" type="checkbox"/>	Rhannol <i>Partial</i> <input type="checkbox"/>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/>
Assurance level:	Lefel uchel o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol	Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol	Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol	Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence /</i>

	<i>High level of confidence/evidence in delivery of existing mechanisms/objectives</i>	<i>General confidence / evidence in delivery of existing mechanisms / objectives</i>	<i>Some confidence / evidence in delivery of existing mechanisms / objectives</i>	<i>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>				
<p>Cysylltiad ag Amcan/Amcanion Strategol:</p> <p><i>Link to Strategic Objective(s):</i></p>	<p>Cynllun Tair Blynedd 2024-2027 BIPBC</p> <p>Mae amcanion strategol elusennol BIPBC wedi'u cynnwys yn Strategaeth yr Elusen 2024-28</p>			
<p>Goblygiadau rheoleiddio a chyfreithiol:</p> <p><i>Regulatory and legal implications:</i></p>	<ul style="list-style-type: none"> ▪ Cyfleoedd gwirfoddoli, hawliau a threuliau: Hawliau gwirfoddolwyr - GOV.UK ▪ Ddeddfau Elusennol 1993, 2006 a 2022 ▪ Deddf Ymddiriedolaethau Elusennol y GIG (ac ati) 2016 			
<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>Do/Naddo Y</p> <p>Mae Deddf Cydraddoldeb 2010 a'i goblygiadau wedi cael eu hystyried a byddant yn parhau i gael eu hystyried trwy gydol y broses o ddatblygu Strategaeth Wirfoddoli newydd ar gyfer BIPBC.</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>Do/Naddo Y</p> <p>Bydd dyletswydd gydraddoldeb sector cyhoeddus BIPBC a'r elusen yn cael eu hystyried trwy gydol y broses o ddatblygu Strategaeth Wirfoddoli newydd ar gyfer BIPBC. Caiff Aseidiadau o Effaith Economaidd-gymdeithasol ffurfiol eu cynnal ar gyfer yr holl gynlluniau gweithgarwch gwirfoddoli.</p>			
<p>Manylion am risgiau sy'n gysylltiedig â phwnc a chwmpas y papur hwn, gan</p>	<p>Risg Gweithlu a Datblygu Sefydliadol: Mae angen i'r Fframwaith Llywodraethu ar gyfer Gwirfoddolwyr BIPBC gael ei</p>			

<p>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><i>atgyfnerthu i amddiffyn gwirfoddolwyr, cleifion a staff</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>	<p>Caiff goblygiadau ariannol eu cynnwys yng nghynllun Gwirfoddoli BIPBC.</p> <p>Cafodd cyllideb y Gwasanaeth Gwirfoddolwyr Croeso a Chymorth ei gymeradwyo gan y Pwyllgor Cronfeydd Elusennol, 12/11/24.</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>Mae BIPBC yn disgwyl tyfu o ran ei swyddogaethau gwirfoddoli, yn amodol ar gyllideb, strwythur gweithredol a chymeradwyo strategaeth gan y Bwrdd.</p>
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	<p>Cyflwynir y papur hwn er mwyn cynorthwyo i ddatblygu cynllun gwirfoddoli hirdymor ar gyfer y Bwrdd Iechyd.</p>
<p>Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risgiau Corfforaethol)</p> <p><i>Links to BAF risks:</i> (or links to the Corporate Risk Register)</p>	<p>Mae'r risgiau sydd ynghlwm wrth wirfoddoli'n cael eu hadolygu ar hyn o bryd.</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>Amherthnasol</p>
<p>Atodiadau / Appendices: Amherthnasol</p>	
<p>Y Sefyllfa</p> <p>Deallir buddion gwirfoddoli ym maes gofal iechyd yn eang, gyda buddion lles amlwg i'r rhai sy'n gwirfoddoli yn ogystal â staff y GIG, cleifion ac ymwelwyr (gweler: Adding Value: A Strategic Vision For Volunteering In NHS Trusts The King's Fund (kingsfund.org.uk))</p> <p>Mae gan y Bwrdd Iechyd nifer o gynlluniau gwirfoddoli gan gynnwys Gwirfoddolwyr y Robiniaid, Gwirfoddolwyr y Gwasanaeth Croeso a Chymorth, gwirfoddolwyr Caplaniaeth a Gwirfoddolwyr Awdioleg. Mae cydweithwyr wedi gofyn i raglenni gwirfoddoli gael eu sefydlu ar gyfer gwasanaethau penodol, er enghraifft, Mae Gwasanaethau Plant yn awyddus i sefydlu gwasanaeth gwirfoddolwyr yn cynnig cymorth llety i rieni.</p>	

Gwnaeth BIPBC gomisiynu astudiaeth 'Cwmpasu Rhaglenni a Phartneriaethau Gwirfoddoli' i adolygu a meincnodi gwasanaethau gwirfoddoli BIPBC ar draws BIPBC o Fehefin hyd at Hydref 2023 (gweler: tudalen 123 bcuwb.nhs.wales/about-us/committees-and-advisory-groups/board-committees/charitable-funds-committee/cf031023-agenda-compressed-1/). Mae'r adroddiad sy'n deillio o'r cyfan wedi cael ei gyflwyno i'r Tîm Gweithredol. Cytunwyd yn ddiweddarach mai'r Gweithredwr arweiniol ar gyfer Gwasanaeth Gwirfoddoli'r Bwrdd Iechyd fydd y Cyfarwyddwr Gweithredol Nyrsio.

Gwnaeth adroddiad 'Cwmpasu Rhaglenni a Phartneriaethau Gwirfoddoli BIPBC' ganfod nifer o fuddion ynghlwm wrth ymgorffori diwylliant sy'n cofleidio gwirfoddoli yn BIPBC, fel y mae Byrddau Iechyd ac Ymddiriedolaethau GIG eraill wedi'i wneud dros y blynyddoedd diwethaf. Gwnaeth yr adroddiad ddarparu deg argymhelliad i fynd i'r afael â heriau gwirfoddoli BIPBC, gan gynnwys:

- Sefydlu Grŵp Gorchwyl Gwirfoddoli BIPBC
- Datblygu Strategaeth Wirfoddoli BIPBC
- Creu Siarter Wirfoddoli
- Cynllun Blynyddol
- Mabwysiadu swyddogaeth wirfoddoli corfforaethol yn cynnig arolygu ar draws y sefydliad

Mae cynllun i roi'r argymhellion a amlinellir yn yr adroddiad 'Cwmpasu Rhaglenni a Phartneriaethau Gwirfoddoli BIPBC' ar waith ar y gweill. Yn y cyfamser, mae gweithgarwch gwirfoddoli'n parhau ar draws y Bwrdd Iechyd. Mae'r adroddiad hwn yn canolbwyntio ar ddatblygiadau'n ymwneud â Gwirfoddolwyr Croeso a Chymorth, a reolir gan Dîm Cymorth Elusennol y Bwrdd Iechyd.

Cefndir

Ym mis Ionawr 2023, gwnaeth y Gwasanaeth Gwirfoddoli Brenhinol (RVS) gadarnhau y byddai'n rhoi'r gorau i ddarparu cyllid ar gyfer ei gynlluniau gwirfoddoli yn ysbytai BIPBC o fis Mawrth 2023, oherwydd gostyngiad yn ei incwm codi arian. Mae RVS wedi bod yn gyfrifol am y Gwasanaeth Croeso yn Ysbyty Glan Clwyd ac Ysbyty Gwynedd am dros 15 mlynedd.

Roedd dirwyn gwasanaethau RVS i ben yn fygythiad i'r Bwrdd Iechyd gan yr ystyrir bod y Gwasanaeth Croeso yn rhan annatod o'r ysbyty, ond nid yw cyllid craidd erioed wedi bod ar gael i'w gynnal. Cytunwyd y byddai'r Tîm Cymorth Elusennol yn gyfrifol am y gwasanaeth, gan ddefnyddio staff a gwirfoddolwyr sy'n bodoli eisoes.

Un diffyg o fewn 'Gwasanaeth Gwirfoddolwyr Croeso a Chymorth' y Bwrdd Iechyd fu diffyg tegwch o ran y cymorth sydd ar gael ar draws y rhanbarth. Gan fod y treial 12 mis o'r gwasanaeth wedi'i asesu erbyn hyn, mae camau yn cael eu cymryd bellach i fynd i'r afael â hyn, a bydd y gwasanaeth, sydd ond ar gael ar hyn o bryd ar safleoedd aciwt y Gorllewin a'r Canol, yn cael ei ymestyn i'r Dwyrain, a chaiff y posibilrwydd o'i ymestyn i leoliadau gofal sylfaenol ei ystyried.

Roedd ymddeoliad aelod o staff ar y Ddesg Groesawu yn Ysbyty Maelor Wrecsam yn ddiweddar yn her i'r ysbyty, ac roedd yn gyfle i ddatblygu 'Gwasanaeth Gwirfoddolwyr Croeso a Chymorth'. Cytunwyd gan Bwyllgor Cronfeydd Elusennol y Bwrdd Iechyd y caiff y Gwasanaeth Croeso presennol yn Ysbyty Gwynedd ac Ysbyty Glan Clwyd ei gopïo yn Ysbyty Maelor Wrecsam. Bydd Cydlynnydd Gwirfoddoli cyflogedig yn goruchwyllo'r gwasanaeth gwirfoddoli newydd yn yr ysbyty.

Asesiad

Mae'r Gwasanaeth Croeso a Chymorth yn darparu gwirfoddolwyr hyfforddedig ar gyfer y Bwrdd Iechyd i wneud y canlynol:

- Croesawu cleifion ac ymwelwyr
- Cefnogi staff o ran cyfeirio cleifion at eu hapwyntiadau ac at wasanaethau a gweithgareddau gwahanol
- Darparu cymorth ychwanegol ar gyfer ymwelwyr yn yr ysbyty
- Rheoli proses arwyddo i mewn ac allan ar gyfer cadeiriau olwyn yn yr ysbyty
- Delio ag ystod eang o faterion gan gynnwys rhoi gwybod i staff diogelwch os bydd problem yn codi wrth y fynedfa a thynnu sylw staff pan fo angen aelod o staff gofal iechyd ar glaf

Mae'r Gwasanaeth Croeso a Chymorth hefyd yn darparu adnoddau ar gyfer y Bwrdd Iechyd i gynnal gwasanaethau cymorth eraill, yn ôl yr angen.

Mae Cydlynwyr y Gwasanaeth Croeso a Chymorth (0.6 FTE wedi'i sefydlu yn Ysbyty Gwynedd, 0.3 FTE yn Ysbyty Glan Clwyd a chaiff 0.5 FTE ei recriwtio yn Chwarter 4 2024/25) yn goruchwyllo'r broses o recriwtio gwirfoddolwyr; cyfarfodydd a goruchwyllo'r gwirfoddolwyr yn rheolaidd; trefnu'r rota misol, a gweithredu fel cyswllt gyda tîm yr ysbyty ar ran y gwirfoddolwyr. Ar hyn o bryd, mae gan y Gwasanaeth Croeso a Chymorth 66 o wirfoddolwyr cofrestredig.

Ar hyn o bryd, yn ystod wythnos gyfartalog, mae gwirfoddolwyr y Gwasanaeth Croeso yn Ysbyty Gwynedd ac yn Ysbyty Glan Clwyd yn ymateb i dros 1,000 o ymholiadau. Mae'r rhyngweithiadau hyn yn cynnwys ymholiadau cyffredinol, ceisiadau am gyfarwyddiadau a chymorth o ran dod o hyd i berthnasau yn yr ysbyty. Mae adborth gan gleifion a staff yn dangos bod gwerth yn cael ei roi ar y gwasanaeth, gan fod cydweithwyr ac ymwelwyr wedi'i ddisgrifio fel: 'amhrisiadwy', 'yn dangos gwên wych pan oedd angen hynny arnaf', 'gwybodus ac ystyriol'. Disgwylir i nifer y rhyngweithiadau gynyddu bob wythnos i 1,500 yr wythnos erbyn diwedd 2025/26, sy'n hafal i gyfanswm o 78,000 o ryngweithiadau gan wirfoddolwyr y Gwasanaeth Croeso a Chymorth bob blwyddyn.

Costau disgwylidig bob blwyddyn (2025/26):

Disgwylir i gostau blynyddol y gwasanaeth gynyddu yn 2025/26 wrth i'r gwasanaeth gael ei gyflwyno yn y Dwyrain a menter recriwtio newydd yn y Gorllewin a'r Canol.

Mae cyfanswm costau disgwylidig o £66,110 ar gyfer 2025/26 yn cael eu rhannu fel a ganlyn:

- Costau staff Cydlynu Gwirfoddolwyr: £41,170
- Treuliau gwirfoddolwyr £14,940 (cyfartaledd misol disgwylidig o £1,245, treuliau teithio ar gyfer 150 o wirfoddolwyr, am £8.30 yr un)
- Costau gwisgoedd gwaith, recriwtio a chostau ychwanegol £10,000

Mae'n bwysig nodi bod y Tîm Cymorth Elusennol yn bwriadu lansio ymgyrch codi arian parhaus, gyda tharged o £100,000 y flwyddyn, er mwyn codi arian i gynnal hyn a gwasanaethau gwirfoddoli BIPBC eraill o Ebrill 2025.

Mae pob rhyngweithiad a ddarperir gan y Gwasanaeth Croeso yn costio llai na 85c. Mae buddion y rhyngweithiad hwnnw'n sylweddol:

- Mae gwirfoddolwr yn derbyn profiad gwaith gwerthfawr, yn gwella ei hyder neu mae'n rhoi ymdeimlad o gysylltiad ag eraill yn y gymuned

- Nid oes angen i aelod o staff ateb ymholiadau'r cleifion, gan eu galluogi i ganolbwyntio ar eu gwaith heb i bethau eraill dorri ar draws
- Mae claf neu ymwelydd yn cael sicrwydd ble mae angen iddo fynd, neu sut y gallant dynnu sylw at bryder, neu mae'n cael help llaw ar adeg anodd

Risgiau

Gwasanaeth Gwirfoddolwyr Croeso a Chymorth	Disgrifiad o'r risg	Lliniaru Risg	Cyfrifoldeb	Lefel (R: Uchel, A: Canolig, G: Isel) [Blaenoriaeth, tebygolrwydd ac effaith wedi'u hystyried]
Risg 1 W&SVS	Risg capasiti: adnoddau dynol annigonol i reoli'r gwasanaeth gwirfoddoli'n effeithiol.	Cydlynnydd Pwrpasol ar gyfer y Gorllewin a'r Canol, dim ehangu heb gydlynu pwrpasol. Rheoli wedi'i flaenoriaethu gan Swyddog Cyfathrebu, cyfarfodydd bob pythefnos i asesu gofynion y tîm a recriwtio gwirfoddolwyr.	Swyddog Tîm Cymorth Elusennol	
Risg 2 W&SVS	Risg cydymffurfio a rheoleiddio: peidio â chadw at reolau / rheoleiddio	Cydweithio agos â WCVA, Robiniaid BIPBC ac Elusennau GIG eraill am gyngor ac arweiniad.	Cydlynwyr Gwirfoddoli	
Risg 3 W&SVS	Risg ariannol: cyllid annigonol i'w gyflwyno i'r gwasanaeth	Wedi'i gynnwys yng nghyllideb Weithredol yr Elusen. Cyflwyno cynllun codi arian gyda'r nod o adennill costau llawn	Pennaeth Tîm Cymorth Elusennol	

Bydd Gwasanaeth Gwirfoddolwyr Croeso a Chymorth sydd wedi'i reoli'n dda, sy'n effeithiol ac yn deg yn ategu'r gwaith y mae cydweithwyr ar draws y Bwrdd Iechyd yn ei wneud i wella profiad ein dinasyddion o ofal iechyd yng Ngogledd Cymru. Bydd y mewnwelediadau a gasglwyd gan y gwirfoddolwyr a'r cydlynwyr yn y gwasanaeth yn darparu gwybodaeth ddefnyddiol ar gyfer y Bwrdd Iechyd. Mae gan y Gwasanaeth Gwirfoddolwyr Croeso a Chymorth y potensial i gynorthwyo ymgysylltu â chleifion a staff, dau ysgogydd perfformiad a gafodd sylw mawr yn Adroddiad Darzi ar gyflwr y GIG a gyhoeddwyd yn ddiweddar.

Argymhelliad:

Gofynnir i'r Grŵp Cyfeirio Rhanddeiliaid nodi'r wybodaeth a geir yn yr adroddiad hwn ac i godi unrhyw gwestiynau sydd gan aelodau ar y canlynol:

- Cynlluniau ar gyfer gwirfoddoli ar draws y Bwrdd Iechyd yn fwy cyffredinol
- Gwasanaeth Gwirfoddolwyr Croeso a Chymorth

Teitl adroddiad: <i>Report title:</i>	Process of Appointments to the Stakeholder Reference Group
Adrodd i: <i>Report to:</i>	Stakeholder Reference Group
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024
Crynodeb Gweithredol: <i>Executive Summary:</i>	<p>In determining the overall size and composition of the SRG, the Health Board must take account of the:</p> <ul style="list-style-type: none"> • demography of the areas served; • need to encourage and reflect the diversity of the locality, to incorporate different ages, race, religion and beliefs, sexual orientation, gender, including transgender, disability and socio-economic status; • balance needed in both the range of difference in stakeholders and the geographical areas covered, taking particular care to avoid domination by any particular stakeholder type or geographical area; • design and operation of the partnership / stakeholder fora already influencing the work of the Health Board at local community levels; • need to complement, and not duplicate the work of Llais; and the • need to guard against the over involvement of particular stakeholders through their roles across the range of partnership / stakeholder arrangements in place. <p>In terms of membership a report is attached which sets out the proposed process for appointments to the Stakeholder Reference Group. This includes role descriptions and personal specifications for both Members, and Chair of the SRG.</p> <p>Next Steps</p> <p>Members of the SRG are invited to comment on the following:</p> <ul style="list-style-type: none"> • role profile for the member of the SRG • the suggested process and make suggestions in order that this can be developed into a formal process • the Expression of Interest form
Argymhellion: <i>Recommendations:</i>	To seek comments from members and to agree the process in accordance with the Health Board Standing Orders and Terms of Reference for the SRG.
Arweinydd Gweithredol: <i>Executive Lead:</i>	Pam Wenger, Director of Corporate Governance
Awdur yr Adroddiad: <i>Report Author:</i>	Llinos Roberts, Executive Business Manager (Chair's Office)

Pwrpas yr adroddiad: <i>Purpose of report:</i>	I'w Nodi <i>For Noting</i> <input type="checkbox"/>	I Benderfynu arno <i>For Decision</i> <input type="checkbox"/>	Am sicrwydd <i>For Assurance</i> <input checked="" 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 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:	Building and Effective Organisation			
<i>Link to Strategic Objective(s):</i>				
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>				
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>				
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>	N/A			
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	None			
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	None			

<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></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>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>Amherthnasol</p> <p>Not applicable</p>
<p>Camau Nesaf: Gweithredu argymhellion</p> <p><i>Next Steps:</i> <i>Implementation of recommendations</i></p>	
<p>Rhestr o Atodiadau: Tri</p> <p><i>List of Appendices:</i> Appendix 1 – Role Description and Person Specification for SRG Member Appendix 2 – Role Description and Person Specification for SRG Chair Appendix 3 – Confidentiality Agreement</p>	

Process for the Appointment of Members to the BCU Stakeholder Reference Group

1 Role and Purpose – what the SRG is here to do

The BCU Stakeholder Reference Group has been set up so that it brings a broad range of perspectives to scrutinise the work of the Health Board. It will make sure that there is a clear focus on putting citizens, patients, their carers and families at the centre of all the Health Board does. The surrounding community, and stakeholders supporting the SRG, should be clear on its purpose and how the work of the SRG impacts on the Health Board's decision making.

The SRG will provide independent advice and expertise on any aspect of Health Board business. This will be done on behalf of stakeholders who may be affected by the decisions of the Health Board. The SRG will:

- provide early stakeholder engagement and participation for the Health Board when it is shaping its overall strategic direction;
- provide advice and expertise for specific service proposals initially as part of engagement and then prior and after formal consultation;
- scrutinise the Health Board's arrangements relating to patient experience; and
- give feedback on the impact of Health Board plans and decisions on communities and stakeholders

The Group provides a forum to facilitate full engagement and activate debate amongst stakeholders from across the communities served by the Health Board, with the aim of reaching and presenting a cohesive and balanced stakeholder perspective to inform the HB's decision making.

2 The Role of SRG Members and the SRG Chair

The conduct of SRG members is at the heart of ensuring a cohesive, balanced stakeholder perspective is provided to the Health Board. It is important that the individuals carrying out these roles know what is expected from them at meetings and when they are working with others.

2 Membership of SRG

SRG membership is made up of a range of stakeholders drawn from across the Health Board area. These stakeholders represent a range of bodies and groups including statutory organisations we work in partnership with, communities, provider organisations, and special interest groups which reflect protected characteristics from the Equality Act and other relevant groups. We aim to ensure our membership reflects the diversity, demographics and geography of the community we serve.

Members: There will be no minimum or maximum requirement regarding membership size. However, in determining the number of members, the Board will take account of the need to ensure the Stakeholder Reference Group's size is optimal to ensure focused and inclusive activity, and that we complement, and not duplicate, the work of Llais. The term of office for members is a maximum of 5 years (3 + 2 years). The role description and person specification for this role is attached at Appendix 1.

Current membership list is as follows:

Third Sector	6 places
Independent Sector	3 places
One Voice Wales (Town / Community Councils)	1 place
Housing Associations	1 place
Carers	1 place
Local Authorities	6 places
Disability / Equality	1 place
North Wales Regional Equality Network	1 place
Hospices	1 place
LGBTQ	1 place
TOTAL	22

The **Chair** will normally be selected from within the elected members of the Group and agreed nomination will be subject to consideration by the Board. Expressions of Interest will be sought from within the membership and the members of the Group will vote for their preferred candidate. Once approved by the Board, the recommendation will require the approval and agreement of the Cabinet Secretary for Health and Social Services. The Chair will be an Associate Member of the Board. The term of office as Chair will be for up to 2 years, with the ability to stand for a further year, in line with the member's term of office as a member of the SRG. The individual can remain in office for the remainder of their term as a member of the SRG after the term of appointment as Chair has ended. The role description and person specification for this role is attached at Appendix 2.

The **Vice Chair** will be selected by the Group as above, and will require consideration of the Board. The Vice Chair will deputise in the Chair's absence as an Associate Member of the Board. The term of office as Vice Chair will be for up to 2 years, with the ability to stand for a further year, in line with the member's term of office as a member of the SRG. The individual can remain in office for the remainder of their term as a member of the SRG after the term of appointment as Chair has ended.

SUGGESTED PROCESS FOR VACANCIES

1. Where a vacancy arises for a new member of the SRG, an invitation letter will be sent to relevant groups and posted on the Health Board's social media sites seeking their nomination.
2. A role profile has been developed (Appendix 1) for the members of the SRG to consider and this will be circulated as part of the nomination process.
3. In circumstances whereby separate requests are made to become a member of the SRG, the Chair of the SRG, in discussion with other members, will consider if there is need for representation from the particular group.
4. Following consideration by the Chair, if it is deemed that there is an identified need in terms of the stakeholder group, a process of nomination for that particular group will be initiated, in the same way as when there is a vacancy.
5. The Board may seek independent expressions of interest to represent a key stakeholder group where there is a view that formal bodies or groups are not already established or operating within an area that may represent the interests of these stakeholders on the Stakeholder Reference Group.

Appendix 1

Betsi Cadwaladr University Health Board Stakeholder Reference Group (SRG) Member Role Description

Aim of role

- To represent a defined stakeholder body or group, who have an interest in, or whose own role and activities may be impacted by the decisions of Betsi Cadwaladr University Health Board (the Health Board).

Accountability

- You are accountable, through the SRG Chair, to the Health Board for your performance as a member of the Group.
- You are also accountable to the wider sector who have elected you (*****) or your nominating organisation for the way in which you represent the views of your organisation / equality / specialist interest at the SRG.
** Note your role on the SRG is as an elected individual not the organisation you work for.*
- You have a formal role as an SRG member and the Chair will invite new members as part of their induction to meet with them to discuss this role description.
- It is expected that if you resign, you notify both the Chair and your relevant electing or nominating body.
- Your first term of office ends after an initial period of three years, and can be followed by a further 2 years in office, however you cannot be an elected member for more than 5 years consecutively. It is proposed that the Chair of the SRG will speak directly to the member to agree whether a second term of office will be offered / undertaken.
- All members need to declare if they take on a different role within their nominating organisation which affects their ability to be a member of the SRG, or their ability to represent the views of their organisation / equality / specialist interest group at the SRG. Members will therefore be requested to complete an annual declaration confirming their eligibility to continue as a member of the SRG.

Responsible to:

The SRG Chair

Time commitment:

Usually no more than 6 meetings per annum, of approximately 3 hours duration.

Term of Office

- No longer than 3 years in any one term. Members can be re-appointed but may not serve a total period of more than 5 years consecutively.

Key working relationships

- To work closely with the SRG Chair.
- Wherever possible SRG members should attend the Third Sector Health and Social Care Network, or other relevant mechanisms, to maintain good working relationships and gather views from stakeholders.
- To maintain good working relationships with the Health Board, local and community partnerships and other key stakeholders who do not form part of the SRG membership.

Role

You will be expected to:

- Regularly commit to the meetings of the SRG.
- Represent your nominating organisation or equality / specialist interest group at SRG meetings.
- Express opinions clearly and allow others to express theirs.
- Share responsibility for the recommendations of the SRG with other members.
- Promote the work of the SRG in the community it represents.
- Undertake appropriate induction and development training identified by the SRG Chair or Health Board.

Key tasks

- Meaningfully engage with the meeting in relation to your special interest group or organisation.
- Suggest ways in which the Health Board could better engage with your special interest group or organisation.
- Engage with and contribute fully in SRG activities, accepting responsibility to share work load with other members where identified and completing tasks to set timescales.
- Encouraged to attend a Health Board to observe the business. Please let the SRG Chair know as they will then ensure introductions and welcome.

Remuneration

SRG members are not paid. However, you are entitled to claim out of pocket expenses, ie, mileage and public transport costs, in accordance with the Health Board policy.

Stakeholder Reference Group (SRG) Member Personal Specification

All SRG members will be required to demonstrate the following qualities:

Commitment

- A commitment to the work of the SRG, believing in its purpose and functions.
- Reliable, punctual and professional in attendance and conduct at meetings.
- Willingness to participate in the continuing development of the SRG.
- Compliant with the terms and conditions of the appointment.

Attitude and Approach

- Respectful and appreciative of the contribution that others make
- Welcoming and encouraging towards people from different backgrounds who may bring with them different opinions and perspectives.
- Sensitive, diplomatic and tactful in dealing with others.
- Flexibility in approaching complex problems and issues.
- Willing to learn new information and contribute to solving problems.

Skills and Experience

- A current connection to the nominating group or body you are representing at the SRG.
- Ability to work as part of a team.
- Experience of dealing with confidential issues.
- Ability to consider reports and other documentation and contribute to discussion and decisions.

Betsi Cadwaladr University Health Board

Stakeholder Reference Group (SRG) Chair Role Description

Aim of role

- To ensure the effective operation of the SRG as a coherent Advisory Body, developing positive and professional relationships between the SRG, the Health Board (HB) and its Chair and Chief Executive.

Accountability

- As Chair of the SRG, you will be appointed as an Associate Member of the Health Board. You will be accountable for the conduct of your role as Associate Member to the Cabinet Secretary, through the Health Board Chair.
- You are also accountable to the Health Board for the conduct of business in accordance with the governance and operating framework set by the Health Board.

Responsible to:

- Betsi Cadwaladr University Health Board Chair

Time Commitment

- Usually no more than six SRG meetings, and eighteen Health Board Meetings / Development Sessions per annum, with other related meetings as required.

Term of Office

- The Chair's Term of Office shall normally be for a period of a minimum of two years, with the ability to stand for a further year in line with the member's term of office as a member of the SRG. You may remain in office for the remainder of your term as a member of the SRG after your term of appointment as Chair has ended.

Key Working Relationships

- Health Board Chair, Chief Executive and Director of Corporate Governance.
- Lead Executive for SRG (Director of Partnerships, Engagement and Communications), management support, and secretariat.
- SRG members and Health Board members
- The Health Board's other Advisory Groups and Committees
- Local and community partnerships and other key stakeholders who do not form part of the SRG membership.

Role

You will be expected to:

- Chair SRG meetings
- Attend meetings of the Health Board, providing advice on behalf of the SRG where appropriate.
- Report regularly to the Health Board on SRG activities and submit an annual report on SRG activity.
- Work with the Health Board to maintain a strong SRG membership

- Promote the work of the SRG in the community it represents
- Undertake appropriate induction and development training identified by the Health Board

Key tasks

- Lead the SRG to provide a forum to facilitate full engagement and active debate amongst stakeholders from across the HB area.
- Provide formal feedback to the SRG from the Health Board meetings
- Aim to reach and present a cohesive and balanced stakeholder perspective to inform the Health Board's decision making, this will include the provision of:
 - Advice on specific service proposals prior to formal consultation
 - Feedback on the impact of LHB operations within the community
 - Early stakeholder engagement and involvement for our LHB when it is shaping its overall strategic direction.
 - Casting vote on decisions will remain with the Chair.

Remuneration

The SRG Chair is not a paid role. However, you are entitled to claim out of pocket expenses, ie, mileage and public transport costs, in accordance with the Health Board policy.

Stakeholder Reference Group (SRG) Chair Personal Specification

As SRG Chair, you will be required to demonstrate the following qualities:

Commitment

- A commitment to the work of the SRG, believing in its purpose and functions.
- Reliable, punctual and professional in attendance and conduct at meetings.
- Willingness to participate in the continuing development of the SRG and the Health Board.
- Compliant with the Terms and Conditions of the appointment.

Attitude and Approach

- Ready to develop positive working relationships with others.
- Respectful and appreciative of the contribution that SRG members make.
- Welcoming and encouraging towards people from different backgrounds who may bring with them different opinions and perspectives.
- Sensitive, diplomatic and tactful in dealing with others.
- Flexibility in approaching complex problems and issues.
- Willing to learn new information and contribute to solving problems.

Skills and Experience

- Experience of leading programmes of work and people
- Experience of stakeholder engagement
- Ability to analyse complex information, collate views and develop concise reports.
- Ability to influence and be persuasive.
- Ability to work as part of a team.
- Experience of dealing with confidential issues.

Confidentiality Declaration

NB This declaration applies to elected third sector representatives and those representing collective groups. Representatives of statutory organisations are bound by the confidentiality clauses within their employment contracts.

Duty of Confidentiality

An essential aspect of good governance is that the Betsi Cadwaladr University Health Board Stakeholder Reference Group (SRG) members maintain confidentiality in respect of all Advisory Group matters and discussions. Other than as required by law, strict confidentiality will be observed and all discussion and records will remain confidential.

Confidentiality forms the basis of trust and encourages an open and honest forum for discussion. SRG members have a right to freely express their views without fear of being named outside the meeting as taking a particular position. Once a decision is made it is a decision of the group as an entity, whether you personally agree with the decision or not.

The Stakeholder Reference Group will hold meetings where participants are free to use the information received, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, should be revealed.

Betsi Cadwaladr University Health Board Stakeholder Reference Group Confidentiality Agreement

I understand that, in performing my duties as an elected member representative of the BCU SRG, I may have access to discussions and / or information and / or records which are confidential. This includes discussions or information related to parties or individuals.

I confirm that I will treat all such information and conversations as confidential.

I undertake not to disclose any such information to any person, who isn't specifically authorised by the SRG to receive the information, nor use it to my own advantage, or that of a third person. I understand that if I don't know or am uncertain if the information is confidential, I will seek clarification from the Chair of the SRG who may seek advice from the Health Board.

I acknowledge that, if I breach any of my obligations under this Confidentiality Agreement, the SRG may take any action it considers appropriate against me in respect of such breach and may remove me from the Group. Such removal shall be by a majority vote of the Group.

I understand that, even if removed from the Group, these confidentiality obligations still apply.

I have read, understand, and agree to abide by all of the terms of this agreement as a condition of my service as a Stakeholder Reference Group member.

Signed: _____

Date: _____

MYNEGIANT DIDDORDEB / EXPRESSION OF INTEREST

Cadeirydd ac / neu Is-Gadeirydd (*nodwch os gwelwch yn dda*)

Chairman and / or Vice Chair – *please indicate*

Grŵp Cyfeirio Rhanddeiliaid / Stakeholder Reference Group

ENW / NAME	
SEFYLLFA AR Y GRŴP / POSITION ON THE GROUP	
CYNRYCHIOLI / REPRESENTING	
DYDDIAD YMUNO'R GCR / DATE JOINED SRG:	

Bywgraffiad / Biography:

Datganiad enwebu, sy'n nodi rhinweddau rydych chi'n credu bod yn rhaid i chi gael i cael eich dewis fel Gadeirydd / Is-gadeirydd yr GCR

Nomination statement, setting out qualities you believe you have to be selected as Chair / Vice Chair of the SRG

I'w ddychwelyd i llinos.roberts3@wales.nhs.uk gan

To be returned to llinos.roberts3@wales.nhs.uk by



<p>Teitl adroddiad: Report title:</p>	<p>Values and Behaviours Framework</p>		
<p>Adrodd i: Report to:</p>	<p>Stakeholder Reference Group</p>		
<p>Dyddiad y Cyfarfod: Date of Meeting:</p>	<p>Monday, 02 December 2024</p>		
<p>Crynodeb Gweithredol: Executive Summary:</p>	<p>In September 2023, the Board approved the paper titled Organisational Development: Culture, Leadership and Engagement. In September 2024 the Board received a report outlining the progress to date across all nine areas of focus. This report provides, for decision, the outcome of the work undertaken in relation to the development of a Values and Behaviours Framework, following significant engagement and co-design.</p> <p>The final draft review has been undertaken by People and Culture Committee and informally the wider Board. Given the role of the Board is leading culture, the final steps of the process of developing the Values and Behaviours Framework has looped back to the Board itself and the Committee charged with a focus on People and Culture. The discussion enabled an understanding of the approach to development and co-design taken, and the final draft for consideration formally at the Board in November. The detail is provided below, and a toolkit will be developed with further resources and materials during the implementation phase. In summary, the Values and Behaviours presented are:</p> <ol style="list-style-type: none"> 1. Compassion <ul style="list-style-type: none"> - We will take care of each other - We will provide a good place to work, learn and succeed 2. 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 3. Respect <ul style="list-style-type: none"> - Everyone counts - We work together and appreciate individual differences - We say thank you and well done 		
<p>Argymhellion: Recommendations:</p>	<p>The Stakeholder Reference Group is asked to DISCUSS and NOTE the progress of the work.</p>		
<p>Arweinydd Gweithredol: Executive Lead:</p>	<p>Chief Executive, supported by Deputy Director of People</p>		
<p>Awdur yr Adroddiad: Report Author:</p>	<p>Head of Culture Development</p>		
<p>Pwrpas yr adroddiad:</p>	<p>I'w Nodi <i>For Noting</i></p>	<p>I Benderfynu arno <i>For Decision</i></p>	<p>Am sicrwydd <i>For Assurance</i></p>

Purpose of report:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Lefel sicrwydd: Assurance level:	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 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>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:</p>				
Cyswllt ag Amcan/Amcanion Strategol:	Strategic Objective 3: Creating Compassionate Culture, Leadership and Engagement			
Link to Strategic Objective(s):				
Goblygiadau rheoleiddio a lleol:	Indirect – these values will form part of the expected standards of behaviour			
Regulatory and legal implications:				
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>				
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>				
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>				
Goblygiadau ariannol o ganlyniad i roi'r argymhellion ar waith <i>Financial implications as a result of implementing the recommendations</i>	No recommendation results in a financial decision or implication			
Goblygiadau gweithlu o ganlyniad i roi'r argymhellion ar waith <i>Workforce implications as a result of implementing the recommendations</i>	Approving the Values and Behaviours Framework will impact on the approach taken to recruitment and the standards of behaviour within the organisation			
Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori	Feedback following engagement has been included within the main report			

Feedback, response, and follow up summary following consultation	
Cysylltiadau â risgiau BAF: (neu gysylltiadau â'r Gofrestr Risg Gorfforaethol) Links to BAF risks: (or links to the Corporate Risk Register)	CRR24-01 CRR24-16
Rheswm dros gyflwyno adroddiad i fwrdd cyfrinachol (lle bo'n berthnasol) Reason for submission of report to confidential board (where relevant)	N/A
Camau Nesaf: Gweithredu argymhellion Next Steps and implementation of recommendations: The implementation plan relating to the Values and Behaviours Framework will be presented to the Executive Team and onward to the People and Culture Committee. Monitoring will also take place through these mechanisms.	
Rhestr o Atodiadau:	

VALUES AND BEHAVIOURS FRAMEWORK

1.0 INTRODUCTION

In September 2023, the Board approved the paper titled **Organisational Development: Culture, Leadership and Engagement**. In September 2024 the Board received a report outlining the progress to date across all nine areas of focus. This report provides, for decision, the outcome of the work undertaken in relation to the development of a Values and Behaviours Framework, following significant engagement and co-design.

It is within the Boards responsibility to develop and set culture. The ‘tone from the top’ is evidenced as critical to the culture that exists across the organisation. Developing an organisational culture designed to deliver the purpose and strategic objectives of the organisation is key. In developing this work therefore, there has been a clear line of sight linking the development of the Values and Behaviours Framework to the organisations’ purpose which is ‘to improve health and provide excellent care’ and the organisations Strategic Objectives:



1. Building an effective organisation



2. Developing strategy and long-lasting change



3. Creating compassionate culture, leadership and engagement



4. Improving quality, outcomes and experience



5. Establishing an effective environment for Learning





2.0 APPROACH TO DEVELOPING THE VALUES AND BEHAVIOURS FRAMEWORK

The approach to developing the Values and Behaviours Framework has been designed to be as inclusive as possible. Learning from what has worked and not worked from the past within the health board has meant that a significant emphasis has been placed on co-designing the values and behaviours. Detail of the genesis of previous values and separate behaviours approaches are included as appendix 1. In relation to the contemporary work, a five-stage process has been developed and implemented:

1. *Review of the Evidence* relating to compassionate cultures, given the Board has already stated its intent to commit to this approach. The work of Professor Michael West, along with wider contributors in the Kings Fund, have informed practical resources for understanding and developing compassionate culture.

2. *Stage 1 insights and feedback.* This included work commenced in summer 2023 and concluding in June 2024. The initial draft Framework was developed from these insights.

<p>Thematic analysis from the Independent Reviews carried out as part of Special Measures provided information on culture and areas for development.</p>	<p>Stronger Together engagement events carried out in Summer 2023 – feedback on current culture, values and behaviours were analysed and themed.</p>	<p>Leadership (& People Managers) Conference June 2024 – conversational spaces were held with participants asking specific questions on our values and behaviours.</p>
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Organisational Values	Organisational Behaviours	Behaviours for All	Behaviours for People Managers	Behaviours we Don't Want
Compassion 	<ul style="list-style-type: none"> ▪ We are Kind ▪ We Listen ▪ We show Empathy ▪ We take Care of each Other 	<ul style="list-style-type: none"> • I am patient and considerate of others • I take time, even if busy to understand others point of view • I am attentive and think about what others need • I take care of my own wellbeing and support others to do so too 	<ul style="list-style-type: none"> • I care for my team and colleagues' wellbeing, showing understanding and compassion • I listen with curiosity, proactively listen to suggestions and address areas of concerns • I am open to hear worries and concerns and working together to resolve them • I am attentive to my teams needs and motivations, I am civil, courteous and polite 	<ul style="list-style-type: none"> • I ignore people's feelings, I am rude and dismissive of others • I don't give people a chance to explain, I talk over people and I'm disruptive • I ignore concerns that people raise • I ignore and walk by when people need support
Respect 	<ul style="list-style-type: none"> ▪ We are Open and Honest ▪ We recognise Achievement ▪ We Value Difference ▪ We have Integrity 	<ul style="list-style-type: none"> • I am aware of my impact on others and act on feedback • I celebrate others' achievement • I appreciate that people have differing needs and take them into consideration • I am truthful and honest 	<ul style="list-style-type: none"> • I communicate openly, respectfully and professionally • I celebrate achievements and say 'thank you' • I take into account and respect diverse views for better outcomes • I challenge inappropriate behaviours or language 	<ul style="list-style-type: none"> • I speak negatively of others and hold grudges. • I am closed to feedback about myself • I ignore my colleagues/teams achievements or take the credit myself • I make people feel belittled or judged
Everyone counts 	<ul style="list-style-type: none"> ▪ We put People First ▪ We work Together ▪ We are Inclusive ▪ We are Professional 	<ul style="list-style-type: none"> • I prioritise actions that will improve the service and promote safety • I am a team player, interacting, co-operating and offer help • I am approachable and welcoming to everyone whoever they are • I lead by example by modelling the values and behaviours of the organisation 	<ul style="list-style-type: none"> • I am visible, approachable and available to my team, colleagues and service users • I share ideas and knowledge to develop best practice for the benefit of all • I consistently act in a positive and inclusive manner and value all staff as individuals • I lead by example, influencing and inspiring confidence by maintaining professional standards 	<ul style="list-style-type: none"> • I ignore safety and poor standards of care • I am not supportive of my colleagues • I am only concerned about my own needs, ambitions and goals • I dismiss differing views or opinions without discussion, I isolate and avoid people
Innovation & Positivity 	<ul style="list-style-type: none"> ▪ We constantly Improve ▪ We Strive to be the Best ▪ We Empower ▪ We are Open to Change 	<ul style="list-style-type: none"> • I frequently ask for and act on feedback to improve what I do from day to day • I suggest improvements to the way we do things. I am positive and have a can-do attitude • I ensure everyone's voice is heard and is considered in decision making • I challenge the status quo in a constructive way 	<ul style="list-style-type: none"> • I define and lead change and continuous improvement • I develop myself as a manager and leader to the best I can be • I develop others so that they can bring their best self to work • I share skills and knowledge in order to encourage others to innovate and improve 	<ul style="list-style-type: none"> • I resist change or improvements • I focus on problems rather than solutions • I sabotage change • I make changes to suit my own agenda not for the greater good of the service user or organisation

3. *Stage 2 Feedback on initial draft Framework.* Extensive engagement was held across the organisation to help shape the Framework, including:

- 28 meetings ranging from –
 - IHC/Pan and Corporate Services Senior Leadership Teams;
 - Local People & Culture Committees;
 - Workforce Partnership Group;
 - Local Partnership Forum
- Health Board People & Culture Committee
- Executive Team
- Stakeholder Reference Group
- Health Board workshop
- All members of the Culture & Leadership Design Group have cascaded out to their teams and main contacts
- 3 Roadshows at areas of high footfall in the main District General Hospitals
- 7 Microsoft Teams drop-in sessions with 47 staff attending

The feedback from the engagement events was collated into a **'You Said We Did'** format, this was posted on BetsiNet and shared in all presentations to ensure staff could see how the feedback had been used to shape the second iteration of the framework, as outlined below.

You said	We did
<ul style="list-style-type: none"> There was duplication in some of the values and behaviours 	<ul style="list-style-type: none"> We re-looked at the values and behaviours and removed any duplication. This involved condensing values to three, whilst being mindful not to lose any of the behaviours (these have been added under other values).
<ul style="list-style-type: none"> The document was too busy and wordy 	<ul style="list-style-type: none"> By removing duplication as noted above, the framework was condensed.
<ul style="list-style-type: none"> The language needed simplifying 	<ul style="list-style-type: none"> Statements have been simplified and shortened.
<ul style="list-style-type: none"> Whilst the behaviours we don't want, are important and should not be lost, they should not be included on the front page as it could be seen as providing a negative view. 	<ul style="list-style-type: none"> The behaviours we don't want to see, have been taken off the front page of the document but will be included in a toolkit to support embedding the values and behaviours.
<ul style="list-style-type: none"> Accountability needs to feature within the framework 	<ul style="list-style-type: none"> Accountability is clearly featured with specific behaviours relating to holding ourselves and others to account. The PADR process will be reviewed, to ensure evidence is provided on behaviours.
<ul style="list-style-type: none"> What support will staff receive to develop competence and confidence to address any unacceptable behaviours? 	<ul style="list-style-type: none"> A toolkit to support embedding the values and behaviours will be produced. The toolkit will include signposting to workshops available to develop competence and confidence; signposting to additional support /policies and resources; local case studies and more. (There will be opportunities to be involved in the development of this toolkit).
<ul style="list-style-type: none"> Open and honest communication is not featured heavily enough in the framework 	<ul style="list-style-type: none"> Due to the overwhelming feedback, there is a value dedicated to openness which embodies this.
<ul style="list-style-type: none"> Learning & development is not featured heavily enough in the framework 	<ul style="list-style-type: none"> These behaviours have now been included across the framework.

4. Stage 3 Feedback on second draft Framework. The revised draft reduced the number of values and further simplified the wording. In terms of engagement, this phase involved those who had taken the time to inform the first iteration and furthermore reached out across the organisation using surveys as well as roadshows, aiming to reach as many staff as possible.

Organisational Values	Organisational Behaviours	Behaviours for All	Behaviours for People Managers
Compassion	<ul style="list-style-type: none"> We take care of each other 	<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 teams needs
Openness	<ul style="list-style-type: none"> We are honest We are accountable We empower each other 	<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 everyday I share ideas and knowledge for everyone's benefit I am open to being held to account on 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 value individual difference 	<ul style="list-style-type: none"> I recognise that people's needs are different and respect these difference 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 self to work I ensure everyone's voice is heard and is considered in any change and/or improvement

- All Senior Leadership Teams, Partnership groups and forums engaged with during the first draft have received an email update with the second draft for circulation to teams and encouragement to provide feedback.
- All leadership and management course participants have had the second draft to cascade and provide feedback.
- Executive Team discussion and feedback
- People & Culture Committee update and discussion
- Stakeholder Reference Group
- All members of the Culture & Leadership Design Groups cascaded to their teams
- Local Partnership Forum
- Workforce Partnership Forum
- Organisational Learning Forum
- 13 Roadshows at the following areas: Bryn Beryl & Alltwn Community Hospitals; Llandudno & Denbigh Hospitals; Ysbyty Wrexham Maelor; Ysbyty Glan Clwyd; Ysbyty Gwynedd; Hergest, Ablett and Heddfan Mental Health Units; Ty Llywelyn Mental health Unit; Holywell & Chirk Community Hospitals.
- 9 Microsoft Teams sessions held
- QR code available on leaflets and BetsiNet – to encourage as much feedback as possible
- Padlet survey for feedback open across the organisation.

A summary of the feedback is included in the table below.

You said	We did
<ul style="list-style-type: none"> • Some comments in relation to ensuring partners are included in the framework 	<ul style="list-style-type: none"> ➤ This will be part of the over-arching theme of the how the final framework is displayed i.e. relevant to staff, patients and partners.
<ul style="list-style-type: none"> • A few comments in relation to uncertainty of who 'People Managers' are 	<ul style="list-style-type: none"> ➤ For consistency, the term 'People Managers' ties into other initiatives, such as the newly launched People Manager Forum.
<ul style="list-style-type: none"> • The need to provide support and training for staff to ensure accountability of the framework and how we embed it 	<ul style="list-style-type: none"> ➤ A toolkit that will be provided to support the framework will include information and signposting to support staff
<ul style="list-style-type: none"> • There were suggestions to make changes specific to certain staff groups etc 	<ul style="list-style-type: none"> ➤ The current behaviours are high-level to ensure that they are relevant for everyone
<ul style="list-style-type: none"> • A comment was made around elaborating on behaviour statements 	<ul style="list-style-type: none"> ➤ We aim to ensure the framework is easy to understand and high-level, the toolkit will contain further information to support.
<ul style="list-style-type: none"> • Suggestion under the 'Respect' section, under behaviours of Managers, the sentence which starts with 'I develop and support others so that they can bring their best self to work' to add in 'realise their potential.' 	<ul style="list-style-type: none"> ➤ This has been taken into account and the wording 'realise their potential' added in, to provide a balanced focus on organisation and staff.

3.0 THE VALUES AND BEHAVIOURS FRAMEWORK

The final draft review has been undertaken by People and Culture Committee and informally the wider Board. Given the role of the Board is leading culture, the final steps of the process of developing the Values and Behaviours Framework has looped back to the

Board itself and the Committee charged with a focus on People and Culture. The discussion enabled an understanding of the approach to development and co-design taken, and the final draft for consideration formally at the Board in November. The detail is provided below, and a toolkit will be developed with further resources and materials during the implementation phase. In summary, the Values and Behaviours presented are:

1. Compassion

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

2. Openness

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

3. Respect

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

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

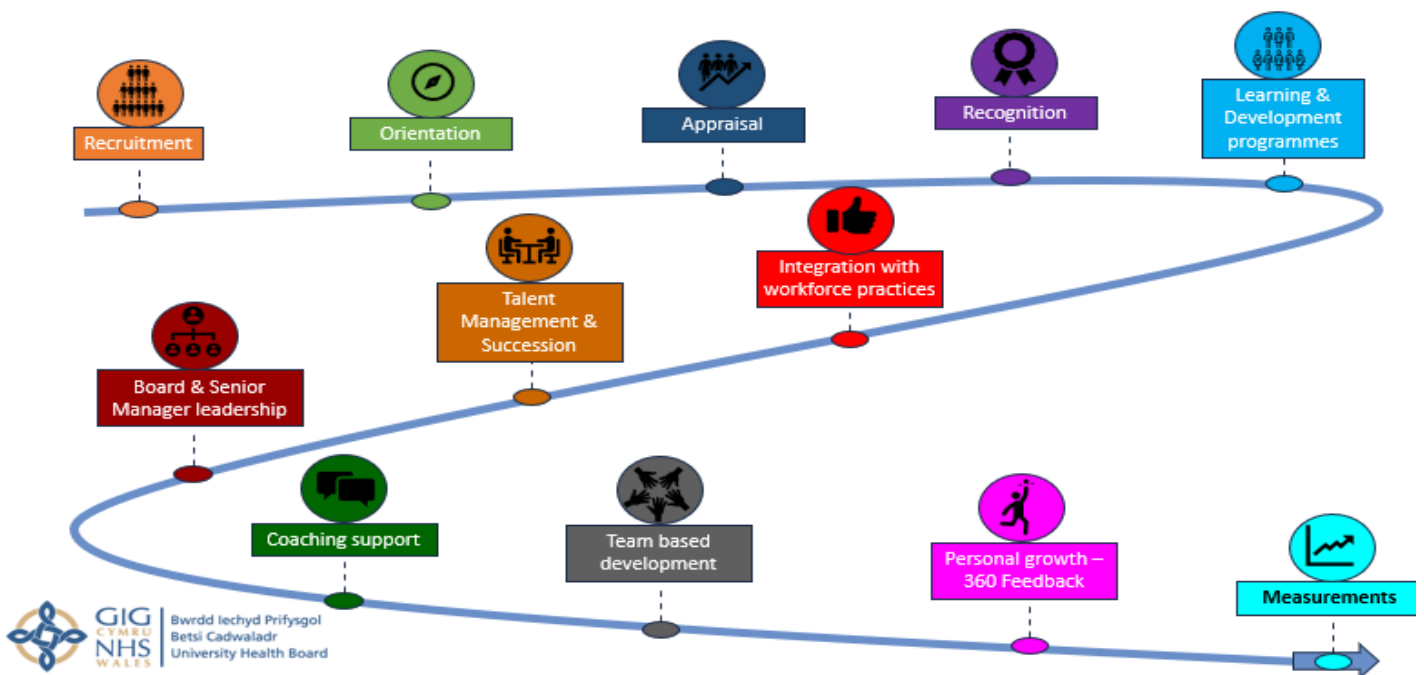
The key part of having a Values and Behaviours Framework is to enable these to be part of everyday life at the health board. Once the final draft has been approved by the Board, there is a need therefore to draw in specific expertise in helping to create 'visuals' that are engaging, attractive and memorable which promotes that values and Behaviours that should be experienced by staff, patients and partners.

4.0 IMPLEMENTATION PLAN

A draft Implementation Plan, including the development of a Values and Behaviours Toolkit, will be led by the Deputy Director of People, reporting through to the Executive Team and then onward to the People and Culture Committee. The Plan is expected to be extension as the Values and Behaviours Framework will be significantly rooted in policies, recruitment and retention practices, engagement mechanisms, team working and partnership working, clinical care, patient experience; in essence in all aspects of the health board in undertaking its core purpose.

Engaging the Culture & Leadership Design Group will be key, as will an ongoing engagement with staff and the organisations new Culture Change Leaders, along with all managers and leaders. Already, this work has been highlighted in response letters to complaints relating to staff attitudes and behaviours and how this significantly impacts the quality of care for our patients and service users.

Some initial areas for implementation are shown below:



5.0 CONCLUSION AND RECOMMENDATION

The Values and Behaviours Framework that has been developed is a significant step forward in the work to develop a compassionate culture, reflecting the alignment to the organisations core purpose and strategic objectives. It marks a key point in setting the standard for everyone in the organisation, regardless of role, and will be embedded into everyday practice.

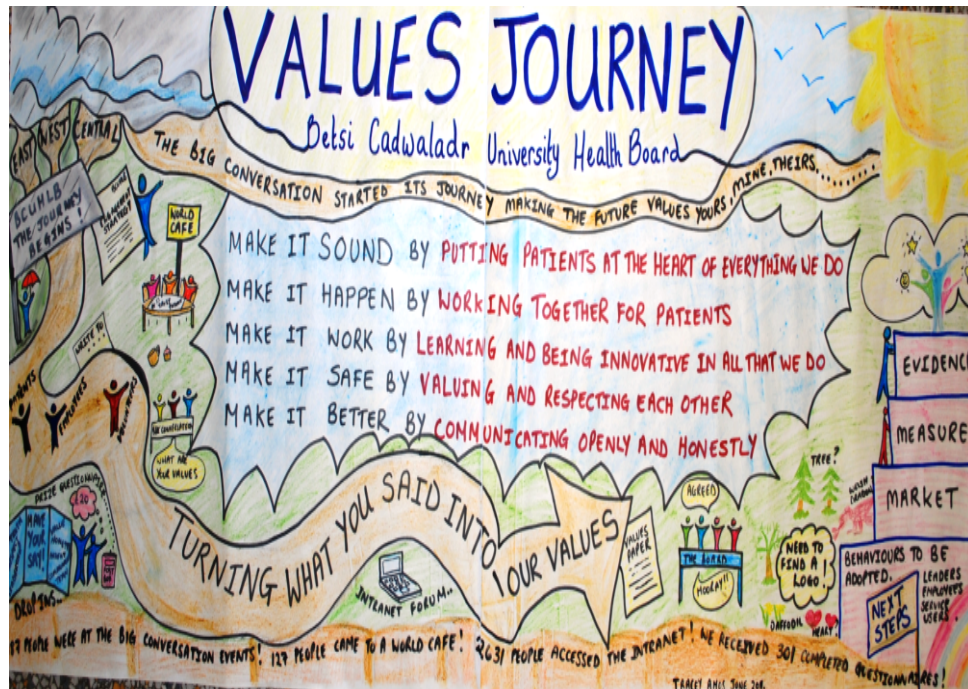
An implementation plan will be critical to its successful delivery, and learning from the past, the way in which the values and behaviours have been co-designed should set the standard for how they become central in all aspects of the health boards work going forward.

The Executive Team and People and Culture Committee will monitor the development and delivery of the implementation plan, including the measurement and reporting of impact.

The Board is asked to APPROVE the Values and Behaviours Framework.

APPENDIX 1: Background to Existing Values 2011 – to date

Our current values were co-produced with staff through various engagement methods in 2011. The journey diagram below shows the values that were created at that time.



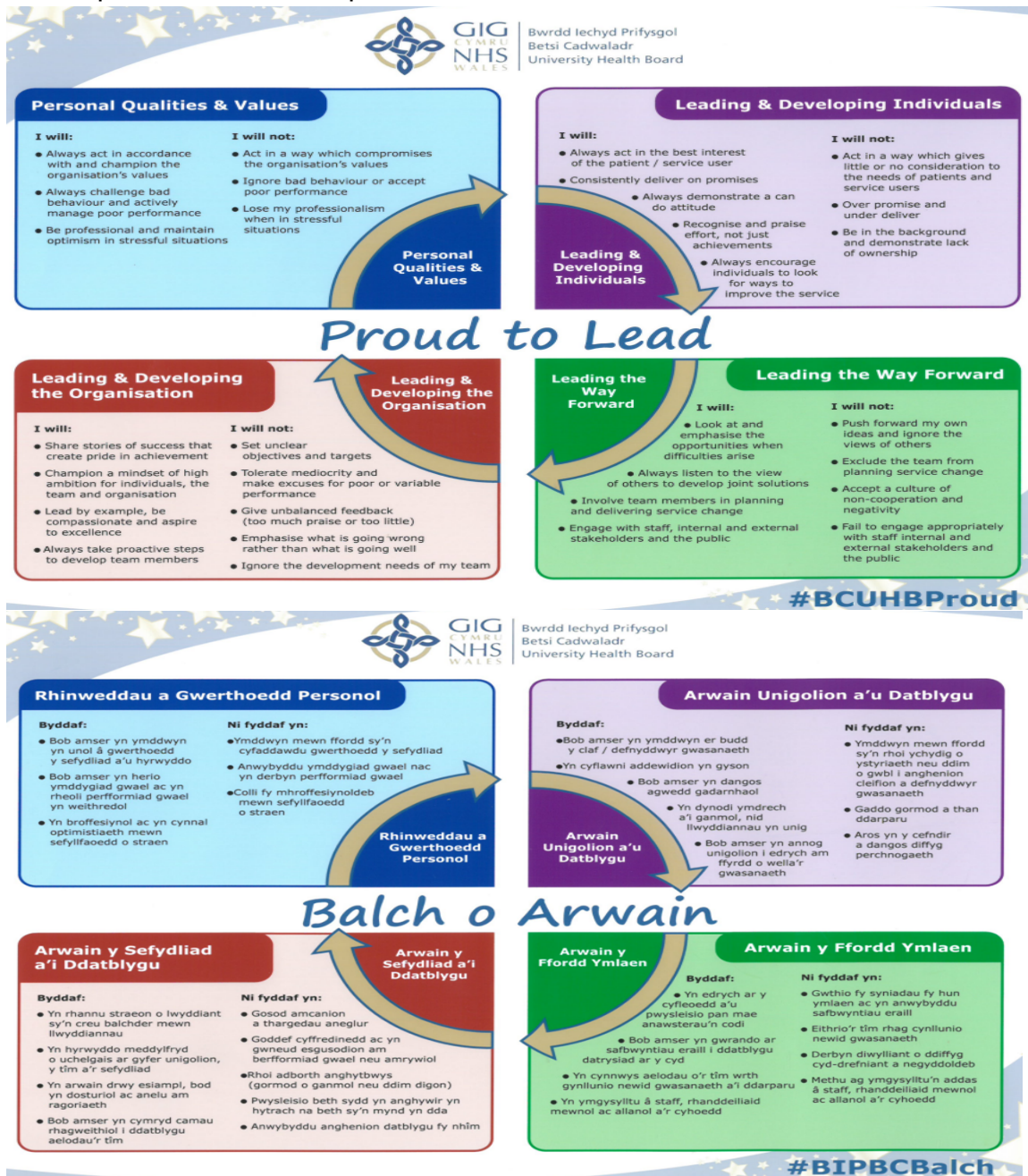
In 2013 there was a small refresh of the values to make them slightly more succinct (as is seen below):

<p>Ein Pwrpas</p> <ul style="list-style-type: none"> ★ Gwella iechyd a chynig gofal ardderchog <p>Ein Gwerthoedd</p> <ul style="list-style-type: none"> ★ Rhoi cleifion yn gyntaf ★ Gweithio gyda'n gilydd ★ Gwerthfawrogi a pharchu ein gilydd ★ Dysgu ac arloesi ★ Cyfathrebu'n agored ac yn onest <p>#BIPBCBalch</p>	<p>Our Purpose</p> <ul style="list-style-type: none"> ★ To improve health and deliver excellent care <p>Our Values</p> <ul style="list-style-type: none"> ★ Put patients first ★ Work together ★ Value and respect each other ★ Learn and innovate ★ Communicate openly and honestly <p>#BCUHB Proud</p>
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 Betsi Cadwaladr
 Betsi Cadwaladr
 University Health Board

The Proud to Lead behavioural framework was developed in 2016 and co-produced following engagement events as part of the development of an Engagement Strategy in response to Special Measures requirements.



Colleagues who have been in the organisation for some time have reflected that the Proud to Lead Framework was not embedded thoroughly enough in the organisation and therefore failed to have any gravitas or long term impact.

Teitl adroddiad: <i>Report title:</i>	Director's Report			
Adrodd i: <i>Report to:</i>	Stakeholder Reference Group			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024	Rhif eitem agenda: <i>Agenda Item number:</i>		
Crynodeb Gweithredol: <i>Executive Summary:</i>	The Director's Report provides an overview of key activity, progress and issues of the Health Board by the Senior Responsible Officer for the SRG. It covers the period June 2024 to the end of November 2024. Some of the content is further expanded in other items on the agenda.			
Argymhellion: <i>Recommendations:</i>	The Stakeholder Reference Group is asked to note the report.			
Arweinydd Gweithredol: <i>BCUHB Lead:</i>	Helen Stevens-Jones Director of Partnerships, Engagement and Communications			
Awdur yr Adroddiad: <i>Report Author:</i>	Helen Stevens-Jones Director of Partnerships, Engagement and Communications			
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 checked="" 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 checked="" 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:				
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: <i>Link to Strategic Objective(s):</i>	Meetings cover a range of strategic priorities.			
Goblygiadau rheoleiddio a lleol: <i>Regulatory and legal implications:</i>	There are no specific implications arising from this report			



<p>Yn unol â WP7, a oedd EqlA yn angenrheidiol ac a gafodd ei gynnal?</p> <p><i>In accordance with WP7 has an EqlA been identified as necessary and undertaken?</i></p>	Not applicable at this stage.
<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 ben undertaken?</i></p>	Not applicable at this stage.
<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>	The issues raised impact across a range of risks.
<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>	There are no specific implications arising from this report.
<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>	There are no specific implications arising from this report.
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	Not applicable
<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>	The issues raised impact across a range of risks.
<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>	Not applicable
<p>Next Steps: <i>Implementation of recommendations</i></p> <p>Not applicable to this report</p>	

1. Introduction

This report provides an overview of key activity, progress and issues by the Senior Responsible Officer for the Stakeholder Reference Group. It covers the period June 2024 to November 2024.

2. Annual Report and Accounts 2023-24

The Health Board published its Annual Report and Accounts for 2023-24 in September, highlighting a year of great change for the organisation. The year was characterised with a continuation of significant challenges but also started to see some improvements while building the foundations for a stronger future.

The draft and final accounts were submitted to Welsh Government earlier in the year, reporting a £24m deficit. The accounts were audited by Audit Wales who issued an unqualified opinion and True and Fair view 'Clean Bill of Health' on the numbers. The full report and also a shorter review are on our [website](#).

3. Special Measures Update

The latest Welsh Government report about the progress we have made under special measures was published in November. This report sets out the progress made over the last quarter (July to September 2024) against the agreed special measures priorities. The focus over the period was the response to the serious issues that resulted in our escalation to special measures, developing and building the Board, rebuilding trust and confidence and putting in place firm foundations for the future.

During this time there has been some encouraging progress in a number of areas and we thank our staff for their continued hard work in helping to make these improvements.

The Welsh Government summary highlights that there is still a lot of work to do, but there are encouraging signs of improvement for people living in North Wales. You can read the full statement [here](#).

4. Annual Quality Report

The Health Board has published its Annual Quality Report independently of Annual Report for the first time. This report sets out the progress we have made over the last year in many different areas, including implementing plans to reduce long waiting lists, starting work on a new multi-million-pound orthopaedic centre in Llandudno and improved mental health services for our young people.

During the year, we have demonstrated areas of improvement, with activity levels across nearly every aspect of our services building on improvements from last year and continuing to increase, and we have successfully delivered a number of key strategic projects:

- Reduced the number of people waiting 52 weeks for a first appointment by 45%
- Vascular services received a positive external review by Health Inspectorate Wales leading it to be de-escalated
- Introduced new ways of treating and diagnosing some cancers, including using artificial intelligence for breast and prostate cancers.

The Board approved our Quality Management System (QMS) earlier this year, which will guide our staff across the organisation to develop their quality management assessments and improvements. This tool will be used across the Health Board, with the initial focus to further improve our vascular and urology services.

We have completed the first phase of our learning from investigations programme which has informed the implementation of a new integrated policy for investigating incidents, complaints and mortality. It now incorporates patient or family involvement from the start and includes staff contributions throughout the process.

5. Llandudno Elective Hub

Work is progressing on the construction of a new Elective Orthopaedic Hub at Llandudno Hospital. Towards the end of 2023 Welsh Government approved £29.4m of funding to refurbish the hospital's Aberconwy Ward to create 19 extra bed spaces, two new theatres and an eight-bed enhanced recovery/post-anaesthetic care unit.

The hub will specialise in high volume, low complexity care and will increase surgical activity by providing orthopaedic operations away from the main three hospitals. It will reduce the effects unscheduled care can have on elective treatment and reduce the chance of surgeries being postponed. It is expected that the hub will be operating at full capacity in Summer 2025.

6. Bangor Health and Wellbeing Hub

Plans for a new £30 million health and wellbeing hub in Bangor have been approved by the Health Board and Cyngor Gwynedd. The proposed hub is planned to be located inside the Menai Centre on the high street in Bangor.

The hub is part of the Health Board's plans to improve access to local health services in the area and forms a key part of the Bangor Regeneration Partnership's overall proposals for the city led by Cyngor Gwynedd. It is hoped that the additional footfall generated by the proposed Health & Wellbeing Hub will be a major contributory factor in the regeneration of the city centre. The location of the new hub means that it will be easily accessible to the local population in terms of public transport from all parts of the city.

7. Supporting the Deaf and British Sign Language Community

Bangor University has been awarded a £1m 3-year research grant from the UKRI to work with the Deaf British Sign Language-using Communities in Wales to tackle health inequalities. Ceri Harris has been identified as a co-investigator on this 3-year project, creating a funding stream for her commitment to the project.

The funding is being used to pilot Sign Live in the health board and provide 24/7 BSL interpretation service via Video Relay Interpretation and Video Interpretation. BSL users can use their smartphones or computers to contact the health board via a standard telephone. Following the pilot, the service is intended to be rolled out across the health board. In addition, the funding will cover the costs training for 20 external stakeholders to enable them to be able to undertake inclusive access reports for health board sites.

Alongside this work the Equality team has been working closely with the Patient Experience and Communication and Engagement team and held a listening event with the Deaf and BSL community in partnership with the Centre for Sight, Sound and Sign on the 17th June. This will

be followed up with a further meeting in six months where we can feedback the changes, we have made in the health board following their comments, stories and suggestions.

8. Maggie's Cancer Support Centre

Work has commenced on the construction cancer support centre Maggie's in North Wales, on 11 July 2024. Located in the grounds of Glan Clwyd Hospital in Bodelwyddan, Denbighshire, the centre's expert staff will support people living with cancer, as well as family and friends, from across the whole region - including Bangor and Wrexham

9. North Wales Medical School

First Minister Eluned Morgan and Health Secretary Jeremy Miles have officially opened the North Wales Medical School.

The first direct intake of medical students have started at Bangor University this semester – this includes a mix of school leavers and graduate entrants. They will be the first to have all their medical training delivered in North Wales. This year the school will take 80 students, but numbers will increase steadily to reach 140 a year from 2029-30 onwards.

Planning for the new medical school began in 2020, when Bangor University, Cardiff University, Betsi Cadwaladr University Health Board and the Welsh Government agreed to work in partnership to set up the school.

10. Well North Wales

The Well North Wales Programme contributes towards delivery of prevention and reduction of avoidable ill-health. It is looking to improve regional partnership approaches shifting from traditional medicalised models of healthcare towards adoption of more holistic bio-psychosocial behavioural frameworks across the wider system infrastructures – this includes working with communities, third sector and our local statutory public service partners to reduce avoidable health inequalities and improving longer-term population health and wellbeing outcomes through the following objectives:

- Addressing the 'Inverse Care Law' in Primary and Community care settings. The inverse care law is the principle that the availability of good medical or social care tends to vary inversely with the need of the population served
- Improving co-design, contracting and co-commissioning of social prescribing and social interventions
- Ensuring the most vulnerable groups and communities are considered in planning and provision of immunisations and screening
- Exploring and providing opportunities across the region to improve health and wellbeing through arts in health.

A scoping review and strategic planning exercise is being undertaken 2024/25 with a view to forming the vision, scope and longer-term delivery plan for this programme of work in a truly collaborative approach with regional stakeholders. This scoping review will seek to establish the governance framework required to embed mechanisms for strategic oversight and operational delivery of a whole system Well North Wales: Working Together to Build a Healthier North Wales approach to addressing the wider determinants of health which influence population health outcomes, and are the key enablers to shifting to preventative models of health and wellbeing.

11. Pharmacy Degree at Bangor University

A new Pharmacy undergraduate degree at Bangor University has been given the go-ahead, with students set to begin their studies in September 2025. The four-year Master of Pharmacy (MPharm) undergraduate degree programme is the primary route that students take to become pharmacists. As Bangor University continues to grow and develop its new Professional North Wales Medical School, the offering of Pharmacy alongside Medicine and Allied Health programmes is part of the University's strategy to ensure that there are opportunities for local applicants to enter these important fields and that graduates fulfil the workforce needs of North Wales and beyond.

The recent developments follow a successful visit by the General Pharmaceutical Council (GPhC) as part of the required accreditation process. This positive outcome enables the University to begin the process of recruiting students to the MPharm pharmacy degree for a September 2025 start whilst continuing to work towards accreditation of the programme with the GPhC. The programme will be provisionally accredited until the accreditation process is complete. Bangor University provides significant experiential teaching through partners including the Betsi Cadwaladr University Health Board (BCUHB), community pharmacies, GP practices and Health Education and Improvement Wales (HEIW). In partnership with BCUHB, Bangor University intends to be the foremost provider of quality pharmacy education in North Wales.

12. Ysbyty Glan Clwyd Emergency Department

Healthcare Inspectorate Wales (HIW) published its report on Ysbyty Glan Clwyd Emergency Department in August 2024, and as a result of the improvements made, de-escalated the service from a Service Requiring Significant Improvement. This represents the focus and hard work of colleagues across leadership and management and frontline services. Whilst there is further work to do, HIW acknowledged the improvements that had been made.

13. Robotic Training Centre

Ysbyty Gwynedd has now officially become the first NHS robotic training centre in Wales to train other surgeons in robotic knee surgery. The hospital became the first in Wales to perform robotic knee replacements in 2021 using the ROSA system. Surgeons are able to personalise the knee replacement, which provides operations that are more precise, potentially shorter hospital stays and quicker recovery. Five Orthopaedic surgeons at the hospital now use the technology, and visiting surgeons from across the UK and Europe can now visit to gain insight into the machine and receive training.

14. Alternative to Admission

A new initiative from our Child and Adolescent Mental Health Service (CAMHS) called Alternative to Admission (A2A) will provide a seven-day-a-week crisis centre for young people aged 12-18 in Conwy and Denbighshire, including those who present at Glan Clwyd Hospital's Emergency Department.

The plans, recently given the green light after confirmation of Welsh Government funding, will see a dedicated venue developed for the service, which will be open between 9am and midnight. It aims to reduce both the number of mental health crisis related admissions to hospital and Section 136 orders for children and young people. As well as benefiting young people in crisis, it is hoped it will reduce pressure on Glan Clwyd Hospital's Emergency Department.

15. New digital service will streamline access to routine NHS dental treatment across Wales

A new digital service launching this autumn will centralise the process for accessing routine care through an NHS dentist for people across Wales.

The Dental Access Portal will provide a central platform for Health Boards to allocate places for routine dental treatment at NHS dental practices across Wales. The new service has been designed and built by Digital Health and Care Wales and will be rolled out nationally later in the year.

Currently, there is significant variation between Health Board allocation of NHS dentist places, making it hard to measure the true level of demand both locally and nationally. The new portal will provide Welsh Government, NHS Wales, and partner organisations with a clear picture of the scale of demand for NHS dental services.

16. Children's Charter

The Health Board has endorsed the BCUHB Children's Charter and committed to implementing it across all service areas.

Children and young people make up around 27% of the total population in the North of Wales and will be crucial in helping to shape services fit for the future. It is essential that they are able to influence, engage with and communicate their hopes and needs of health services both in the here and now and into the future.

Work commenced back in 2021 to develop an organisational Charter, recognising the wider work across Wales. The health board operates in a significantly wider system that supports and protects the rights of children and young people in North Wales. The health board Charter, developed by the children and young people in North Wales, is the health boards promise to children of what they can expect from their health services.

17. Audiology vehicle

Audiology teams across North Wales have come together to establish the first Audiology Vehicle in Wales to provide high quality NHS care to rural communities in North Wales, improving outreach and complementing the existing service in local hospitals.

The project is completely charity-funded from Awyr Las: The North Wales NHS Charity and NHS Charities Together. The near £90,000 project has been created to best meet the needs of people living with hearing related conditions. Quiet hearing test conditions can be difficult when out in the community, so the van has been kitted out with a soundproof room.

This brand new service will operate across North Wales complementing the existing network of fixed sites across the region, offering improved access to high quality adult Audiology services, closer to people's homes.

18. Citizen engagement

There have now been seven Board engagement sessions; in Denbigh, Wrexham, Bangor, Holyhead, Llandudno, Mold and Pwllheli. Feedback from each event includes both general themes, such as access to appointments, long waiting times and poor communication and experiences and specific themes; such as challenges faced by the deaf community, poor parking at the Wrexham Maelor Hospital and the need for a 'one stop shop' for health and care in Holyhead. All general feedback is shared with the Health Board in the Citizen's Experience Report and with relevant directors and services where it is specific.

The Board also hears positive feedback at the events. This has included excellent emergency ophthalmology care with a community optician, a GP surgery on the Llyn being highlighted as one of the practices that works well and community hospitals operating in the East area providing good services.

During August, the Health Board has been at a number of high footfall events including the Anglesey Show and Denbigh and Flint Show. These provide a great opportunity to not only promote services, offer advice and support but also listen and receive further feedback.

Engagement has also been undertaken through a number of focus groups discussing experiences of waiting for orthopaedic procedures and our ideas for tackling planned care challenges such as the Llandudno orthopaedic hub.

There have also been a number of Bitesized Health events in collaboration with third and community sector and public sector partners to promote health and wellbeing advice and support and to gain insight and feedback. Bitesized Health in the Workplace was re-launched in October, offering opportunities for people who work to access advice and support in their workplace.

19. Recognition for our staff

- Wrexham Maelor-based Consultant Anaesthetist Anna Williams and Rakesh Kumar, a Clinical Specialist Physiotherapist at the Hergest Unit, at Ysbyty Gwynedd, were both among the recipients in this year's King's Birthday Honours List. Anna was awarded a British Empire Medal for services to Environmentally Sustainable Healthcare at Wrexham Maelor Hospital while Rakesh was awarded an MBE for his valuable services to Black, Asian and Minority Ethnic (BAME) communities.
- Three Health Board teams were shortlisted for this year's prestigious NHS Wales Awards.
 - The Welsh Language Team for their work promoting bilingual services on hospital wards.
 - Consultant Orthopaedic Surgeons, Mr Edwin Jesudason from Ysbyty Gwynedd and Mr Preetham Kodumuri from Wrexham Maelor Hospital for their work to relocate minor day case surgeries to a dedicated outpatient area in the hospitals.
 - A joint initiative between the Health Board, Public Health Wales and the charity Hepatitis C Trust has been chosen for their work to develop rapid screening and treatment for Hepatitis C for all individuals arriving into HMP Berwyn in Wrexham.

The joint initiative to micro-eliminate Hepatitis C in HMP Berwyn, which is the UK's largest prison won the NHS Wales Team Culture Award.

- One of our nurses has been volunteering in Guatemala with a charity that provides cleft lip and palate surgery. Kirstin Clark, a Diabetes Specialist Nurse in Ysbyty Glan Clwyd has been volunteering for the Love Without Boundaries charity since 2007 and this was her third trip to support their work.
- Happy Valley star James Norton read a book on CBeebies Bedtime Story written by Dr Rose Stewart, a Clinical Psychologist based in Wrexham, to help young children understand diabetes. James, who has type 1 diabetes, read 'How to Manage a Mammoth' during Diabetes Awareness Week. The book encourages families to think of diabetes as an animal, something that will not go away but which they can learn to accept and control.
- The Staff Awards took place on 27th September 2024 and were a great opportunity to celebrate and recognise colleagues across the health board for their efforts. Wider

recognition for staff in external awards continues with a number of events and ceremonies scheduled for the coming months.

- Doctors in training ranked Ysbyty Gwynedd's Emergency Department as the best place to train in Wales for a second year running. Results from the National Training Survey by the General Medical Council (GMC) showed more than 90 per cent of doctors in training are pleased with the quality of clinical supervision, experience and the teaching they receive at the Emergency Department.

Teitl adroddiad: <i>Report title:</i>	Adroddiad y Cyfarwyddwr			
Adrodd i: <i>Report to:</i>	Grŵp Cyfeirio Rhanddeiliaid			
Dyddiad y Cyfarfod: <i>Date of Meeting:</i>	Monday, 02 December 2024	Rhif eitem agenda: <i>Agenda Item number:</i>		
Crynodeb Gweithredol: <i>Executive Summary:</i>	Mae Adroddiad y Cyfarwyddwr yn rhoi trosolwg o'r prif weithgareddau, y cynnydd a materion y Bwrdd Iechyd gan Uwch-swyddog Cyfrifol y Grŵp Cyfeirio Rhanddeiliaid. Mae'n cwmpasu'r cyfnod rhwng mis Mehefin 2024 a diwedd mis Tachwedd 2024. Ymhelaethir ar rywfaint o'r cynnwys ymhellach mewn eitemau eraill ar yr agenda.			
Argymhellion: <i>Recommendations:</i>	Gofynnir i'r Grŵp Cyfeirio Rhanddeiliaid nodi'r adroddiad.			
Arweinydd Gweithredol: <i>Arweinydd BIPBC:</i>	Helen Stevens-Jones Cyfarwyddwr Partneriaethau, Ymgysylltu a Chyfathrebu			
Awdur yr Adroddiad: <i>Report Author:</i>	Helen Stevens-Jones Cyfarwyddwr Partneriaethau, Ymgysylltu a Chyfathrebu			
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 checked="" type="checkbox"/>	
Lefel sicrwydd: <i>Assurance level:</i>	Arwyddocaol <i>Significant</i> <input type="checkbox"/> <small>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></small>	Derbyniol <i>Acceptable</i> <input type="checkbox"/> <small>Lefel gyffredinol o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>General confidence / evidence in delivery of existing mechanisms / objectives</i></small>	Rhannol <i>Partial</i> <input checked="" type="checkbox"/> <small>Rhywfaint o hyder/tystiolaeth o ran darparu'r mecanweithiau / amcanion presennol <i>Some confidence / evidence in delivery of existing mechanisms / objectives</i></small>	Dim Sicrwydd <i>No Assurance</i> <input type="checkbox"/> <small>Dim hyder/tystiolaeth o ran y ddarpariaeth <i>No confidence / evidence in delivery</i></small>
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>	Mae'r cyfarfodydd yn ymdrin ag amrywiaeth o flaenoriaethau strategol.			
Goblygiadau rheoleiddiol a chyfreithiol: <i>Regulatory and legal implications:</i>	Nid oes unrhyw oblygiadau penodol yn codi o'r adroddiad hwn			



<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>	Amherthnasol ar hyn o bryd.
<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>	Amherthnasol ar hyn o bryd.
<p>Manylion y 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>	Mae'r materion a godwyd yn effeithio ar amrywiaeth o risgiau.
<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>	Nid oes unrhyw oblygiadau penodol yn codi o'r adroddiad hwn.
<p>Goblygiadau i'r gweithlu o ganlyniad i roi'r argymhellion ar waith</p> <p><i>Workforce implications as a result of implementing the recommendations</i></p>	Nid oes unrhyw oblygiadau penodol yn codi o'r adroddiad hwn.
<p>Adborth, ymateb a chrynodeb dilynol ar ôl ymgynghori</p> <p><i>Feedback, response, and follow up summary following consultation</i></p>	Ddim yn berthnasol
<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>	Mae'r materion a godwyd yn effeithio ar amrywiaeth o risgiau.
<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>	Ddim yn berthnasol
<p>Camau Nesaf: Gweithredu'r argymhellion</p> <p>Ddim yn berthnasol i'r adroddiad hwn</p>	

1. Cyflwyniad

Mae'r adroddiad hwn yn rhoi trosolwg o'r prif weithgareddau, y cynnydd a'r materion gan Uwchswyddog Cyfrifol y Grŵp Cyfeirio Rhanddeiliaid. Mae'n ymdrin â'r cyfnod rhwng mis Mehefin 2024 a mis Tachwedd 2024.

2. Adroddiad a Chyfrifon Blynyddol 2023/24

Cyhoeddodd y Bwrdd Iechyd ei Adroddiad Blynyddol a'i Gyfrifon ar gyfer 2023-24 ym mis Medi, gan dynnu sylw at flwyddyn o newid mawr i'r sefydliad. Cafodd y flwyddyn ei nodweddu gan barhad heriau sylweddol ond dechreuwyd hefyd weld rhai gwelliannau tra'n adeiladu'r sylfeini ar gyfer dyfodol cryfach.

Cyflwynwyd y cyfrifon drafft a therfynol i Lywodraeth Cymru yn gynharach yn y flwyddyn, gan adrodd am ddiffyg o £24m. Archwiliwyd y cyfrifon (gan Archwilio Cymru) a gyhoeddodd farn ddiamod a darlun Cywir a Theg, a sefyllfa 'Holliach' o ran y niferoedd. Mae'r adroddiad llawn a'r adolygiad byrrach hefyd ar gael ar ein [gwefan](#).

3. Diweddariad ar y Mesurau Arbennig

Cyhoeddwyd adroddiad diweddaraf Llywodraeth Cymru am y cynnydd rydym wedi'i wneud o dan fesurau arbennig ym mis Tachwedd. Mae'r adroddiad hwn yn nodi'r cynnydd a wnaed dros y chwarter diwethaf (Gorffennaf i Fedi 2024) yn erbyn blaenoriaethau'r mesurau arbennig y cytunwyd arnynt. Y ffocws dros y cyfnod oedd yr ymateb i'r materion difrifol a arweiniodd at ein huwchgyfeirio i fesurau arbennig, datblygu ac adeiladu'r Bwrdd, ailadeiladu ymddiriedaeth a hyder a rhoi sylfeini cadarn yn eu lle ar gyfer y dyfodol.

Yn ystod y cyfnod hwn, cafwyd rhywfaint o gynnydd calonogol mewn nifer o feysydd ac rydym yn diolch i'n staff am eu gwaith caled parhaus yn helpu i wneud y gwelliannau hyn.

Mae crynodeb Llywodraeth Cymru yn dangos bod llawer o waith i'w wneud o hyd, ond mae arwyddion calonogol o welliant ar gyfer pobl sy'n byw yng Ngogledd Cymru. Gallwch ddarllen y datganiad llawn [yma](#).

4. Adroddiad Ansawdd Blynyddol

Mae'r Bwrdd Iechyd wedi cyhoeddi ei Adroddiad Ansawdd Blynyddol yn annibynnol ar yr Adroddiad Blynyddol am y tro cyntaf. Mae'r adroddiad hwn yn nodi'r cynnydd rydym wedi'i wneud dros y flwyddyn ddiwethaf mewn sawl maes gwahanol, gan gynnwys rhoi cynlluniau ar waith i leihau rhestrau aros hir, dechrau'r gwaith ar ganolfan orthopedig newydd gwerth miliynau lawer o bunnoedd yn Llandudno a gwella gwasanaethau iechyd meddwl i'n pobl ifanc.

Yn ystod y flwyddyn, rydym wedi dangos meysydd lle cafwyd gwelliant, gyda lefelau gweithgarwch ar draws bron pob agwedd ar ein gwasanaethau yn adeiladu ar welliannau ers y llynedd ac yn parhau i gynyddu, ac rydym wedi llwyddo i gyflawni nifer o brosiectau strategol allweddol:

- Lleihau nifer y bobl sy'n aros 52 wythnos am apwyntiad cyntaf gan 45%
- Cafodd gwasanaethau fasgwlaidd adolygiad allanol cadarnhaol gan Arolygiaeth Iechyd Cymru, a arweiniodd at ei ddad-ddwysáu

- Cyflwyno ffyrdd newydd o drin a gwneud diagnosis o rai canserau, gan gynnwys defnyddio deallusrwydd artifisial ar gyfer canserau'r fron a chanser y prostad.

Cymeradwyodd y Bwrdd ein System Rheoli Ansawdd yn gynharach eleni, a fydd yn tywys ein staff ar draws y sefydliad i ddatblygu eu hasesiadau rheoli ansawdd a'u gwelliannau. Bydd yr adnodd hwn yn cael ei ddefnyddio ar draws y Bwrdd Iechyd, gan ganolbwyntio i ddechrau ar wella ein gwasanaethau fasgwlaidd ac wroleg ymhellach.

Rydym wedi cwblhau cam cyntaf ein rhaglen dysgu o ymchwiliadau sydd wedi cyfrannu at roi polisi integredig newydd ar waith ar gyfer ymchwilio i ddigwyddiadau, cwynion a marwolaethau. Mae bellach yn ymgorffori gwaith cynnwys cleifion neu deuluoedd o'r dechrau ac mae'n cynnwys cyfraniadau staff drwy gydol y broses.

5. Canolfan Ddewisol Llandudno

Mae gwaith yn mynd rhagddo i adeiladu Canolfan Orthopedig Ddewisol newydd yn Ysbyty Llandudno. Tua diwedd 2023, cymeradwyodd Llywodraeth Cymru £29.4m o gyllid i adnewyddu Ward Aberconwy yr ysbyty i greu 19 o welyau ychwanegol, dwy theatr newydd ac uned adfer/gofal ôl-anesthetig well wyth gwely.

Bydd y ganolfan yn arbenigo mewn gofal cyfaint uchel, cymhlethdod isel a bydd yn cynyddu gweithgarwch llawfeddygol drwy ddarparu llawdriniaethau orthopedig i ffwrdd o'r tri phrif ysbyty. Bydd yn lleihau'r effeithiau y gall gofal heb ei drefnu ei gael ar driniaeth ddewisol ac yn lleihau'r siawns y bydd llawdriniaethau'n cael eu gohirio. Disgwylir y bydd y ganolfan yn gweithredu ar gapasiti llawn yn ystod Haf 2025.

6. Canolfan Iechyd a Llesiant Bangor

Mae cynlluniau ar gyfer canolfan iechyd a lles newydd gwerth £30 miliwn ym Mangor wedi cael eu cymeradwyo gan y Bwrdd Iechyd a Chyngor Gwynedd. Bwriedir lleoli'r ganolfan arfaethedig yng Nghanolfan Menai ar y stryd fawr ym Mangor.

Mae'r ganolfan yn rhan o gynlluniau'r Bwrdd Iechyd i wella mynediad at wasanaethau iechyd lleol yn yr ardal ac mae'n rhan allweddol o gynigion cyffredinol Partneriaeth Adfywio Bangor ar gyfer y ddinas dan arweiniad Cyngor Gwynedd. Gobeithir y bydd yr ymwelwyr ychwanegol a gynhyrchir gan y Ganolfan Iechyd a Llesiant arfaethedig yn ffactor pwysig sy'n cyfrannu at adfywio canol y ddinas. Mae lleoliad y ganolfan newydd yn golygu y bydd yn hawdd i'r boblogaeth leol ei chyrraedd o ran trafniadaeth gyhoeddus o bob rhan o'r ddinas.

7. Cefnogi'r Gymuned Fyddar ac Iaith Arwyddion Prydain

Mae Prifysgol Bangor wedi cael grant ymchwil 3 blynedd gwerth £1m gan Ymchwil ac Arloesedd y DU (UKRI) i weithio gyda Chymunedau Pobl Fyddar yng Nghymru sy'n defnyddio iaith Arwyddion Prydain i fynd i'r afael ag anghydraddoldebau iechyd. Mae Ceri Harris wedi'i henwi'n gyd-ymchwilydd ar gyfer y prosiect 3 blynedd hwn, gan greu ffrwd ariannu ar sail ei hymrwymiad i'r prosiect.

Mae'r cyllid yn cael ei ddefnyddio i dreialu Sign Live yn y bwrdd iechyd ac i ddarparu gwasanaeth dehongli BSL 24/7 ar ffurf gwasanaeth Dehongli Cyfnewid Fideo a Dehongli Fideo. Gall defnyddwyr BSL ddefnyddio eu ffonau clyfar neu eu cyfrifiaduron i gysylltu â'r bwrdd iechyd dros ffôn safonol. Yn dilyn y peilot, y bwriad yw cyflwyno'r gwasanaeth ar draws y bwrdd iechyd. Yn ogystal, bydd y cyllid yn talu am gostau hyfforddi 20 o randdeiliaid allanol er mwyn iddynt allu ymgymryd ag adroddiadau mynediad cynhwysol ar gyfer safleoedd y bwrdd iechyd.

Ochr yn ochr â'r gwaith hwn, mae'r tîm Cydraddoldeb wedi bod yn gweithio'n agos gyda'r tîm Profiad Cleifion a Chyfathrebu ac Ymgysylltu ac wedi cynnal digwyddiad gwranddo gyda'r gymuned Pobl Fyddar ac Iaith Arwyddion Prydain mewn partneriaeth â'r Ganolfan Golwg, Sain ac Arwyddo ar 17eg Mehefin. Bydd hyn yn cael ei ddilyn gan gyfarfod arall mewn chwe mis lle gallwn roi adborth ar y newidiadau rydym wedi'u gwneud yn y bwrdd iechyd yn dilyn eu sylwadau, eu straeon a'u hawgrymiadau.

8. Canolfan Gymorth Canser Maggie's

Mae'r gwaith o adeiladu canolfan gymorth cancer Maggie's yng Ngogledd Cymru wedi dechrau ar 11 Gorffennaf 2024. Mae'r ganolfan wedi'i lleoli ar dir Ysbyty Glan Clwyd ym Modelwyddan, Sir Ddinbych, lle bydd staff arbenigol y ganolfan yn cefnogi pobl sy'n byw gyda chanser, yn ogystal â theulu a ffrindiau, o bob cwr o'r rhanbarth – gan gynnwys Bangor a Wrecsam

9. Ysgol Feddygol Gogledd Cymru

Mae'r Prif Weinidog, Eluned Morgan a'r Ysgrifennydd Iechyd, Jeremy Miles, wedi agor Ysgol Feddygol Gogledd Cymru yn swyddogol.

Mae'r garfan uniongyrchol gyntaf o fyfyrwyr meddygol wedi dechrau ym Mhrifysgol Bangor y semester hwn – mae hyn yn cynnwys cymysgedd o fyfyrwyr sydd newydd adael yr ysgol a graddedigion. Nhw fydd y rhai cyntaf i gael eu holl hyfforddiant meddygol yng Ngogledd Cymru. Eleni bydd yr ysgol yn derbyn 80 o fyfyrwyr, ond bydd y niferoedd yn cynyddu'n raddol i gyrraedd 140 y flwyddyn o 2029-30 ymlaen.

Dechreuodd y gwaith cynllunio ar gyfer yr ysgol feddygol newydd yn 2020, pan gytunodd Prifysgol Bangor, Prifysgol Caerdydd, Bwrdd Iechyd Prifysgol Betsi Cadwaladr a Llywodraeth Cymru i weithio mewn partneriaeth i sefydlu'r ysgol.

10. Gogledd Cymru Iach

Mae Rhaglen Gogledd Cymru Iach yn cyfrannu at atal a lleihau afiechyd y gellir ei osgoi. Mae'n bwriadu gwella dulliau partneriaeth rhanbarthol gan symud o fodolau gofal iechyd meddygol traddodiadol tuag at fabwysiadu fframweithiau ymddygiad bio-seicogymdeithasol mwy cyfannol ar draws seilweithiau ehangach y system – mae hyn yn cynnwys gweithio gyda chymunedau, y trydydd sector a'n partneriaid gwasanaeth cyhoeddus statudol lleol i leihau anghydraddoldebau iechyd y gellir eu hosgoi a gwella canlyniadau iechyd a lles y boblogaeth yn y tymor hwy drwy'r amcanion canlynol:

- Mynd i'r afael â'r 'Ddeddf Gofal Gwrthgyfartal' mewn lleoliadau gofal Sylfaenol a Chymunedol. Y gyfraith gofal gwrthgyfartal yw'r egwyddor bod argaeledd gofal meddygol neu gymdeithasol da yn tueddu i amrywio'n wrthgyfartal i anghenion y boblogaeth a wasanaethir
- Gwella cyd-ddylunio, contractio a chyd-gomisiynu presgripsiynu cymdeithasol ac ymyriadau cymdeithasol
- Sicrhau bod y grwpiau a'r cymunedau mwyaf agored i niwed yn cael eu hystyried wrth gynllunio a darparu brechiadau a sgrinio
- Archwilio a darparu cyfleoedd ar draws y rhanbarth i wella iechyd a lles drwy'r celfyddydau mewn iechyd.

Mae adolygiad cwmpasu ac ymarfer cynllunio strategol yn cael eu cynnal 2024/25 gyda'r bwriad o ffurfio'r weledigaeth, y cwmpas a'r cynllun cyflawni tymor hwy ar gyfer y rhaglen waith hon mewn dull gwirioneddol gydweithredol gyda rhanddeiliaid rhanbarthol. Bydd yr adolygiad cwmpasu hwn yn ceisio sefydlu'r fframwaith llywodraethu sydd ei angen i wreiddio

mecanweithiau ar gyfer goruchwyllo strategol a chyflawni Gogledd Cymru iach ar draws y system gyfan: Gweithio Gyda'n Gilydd i Adeiladu dull Gogledd Cymru iachach o fynd i'r afael â phenderfynyddion ehangach iechyd sy'n dylanwadu ar ganlyniadau iechyd y boblogaeth, a dyma'r galluogwyr allweddol ar gyfer symud i fodolau ataliol o iechyd a llesiant.

11. Gradd mewn Fferylliaeth ym Mhrifysgol Bangor

Mae'r radd Fferylliaeth newydd israddedig ym Mhrifysgol Bangor wedi cael sêl bendith, a bydd myfyrwyr yn dechrau ar eu hastudiaethau ym mis Medi 2025. Y rhaglen radd israddedig, Meistr Fferylliaeth (Mpharm) pedair blynedd o hyd yw'r prif lwybr y mae myfyrwyr yn ei ddilyn i ddod yn fferyllwyr. Wrth i Brifysgol Bangor barhau i dyfu a datblygu ei Hysgol Feddygol newydd yng Ngogledd Cymru, mae cynnig Fferylliaeth ochr yn ochr â rhaglenni Meddygaeth ac Iechyd Cysylltiedig yn rhan o strategaeth y sefydliad i sicrhau bod cyfleoedd i ymgeiswyr lleol ymuno â'r meysydd pwysig hyn a bod gradddedigion yn cyflawni anghenion gweithlu Gogledd Cymru a thu hwnt.

Mae'r datblygiadau diweddar yn dilyn ymweliad llwyddiannus gan y Cyngor Fferyllol Cyffredinol (GPhC) oedd yn rhan o'r broses achredu ofynnol. Mae'r canlyniad cadarnhaol hwn yn golygu y gall y Brifysgol ddechrau'r broses o recriwtio myfyrwyr ar gyfer y radd fferylliaeth MPharm i ddechrau ym mis Medi 2025 gan barhau i weithio tuag at achredu'r rhaglen gyda'r Cyngor Fferyllol Cyffredinol ar yr un pryd. Bydd y rhaglen yn cael ei hachredu dros dro nes bydd y broses achredu wedi'i chwblhau. Mae Prifysgol Bangor yn darparu addysgu drwy brofiad sylweddol drwy bartneriaid gan gynnwys Bwrdd Iechyd Prifysgol Betsi Cadwaladr (BIPBC), fferyllfeydd cymunedol, practisau meddygon teulu ac Addysg a Gwella Iechyd Cymru (AaGIC). Mewn partneriaeth â Bwrdd Iechyd Prifysgol Betsi Cadwaladr, bwriad Prifysgol Bangor yw bod y prif ddarparwr addysg fferylliaeth o ansawdd yng Ngogledd Cymru.

12. Adran Achosion Brys Ysbyty Glan Clwyd

Cyhoeddodd Arolygiaeth Gofal Iechyd Cymru (AGIC) ei adroddiad ar Adran Achosion Brys Ysbyty Glan Clwyd ym mis Awst 2024, ac o ganlyniad i'r gwelliannau a wnaed, cafodd y gwasanaeth ei ddad-ddwysáu o fod yn Wasanaeth y mae Angen ei Wella'n Sylweddol. Mae hyn yn cynrychioli ffocws a gwaith caled cydweithwyr ar draws arweinyddiaeth a rheolaeth a gwasanaethau rheng flaen. Er bod rhagor o waith i'w wneud, roedd AGIC yn cydnabod y gwelliannau a oedd wedi cael eu gwneud.

13. Canolfan Hyfforddiant Roboteg

Ysbyty Gwynedd bellach yw canolfan hyfforddi robotig gyntaf y GIG yng Nghymru i hyfforddi llawfeddygon eraill mewn llawfeddygaeth pen-glin robotig. Yr ysbyty oedd y cyntaf yng Nghymru i osod pen-gliniau robotig newydd yn 2021 gan ddefnyddio system ROSA. Mae llawfeddygon yn gallu personoli'r pen-glin newydd, gan ddarparu llawdriniaethau mwy manwl, sy'n golygu aros yn yr ysbyty am gyfnod byrrach o bosibl a gwella'n gyflymach. Mae pum llawfeddyg Orthopaedig yn yr ysbyty bellach yn defnyddio'r dechnoleg, a gall llawfeddygon ar ymweliad o bob rhan o'r DU ac Ewrop ymweld i gael cipolwg ar y peiriant a chael hyfforddiant.

14. Dewis arall yn lle Derbyn

Bydd menter newydd gan ein Gwasanaeth Iechyd Meddwl Plant a'r Glasoed (CAMHS) o'r enw Alternative to Admission (A2A) yn darparu canolfan argyfwng saith diwrnod yr wythnos i bobl ifanc 12-18 oed yng Nghonwy a Sir Ddinbych, gan gynnwys y rhai sy'n dod i Adran Achosion Brys Ysbyty Glan Clwyd.

Bydd y cynlluniau, a gymeradwywyd yn ddiweddar ar ôl cadarnhau cyllid Llywodraeth Cymru, yn gweld lleoliad pwrpasol yn cael ei ddatblygu ar gyfer y gwasanaeth, a fydd ar agor rhwng 9am a hanner nos.

Ei nod yw lleihau nifer y derbyniadau i'r ysbyty sy'n gysylltiedig ag argyfwng iechyd meddwl a gorchmynion Adran 136 ar gyfer plant a phobl ifanc. Yn ogystal â bod o fudd i bobl ifanc mewn argyfwng, y gobaith yw y bydd yn lleihau'r pwysau ar Adran Achosion Brys Ysbyty Glan Clwyd.

15. Gwasanaeth digidol newydd yn symleiddio mynediad at driniaeth ddeintyddol arferol y GIG ledled Cymru

Bydd gwasanaeth digidol newydd sy'n cael ei lansio'r hydref hwn yn canoli'r broses ar gyfer cael gafael ar ofal arferol drwy ddeintydd GIG ar gyfer pobl ledled Cymru.

Bydd y Porth Mynediad Deintyddol yn darparu llwyfan canolog i Fyrddau Iechyd ddyrannu lleoedd ar gyfer triniaeth ddeintyddol reolaidd mewn practisau deintyddol y GIG ledled Cymru. Mae'r gwasanaeth newydd wedi cael ei ddylunio a'i adeiladu gan Iechyd a Gofal Digidol Cymru a bydd yn cael ei gyflwyno'n genedlaethol yn nes ymlaen yn y flwyddyn.

Ar hyn o bryd, mae amrywiad sylweddol rhwng dyraniad y Bwrdd Iechyd o leoedd deintyddol GIG, gan ei gwneud yn anodd mesur gwir lefel y galw yn lleol ac yn genedlaethol. Bydd y porth newydd yn rhoi darlun clir i Lywodraeth Cymru, GIG Cymru a sefydliadau partner o faint o alw sydd am wasanaethau deintyddol y GIG.

16. Siarter Plant

Mae'r Bwrdd Iechyd wedi cymeradwyo Siarter Plant Bwrdd Iechyd Prifysgol Betsi Cadwaladr ac wedi ymrwymo i'w gweithredu ar draws pob maes gwasanaeth.

Plant a phobl ifanc yw oddeutu 27% o'r boblogaeth gyfan yng Ngogledd Cymru a byddant yn hanfodol o ran helpu i lunio gwasanaethau sy'n addas ar gyfer y dyfodol. Mae'n hanfodol eu bod yn gallu dylanwadu, ymgysylltu a chyfleu gobeithion ac anghenion gwasanaethau iechyd yn y presennol a'r dyfodol.

Dechreuodd y gwaith yn 2021 i ddatblygu Siarter sefydliadol, gan gydnabod y gwaith ehangach ledled Cymru. Mae'r bwrdd iechyd yn gweithredu mewn system lawer ehangach sy'n cefnogi ac yn amddiffyn hawliau plant a phobl ifanc yng Ngogledd Cymru. Siarter y Bwrdd Iechyd, a ddatblygwyd gan y plant a'r bobl ifanc yng Ngogledd Cymru, yw addewid y bwrdd iechyd i blant o'r hyn y gallant ei ddisgwyl gan eu gwasanaethau iechyd.

17. Cerbyd Awdioleg

Mae timau Awdioleg ar draws Gogledd Cymru wedi dod at ei gilydd i sefydlu'r Cerbyd Awdioleg cyntaf yng Nghymru i ddarparu gofal GIG o ansawdd uchel i gymunedau gwledig yng Ngogledd Cymru, gan wella allgymorth ac ategu'r gwasanaeth presennol mewn ysbytai lleol.

Mae'r prosiect yn cael ei ariannu'n gyfan gwbl gan elusen Awyr Las: Elusen GIG Gogledd Cymru ac NHS Charities Together. Mae'r prosiect, sy'n costio bron i £90,000 wedi cael ei greu i ddiwallu anghenion pobl sy'n byw gyda chyflyrau sy'n gysylltiedig â'r clyw yn y ffordd orau. Gall amodau prawf clyw tawel fod yn anodd pan fyddwch allan yn y gymuned, felly mae'r fan wedi'i dodrefnu ag ystafell gwrth-sain.

Bydd y gwasanaeth newydd sbon hwn yn gweithredu ar draws Gogledd Cymru gan ategu'r rhwydwaith presennol o safleoedd sefydlog ar draws y rhanbarth, gan gynnig gwell mynediad at wasanaethau Awdioleg o ansawdd uchel i oedolion, yn nes at gartrefi pobl.

18. Ymgysylltu â dinasyddion

Erbyn hyn, cynhaliwyd saith sesiwn ymgysylltu gan y Bwrdd; yn Ninbych, Wrecsam, Bangor, Caergybi, Llandudno, yr Wyddgrug a Phwllheli. Mae'r adborth o bob digwyddiad yn cynnwys themâu cyffredinol, fel mynediad at apwyntiadau, amseroedd aros hir a chyfathrebu a phrofiadau gwael a themâu penodol; fel heriau sy'n wynebu'r gymuned fyddar, parcio gwael yn Ysbyty Maelor Wrecsam a'r angen am 'siop un stop' ar gyfer iechyd a gofal yng Nghaergybi. Mae'r holl adborth cyffredinol yn cael ei rannu â'r Bwrdd Iechyd yn yr Adroddiad Profiad y Dinesydd a gyda chyfarwyddwyr a gwasanaethau perthnasol lle mae'n benodol.

Mae'r Bwrdd hefyd yn cael adborth cadarnhaol yn y digwyddiadau. Mae hyn wedi cynnwys gofal offthalmoleg brys rhagorol gydag optegydd cymunedol, meddygfa ar Benrhyn Llŷn yn cael ei hamlygu fel un o'r meddygfeydd sy'n gweithio'n dda ac ysbytai cymunedol sy'n gweithredu yn ardal y Dwyrain yn darparu gwasanaethau da.

Yn ystod mis Awst, mae'r Bwrdd Iechyd wedi bod mewn nifer o ddigwyddiadau poblogaidd, gan gynnwys Sioe Môn a Sioe Dinbych a Fflint. Mae'r rhain yn gyfle gwych nid yn unig i hyrwyddo gwasanaethau, cynnig cyngor a chefnogaeth ond hefyd i wrando a derbyn adborth pellach.

Gwnaed gwaith ymgysylltu hefyd drwy nifer o grwpiau ffocws yn trafod profiadau o aros am driniaethau orthopedig a'n syniadau ar gyfer mynd i'r afael â heriau gofal wedi'i gynllunio megis canolfan orthopedig Llandudno.

Mae nifer o ddigwyddiadau Iechyd Bitesize wedi cael eu cynnal hefyd ar y cyd â phartneriaid yn y trydydd sector, y sector cymunedol a'r sector cyhoeddus i hyrwyddo cyngor a chymorth iechyd a llesiant ac i gael gwybodaeth ac adborth. Cafodd 'Brathiad o Iechyd yn y Gweithle' (Bitesized Health in the Workplace) ei ail-lansio ym mis Hydref, gan gynnig cyfleoedd i bobl sy'n gweithio gael gafael ar gyngor a chymorth yn eu gweithle.

19. Cydnabyddiaeth i'n staff

- Mae Anna Williams, Anesthetydd Ymgynghorol yn Ysbyty Maelor Wrecsam, a Rakesh Kumar, Ffisiotherapydd Arbenigol Clinigol yn Uned Hergest, Ysbyty Gwynedd, ymhlith y rhai a dderbyniodd anrhydedd yn Rhestr Anrhydeddau Pen-blwydd y Brenin eleni. Dyfarnwyd Medal yr Ymerodraeth Brydeinig i Anna am ei gwasanaethau i Ofal Iechyd Amgylcheddol Cynaliadwy yn Ysbyty Maelor Wrecsam a chafodd Rakesh MBE am ei wasanaethau gwerthfawr i gymunedau Du, Asiaidd a Lleiafrifoedd Ethnig (BAME).
- Mae tri o dimau'r Bwrdd Iechyd wedi cyrraedd y rhestr fer ar gyfer gwobrau nodedig GIG Cymru eleni.
 - Tîm y Gymraeg am eu gwaith yn hyrwyddo gwasanaethau dwyieithog ar wardiau ysbytai.
 - Y Llawfeddygon Ymgynghorol Orthopedig, Mr Edwin Jesudason o Ysbyty Gwynedd a Mr Preetham Kodumuri o Ysbyty Maelor Wrecsam am eu gwaith i adleoli mân lawdriniaethau achosion dydd i ardal cleifion allanol benodol yn yr ysbytai.
 - Menter ar y cyd rhwng y Bwrdd Iechyd, Iechyd Cyhoeddus Cymru a'r elusen Ymddiriedolaeth Hepatitis C ar sail eu gwaith yn datblygu sgrinio a thriniaeth gyflym ar gyfer Hepatitis C i bob unigolyn sy'n dod i mewn i CEM Berwyn yn Wrecsam.

Enillodd y fenter ar y cyd i ficro-ddileu Hepatitis C yng Ngharchar EM Berwyn, sef carchar mwyaf y DU, Wobr Diwylliant Tîm GIG Cymru.

- Mae un o'n nyrsys wedi bod yn gwirfoddoli yn Guatemala gydag elusen sy'n darparu llawdriniaeth gwefus a thafod hollt. Mae Kirstin Clark, Nyrs Arbenigol Diabetes yn Ysbyty Glan Clwyd wedi bod yn gwirfoddoli i'r elusen Love Without Boundaries ers 2007 a hon oedd ei thrydedd daith i gefnogi eu gwaith.
- Darllenodd James Norton, seren Happy Valley, lyfr ar y rhaglen CBeebies Bedtime Story oedd wedi'i ysgrifennu gan Dr Rose Stewart, Seicolegydd Clinigol yn Wrecsam, i helpu plant ifanc i ddeall diabetes. Darllenodd James, sydd â diabetes math 1, 'How to Manage a Mammoth' yn ystod Wythnos Ymwybyddiaeth o Ddiabetes. Mae'r llyfr yn annog teuluoedd i feddwl am ddiabetes fel anifail, rhywbeth na fydd yn mynd i ffwrdd ond y gallant ddysgu ei dderbyn a'i reoli.
- Cynhaliwyd y Gwobrau Staff ar 27ain Medi 2024 ac roeddent yn gyfle gwych i ddathlu a chydabod cydweithwyr ar draws y bwrdd iechyd am eu hymdrechion. Mae cydnabyddiaeth ehangach i staff mewn gwobrau allanol yn parhau gyda nifer o ddigwyddiadau a seremonïau wedi'u trefnu ar gyfer y misoedd nesaf.
- Yn ôl meddygon dan hyfforddiant, Adran Achosion Brys Ysbyty Gwynedd oedd y lle gorau i hyfforddi yng Nghymru am yr ail flwyddyn yn olynol. Dangosodd canlyniadau'r Arolwg Hyfforddiant Cenedlaethol gan y Cyngor Meddygol Cyffredinol (GMC) yn ddiweddar fod dros 90% o feddygon dan hyfforddiant yn falch o ansawdd yr oruchwyliaeth glinigol, y profiad, a'r addysgu maent yn eu derbyn yn yr Adran Achosion Brys.