Betsi Cadwaladr University Health Board (BCUHB)
Confirmed Minutes of the Health Board Meeting
held in Public on 29 May 2025
at Venue Cymru

Board Members present	
Name	**Title**
Dyfed Edwards	Chair
Dr Sreeman Andole	Interim Executive Medical Director
Tehmeena Ajmal	Chief Operating Officer
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
Chris Lothian-Field	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
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	
Jason Brannan	Deputy Director of People
Stuart Keen	Director of Environment and Estates
Steve Powell	Director Performance and Commissioning
Helen Stevens-Jones	Director of Partnerships, Engagement & Communications
Geraint Parry	Interim Assistant Director of Transformation and Improvement (part meeting)
Erica Roberts	Acting Assistant Director Digital Delivery (part meeting)
Georgina Roberts	Senior Associate Director, People Services (part meeting)
Geoff Ryall-Harvey	Chief Officer, Llais North Wales
Kamala Williams	Head of Health Strategy and Planning (part meeting)
Philippa Peake-Jones	Head of Corporate Governance
Laura Jones	Acting Corporate Governance Manager

PRELIMINARY MATTERS
25/78 Welcome, Introductions and Apologies for Absence The Chair welcomed Board Members, Observers, Members of the public and those viewing online to the meeting. The Chair also welcomed the Chief Operating Officer to her first formal Board meeting.

Apologies were received for Paolo Tardivel (Kamala Williams and Geraint Parry deputising) and Dylan Roberts.

On behalf of the Board, the Chair paid tribute to Mike Peters from the band The Alarm whose funeral was taking place during the afternoon. Mike Peters and his family have been champions for the NHS both locally and nationally, whilst also being users of cancer services in the Health Board. They have helped raise a substantial amount of money which has helped to support services within North Wales. Mike had also been a champion for the Welsh language, though not a fluent Welsh speaker himself. The Chair extended condolences to the family on behalf of the Board.

25/79 Declarations of Interest Relating to the Agenda

No declarations of interest were received.

25/80 Unconfirmed Minutes of the Health Board meeting held on 27.03.25.

It was resolved that the Board:

- **AGREED** that the minutes of the Health Board meeting held on 27.03.25 were a true and accurate record.

25/81 Action Log

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

Improving Quality Report

- In relation to action 24/236.1 it was confirmed that the Chief Executive had received an update from the lead Medical Examiner at the NHS Leadership Conference confirming that those involved in the changes to the medical certification and the role of Medical Examiners are aware of the barriers and there is a need to continue connecting in this area to ensure progress is made.

It was resolved that the Board:

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

25/82 Experience Item

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

- The story was based on Child Adolescent Mental Health Services (CAMHS) and described the Alternative 2 Admission Pilot project that has been launched to support Children and Young People in Crisis.
- The service has been developed in the Central area to support patients attending Ysbyty Glan Clwyd and has now been officially opened for use.
- Since the service commenced, the Team have been working to identify how many admissions have been averted from the Emergency Department and also opportunities to provide open access for use across the organisation.

In discussing the video presentation, the Board:

- Acknowledged the success of the project suggesting the need to involve Local Authorities and partners to add value to this service and provide an improved provision to deal with trauma for children and young people.
- Queried where the requirement for this provision commences and suggested the need to be proactive in terms of early intervention and support for children and young people before they reach a crisis situation proposing this forms part of the design and offer as the service develops and expands.
- Highlighted the enthusiasm of those involved in the project stating that this demonstrates the Health Board's commitment to the Children's Charter in practice and also integrates well with the Crisis Service due to the proximity to the team.
- Enquired how the transition from CAMHS to Adult services functions in this area. It was confirmed that the space has been designed to be multifunctional for different age groups, the CAMHS team are also working with the Adult Mental Health team to provide a pathway through the service.
- Agreed that the service needs to be evaluated as a multi-agency approach in terms of what support is being provided ahead of patients requiring this service and the aim to reach a point where young people no longer need to present at Emergency Departments.
- Thanked all the staff involved in developing the service to become operational.

It was resolved that the Board:

- **NOTED** the Experience item.

25/83 Chair's Report

The Board received the report and the Chair highlighted:

- Mike Parry's term as Chair of the Stakeholder Reference Group comes to an end in June 2025 noting this was Mike's last Board meeting. It was highlighted that Mike has accelerated and increased the scope of work and enthusiasm for the Stakeholder Reference Group as well as strengthening partnership working and was thanked for his contributions as an Associate Member of the Board.
- Peter Lewis has been presented as the prospective new Chair of the Stakeholder Reference Group and it was recommended that Peter's name is put forward to the Cabinet Secretary for Health and Social Services as the Board's nomination for the role of Chair and Associate Member of the Board. The Board agreed.
- Jane Wild's term of office as Chair of the Healthcare Professionals Forum and Associate Member of the Board has come to an end and the Chair thanked Jane for her dedication and contribution to the work of the Board.
- The Cabinet Secretary has endorsed Emma Adamson as the new Chair of the Healthcare Professionals Forum and Associate Member on the Board.
- The Ministerial Advisory Group (MAG) recently published their recommendations in a report which focuses around meeting the targets set by Welsh Government. As a Health Board there will be a challenge to get balance in terms of achieving what is set out by Welsh Government as well as moving forward the agenda of creating a sustainable Health and Well-Being service within local communities to ensure the Health Board are able to make long term improvements.
- The Chair recently visited Canolfan Glanhwfa in Llangefni to see the great partnership working in the community hub. This is an example of communities coming together and developing a building for the public to engage in activities that promote Health and Well-Being. He also visited Ysbyty Cefni in the town.

- The Chair also visited and officially opened the new IV Access Suite at Ysbyty Glan Clwyd. This is the first of its kind in Wales and allows patients to receive services outside of the hospital environment. This is an example of an innovative, whole system approach to service change which has a positive impact on patient outcomes and waiting times.

It was resolved that the Board:

- **AGREED** to put forward Peter Lewis to the Cabinet Secretary for Health and Social Services as the Board's nomination for the role of Chair of the Stakeholder Reference Group and Associate Member of the Board; and
- **NOTED** the content of the report.

25/84 Chief Executive's Report

The Board received the report and the Chief Executive highlighted:

- Members of the Board attended an event hosted by the Cabinet Secretary to receive a briefing on the priorities and five key areas for Health and Social Care over the coming year.
- There is significant cross reference with the Health Board's Integrated Medium-Term Plan and the organisation will receive information regarding the next steps and actions in due course.
- The Cabinet Secretary has announced the introduction of an annual public accountability forum where he will meet with NHS bodies in public, as part of holding the NHS to account for meeting our priorities. This will provide an opportunity for openness and transparency which the Health Board are well placed to provide.
- Representatives of the Board attended an event hosted by the Cabinet Secretary where the report of the Ministerial Advisory Group was launched. It was noted that the Ministerial Advisory Group report makes 29 recommendations and provides clear direction on utilising resources. Members noted that the report is being reviewed to ensure the organisation can respond to the recommendations and focus on deploying resources ensuring alignment with the Health Board plans.
- A cross section of staff within the organisation have come forward to become culture change leaders with a total of circa 100 staff to date. A recent meeting took place with the Chief Executive to discuss the way forward in terms of creating a compassionate, collective and inclusive organisation.
- There has been a focus on the quality of care provided by the organisation and the Chief Executive offered condolences in relation to a recent inquest that examined the sad death of a young baby during summer 2023 and a commitment to learn from these situations.
- The Chief Executive welcomed Tehmeena Ajmal as Chief Operating Officer and confirmed the recruitment of Dr Clara Day as the Executive Medical Director who is likely to take up post in September 2025.

In discussing the report, the Board:

- Acknowledged the recommendations included in the Ministerial Advisory Group report as a short-term focus and queried how this can be managed in conjunction with other priorities such as Special Measures and providing a balanced budget. It was confirmed that the Foundations for the Future Programme is based around building an organisation that can provide the immediate needs of patients waiting for care but also focuses on building an organisation that can take forward the medium and long-term planning arrangements.
- Confirmed that the aim of the Health Board is to build a Health and Well-Being service for the future that is different to the current provision in both the short and long term and this will be tested by evaluating what difference this will make for the people of North Wales.

It was resolved that the Board:

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

25/85 Vice Chair's Report

The Board received the report and the Vice Chair highlighted:

- The importance of the Ministerial Advisory Group report and the need for the Health Board to focus more coherently and consistently on developing Primary and Community care services as well as becoming more productive and effective in providing acute and planned care.

It was resolved that the Board:

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

STRATEGIC DIRECTION

25/86 Citizen Experience Report

The Board received the report and the Chair and Director of Partnerships, Engagement and Communications highlighted:

- The report provides the Board with a summary of the key themes following correspondence and engagement with the patients and citizens of North Wales.
- A wide variety of engagement is undertaken by Llais and the information provided on a regular basis allows the Health Board to develop a comprehensive picture of experiences and where service improvement is required.
- This is an evolving report that allows the team to learn and make improvements as we move forward and staff members were thanked for gathering the feedback to help understand the themes included in the report.
- The Independent Review of Engagement and Communications that was completed in this area highlighted that the Health Board are good at listening and compiling feedback but need to move into the space of identifying the changes that are being made as a result of the feedback received.

In discussing the report, the Board:

- Suggested there is a need for triangulation in terms of the information being provided via Board reports and how the issues being raised align and refer to action in other areas to address specific issues. For example, satisfaction levels in Emergency Departments are low but what is happening in other areas to address this such as developing services and hubs to address patient issues before they attend Emergency Departments. It was suggested that individual Committees review specific areas and provide feedback via indicators within reports as to which areas are being addressed by which Committee.
- Acknowledged that the Planning, Population Health and Partnerships Committee addresses how the Health Board engage with partners and suggested this report should go to the Committee initially to allow discussion on the strategic intent of the Committee before being shared with Board members.
- Referred to the need to review opportunities and areas for transformation within Community services and Primary Care suggesting this is supported by the appropriate Committee and reported back to the Board.
- Highlighted concerns in relation to a number of areas including the need to improve access to Dental services, provide additional capacity for Dermatology patients and the need to

review the work being completed by the Cardiff and the Vale Inclusion Service in terms of working with refugees, asylum seekers and the homeless. It was confirmed that the Stakeholder Reference Group will be discussing homelessness at their next meeting to understand this area in more detail and also the need to address the offer in relation to Dental and Dermatology.
- Recognised the correspondence being received highlighting issues in a range of areas and suggested the need to shape the feedback into services and Committees to address the issues being raised.
- Suggested that patients and communities should be highly involved in developing and designing services to ensure facilities are being transformed in line with the needs of the population. It was confirmed that co-design is currently taking place in the development of the Womens Health Hub which is also being supported by Welsh Government.
- Confirmed that there has been an increase in feedback and patient satisfaction levels however further work is required in this area and this is being supported by the Patient Experience Team in terms of monitoring action plans.
- Stated that a wide range of feedback being received links to planning, improvement and transformation and there is a need for this to influence service design and development as we move forward.

Actions:
- **25/86.1** Develop a method of triangulating the information being provided in Board reports and how the issues being raised align to what is being done in other areas. Suggest that Committees review specific areas and provide feedback via indicators within reports as to which areas are being addressed by which Committee.
- **25/86.2** The Citizen Experience Report to go to the Planning, Population Health and Partnerships Committee before being presented to the Board to allow discussion on the strategic intent of the Committee before being shared with Board members.
- **25/86.3** Planning, Population Health and Partnerships Committee to support a review of opportunities and areas for transformation within Community services and Primary Care and report back to the Board.

It was resolved that the Board
- **NOTED** the content of the report.
- **AGREED** that the detailed report should be considered by the Planning, Population Health and Partnerships Committee but recognising that this was an important report for the Board in terms of Citizen Engagement.

25/87 Strategic Direction and Planning Report

The Board received the report and the Head of Health Strategy and Planning highlighted:
- The report focusses on the Health Board's Strategic Objective 2: Delivery strategy and long-lasting change, as well as the Ten-Year Strategy, Clinical Services Plan and other key programmes including Special Measures and will be a regular report received by the Board.
- In addition, the report focussed on three additional areas which included:
  - The proposed changes to the Well-being objectives for consideration and approval, taking into account how these contribute to fair work and shape the development of Health Board plans at all levels.
  - The proposed approach for developing longer term service solutions relating to Tywyn and Penley Hospitals including proposed timelines set out for consideration and discussion by Board.

- The Hywel Dda University Health Board's Clinical Services Plan (CSP) Programme which is out for consultation to be noted by the Board.

In discussing the report, the Board:

- Acknowledged the update to the Well-being objectives stating the need for the organisation to commit to the objectives and ensure fair work is demonstrated throughout the Health Board by addressing issues relating to short term contracts as well as reviewing how the organisation commission services. It was agreed that there is a need to think more flexibly around the use of short-term contracts.
- Queried how the objectives are being managed and the steps to achieve progress in this area. It was confirmed that future items will set out the strategic workplan for the year to identify those areas that are progressing and where these align to the appropriate Committees. In terms of strategic development, this is in the early stages and the next report can provide an initial focus around strategic intent.
- Confirmed that the Well-being objectives have been discussed by the Planning, Population Health & Partnerships Committee who recommended that the Board approve the objectives, with caveats. It was confirmed that the objectives will inform the Ten-Year Strategy and it was also noted that there is a need to be clear on the future intent of the Well-being objectives to ensure there is no commercial risk associated with this area of work.
- Highlighted the need to consider the implications in terms of the Hywel Dda Clinical Services Plan and determine the services that the Health Board can offer. It was confirmed that the organisation will fully engage with Hywel Dda and this will provide an opportunity for learning as well as being able to influence their plan.
- Referred to the delay in discussing Tywyn and Penley Hospitals in the public domain and the need to move forward with similar discussions more quickly in the future. It was agreed that systems and processes need to be developed in this area to ensure formal discussions take place in a more timely manner.
- Agreed that the report allows discussion within the strategic planning space and highlights challenging and ambitious timescales. This will be a key report going forward in terms of the planning route for strategic change as well as the Clinical Services Plan.

It was resolved that the Board

- **APPROVED** the proposed Health Board well-being objectives (2025).
- **CONSIDERD AND DISCUSSED** the proposed process and timeline for developing sustainable solutions for Tywyn and Penley Community Hospitals.
- **NOTED** the update on Hywel Dda University Health Board's CSP programme and Public Consultation, which will run from 29 May – 31 August 2025.

25/88 Foundations for the Future

The Board received the report and the Chief Executive and Senior Associate Director, People Services highlighted:

- During the Summer of 2023, a series of Independent Reviews, engagement with colleagues and stakeholders, as well as other sources of insight identified a need to review the organisations Operating Model.
- The Foundations for the Future Programme has been developed as a major priority for the Board, and is one of the organisations four Major Change Programmes.
- The aim of the programme is to help better serve the population of North Wales by becoming a more effective organisation and the programme describes the core components

of how an organisation should work in order to successfully deliver its purpose and strategic objectives.

- A structured, evidence-based approach is being used that comprises of 3 stages which include discover, design and deliver.
- The discovery phase was completed in 2024, this provided a wide range of insights from staff and external colleagues and the outcome of this phase was published in November 2024.
- The Team are now working through the design phase which includes an outline design of the operating model however the scope is wider than just focussing on structures and includes five key elements: Strategy, Culture, People, Structure and Processes.
- All phases will involve listening and learning from staff in the co-creation of the model as well as reviewing models developed by external organisations from within Wales, the UK and further afield.
- In addition, the Health Board requires an organisational structure that enables improvements to be made for the health and well-being of the population as well as the provision and commissioning of high quality, high value healthcare services and a core model has been included in the paper.
- Work is currently underway to further engage with a plan to undertake the detailed design work in relation to the structures workstream and finalise the prioritised work in other workstreams during the Summer 2025.
- In the Autumn 2025, a further report will come to the Board containing the details of the structure's proposal, and if approved early implementation will commence on the structure's elements in Quarter 4.
- Progress and oversight of the programme will continue via the People and Culture Committee.

In discussing the report, the Board

- Thanked the Team for the work completed to date, acknowledging the importance of this step forward for the organisation to improve services for the people of North Wales.
- Emphasised the need to restructure the budget to support the objectives and core activity of the programme for future sustainability. It was confirmed that there is a need to establish and embed the programme effectively to ensure fundamental long-term change.
- Highlighted that the elements of the programme interlink which will allow for a more seamless route through healthcare and will allow wider opportunities for staff to develop and improve their skills.
- Enquired how this will have an impact on the public, those waiting for appointments, improving the health and well-being of patients and also Health Board staff. It was confirmed that the programme provides clear strategic direction with high level outcomes to improve the way the organisation operates and provides a significant step forward to deliver better outcomes for the population of North Wales.

It was resolved that the Board:

- **DISCUSSED** the programme.
- **ENDORSED** the proposed approach in proceeding to more detailed design; with a further report coming through to the Board in Autumn 2025.

25/89 Health Board Key Programmes Progress Report

The Board received the report and the Chief Executive and the Quality Improvement Fellow highlighted:

- In addition to the four Major Change Programmes for the organisation, the report focusses on the additional key programmes that are in development and these are listed in the paper.
- An Executive led Strategic Planning and Service Change Group reporting to the Executive Committee has been developed to oversee the programmes and ensure governance and reporting processes are in place.
- The aim of each of the programmes all include an element of workforce redesign and align to improving services and providing better care for the population of North Wales.
- The report highlights the background, current position and key challenges for each programme as well as the plan to go forward.
- The item is for discussion to ensure the programmes move forward in line with the strategic direction of the Health Board.

In discussing the report, the Board:

- Highlighted that the capital programme is a significant element that requires delivery to enable the provision of the key programmes.
- Referred to the digital programmes and the current challenges, pace is required and there is a need to be assured in this area.
- Recognised that further resource is required to deliver the prescribing services suggesting structures need to be further developed to take this programme forward and deliver services.
- Noted that the cover sheet refers to partial assurance and queried how this level of assurance can be increased. It was confirmed that the Strategic Planning and Service Change Group will identify assurance levels going forward to be reported back to the Board via future reports.
- Queried the original proposal for the Ablett Mental Health Unit, it was confirmed that the original plan was to provide storage and offices rather than clinical space. The new strategy supports estates rationalisation in terms of reducing floor area.
- Stated that the programmes include an element of risk and requires substantial levels of funding and this needs to be reviewed in further detail in future reports.
- Confirmed that the report demonstrates how the Health Board are developing services for the people of North Wales, the report will mature as we move forward and will highlight progress, timelines, risk mitigation and confidence levels.
- Welcomed the report as an opportunity for the Board to endorse the arrangements going forward and allow the information to be shared within the public domain.

It was resolved that the Board:

- **NOTED** the report and current position of key programmes.
- **AGREED** to receive further summary updates at Board with the individual programmes reported at committee level in with Annual Delivery Plan cycle.
- **AGREED** that oversight of the programmes will be reported through the Planning, Population Health and Partnerships Committee.
- **RECEIVED ASSURANCE** that the Executive Committee has oversight of all these programmes.

25/90 Annual Plan – 2024/25 Closure and Look Forward to 2025/26

The Board received the report and the Quality Improvement Fellow highlighted:

- The report provides a summary of the progress made throughout 2024/25 against the five strategic objectives included in the Annual Delivery Plan.
- Significant progress has been made against a range of governance elements and the Board approved its first financially balanced Integrated Medium-Term Plan (IMTP) this year.

- The new Values and Behaviours Framework has been formally launched by the Board and there are currently circa 100 culture change leaders across the organisation.
- A broad programme of engagement work is taking place and improvements have been made in areas such as Pharmacy, performance against Mental Health metrics and concern management.
- There has been an 85% completion rate against the delivery of the strategic objectives which is higher than the rate in previous cycles.
- The Annual Delivery Plan for 2025/26 has been developed alongside the Integrated Medium-Term Plan (IMTP) and a more detailed programme of work has also been created underneath the priorities to support more detailed tracking and assurance.
- A change control summary was included in the report highlighting the outcome of the assessment to retire the objectives that have subsequently been superseded by newly agreed priorities.
- Further work is required in relation to Strategic Objective 4 to ensure delivery expectations are met, clinical services are strengthened and the Health Board deliver in terms of making a difference to the population of North Wales.
- The approach is maturing, further improvements are continuing and this will provide assurance on how we progress going forward.

In discussing the report, the Board:

- Recognised the 85% completion rate but also suggested the need for the Board to be sighted on whether the deliverables completed have been embedded and sustained and also what was not achieved within the strategic objectives.
- Stated the importance of identifying which objectives align with which Committee to provide assurance around the delivery and integration of specific outcomes. It was confirmed that work is taking place with teams to develop and align objectives to the Integrated Performance Report and the Committees and a clear protocol is in place to ensure any evidence being provided is tested to provide assurance.
- Highlighted the lack of progress in relation to challenged services and the need to focus on this area over the next twelve months. It was confirmed that this is a key area that has been confirmed by Welsh Government and checkpoints will be established in this space.
- Queried whether the organisation need to have a longer term look back for example over a three-year period to determine whether there have been improved health outcomes for the population. It was confirmed that the look back element is important to determine whether the changes being made are providing improved outcomes for patients and whether there is a need to change the way services are being delivered.
- Confirmed that the Annual Plan has transformed over the past two years, the work completed to date aligns with the information being received from the Ministerial Advisory Group and the Cabinet Secretary, there is further work to be completed in relation to Value and Sustainability and the Clinical Services Plan and there is a need to integrate these elements of work as we move forward.

It was resolved that the Board:

- **RECEIVED ASSURANCE** on the progress made throughout the year along with the challenges highlighted
- **APPROVED** the change controls outlined within the paper
- **RECEIVED** the Annual Delivery Plan for 2025/26 and **AGREED** that oversight will be via the relevant Board committees with an overarching report to Board.

25/91 Staff Engagement and Experience Report

The Board received the report and the Deputy Director of People highlighted:

- This is the initial version of the report and provides an overview of staff experience and engagement including key elements of feedback from the Staff Survey and progress in terms of creating a compassionate culture.
- Significant work has been completed in relation to culture, leadership and the Values and Behaviours Framework to strengthen staff connections with the organisation. The Personal Appraisal Development Review (PADR) has also been revised to align with individual performance as well as values and behaviours.
- In terms of Key Performance Indicators, the current position of the Health Board demonstrates low sickness absence and nurse staffing turnover and high completion of mandatory training.
- The results from the Staff Survey have been received and the detail is being shared with Teams to review the data and determine local feedback from staff. The participation rate has been low, there is a need to reach more staff to gain quality information and a clear target is being set for next year.
- Reference was made to the engagement index, there has been a decrease in the overall score and a range of concerns were captured however there had been an increase in positive feedback in a number of areas including the ability to make improvements and enthusiasm for work.
- Further work is taking place in relation to culture which includes Speaking up Safely, the relaunch of the Seren Betsi Award, recognising staff achievements and tools have been put in place to support Managers with recognition and reward.

In discussing the report, the Board:

- Recognised the results received from the Staff Survey but suggested the need to consider how to reach those members of staff who want to raise concerns but do not have the capacity to complete the survey. It was confirmed that there are a range of ways to compete the survey however further work is required to ensure senior directors and managers take responsibility to connect with staff around the importance of completing the survey.
- Suggested incentivising the Staff Survey to increase the completion rate. It was confirmed that a prize draw was offered however feedback suggested staff are not completing the survey as they do not have belief and confidence that changes will be made as a result of the information being provided and there is also a need to start planning ahead to allow staff the time to complete the survey.
- Referred to staff retention and it was confirmed that there has been a reduction in retention figures especially in Nursing, a Retention Lead has now been appointed to provide more focus in this area.
- Highlighted the increase in the patient safety score suggesting this connects to the narrative of the Health Board and the need to share positive feedback.

It was resolved that the Board:

- **DISCUSSED** the Staff Engagement and Experience Report.
- **ENDORSED** the actions underway, to be overseen by the People and Culture Committee of the Board.

INTEGRATED PERFORMANCE

25/92 Chair's Assurance Report: Quality, Safety and Experience Committee

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

- The Board have been alerted on the discussion regarding the Nurse Staffing Act as it was identified during the Committee that the nurse staffing levels requirements reported to the Board in November 2024 had not been funded. Progress against this is covered in the Nurse Staffing Levels Act paper later on the agenda.
- The Committee received the Royal College of Psychiatry Action Plan, progress has been made in terms of action and implementing the recommendations from the report.
- There are a number of risks associated with the QSE Committee, there is a need to focus on the mitigations and reducing the risk scores going forward.

It was resolved that the Board

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

25/93 Improving Quality Report

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

- The number of inpatient falls continues to decrease across the organisation resulting in a reduction to harm levels and the extensive learning and improvement in relation to inpatient falls prevention and management has been acknowledged by the Health and Safety Executive.
- There has been a similar downward trend in relation to healthcare acquired pressure ulcers, significant work has taken place in this area to reduce levels of harm.
- There has been an improvement in Nationally Reportable Incidents with only four currently overdue and also an improvement in compliance with the 75% target of overdue complaints which is currently at 78.3%.
- Work has taken place in relation to Clinical Effectiveness to take forward improvements in this area and the Clinical Audit Final Internal Audit report 2024-2025 was considered by the Audit Committee in May 2025.

In discussing the report, the Board:

- Referred to the press release from the British Medical Association Cymru to end corridor care and queried how the Health Board can work towards eliminating this. It was confirmed that a formal response has been provided, there are difficulties with the flow of patients through the organisation and work is taking place with the clinical and operational teams to provide support in this area
- Highlighted the Learning from Events Reports (LFERs) and whether there is an escalated focus in this area. It was confirmed that this is an area of focus, the process has been amended and the three divisions with the highest number of LFERs are being supported.
- Further work is also taking place in relation to LFERs with the Legal Service Team to gain oversight and reach an improved position. Assurance was also provided as the Health Board are currently working closely with the Welsh Risk Pool to agree extensions to those reports that are overdue.

It was resolved that the Board:

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

25/94 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 (PFIG) Committee highlighted:

- Significant work is required in relation to patients whose follow-up is significantly overdue, this needs to be reviewed in further detail to identify priorities in addressing the backlog.
- The Committee will discuss the response to the Ministerial Advisory Group recommendations at the next meeting and additional members will be invited to join the meeting.
- There will be a need to restructure the budget when considering the Foundations for the Future programme.
- There is potential to review the risk tolerances set by the Executive against the risk appetite and this will be considered in due course.

It was resolved that the Board:

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

25/95 Integrated Performance Report

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

- The report highlights the position up to the end of March 2025.
- After having no new never events over the past seven months, a never event occurred in March 2025.
- The number of overdue Learning from Event Reports (LFERs) have decreased with the latest position at 43 overdue which is a positive improvement.
- Clinical Coding compliance remains a significant risk as compliance remains low and the latest position was 21.4% as at January 2025.
- Sickness absence decreased to 5.6% in March 2025 however the monthly turnover rate of nursing and midwifery staff increased during the same month.
- Reference was made to access and activity performance which highlighted a reduction in the number of patients waiting over 104 weeks and an increase in compliance against the Mental Health measures.
- The latest performance relating to children requiring assessment for neurodivergence continues to be significantly adverse to target and has been recognised as a nationwide issue, work has started to develop and improve the service.
- Improvements have been made in relation to Referral to Treatment performance with the current figures showing a significant reduction and there is a need to maintain this position.
- The performance against the single cancer pathway (SCP) target remains fragile, however the position improved at the end of March 2025 with a rate of 59%.
- The number of patients waiting over 8 weeks for a diagnostic test has increased, a bid has been submitted to Welsh Government for additional funding in this area.

In discussing the report, the Board:

- Queried how Primary and Community care reports in to the Board and should this be a key area of challenge. It was confirmed that Primary and Community care along with Commissioning will contribute to this report in future. However, further work is required.
- Referred to theatres starting late and finishing early, it was confirmed that the Chief Executive has met with surgeons in the East who want to create a more streamlined process and this will be taken forward.
- Suggested that there is a lack of leadership at the correct level for clinicians. It was confirmed that clinical leaders are engaging in service review meetings and this will be addressed as part of the Foundations for the Future programme.

- Highlighted a range of issues that need to be addressed including clinical coding and the follow up backlog. It was confirmed that clinical coding poses a mortality risk, service change is required and work is taking place to mitigate the risk. In relation to follow ups, there is a need to review the backlog to distinguish between cases.
- Referenced the unsatisfactory position in relation to diagnostics, it was confirmed that the position has deteriorated, a diagnostic service review has recently taken place and work continues to address the issues in this area.

It was resolved that the Board:

- **REVIEWED** the contents of the report.
- **PROPOSED ACTIONS** arising from the report and **IDENTIFIED** additional assurance work and actions recommended for Executive colleagues to undertake.

25/96 Finance Report

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

- The draft accounts were submitted on 2 May 2025 highlighting a full year unaudited financial position for the Health Board as a deficit of £7.6m.
- Audit Wales are reviewing the documentation, the Finance Team are working closely with the Team and the 30 June 2025 will be the last day to submit the final accounts.
- A deficit position of £7.6m does not meet the key first financial duty to break-even therefore the Health Board may receive a regulatory qualification.
- The full year savings value totals £58.4m which is higher than the target however the full year recurrent savings totals £44.0m which reflects a gap of £4.0m.
- In terms of Capital, the 2024/25 expenditure is £51.7m against a year-to-date plan of £52.0m, with an underspend of £0.3m. Going forward there is a need to review and move into a financially sustainable model.
- The month 1 position is reported as a £3.7m deficit against the savings requirement of £40m apportioned equally over the financial year. There is a need to focus on savings delivery as well as value and sustainability as a key model.

In discussing the report, the Board:

- Suggested that the Performance, Finance and Information Governance (PFIG) Committee reflect on the last twelve months in terms of what worked well and lessons learnt. It was confirmed that the Committee have plans to review value and sustainability and can factor this into discussions.
- Queried how funds are being moved into Primary and Community Care. It was confirmed that there is no clear line of sight and there is a need to ensure allocations into this area are visible. This will form part of the value and sustainably work: there will be a need to review efficiencies, develop proposals and target investment to provide the greatest return and Board members will be involved in those discussions.
- Acknowledged the positive result in achieving the savings target for the Health Board, thanked the Team for their hard work and noted the position provides confidence in the organisation going forward in relation to financial control.

It was resolved that the Board:

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

GOVERNANCE & ASSURANCE

25/97 Nurse Staffing Levels Act

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

- The paper is an annual assurance report on compliance with the Nurse Staffing Levels (Wales) Act highlighting that the organisation has met its statutory duty to review and calculate nurse staffing levels requirements and provided assurance to the Board in this area.
- During April 2025 the budgets were uplifted to reflect the nurse staffing levels presented to November Board and recommended in the May 2024 review, but not for the recommended November 2024 requirements. Mitigating actions have been taken to support the areas and maintain patient safety, this is detailed within the appendices of the report and has been supported by the Chief Operating Officer.
- The ward acuity data and incidents for these unfunded areas will be reviewed going forward to determine if any harm has been caused over the period of the assessment and if this poses a risk, this will be considered as part of the ongoing process.
- In relation to wards that fall under the inclusion criteria of Section 25B of the Nurse Staffing Levels (Wales) Act 2016, the areas reviewed in the Spring 2025 reviews did not require any further uplifts, this does not require approval but will be monitored going forward.
- The Board has now discharged its duty in line with legislation.

It was resolved that the Board gained **ASSURANCE** in relation to:

- Betsi Cadwaladr University Health Board (BCUHB) meeting its statutory "duty to calculate and take steps to maintain nurse staffing levels" in all wards that fall under the inclusion criteria of Section 25B of the Nurse Staffing Levels (Wales) Act 2016.
- BCUHB is meeting its statutory duty to provide an annual presentation to the Board detailing calculated nurse staffing levels.
- The Executive Director of Nursing & Midwifery, as the designated person has undertaken the bi-annual reviews and approved the nurse staffing calculations presented within this report and the associated appendices.

25/98 Chair's Assurance Report: Audit Committee

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

- The Committee received progress against the follow up review of Contracted Patient Services – Quality and Safety arrangements and swift action to address this review is being taken.
- It was agreed that overdue policies, Welsh Health Circulars and Ministerial Directions will have oversight in the form of a tracker to ensure the Committee are able to monitor action within these areas.
- A private Audit Committee took place on 20 May 2025 to review the draft Annual Report & Accounts for 2024/25, the Finance Team were commended for meeting the deadline to allow External Audit to commence the Audit at an early stage.
- The final report will be received by the Audit Committee on 24 June 2025 and Internal Audit are suggesting an overall limited opinion will be received.

It was resolved that the Board:

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

25/99 Corporate Governance Report

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

- There are a number of appendices and recommendations for consideration and approval.
- The Board cycle of business has been revised to align to the Integrated Medium-Term Plan (IMTP).
- The Committee cycles of business will now be developed in line with the Board cycle of business and highlight priorities for each Committee to be reviewed by members.
- A Chair's Action has been included for ratification.
- A protocol has been developed for matters considered in the Private Board to allow Board members to gain an understanding in this area and this is part of the improvements being made in line with the IMTP.
- A full set of Terms of Reference have been developed and received by the relevant Committees as this review is required to take place on an annual basis. The Charitable Funds Committee are due to review their Terms of Reference in June 2025.
- The Committees have reviewed the Board Assurance Framework during the recent meetings, it has been agreed not to share the Corporate Risk Register with the Board at this meeting as further work is required by the Executive Committee.
- The Corporate Governance Directorate were thanked for their work and support to the Board.

It was resolved that the Board:

- **NOTED** the content of the report.
- **APPROVED** the Board Business Cycle for 2025-26 and the planned Informal Board and Development Sessions.
- **RATIFIED** the Chair's Action dated 30 April 2025.
- **NOTED** the matters considered in the Private Board meeting on 27th March 2025.
- **APPROVED** the Committee and Advisory Group Terms of Reference for inclusion in the Standing Orders.
- **RATIFIED** the approved Clinicians and Section 12(2) Doctors across Wales.

25/100 Chair Reports of Committees and Advisory Groups

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

- Planning, Public Health and Partnerships Committee
- Mental Health Legislation Committee
- People and Culture Committee
- Remuneration Committee
- Local Partnership Forum
- Executive Committee

In discussing the reports, the following was highlighted:

- The question raised at the Local Partnership Forum in relation to delays to policies being uploaded was queried. It was confirmed that there is a delay with the current policy process. The process is complex and this is being streamlined and the new process will be shared at the next meeting.
- Mike Parry was thanked for his contribution to the Board and Stakeholder Reference Group, Mike Parry confirmed his confidence in the Board and thanked the Board members for their support.

It was resolved that the Board:

- **RECEIVED** and **NOTED** the reports.

OTHER MATTERS

25/101 Review of Meeting Effectiveness

It was agreed that the Board:

- Are working well as a unified Board and this approach will continue.
- Need to identify the most important items that require discussion as the main aim of the Board is to improve performance and healthcare services for the population of North Wales.
- Need to receive information relating to Primary and Community Care as this is an important area of focus.
- Are moving into the strategic agenda and planning space.

25/102 Date of Next Meeting:

Thursday 26 June 2025, 9.30am

25/103 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."