Betsi Cadwaladr University Health Board (BCUHB)
Confirmed Minutes of the Health Board
held in Public on 27th March 2025
at Venue Cymru

Board Members present	
Name	**Title**
Dyfed Edwards	Chair
Dr Sreeman Andole	Interim Executive Medical Director
Karen Balmer	Independent Member
Clare Budden	Independent Member
Russell Caldicott	Executive Director of Finance
Urtha Felda	Independent Member
Dyfed Jones	Independent Member
Prof Mike Larvin	Independent Member
Dr Jane Moore	Executive Director of Public Health
Billy Nichols	Independent Member
Teresa Owen	Executive Director of Allied Health Professionals and Health Science
Mike Parry	Associate Member (Chair of Stakeholder Reference Group)
Fôn Roberts	Associate Member (Representing Directors of Social Services)
Carol Shillabeer	Chief Executive
Paolo Tardivel	Interim Executive Director of Transformation and Strategic Planning
Dr Caroline Turner	Independent Member
Rhian Watcyn Jones	Independent Member
Pam Wenger	Director of Corporate Governance
Gareth Williams	Vice Chair
Angela Wood	Executive Director of Nursing and Midwifery
In Attendance	
Stuart Keen	Director of Environment and Estates
Steve Powell	Director Performance and Commissioning
Tehmeena Ajmal	Chief Operating Officer (as from 1 April 2025)
Gareth Evans	Integrated Health Community Director (Central)
Dylan Roberts	Chief Digital and Information Officer
Georgina Roberts	Senior Associate Director, People Services
Helen Stevens-Jones	Director of Partnerships, Engagement & Communications
Fflur Jones	Performance Audit Lead, Audit Wales
Simon Monkhouse	Financial Audit Lead, Audit Wales
Jim McGuigan	Deputy Medical Director
Geoff Ryall-Harvey	Chief Officer, Llais North Wales
Philippa Peake-Jones	Head of Corporate Affairs
Laura Jones	Acting Corporate Governance Manager

PRELIMINARY MATTERS

25/41 Welcome, Introductions and Apologies for Absence

The Chair welcomed Board Members along with Gareth Evans on behalf of Imran Devji, Paolo Tardivel in the position of Interim Executive Director of Transformation and Strategic Planning and Tehmeena Ajmal who joined the meeting to observe and will be joining the Board as the Chief Operating Officer on 1 April 2025.

The Chair also welcomed Observers, Members of the public and Audit Wales to the meeting.

Apologies were received for Jason Brannan, Deputy Director of People (Georgina Roberts deputising), Imran Devji, Interim Chief Operating Officer (Gareth Evans deputising) and Chris Lothian-Field.

25/42 Declarations of Interest Relating to the Agenda

Prof Mike Larvin declared an interest in the North Wales Medical School item in his position at Bangor University, no further declarations of interest were received.

25/43 Unconfirmed Minutes of the Health Board meeting held on 30.01.25.

It was resolved that the Board:

- **AGREED** that the minutes of the Health Board meeting held on 30.01.25 were a true and accurate record.

25/44 Action Log

Members received the action log and noted progress against the actions.

Patient Experience Story

- In relation to action **24/227** it was noted that a copy of the letter relating to the Pwysau Iach Plant Yng Nghymru (PIPYN) / Healthy Children Healthy Weight in Wales Project has been circulated to members outside of the meeting and this action can be proposed for closure.

Integrated Quality and Performance Report

- In relation to action **25/20.1** regarding the accommodation issue for the Physiotherapy Team, it was confirmed that an interim solution has been sought, the Capital Investment Group are reviewing the issue and will provide a response in due course. Enabling access to Physiotherapy is also being addressed as part of the Performance Report.

It was resolved that the Board:

- **AGREED** to close the actions that were proposed for closure.

25/45 Experience Item

The Chair confirmed that the Board receive an Experience item at each meeting to gain an insight into what is happening within the Health Board for patients receiving services in our area.

The Executive Director of Nursing & Midwifery and Executive Director of Allied Health Professionals and Health Science introduced the Experience item, a video presentation was shared with the Board and the following was highlighted:

- The ‘Use Your Welsh’ Campaign has been taking place this week to encourage and support all to use whatever Welsh Language they are able to.
- The Campaign has been part of Welsh Language week and the Teams were thanked for their work in providing stalls, films and radio programmes to highlight the importance of speaking Welsh.
- Everyone can be champions and have a positive attitude towards using the Welsh Language.

- The Experience item focussed on a parent who had a positive experience in the Children's Ward with her 6-year-old Daughter.
- Staff communicating with patients and families using the Welsh Language where appropriate was welcomed.
- Using people's first language to communicate provides reassurance to patients and is a fundamental element of the experience and care provided.

In discussing the video presentation, the Board:

- Acknowledged that the video focussed on children and parents and highlighted that this is also important for older and vulnerable patients to be able to communicate using their first language.
- Highlighted that an awareness of the benefits of using the Welsh Language is as important as learning the language.
- Were advised that all Year 1 students who enrol with the North Wales Medical School will complete Welsh Language classes as part of their course and the feedback received from non-Welsh speakers to date, has been positive.
- Confirmed that some staff may be more apprehensive speaking to adults in Welsh rather than children and agreed the need to give staff the confidence to speak to all.
- Thanked all staff for using and promoting the Welsh Language and agreed to continue to develop further in this area.

It was resolved that the Board:

- **NOTED** the Experience item.

25/46 Chair's Report

The Board received the report and the Chair highlighted:

- The Health Board has now been in Special Measure for a two-year period, a series of engagement events and meetings have taken place to share our progress and outline the developments made during this period.
- A Special Measure progress presentation has also been shared with Members of the Senedd in Cardiff Bay followed by questions and discussion.
- Going forward the aim will be to develop meetings around specific matters to discuss with members of the public.
- The Chair and Chief Executive have recently signed the Hillsborough Charter to show the organisation's support for the Charter for Families Bereaved by Public Tragedy. The Health Board has formally adopted the Charter and joined more than 50 public sector organisations across Wales to commit to openness, transparency and accountability when responding to public tragedies. As a Health Board, there are people and families within our communities who have suffered and the role of the organisation is to walk in the shoes of those who have suffered, provide support and encourage all to adopt this way of thinking.

It was resolved that the Board:

- **DISCUSSED** and **NOTED** the content of the report.

25/47 Chief Executive's Report

The Board received the report and the Chief Executive highlighted:

- Following the agreement to establish the Executive Committee as a formal decision making Committee of the Board, the report on the meetings that have taken place since the last Board are included in the papers.
- As previously noted, new colleagues are joining the Executive Team: she thanked Imran Devji for his support.
- The Education Steering Group has been established which provides the Health Board with the opportunity to commit to providing education for all. This work links with Partners, the North Wales Medical School, Higher Education Institutions and also In House Training and will report via the People & Culture Committee.
- A recent visit has taken place with local politician Darren Miller MS to the West End Medical Centre which is a practice managed by the Health Board. The practice had previously had issues with staffing, but significant improvements have been made which now includes research opportunities for staff and provision of training for medical students: Darren Millar has also given public recognition of the progress made.
- She had visited the North Wales Adolescent Centre in Abergele, which is part of the Children and Adolescent Mental Health Services (CAMHS). This service provides specialist Mental Health support and it was noted that fewer young people are currently being admitted into the service. There has been significant investment recently to upgrade the bedrooms and the Specialist Eating Disorder Team are working hard to provide support in this area. The service allows young people to be treated in Wales rather than being transferred into England.

It was resolved that the Board:

- **NOTED** the content of the report.

25/48 Vice Chair's Report

The Board received the report and the Vice Chair highlighted:

- The Advanced Cluster Development Conference took place on 25 March 2025 and included more than 80 contributors from the Health Board and partners.
- There is a need for the Health Board to provide focus, guidance and leadership on the future direction of Primary Care.
- There are capacity issues in relation to Neuro-Diversity and the problems faced by the Teams to undertake these complex, multi-disciplinary assessments which can only be resolved by service redesign which is underway.
- He had visited the 'Alternatives to Admission' crisis hub at the Royal Alexandra Hospital which provides a specialist service that aims to keep young people out of Emergency Departments. This was a really positive development, which ideally needs to be replicated in the West and East IHC areas.

It was resolved that the Board:

- **NOTED** the content of the report.

STRATEGIC DIRECTION

25/49 Progress of the Health Board

The Board received the report and the Chief Executive highlighted:

- The Progress of the Health Board and the Special Measures Progress Report would be discussed as one item.

- A series of engagement events with colleagues and the public have been undertaken in relation to the progress made by the Health Board over the last two years since the organisation was escalated into level 5 intervention.
- The importance of marking the two-year period that the organisation has been in Special Measures and providing an Annual Review of the progress made.
- The Welsh Government escalation and intervention framework applies to all Health Boards. The Tripartite meeting which brings together the Welsh Government, Audit Wales and Health Improvement Wales has taken place where decisions are agreed on the level of escalation for all organisations and it has been confirmed that the Health Board is to remain at level 5.
- A meeting with the Cabinet Secretary took place on 5 March 2025 where the progress made by the Health Board was identified.
- There has been clear improvement in the way the Health Board is governed and the Corporate Governance work was recognised by Welsh Government and Audit Wales as clear progress.
- There has been an improvement in terms of managing financial governance and financial performance, providing the Welsh Government with greater assurance that funding invested into the Health Board is being deployed effectively for the people of North Wales.
- There has been progress in relation to culture and it was noted that the Board approved and will launch the Values & Behaviours Framework today by signing the pledge to help drive culture change and improvement across the organisation.
- There is still significant work and progress ahead of us and the item focussing on the Integrated Medium-Term Plan (IMTP) will set out the priorities and focus of work.
- Further work is required across the organisation in areas which include Access to services, Urgent & Emergency Care, Planned Care and Community Mental Health Care.
- In terms of de-escalation, it was suggested work is required to highlight how the organisation may be able to reach level 4.
- The hard work of the staff to reach this position was acknowledged.

In discussing the report, the Board:

- Agreed on the importance of progress to date in terms of effective and appropriate governance as this will determine how the Health Board move forward and tackle the challenges.
- Acknowledged the need for transparency within the organisation, recognising the negatives as well as the positives and being aware of the challenges.
- Questioned what the Health Board should now do in terms of providing evidence to Welsh Government to seek de-escalation in certain areas as it would also be good to demonstrate the progress to the people we serve. It was confirmed that clarity is required in relation to the de-escalation criteria in terms of a route map down from level 5 to 1 to become an effective organisation. Evidence of improvement will be required both internally and externally and to evidence maturity, there will also be a need increase self-assessment of our own progress.
- Referred to item C6: Quality of Care within the report and suggested focus is made in this area to bring the level down from 5 to 4.
- Highlighted item C3: Fragile Services within the report suggesting significant improvement is required in this area.
- Observed that the Health Board is assessed by people's experience of the service they receive therefore it is important that the organisation receive support from partners and Welsh Government to ensure the Health Board develop and succeed. Going forward there is a need to form strategies and create the conditions to deliver for the people of North Wales.

- Thanked staff throughout the Health Board for their hard work, action and progress made to date.

It was resolved that the Board

- **NOTED** the report.
- **RECEIVED ASSURANCE** on the progress made during the first 2 years of Special Measures, along with the challenges highlighted and the focus going forward.

25/50 Special Measures Progress Report

This item was covered under item 25/49 Progress of the Health Board**.**

25/51 Annual Audit Letter

The Board received the report and the Chief Executive, Director of Corporate Governance and Audit Wales highlighted:

- Appreciation to Audit Wales colleagues for their support with this work and acknowledged the importance of external colleagues reviewing the work of the Health Board to provide assurance.
- The report summarises the work completed during 2024 and focuses on governance, strategic planning and the use of resources including a view of the accounting elements and performance review, it was noted that work continues in other areas.
- The report has been considered by the Audit Committee, all completed reports produced during this period have been through the audit process, recommendations have been produced and the reports have been considered by the Committee.
- In terms of the Structured Assessment, BCU is the only Health Board in Wales to have two Structured Assessments reported in one year however this has highlighted the volume of improvements made over a short period of time. This progress includes the recruitment of Independent Members, the work relating to risk, progress on performance and the development of a long-term plan and clinical plan.
- In terms of the financial element, the Auditor General for Wales (AGW) issued an unqualified true and fair opinion on the Health Board's 2023-24 accounts.
- The areas that were issued a qualified regularity opinion related to a failure to break-even over a three-year period and one case of an irregularly incurred expenditure.
- The AGW also placed a substantive report on the Health Board's accounts to highlight these true and fair and regularity qualifications and also the failure of the Health Board to have an approved three-year plan.
- There were significant improvements in the accounts presented however issues were highlighted within the Remuneration Report and measures have been taken to address this.
- The report includes some recommendations and minor issues and these have been considered in further detail in the Final Accounts Memorandum.
- In terms of performance, there has been a review of partnership working to improve the flow of patients out of hospital which is a challenging area. A number of initiatives have been considered between partners and the Health Board however the figures remain low and further work is required.
- The Team have reviewed the previous recommendations made relating to discharge planning, there has been improvements in some areas however further work is required to respond fully to the recommendations.

- There has also been a review of the arrangement for financial savings and the Team recognised the work completed to reach the control totals for 2023/24 however further work is required going forward.
- Further work is taking place which includes a review of Planned Services, Emergency Services, Funding from Welsh Government for 2020-2024 and also a review of Digital Services.

In discussing the report, the Board

- Highlighted the progress being made which has also been recognised by the Audit Committee particularly in terms of the governance and financial control elements as well as the working relationship with both External and Internal Audit.
- Confirmed that the teams have worked with openness and transparency to ensure a collective approach and, going forward, lessons will be learnt from the issues previously highlighted.
- Referred to the focus on delayed discharge of care and hospital flow confirming that a lot of work has been completed in this area over the last six months and queried when a further review may be undertaken. It was confirmed that the Unscheduled Care review is being completed in three parts. Part one focussed on the discharge element, part two will focus on the flow out of hospitals and the Team are aware of the recent progress highlighted. Part three will focus on the national arrangements and the Team will produce an All-Wales summary to address some of the issues being discussed.
- Recognised that the discharge issue is difficult for the Health Board to impact due to the work required by external partners. It was confirmed that the work with external partners has been reviewed however it is difficult to capture the information due to the complexity of the configuration however the Team can plan this into future audits to address this issue as a broader piece of work.
- Thanked the Team for their work and the positive relationship in supporting the Health Board on the journey to improvement.

It was resolved that the Board:

- **RECEIVED** the report and **NOTED** that the Audit Committee has considered the report and confirmed that the Structured Assessment report presents a fair and balanced view of the organisation, recognising both the positive aspects identified and those areas where further progress is required and
- **NOTED** the management response to the Structured Assessment and that the progress will be monitored by the Audit Committee and reported to the Board via the Chairs Assurance Report.

25/52 Board Effectiveness

The Board received the report and the Director of Corporate Governance highlighted:

- The report builds on previous reports and links to the discussion around de-escalation and the escalation criteria.
- Positive feedback has been received from Audit Wales in terms of Board effectiveness.
- It is important for the Board to undertake a self-assessment on an annual basis to inform the end of year governance arrangements.
- The Board considered the results from the self-assessment at an informal Board session to discuss the key messages and identify areas of priority going forward.

- The key messages included that 90% of Board members agreed the Chair and Chief Executive have a strong relationship and the Executive Directors and Independent Members work well together.
- The facilitated Board sessions completed have been helpful to emphasise individual and collective responsibilities as a Board at strategic level.
- There has been improvement in terms of risk management, this has also been acknowledged by the Board and validated by Audit Wales. It was noted that the Risk Team have also been shortlisted for a Risk Management Award.
- Significant progress is being made in terms of leadership roles and improvements are being made to allow the Board to be more strategic rather than operationally focussed.
- A Governance Improvement Plan will be developed going forward.

In discussing the report, the Board:

- Recognised the work completed under the leadership of the Director of Corporate Governance and congratulated the Risk Team on their nomination.
- Referred to the transformation in the way the Board conduct business which reflects the progress made in the capacity to work together and challenge positively.
- Noted that the public expect the Board to be able to work together to provide the best for the people we serve. Further progress can be made as one team who support and challenge each other equally.

It was resolved that the Board:

- **RECEIVED** the outcome of the self-assessment
- **AGREED** to the areas identified for improvement which will be addressed as part of the Board Governance Improvement Plan.

IMPROVING QUALITY

25/53 Integrated Medium Term Plan (IMTP)

The Board received the report and the Chief Executive highlighted:

- In the earlier report, Audit Wales referred to the first and second duty, to develop a three year Integrated Medium Term Plan (IMTP) and to achieve financial balance over a three-year period
- Two years ago, when the Health Board were escalated into Special Measures, the organisation were working on 3 x 90-day cycles as a rapid response to critical issues.
- Last year the Health Board approved an Integrated Annual Plan which included Special Measures and all additional actions over a one-year period.
- This year, the Plan, as a three-year IMTP with a balanced budget, represents a significant step forward and signals a move towards de-escalation.
- The Welsh Government are focussing on delivery in line with the Cabinet Secretary's ambition for the NHS in Wales.
- There has been significant involvement with, and a wide range of contributions from Committees, Groups, Chairs and Board Members into the development of the Plan.
- A summary of the Plan is being produced for staff and the public to highlight the direction of the Health Board and level of ambition for the people and communities in North Wales.

The Board received a presentation and the following was highlighted:

- In terms of improved planning, learning from previous years and other Health Boards has been considered, findings from the Special Measures Independent Reviews have been

incorporated and the Executive Team have engaged more widely both internally and externally.

- The Plan is more targeted and focussed on some key issues and going forward, continuous planning will help the Team to become more agile and responsive to the changing needs of the organisation.
- During the past two years, work has taken place to put down the foundations in terms of governance, relationships, integrated frameworks and the financial control environment to allow the Health Board to become more effective.
- Work has taken place to understand the nature and scale of the problems which include long waits within Planned Care as well as areas such as culture, learning from events and engagement.
- Going forward, there are significant challenges and these relate to areas such as organisational structure, productivity, processes, systems and the need to be aligned to ensure improvements.
- The Foundations for the Future work is a major change programme that will be delivered this year.
- Access to services remains the largest impact on the population across both Planned and Unscheduled Care as well as Primary and Secondary Care including access to Emergency Departments.
- Collaboration with partners is crucial and the need to utilise Primary and Community Care to ensure access to a range of services closer to home.
- A focus on integrating prevention and early intervention into service design needs to be strengthened as the Health Board move forward.
- The services offered by the organisation need to be high quality and this includes the use of digital and estates infrastructure as these are important enablers.
- The overview of the Plan includes five strategic objectives which have been modified from last year to ensure they provide more focused and targeted priorities.
- In terms of performance, the performance requirements for 2025/26 were highlighted along with the Cabinet Secretaries strategic priorities and enabling action which provides some areas that require additional focus.
- There will be a significant challenge to deliver in terms of performance, the delivery expectations for 2025/26 were emphasised to the Board stating that the Ministerial aim is to see improvements in these areas.
- It is important to have a strong start to the year and continue with the same pace going forward to try and achieve the targets set.
- In terms of finance, work has taken place around governance and oversight to reach this position.
- The outturn position is to deliver an £8.6m deficit and it was noted that the Health Board have successfully exceeded the £48m savings target for the current financial year.
- The Health Board has an underlying deficit, predominantly driven through two non-recurrent allocations of resource (£74.6m conditionally recurrent and £82m strategic allocation).
- These allocations are to become recurrent upon satisfying conditions, with the £74.6m recurrent and secured for future years on delivery of the targeted deficit for 2024/25.
- Pay award is centrally allocated in year, the organisation have a Planned Care allocation of £34m that is ring fenced and £9m to support flow and emergency pressures.
- There will be some inflationary cost impacts, growth cost pressures and Planned Care utilisation.
- The savings delivery target is £40m which will move us back into a position of break-even to facilitate the objective to deliver the key first financial duty to break-even.

- Inflation will be a challenge as well as out of area cost exposure and there will be a need to focus on reducing the £40m risk to deliver, work is also taking place in terms of value and sustainability.
- The three-year model was shared which will be challenging to deliver, the £188m underlying deficit remains the same over the three years however this may change as the organisation move forward.
- The Health Board has not previously had a financially balanced IMTP, the key points noted during the meeting will be incorporated into the Plan, this will be submitted to WG by 31 March 2025 and then cascaded across the Health Board for delivery.

In discussing the report, the Board:

- Queried whether there is any allowance for an increase in demand for Cancer referrals, it was confirmed that the figures build in an increase in demand and growth over the period for Cancer as well as other areas such as Planned Care and Mental Health.
- Referred to the third sector as an important partner while noting that it often had limited capacity to engage in meetings not directly related to service delivery. It was confirmed that the Board are keen to engage more effectively with the third sector in the community space in terms of prevention and early intervention and re-examine how the organisation work with community groups. It was suggested that this is monitored through the Planning, Population Health & Partnerships Committee.
- Highlighted the value and sustainability section and queried whether there is a plan to develop a skills audit to ensure the appropriate skills are embedded into the relevant teams. It was confirmed that a skills audit has been included in the Foundations for the Future Programme to ensure staff have the baseline skills required and also equipping staff with the right skills to facilitate change. It was also confirmed that there is an improvement programme within the organisation and work is taking place in this area.
- Suggested the need to address what the organisation may need to focus on over the next ten to fifteen years in terms of providing care for an older population as part of a continuous planning process. It was suggested the Planning, Population Health & Partnerships Committee discuss how continuous planning can be facilitated and monitored going forward.
- Queried the confidence levels to deliver given the large number of actions, whether the targets set are realistic and how the organisation embedded improvements. It was confirmed that the drive for improvement needs to be balanced with our current position and there will be areas that are more difficult to deliver such as Urgent & Emergency Care which will take longer.
- Highlighted the need for an emphasis on delivering productivity gains to generate savings which can in part be invested in service improvement within planned care and in part be used to increase spending on prevention and Primary Care which needs to be at the heart of our strategy.
- Queried how the budgets and resources are aligned to the objectives in the Plan to enable us to deliver the outcomes. It was confirmed that there is a need to focus on utilising funding and this will be clear in the strategy and the clinical service plan as well as having a strong focus on Primary and Community Care.
- Highlighted the savings target and queried whether this will be delivered by transformational change rather than ‘salami-slicing’. It was confirmed that there is significant evidence to suggest there are opportunities within the Health Board to create productivity and efficiencies throughout the organisation to improve services and financial delivery.
- Enquired how the Plan will make a difference to the people of North Wales over the next three years. It was confirmed that the organisation will become more effective and change the way the Health Board operate to ensure maximum delivery. The Health Board have a

clear strategy to deliver these plans and there is a need to develop service provision, become a learning organisation, improve access areas including Dental and Primary Care and make significant steps towards achieving access standards in Wales.

Actions:

- **25/53.1** Planning, Population Health & Partnerships Committee to monitor how the Health Board could engage more effectively with the third sector in terms of prevention and early intervention and re-examine how the organisation work with community groups. Planning, Population Health & Partnerships Committee to also focus on the work with partners to develop partnership working further and provide evidence that our partners have influenced our planning and join outcomes.
- **25/53.2** Planning, Population Health & Partnerships Committee to discuss how continuous planning in relation to the IMTP and focus for the next ten to fifteen years can be facilitated and monitored going forward.

It was resolved that the Board

- **RECEIVED** the Plan
- **NOTED** that the Plan is subject to and may require some final minor modifications
- **SUPPORTED** the onward submission of the Plan to Welsh Government on 31 March 2025 in accordance with the agreed timescales.

25/54 North Wales Medical School

The Board received the report and the Deputy Medical Director highlighted:

- As a University Health Board, training and research is a key part of the organisation and this includes the North Wales Medical School.
- The Medical School opened one year earlier than stated in the strategic plan and during September 2024, took its first intake of 80 undergraduates.
- This is positive for the Health Board as qualified doctors tend to stay where they train and then move through the organisation into consultant posts.
- There has been a large intake of Welsh speakers and this aligns to the organisation promoting the use of the Welsh Language.
- The Medical School has a positive impact in terms of research, a research strategy is being developed and this will help to improve outcomes for patients.
- The next step is to increase the intake of graduates from 80 to 130 per year.

In discussing the report, the Board:

- Recognised that the curriculum provides students with unique and excellent experience in Primary Care which is required as the organisation move forward.
- Confirmed the need to ensure students receive a positive experience as this provides opportunities for the recruitment of GPs and Medics in the future to train and stay in North Wales.
- Highlighted that prevention and changing ways of working with patients will become a key role for doctors and this can be built into the training provided by the Medical School.
- Acknowledged the importance of developing multi-disciplinary working and an understanding of disciplines within other teams which can be maximised as part of the training.
- Referred to the Education Steering Group which will focus on excellence in clinical practice and proving high quality placements for students. This work will be fundamental to the success of the organisation and there is a need to continue building relationship with higher and further education and evaluate the outcome for students as the Health Board progress.

- Thanked the Board for the positive working relationship with the Medical School and Bangor University.

It was resolved that the Board:

- **NOTED** the successful establishment of the North Wales Medical School which was delivered one year ahead of the original target and the ongoing development of the collaborative relationship with Bangor University.

25/55 Equality Annual Report

The Board received the report and the Associate Director of People Services highlighted:

- The Health Board is required to publish an Annual Equality Monitoring Report as part of the Public Sector Equality Duty and this includes the Gender Pay Gap Report and the Race Pay Gap Report.
- The report demonstrates the work of the Health Board during 2023/24 up to 31 March 2024.
- All reports have been to the Executive Committee, People and Culture Committee and have come to the Board for approval before 31 March 2025.

In discussing the report, the Board:

- Confirmed that this is part of our statutory duty as it affects staff within our organisation and the People and Culture Committee will discuss this further and report back to the Board.
- Received the actions and priorities included in the reports but queried the aim and outcome of the work. It was confirmed that there is a mismatch between what is required under the statutory duty and what may be required in order for the Health Board to address specific equality issues (for example, any disparity in terms of pay for similar jobs) and this needs to be reviewed in further detail.
- Highlighted gender pay in terms of men receiving higher salaries than women and queried how the organisation can support more women into senior positions. It was confirmed that women who have caring responsibilities may need encouragement in this area and further work is required.
- Referred to the challenges around discrimination and suggested the Health Board need to address all levels of the organisation to demonstrate equality. It was noted that more focus is required to target equality, a Strategic Equalities Forum has been developed and a review of the Executive Groups is taking place to ensure this reflected along with the culture and leadership work
- Stated the need to review the health offer for homeless and vulnerable communities as part of the equality agenda.

Action:

- **25/54.1** People and Culture Committee to discuss the equality agenda in further detail and report back to the Board.

It was resolved that the Board:

- **APPROVED** the Annual Equality Report, Annual Equality Monitoring Report, Gender Pay Gap Report and Race Pay Gap Report for the Health Board to meet its legal obligations to publish by the 31 March 2025.

IMPROVING QUALITY

25/56 Chair's Assurance Report: Quality, Safety & Experience Committee

The Board received the report and the Chair of the Quality, Safety and Experience Committee highlighted:

- The Committee received a demonstration of the new Quality Management System which was positively received and noted the learning would be captured to feed into the strategy.
- A QSE Development Session took place on 24 March 2025 with a focus on Clinical Audit and learning from Deaths which has allowed members to be more confident discussing those matters moving forward.
- The Committee suggested that the All-Wales Anti Sexual Harassment policy is reviewed by the People and Culture Committee.

Action:

- **25/56.1** People and Culture Committee to review the All-Wales Anti Sexual Harassment policy

It was resolved that the Board:

- **NOTED** the contents of the report.

25/57 Improving Quality Report

The Board received the report and the Executive Director of Nursing & Midwifery highlighted:

- The Health Board have the lowest total volume of reported incidents in Wales.
- There are currently three overdue Nationally Reported Incidents which shows a significant improvement in this area.
- The Complaints Team have sustained the improvements made by maintaining over 80% response rate which is a good position compared with other Health Board in Wales.
- Work is taking place in relation to falls training and the Team continue to improve standards and address the issues identified as part of the HSE inspection.
- There has been an improvement in patient feedback with 83% of patients now providing feedback allowing the Team to capture more quantitative data.
- Positive feedback was received following the infection control inspection which took place in December 2024.
- Work continues in relation to inquests and a number of training sessions and meetings with senior coroners have taken place.

In discussing the report, the Board:

- Referred to the behaviour of staff and whether embedding the values and behaviours going forward may have an impact on workforce stress. It was confirmed that work is taking place with Teams to gain further information in this area and support and counselling is being offered where required.
- Queried the implementation of the Quality Management System (QMS), it was confirmed that an app is being developed and will be piloted. The IMTP will support the progress of the QMS and the aim of the app is to highlight areas that need further focus.
- Suggested that complaints in relation to service access and communication could be linked as patients require information in relation to appointments and queried when significant changes may be apparent. It was confirmed that there is a need to ensure contact and communication is clear including clinicians providing clarity on timeframes. The number of complaints are reducing and there is a link with the recent increase in providing responses to complaints within a 30-day timescale.
- Highlighted that proactive learning is taking place in relation to the Mortality Report in terms of triangulation with the medical examiner information and the coroner inquest.

- Indicated that the report on falls management confirmed a significant increase in deaths related to falls in the over 60s and suggested the need to identify potential falls patients in advance to start improving outcomes.

It was resolved that the Board:

- **NOTED** the report.

INTEGRATED PERFORMANCE AND FINANCE

25/58 Chair's Assurance Report: Performance, Finance and Information Governance Committee

The Board received the report and the Chair of the Performance, Finance and Information Governance Committee highlighted:

- In relation to the establishment, it was clear that the additional costs from using agency, bank or temporary staff was a significant factor in the overspend on staffing costs, despite the fact actual numbers employed were below the funded establishment. This highlighted the importance of wherever possible filling posts with permanent employed staff.
- The Independent Members had had an opportunity to discuss the additional financial controls which had been implemented in the last two months of the year in advance of them being introduced in the private session at the last Board meeting..

It was resolved that the Board:

- **NOTED** the report

25/59 Financial Performance 2024/25 Monthly Report

The Board received the report and the Executive Director of Finance highlighted:

- In order to achieve the target deficit of £8.6m as reported at the last Board meeting, action was taken to set financial controls relating to non-clinical areas to avoid impact on patient care: the current position is £10.2 year to date and the Health Board are tracking towards the £8.6m target. This will be closely monitored to ensure the organisation remain on that trajectory.
- The Health Board are due to receive £82m non-recurrent and £74.6m recurrent funding this year in addition to our core recurrent allocation.
- The savings target was £48m and this has been exceeded, the organisation were thanked for their support in reaching this position.
- The year-to-date expenditure in terms of Capital is £20.1m against a year-to-date plan of £29.2m, reporting an underspend of £9.1m as at Month 11. This is an area that needs to be reviewed and managed closely over the coming days.

In discussing the report, the Board:

- Acknowledged the work of the Finance Team to reach this position and noted the learning that can be utilised going forward into the next financial year.
- Referred to the position in relation to Capital and queried the implications of an underspend at year end. It was confirmed that the Finance Team have a line of sight to spend the allocation however contracts need to be in place for specific programmes of work. If the Health Board fail to be within half a million underspend, this would result in a regulatory breach and a clawback of funds. There is a need to learn and review our ability to deliver large capital programmes to reduce the potential of this situation going forward.

It was resolved that the Board:

- **RECEIVED** and **SCRUTINSED** the report.

25/60 Integrated Performance Report

The Board received the report and the Director Performance & Commissioning highlighted:

- The report relates to Month 11 and provides information to the end of February 2025.
- In terms of quality and performance, no new never events have been reports since July 2024.
- The timely submission of Learning from Event Reports (LFERs) has been highlighted as an area of concern due to the increasing number of overdue submissions which incur financial penalties and immediate improvement is required in this area.
- Clinical Coding compliance remains a significant risk as compliance remains low.
- The current PADR rate is 79% which remains under target.
- The turnover rate for Nursing & Midwifery has reduced to 0.25%.
- In terms of access and activity performance, progress is being made in relation to Referral to Treatment: waiting times remain too high but improvements are being made in this area.
- Patients waiting over 156 weeks and 104 weeks have been the main focus through quarter 3 and 4 and there has been a reduction in both cohorts: there are plans within the IMTP to maintain this momentum.
- The performance against the single cancer pathway (SCP) target remains fragile and further work is required in this area.
- Additional capacity is required in relation to diagnostics however there continues to be a reduction in Therapies waits.
- Work is taking place to develop a sustainable service plan for Children's Neurodiversity services, it was confirmed that this is a challenging issue.

In discussing the report, the Board:

- Queried whether the recent decrease in attendees at Emergency Departments relates to new initiatives: it was confirmed that this improvement links to the work around the 6 goals and managing people at the front door, this is being reviewed to see whether this is sustainable.
- Highlighted the recent two week focus on care pathways and whether this will continue. It was confirmed that this was a 2-week rapid improvement event which highlighted some areas of learning. Some areas are sustainable in terms of process improvement however other areas will take longer to embed as there may be a requirement for additional resource, this remains a continuous process. It was suggested that learning and embedding change is reviewed in more detail by the appropriate Committee.
- Suggested that the People & Culture Committee do a deep dive into the link between absence and stress for staff to determine whether the Health Board could do more to help staff in this area.
- Confirmed that Children's Neurodiversity services has been included as a key priority for the Children's Regional Partnership Board and a plan in being developed to identify how the Local Authorities and the Health Board can work together to address this critical issue. This has also been discussed by the Quality, Safety and Experience Committee in terms of the significant increase in referrals.
- Stated that work is taking place to address the Learning from Events Reports (LFERs) issue, a new process has been put in place, this is being discussed with colleagues to ensure support is provided to deliver the new approach and avoid receiving fines. It was confirmed

that this has also been discussed by the Audit Committee and an update is now included as part of the regular Conformance Report received by the Committee.

Actions:

- **25/60.1** It was suggested that learning and embedding change is reviewed in more detail by the Quality, Safety and Experience Committee.
- **25/60.2** People and Culture Committee to do a deep dive into the link between absence and stress for staff to determine whether the Health Board could do more to help staff in this area.

It was resolved that the Board:

- **REVIEWED** and **SCRUTINISED** the contents of the report.

25/61 Capital Report and Programme for 2025-2030

The Board received the report and the Executive Director of Finance and Director of Environment & Estates highlighted:

- The Executive Team have used the same prioritisation process as last year as the Plan needs to align with the discretionary allocation.
- Areas including medical devices, infrastructure and digital will be considered separately due to the size, scope and value of the requests.
- Welsh Government have confirmed a discretionary allocation of £17m for 2025/26.
- The paper focuses on the discretionary fund and the targeted estate fund and covers the approach to prioritisation.
- Since the report was drafted, the allocation for BCU from the Targeted Estates Fund has been confirmed as 27% of the total for Wales, somewhat above expectations.

In discussing the report, the Board:

- Confirmed the need to move into a different place, in terms of a much more proactive focus on managing our property assets, including disposing of under-utilised land and buildings in order to increase our discretionary capital.
- Agreed that the Board need to be sighted on what has not been included in the Capital programme and the rationale behind those decisions.

It was resolved that the Board:

- **RECEIVED** and **APPROVED** the Capital Programme for submission to Welsh Government.

GOVERNANCE & ASSURANCE

25/63 Chair's Assurance Report: Audit Committee

The Board received the report and the Chair of the Audit Committee highlighted:

- The Committee have discussed the issue around ESR reporting more vacancies than the funded establishment and there is a need for essential work to take place in this area. It was confirmed that this is being reviewed in detail to align the relevant systems.
- The changes that have been issued by Welsh Government to the Standing Orders and have been made, this has been considered by the Audit Committee and the Board is required to approve he changes.

It was resolved that the Board:

- **APPROVED** the changes to the Standing Orders, Reservations and Delegation of Powers (SORD) as highlighted in the report.

25/64 Corporate Governance Report

The Board received the report and the Director of Corporate Governance highlighted:

- The Health Board are awaiting the outcome of a judicial review.
- The Board are asked to receive the recommendations noted in the report.

It was resolved that the Board:

- **NOTED** the contents of the report.
- **RATIFIED** the Chair's Action, dated 18 March 2025.
- **NOTED** the matters considered in the Private Board meeting on 30 January 2025.
- **RATIFIED** the approved Clinicians and Section 12(2) Doctors across Wales.

25/65 Corporate Risk Register

The Board received the report and the Director of Corporate Governance highlighted:

- The Corporate Risk Register has reported to the Risk Scrutiny Group, Executive Committee and Committees during the last cycle.
- The Executive Committee suggested a workshop may be useful to review some of the risks in more detail and ensure the actions are accurate to drive down the risks.
- Following Deep Dive of risk CRR24-18 Operational Planning for Transmittable Diseases and Outbreaks, there has been a reduction in the score.
- The Risk Team had worked with the Lead Directors to split the risks around challenged services to make these more specific, this has been discussed by the Executive Committee and further work is required.

In discussing the report, the Board:

- Recognised the approach was previously refreshed and suggested the current data needs to be reviewed to ensure focus and clarity on dates.
- Supported the views of the Executive Committee in terms of a further review of the Corporate Risk Register to ensure the appropriateness of the actions to address the risk mitigations.

It was resolved that the Board*:*

- **RECEIVED** the Corporate Risk Register as reported to Risk Scrutiny Group / Executive Team and Committees during January 2025.

25/66 Chair Reports of Committees and Advisory Groups

The Board received the Chair's Reports from the following Committees and Advisory Groups:

- Remuneration Committee
- Mental Health Legislation Committee
- People and Culture Committee
- Planning, Public Health and Partnerships Committee
- Local Partnership Forum
- Healthcare Professionals Forum
- Stakeholder Reference Group

- Executive Committee

The Chair thanked Jane Wild, Associate Member for the work and guidance she has provided as Chair of the Healthcare Professionals Forum (HPF). It was noted that Jane's tenure as Chair of the HPF has come to an end and it was agreed that the Chair would send a letter to Jane thanking her for her time on the Board.

The following was highlighted by the Chairs of the Committees:

- The Performance, Finance and Information Governance Committee have discussed the use of non-recurrent funding for posts and suggested that any contracts that are funded for more than 2 years from non-recurrent funds, should move into permanent posts. It was confirmed that staff on fixed terms contracts are required to be in a post for more than four years to make the post permanent. It was also confirmed fixed term contracts should be used selectively, there is a need to review the approach and this is being discussed as part of the Foundations for the Future Programme.
- The Stakeholder Reference Group have raised concern around timely communication to the third sector in relation to joint funding as early confirmation would allow better planning to be put in place. It was agreed that a commissioning review relating to funding would be completed and reported back to the Performance, Finance and Information Governance Committee with progress noted to the Planning, Population Health and Partnerships Committee.
- The Remuneration Committee ratified the Board level appointments.

Actions:

- **25/66.1** Chair of the Health Board to send a letter to Jane Wild thanking her for her time on the Board.
- **25/66.2** Complete a commissioning review relating to funding for the third sector and report back to the Performance, Finance and Information Governance Committee with progress noted to the Planning, Population Health & Partnerships Committee.

It was resolved that the Board:

- **RECEIVED** and **NOTED** the reports.
- **APPROVED** the appointment of a substantive Executive Director of Finance and the Director of Mental Health and Learning Disabilities.

OTHER MATTERS

25/67 Any other Business (as previously agreed with Chair)

The Chair confirmed that no issues had been raised.

25/68 Review of Meeting Effectiveness

It was agreed that the Board:

- Acknowledged the content of the video presentation and the use of a patient's Mother speaking to camera which provide a closer connection to the story. It was agreed to upload the video presentation to the website to be viewed more widely.
- Noted an improvement in the quality of the papers which is helpful for the Board to understand the content.
- Observed the openness and transparency of the Board meeting as a safe space to speak providing supportive challenge.

Action:

- **25/68.1** Corporate Governance Directorate to upload the video presentation to the website.

25/69 Date of Next Meeting:

Thursday 29th May 2025, 9.30am

25/70 Resolution to Exclude the Press and Public

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