

Betsi Cadwaladr University Health Board (BCUHB)
Confirmed Minutes of the Health Board Meeting
held in Public on 30 July 2026
at Venue Cymru, Llandudno

Board Members present	
Name	Title
Dyfed Edwards	Chair
Tehmeena Ajmal	Chief Operating Officer
Clare Budden	Independent Member
Russell Caldicott	Executive Director of Finance
Clara Day	Executive Medical Director
Debbie Eyitayo	Executive Director of People and Organisational Development
Urtha Felda	Independent Member
Dyfed Jones	Independent Member
Paul Lambert	Independent Member
Peter Lewis	Associate Member: Chair of Stakeholder Reference Group
Chris Lothian-Field	Independent Member
Jane Moore	Executive Director of Public Health
Billy Nichols	Independent Member
Teresa Owen	Executive Director of Allied Health Professionals and Health Science
Fôn Roberts	Associate Member (Representative of Directors of Social Services)
Carol Shillabeer	Chief Executive
Paolo Tardivel	Interim Executive Director of Transformation and Strategic Planning
Caroline Turner	Independent Member
Rhian Watcyn Jones	Independent Member
Gareth Williams	Vice Chair
In Attendance	
Sue Irlam	Head of Engagement and Complaints Advocacy, Llais
Laura Jones	Corporate Governance Manager
Stuart Keen	Director of Environment and Estates
Chris Lynes	Deputy Executive Director of Nursing
Phylis Makurunje	Aspiring Board Member
Justine Parry	Acting Director of Digital, Data and Technology
Philippa Peake-Jones	Head of Corporate Governance
Helen Stevens-Jones	Director of Partnerships, Engagement and Communications
Pam Wenger	Director of Corporate Governance

PRELIMINARY MATTERS

26.133 Welcome, Introductions and Apologies for Absence

The Chair welcomed Board Members, members of the public and those viewing online to the meeting and apologies were noted for Angela Wood and Mike Larvin.

The Chair also welcomed representatives attending for the **Tywyn Community Hospital** item along with Sue Irlam, Head of Engagement and Complaints Advocacy, Llais who joined the meeting to contribute to the discussion.

The Chair highlighted that the agenda includes a number of key items featuring **Planned Care** and the response to Welsh Government in relation to the funding and additional support received. It was also noted that **Urgent and Emergency Care** continues to be a regular report to the Board to highlight progress in this area.

The Chair noted that this would be Tehmeena Ajmal's final meeting as Chief Operating Officer before leaving the Health Board in August 2026 and thanked her for the contribution she has made over the past 18 months, particularly during a challenging period and wished her well for the future.

The Chair also welcomed Chris Lynes who was attending on behalf of Angela Wood and noted that Angela Wood, Executive Director of Nursing and Midwifery would be leaving the Health Board at the end of August 2026. The Chair thanked Angela for her significant contribution and wished her well for the future.

26.134 Declarations of Interest Relating to the Agenda

No declarations of interest were raised.

26.135 Unconfirmed Minutes of the Health Board meetings held on 28 May 2026 and 25 June 2026

It was resolved that the Board:

- **AGREED** that the minutes of the Health Board meetings held on 28 May 2026 and 25 June 2026 were a true and accurate record.

26.136 Matters Arising and Action Log

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

Emergency Department Business Case

- Reference was made to action 26.131.1 noting that the draft Health Inspectorate Wales report has been received and is being reviewed for factual accuracy. An Oversight Group is being established to progress the next stages of the review and it was suggested that this action is closed.

Proposal to becoming a Maethu Cymru / Foster Wales Partner and Foster Friendly Employer

- In relation to action 26.102.1 it was noted that the Board supported the proposal to become a Maethu Cymru partner and queried whether this could be progressed earlier than January 2027. It was noted that a meeting is scheduled for August 2026 and that work is underway to ensure the Health Board meet the accreditation requirements. Should this position be reached sooner, an update will be reported accordingly.

Chair's Report

- Referred to action 25/129.1 from 2025 around the importance of providing opportunities to support young people into the workplace and noted the link to the Foundation for the Future Programme querying whether further progress could be made more quickly. It was confirmed that this will be discussed further at the People and Culture Committee agenda setting meeting.

Matters Arising and Action Log

- In relation to action 26.84.1 that was proposed for closure, further clarity was requested around ensuring value and sustainability as well as savings become more visible. It was confirmed that work is progressing through the initial step which includes identifying 2% savings, the next step will focus on value and sustainability and once the information has been evaluated, it will provide a clearer view of the remaining savings gap. The final step will involve bringing more difficult choices to the wider Board for consideration of any further steps required.

It was resolved that the Board:

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

26.137 Experience Item

The Executive Director of Allied Health Professionals and Health Sciences introduced the experience item and a video presentation was shared with the Board:

- It was noted that the video focussed on the impact of the **Independent Contributing Active Network (iCAN)** which provides community-based mental health support.
- The story demonstrates the value of **iCAN** and the importance of partnership working with Caniad and wider partners across North Wales, providing a clear focus on early intervention and alignment with the **National Mental Health Strategy**.
- Thanks were extended to the Mental Health team for their work in this area reflecting that smaller community-based interventions have become increasingly important, with the potential to make a significant difference, save lives and support the wider aims of the **Mental Health Report**.

In discussing the report, the Board:

- Were encouraged by the work being delivered and noted that the approach aligns with the Welsh Government strategy and provides timely, practical support through local partners and third sector, building on community strengths to meet local needs.
- Highlighted the positive impact of the service noting its role in reducing stigma suggesting the need to further improve community access and the ability to provide preventative support which may reduce the need for more formal assessment.
- Suggested the need for continued oversight of the impact of early intervention, including how outcomes could be captured beyond waiting times to demonstrate where people have been supported without requiring access to more formal services.
- Noted that the revised **Performance Report** provides a clearer forward look on delivery plans and savings against the Ministerial priorities and will enable more visibility of areas of good practice, with further refinement planned as the report develops.
- Referred to the **Outcomes Framework** suggesting the aim to move beyond Welsh Government measures to assess the extent to which support has addressed individual needs and identify opportunities for further improvement.
- Acknowledged the value of collaborative and partnership working as well as the benefits for volunteers and beneficiaries in terms of impact, funding and sharing good practice.
- Thanked all involved in this area of work which is having an impact on local communities and noted the challenges to support this work in the longer term.

It was resolved that the Board:

- **NOTED** the Experience item.

26.138 Chair's Report

The Board received the report and the Chair highlighted:

- Ongoing engagement continues following the elections, including meetings with new Members of the Senedd and Ministers noting the **Ministerial visits** that have taken place in Ysbyty Gwynedd, Ysbyty Glan Clwyd and the North Wales Surgical Hub, Llandudno to provide positive opportunities to showcase the work taking place.
- A viewing of '**This Too Will Pass: My Bipolar Life**' was presented at Y Ganolfan, Porthmadog earlier this month with Chris Eastwood sharing his inspiring experience of living with Bipolar noting the work taking place with Llais in this area.
- A number of **Graduation Ceremonies for Supported Interns** have been taking place across the region and recognised the support and achievements of young people in the workplace and the benefits gained as a result of the support received from partners.

It was resolved that the Board:

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

26.139 Chief Executive's Report and Escalation Progress Report

The Board received the reports and the Chief Executive highlighted:

- There will be a number of Executive Team changes over the coming months noting that Angela Wood, Executive Director of Nursing and Midwifery will be retiring at the end of August 2026 following 39 years in the NHS. This is a phenomenal achievement, and thanks were extended to Angela for her service and dedication to the NHS in North Wales.
- Tehmeena Ajmal, Chief Operating Officer will also be leaving during August 2026 and thanks were extended for the important role Tehmeena has provided, supporting services and teams and showing a strong commitment to improving care within communities.
- Russell Caldicott, Executive Director of Finance and Performance, has recently been appointed to the role of Chief Finance Officer at the University Hospital of North Midlands and will leave the Health Board at the beginning of October 2026.
- Recruitment to these three key Executive roles is progressing positively, with a thorough process being undertaken to secure colleagues for these demanding positions.
- A number of summits have been taking place including the **Primary Care Summit** convened by the Cabinet Minister for Health and Care to consider how the **Community by Design Transformation Programme** could be translated into practical delivery and this will report back to the Board in due course.
- A **Graduate Summit** has also taken place to consider the employment position for Nursing, Midwifery and Paramedic graduates qualifying in Summer 2026 noting that the Health Board continue to offer roles to those who have trained within North Wales.

Health Board Escalation Progress Report

- The Chief Executive presented the **Health Board Escalation Progress Report** highlighting that the **Escalation Board** held during July 2026 was held in North Wales and was chaired by the Cabinet Minister for Health and Care.
- During the meeting the Cabinet Minister for Health and Care announced the forthcoming **Well Led Review** which will provide an independent assessment of the Health Board's improvement journey. The review will assess the effectiveness of leadership, governance, organisational culture, capability and quality arrangements, together with the Health Board's readiness to deliver sustainable improvement.

- The detail of the review will follow however it was noted that Quality will not form part of the scope of the review and a more detailed briefing with Board members will take place in due course.
- Significant progress has been made in relation to **Planned Care** noting that the Health Board performance against patients waiting over 104 weeks from Referral to Treatment is currently meeting the de-escalation criteria. Plans have now been submitted to reflect the actions proposed to move forward and to eradicate 104 week referral to treatment waits.
- Progress is being made in relation to **Diagnostics** and the Health Board are close to meeting the de-escalation level in this area. Plans have been submitted to reflect the actions proposed to eradicate over 8 week Diagnostic waits.
- **Urgent and Emergency Care** continues to be a major focus for the Health Board and the Cabinet Minister for Health and Care is encouraging the organisation to achieve the de-escalation criteria in this area by the end of September 2026.
- Work continues in relation to Quality, Planning, Finance and Workforce and the next **Escalation Board** will take place in October 2026 to review progress in these areas.

In discussing the report, the Board:

- Referred to the **Well Led Review** and queried how this differs from the **Audit Wales Structured Assessment**. It was confirmed that in England, the Care Quality Commission undertake **Well Led Reviews** against a range of criteria, whereas in Wales the equivalent assurance role is undertaken by Audit Wales noting that the Auditor General is accountable to the Senedd.
- Noted that the **Well Led Review** will draw on the information gained from the **Health Board Structured Assessment** as well as a range of relevant evidence, including a document review, Board and senior leadership engagement, individual interviews, meeting observations and input from an Expert Panel and Reference Group. Preparation for the review will take place in August 2026, the fieldwork will be completed in September 2026 and a report is expected during October 2026.
- Acknowledged the changing political landscape and the comments made by the newly elected Members of the Senedd, noting the importance of maintaining leadership stability whilst continuing to build on the progress made over the past two years and recognising the need for caution as Executive Team changes take place.
- Reaffirmed the commitment of the Health Board to place the people and communities of North Wales at the heart of all decisions, with a shared focus on delivering the best possible care and driving forward high-quality services that the people of North Wales deserve.
- Reflected on the organisation's improvement journey over the past three years, noting that sustainable progress takes time, and welcomed the **Well Led Review** as an opportunity to assess the Health Boards current position, future direction and how progress and plans to address ongoing challenges are communicated more clearly to the public.

It was resolved that the Board:

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

26.140 Vice Chair's Report

The Board received the report and the Vice Chair highlighted:

- The importance of meeting and speaking with staff and teams across the organisation and the value in learning from the experience of others.

In discussing the report, the Board:

- Queried how the Health Board are addressing the issues of **Delayed Transfers of Care** (DTCOC) from acute hospitals. It was confirmed that work has been undertaken over recent months to strengthen discharge planning and identify improvements including targeted actions with Local Authorities and ward-based work to support patients to move to the most appropriate setting, whilst also learning from best practice across other Health Boards to inform further improvements in **Urgent and Emergency Care** and patient pathways.

It was resolved that the Board:

- NOTED** the content of the report.

STRATEGIC ITEMS

26.141 Tywyn Community Hospital - Case for Change

The Board received the report and the Interim Executive Director of Transformation and Strategic Planning highlighted:

- The paper presents the **Case for Change** for services at **Tywyn Community Hospital** and seeks Board approval to progress the proposed options to formal public consultation.
- Thanks were extended to everyone who has contributed to the discussion to date, noting that the time and effort committed demonstrates the strength of feeling within the community regarding this issue.
- The temporary closure of **Dyfi Ward** in 2023 highlights the longstanding challenges associated with maintaining a safe and sustainable inpatient service within **Tywyn Community Hospital**.
- The need to close **Dyfi Ward** arose from patient safety concerns driven by workforce constraints, including challenges in recruiting and retaining appropriately skilled nursing staff.
- Since the temporary closure, resources have been redirected to provide a range of alternative community services for the local population including a Treatment Room, Tuag Adref service, Wellbeing Hub, expanded Minor Injuries Unit and wider community-based care.
- Healthcare delivery has changed significantly in recent years, with increasing emphasis on providing care closer to home, reducing avoidable hospital admissions and supporting people to remain independent within their own communities wherever clinically appropriate.
- The population served by **Tywyn Community Hospital** is ageing, with increasing levels of frailty, multiple long-term conditions and complex health needs requiring coordinated multidisciplinary care.
- Community services are increasingly required to respond flexibly to a wider range of population needs, including appropriate support for younger people, individuals experiencing Mental Health challenges and a wide range of ongoing care services.
- The review has sought to identify clinically effective and sustainable potential models for delivering community healthcare services from **Tywyn Community Hospital** noting that the scope of the work is limited to the operating model of **Dyfi Ward** and directly associated community hospital services and highlighting that broader issues such as dentistry and specialist Mental Health services are out of scope.
- Following the Board's decision in May 2025 to review the service and develop a sustainable future solution, the Health Board has undertaken a programme of pre-consultation engagement events to understand local experiences and support the development of viable options.
- Between September 2025 and June 2026, a series of balanced room community engagement events were held to generate and then shortlist options to form the basis of a

consultation noting that Balanced Room 2 had been repeated in March 2026 following identification that the original scoring had not been balanced.

- The balanced room process was also supplemented by an extensive set of face to face and online community engagement events including attendance at a wide range of community shows, groups and forums.
- Pre-consultation engagement identified strong public support for retaining and enhancing local healthcare services within **Tywyn** emphasising the importance of care being delivered closer to home for a rural and ageing population.
- Feedback demonstrated a strong attachment to local inpatient provision whilst also identifying support for expanding locally delivered community, outpatient, rehabilitation and preventative services.
- Whilst there has been a detailed analysis of the options generated it was noted that no preferred option is being recommended and no final decision is being sought at this stage.
- If the proposed consultation is supported by the Board, the aim is to test the evidence, assumptions and impact assessments presented in the case for change noting that the consultation period allows for responses, additional evidence and reasonable alternative proposals to be provided which will be carefully considered before any final decision is made.
- The two options being proposed following the pre-consultation engagement are highlighted within the report noting the caveat included with Option B.
- During the pre-consultation engagement events, support was expressed for a hybrid option to retain existing community services and reopen inpatient beds however, the technical appraisal concluded that this option could not be supported due to concerns regarding deliverability and sustainability, particularly in relation to staffing and resourcing.
- If approved by the Board, consultation materials will be prepared during August 2026 ahead of a 12-week consultation period commencing in September 2026, followed by a period of post-consultation analysis during December 2026 and final decision making by the Board in March 2027.
- Thanks were extended to all staff based in **Tywyn Community Hospital** for their resilience and commitment during a challenging period, and for continuing to provide high-quality care to the local community.

The Chair referred to a letter received from the **South Meirionnydd Forum** which has been shared with Board members and the questions and comments raised at the **Annual General Meeting** held on 29 July 2026.

Sue Irlam Head of Engagement and Complaints Advocacy, Llais shared the feedback collated by Llais highlighting:

- The pre-consultation engagement has been very positive and inclusive and Llais welcome the change in approach and the opportunities provided for involvement in the engagement exercises.
- Should the proposal proceed to full consultation, local people were encouraged to engage constructively and use the opportunities available to share their views noting that Llais will provide an independent voice to support and represent public feedback.
- The documentation provided is comprehensive and emphasises the importance of the Health Board responding to questions promptly and fully, with Frequently Asked Questions (FAQs) shared as widely as possible, including in accessible formats for those without digital access.

- Llais are committed to attend as many consultation events as possible to support the public, provide independent oversight and help ensure the consultation process is undertaken appropriately.

The Chair welcomed the contribution and support provided by Llais noting that the Board recognise the ongoing workforce challenges in recruiting, staffing and sustaining services in rural areas, highlighting the need for wider discussion with Local Authorities, Welsh Government and partners on the future model for rural services across all sectors.

In discussing the report, the Board:

- Queried whether **Community by Design** has been taken into account within the plans for the future. It was confirmed that there is a need to balance immediate service requirements with longer-term planning, building on place-based community assets to support health and wellbeing, including care closer to home and end-of-life care provision within communities.
- Recognised the need to review rural service provision across all communities noting the need for wider discussion with neighbouring Health Boards, Local Authorities and partners on the future model for rural services to support service needs. It was agreed that this is an important area that requires further consideration within the context of future equitable service delivery and models of care.
- Acknowledged the challenges facing rural healthcare and the need to strengthen community-based services confirming that this will be discussed further with Welsh Government around the need for a **Rural Healthcare Plan** for all Health Boards in Wales.
- Extended thanks to Llais and Sue Irlam for their contribution, noting the importance of open dialogue with local communities.
- Noted that consideration of the options does not constitute a final decision, and that all evidence and statutory requirements will be carefully considered before the outcome of the consultation returns to the Board in March 2027.
- Approved the proposed options being taken forward to formal public consultation.

It was resolved that the Board:

- **APPROVED** the proposed options being taken forward to formal public consultation noting that no final decision is being sought at this stage and that the consultation is intended to test the evidence, assumptions, impact assessments and conclusions presented within this document.
- **APPROVED** to commence public consultation and that the outcome of the consultation is planned for March 2027 as described in the timeline outlined in the report.

26.142 Mental Health Report

The Board received the report and the Executive Director of Allied Health Professionals & Health Sciences highlighted:

- The report provides an overview of the progress made in the continued improvement of modernising Mental Health services across the Health Board through the **Mental Health Oversight and Delivery Group**.
- The report is part of regular reporting arrangements noting that the previous report was received by the Board in January 2026.
- The **Royal College of Psychiatry (RCP) Invited Services Review** and the **Expert Advisory Group** reports informed the priorities of the Health Boards **Mental Health Oversight and Development Group**, chaired by the Chief Executive and created to provide effective oversight and drive delivery.

- The **Mental Health Oversight and Development Group** has developed a clear workplan based on its scope and remit, with five workstreams and a number of key deliverables. An Executive Director has been aligned to each of the workstreams and the detail is included within the report.
- Whilst significant work remains in relation to performance improvements and sustainable outcomes, the Health Board has established a clear framework for oversight, accountability and improvement as well as developing a **Mental Health Outcomes Framework**.
- The methodology for design of the **Mental Health Outcomes Framework** has involved extensive consultation with service users and carer representatives across North Wales in a series of events over an 18-month period and the key themes identified have been captured.
- Going forward the **Mental Health Outcomes Framework** will be tested and refined to ensure it is reflective of the views shared and additional data will be collected from the lense of the patient and the teams.

In discussing the report, the Board:

- Noted that the Quality, Safety and Experience Committee have maintained close oversight of this work, including consideration of performance and community-based activity, and welcomed the detailed progress reports provided.
- Acknowledged the need to improve access to early talking and listening support, recognised the significant progress made in reducing out of area placements, and emphasised the importance of strengthening patient experience by providing individuals with a greater voice in their care.
- Recognised the importance of physical health within Mental Health services and welcomed the progress made to date noting that further work will be taken forward in this area.
- Referred to development needs in relation to Estates and how the ligature risks are being managed. It was confirmed that annual work continues to manage ligature risks through clinical assessment and the existing ligature programme. It was also noted that an update on the **Estates Strategy** will be presented to the next Planning, Population Health and Partnerships Committee in September 2026.
- Welcomed the progress made and suggested future reports include more specific and measurable plans, including clear milestones and timescales for areas such as ligature risks and the development of a dementia service model.
- Recognised the intense support provided by staff within the culture, leadership and organisational development workstream suggesting the need to support staff in this area of work and provide a holistic and measurable plan.
- Stated that the report provides assurance on the future direction, noting the need for the **Mental Health Oversight and Delivery Group** to strengthen the balance of plans, milestones and measurable impact, whilst maintaining focus on the **Royal College of Psychiatry** and **Expert Advisory Group** recommendations, with six-monthly reporting to the Board to maintain oversight.

It was resolved that the Board:

- **NOTED** the progress made through the Mental Health Oversight and Delivery Group since the previous update to the Board in January 2026. This includes the establishment of a single structured improvement programme across the five strategic workstreams.
- **NOTED** the significant reduction in acute out-of-area placements, sustained compliance with Mental Health Measure performance standards, successful procurement outcome for the Mental Health Electronic Healthcare Records and progress made in strengthening workforce stability, service quality and patient experience.

- **CONSIDERED** and **ENDORSED** the draft Mental Health Outcomes Framework as the foundation for strengthening outcome-focused performance, quality and assurance reporting across Mental Health and Learning Disabilities service.
- **NOTED** the report and took reasonable assurance from the governance, quality management and oversight arrangements established through the Mental Health Oversight and Delivery Group.

26.143 All Ages Community Health Digital Solution – Outline Business Case

The Board received the report and the Chief Executive highlighted:

- The Board are committed to driving forward an **Electronic Healthcare Records** system.
- The full system is currently on pause as Welsh Government revise their **Digital Strategy** however progress is being made with the **Mental Health and Learning Disability Electronic Healthcare Records** system.
- Digital records are an important enabler in supporting improvements to the delivery of care within community services.
- As part of the National Connecting Care Programme, Digital Healthcare Wales (DHCW) submitted a business case to Welsh Government for funding to support the procurement and implementation of a Community Health Digital System for Health Boards across Wales.
- Approval of the Outline Business Case will enable the tender to progress, with a Full Business Case to follow before any contract is awarded. This proposed approach has been reviewed and supported by the Performance, Finance and Information Governance Committee.

In discussing the report, the Board:

- Noted that the Outline Business Case does not identify cash-releasing savings but sets out an ambition to cover the revenue costs, requiring sufficient financial headroom and a clearer articulation of the expected benefits.
- Queried which Committee should provide oversight of this area of work. It was confirmed that the responsibility currently falls within the remit of both the Performance, Finance and Information Governance Committee and Planning, Population Health and Partnerships Committee noting the need to clarify the balance and oversight required from the Committees. The Director of Corporate Governance agreed to take this forward.
- Acknowledged that the Chief Executive is the Senior Responsible Officer for this area of work and also Chair of the **Electronic Healthcare Records Programme Board** noting the need for decisions to be made taking into account the broader **Electronic Healthcare Records** landscape.
- Highlighted the need for a current solution to support progress with transformation including **Community by Design** and integration with existing programmes.

Action:

- **26.143.1** Director of Corporate Governance to clarify the oversight required by the Performance, Finance and Information Governance Committee and Planning, Population Health and Partnerships Committee in relation to the digital solution work.

It was resolved that the Board:

- **APPROVED** the Outline Business Case in its current context, noting that a recurrently affordable Full Business Case will be presented for full approval before contract award and implementation.

- **APPROVED** the tender exercise to identify a preferred way forward for procurement, retaining the option for either a locally led or collaborative procurement with other Health Boards, noting that any subsequent contract award will be dependent upon a recurrently affordable Full Business Case.
- **SUPPORTED** the use of existing Health Board resources to develop the Full Business Case, with the agreement that the Full Business Case presented for approval following formal procurement tender for the system will demonstrate and deliver recurrent affordability.

26.144 North Denbighshire GP Practice Sustainability Proposal

The Board received the report and the Chief Operating Officer highlighted:

- **Healthy Prestatyn Iach** was established in 2016 following the return of three GP contracts and initially served approximately 23,000 patients.
- Patient numbers have fallen by more than 20% but the practice boundary and operating model have remained unchanged.
- Neighbouring independent practices have expressed a need to grow their patient lists to improve sustainability, support workforce development and strengthen partnership succession planning.
- It is being suggested to transfer approximately 5,000 patients living outside the new outline boundary to neighbouring practices that have volunteered to increase capacity.
- No patient would be left without a GP practice and patients would automatically be allocated without needing to re-register.
- It has been recognised that there is a need to engage with those affected and an eight-week public engagement period is running from 4 June to 31 July 2026 as well as multiple public meetings, stakeholder briefings and engagement sessions.
- Initial analysis suggests the majority of patients would transfer to a practice that is either closer to, or no further away from their home than their current practice noting that a small number of patients may experience increased travel times.
- A boundary change would require a review of workforce and service models and this will be addressed as part of the workstream.
- Failure to make changes could limit the sustainability of neighbouring practices and restrict workforce development opportunities.
- The team are working closely with residents and a decision is due to be agreed by the end of August 2026 with the proposed boundary change effective from 1 January 2027.

In discussing the report, the Board:

- Queried the process for decision making and final Board approval. It was confirmed that service change is a matter reserved for the Board however it was agreed to clarify outside of the meeting.
- Questioned whether any posts are expected to be adversely affected, it was confirmed that a small number of staff may be asked to work from different surgeries or branches transferred to other practices.
- Acknowledged the need to rebalance and ensure services are being delivered effectively.

It was resolved that the Board:

- **NOTED** the proposals to improve GP Sustainability in the North Denbighshire Cluster.
- **NOTED** the progress of the engagement process and actions bring considered following feedback.
- **NOTED** the timescale and process for the boundary change proposals.

INTEGRATED PERFORMANCE

26.145 Planned Care

The Board received the report and the Chief Executive and Chief Operating Officer highlighted:

- The Health Board continues to make significant progress in relation to **Planned Care**.
- The Cabinet Minister for Health and Care recently visited the **North Wales Surgical Hub, Llandudno** which will provide improvements in sustainable service delivery.
- A new single **Planned Care Recovery Plan** is being developed to bring together recovery, transformation and fragile service improvements into one integrated specialty-based framework to deliver sustainable change for the future.
- Significant improvements achieved during 2025/26 have been sustained and at the end of June 2026 there were 2,167 patients waiting over 104 weeks noting that this position remains broadly stable and is positive compared to other Health Boards.
- There has been a significant change in team working across the region on a specialty-by-specialty basis rather than by site noting that specialty reviews will be undertaken to ensure patients are not disadvantaged.
- Theatre utilisation remains a key challenge recognising that additional capacity is required to support a detailed review and enable clinicians to ensure theatre lists are utilised effectively.
- There have been sustained improvements in diagnostics with current performance reported at 66% with an aim of 75% noting that teams are working more effectively with a focus on reviewing demand and capacity.
- Funding has been made available across Wales, with Health Boards asked to set out plans for in-year delivery and long-term sustainability. As further funding is secured, the focus will be on maximising internal delivery, building on planned care improvements and ensuring sufficient care provider capacity.
- Thanks were extended to all the teams who are working exceptionally hard together to make improvements in this area.

In discussing the report, the Board:

- Suggested that performance reporting should clearly highlight the progress made, the current position and the future trajectory, supported by narrative that helps the public understand the impact of the improvements.
- Noted the importance of maintaining theatre utilisation including effective use of the additional capacity in the **North Wales Surgical Hub, Llandudno** to support improved productivity, alongside clarity on the work underway to improve theatre productivity.
- Highlighted the need to share further information with the public around performance. It was confirmed that information is in the public domain, and work is being taken forward to share progress alongside a balanced view of the national position and further improvements required.

It was resolved that the Board:

- **DISCUSSED** and **NOTED** the current position for Quarter 1 planned care performance delivery and the Planned Care Change Programme delivery, including further opportunity.

26.146 Chair's Assurance Report - Quality, Safety and Experience Committee

The Board received the report and **NOTED** the content.

26.147 Urgent and Emergency Care Progress Report

The Board received the report and the Chief Operating Officer highlighted:

- **Urgent and Emergency Care** remains one of the Health Boards most significant risks with an impact on patient and staff experience.
- Some area of improvement are being sustained however this is not system wide.
- There is a need to review alternatives to attendance at **Emergency Departments** as part of the **Community by Design Programme**.
- Focus remains on delivering the expectations set around ambulance handovers and reducing 12 hour waits by the end of September 2026 noting that front-door performance is improving, but flow through and out of hospitals remains an area of challenge.
- Work is taking place in relation to culture and team working, with a learning session planned to reflect on recent pressures and support closer collaborative working across the three sites.
- Significant progress is underway to improve discharge and reduce length of stay, including collaboration with Local Authorities around discharge hubs.

In discussing the report, the Board:

- Referred to risk appetite in relation to discharge recognising the need to take a proportionate approach and balance the risks of keeping patients in hospital against supporting timely and appropriate discharge.
- Acknowledged the support required to free up beds by working closely with Local Authorities and partners to improve patient flow across acute and community settings.
- Noted that the weekly **Urgent and Emergency Care** meetings are supporting a better understanding of the data and clearer management actions with a need to continue to embed a consistent daily discipline to ensure teams are confident and capable of sustaining improvement.
- Confirmed that progress is being made whilst recognising that further work is required.

It was resolved that the Board:

- **NOTED** the current performance.
- **SUPPORTED** the requirement for accelerated system-wide action on flow and discharge.
- **ENDORSED** strengthened operational accountability at site and system level.
- **AGREED** to maintain focus on the delivery of measurable improvement over the next 90 days.

26.148 Integrated Quality Report

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

- Never Events continue to increase, there are a number that can be defined as preventable reinforcing the need to investigate contributory factors, audit compliance and strengthen learning.
- There has been an amendment to the rules relating to the **Deprivation of Liberty Safeguards** and this is documented within the report.
- The **Health Inspectorate Wales Review** of the Emergency Department at Ysbyty Glan Clwyd designated the site as requiring improvement. The report highlights the immediate actions required and the Wrexham Maelor Hospital and Ysbyty Gwynedd sites are completing a self-assessment against these actions.

In discussing the report, the Board:

- Referred to the amendment to the **Deprivation of Liberty Safeguards** guidance noting the need for further information to be shared to ensure the Health Board are meeting the



statutory requirements. It was confirmed that this will be reviewed in further detail by the Executive Committee in terms of adhering to legislation and practical implementation agreeing to circulate a briefing note outside of the meeting.

- Suggested that future reports provide greater detail on learning from patient safety incidents and never events, including how this is being embedded to prevent recurrence and reduce incidents over time. It was confirmed that this can be reviewed in further detail by the service and additional information can be provided in future.
- Highlighted the draft report from the **Health Inspectorate Wales Review** of the Emergency Department at Ysbyty Glan Clwyd which reported ongoing cultural issues noting the need for assurance that previous recommendations have been fully embedded. It was confirmed that a group has been established to strengthen oversight arrangements and support consistency across the organisation.
- Confirmed that work is taking place to refine the Integrated Quality Report and enhance reporting processes.

Action:

- **26.148.1** Director of Corporate Governance and Deputy Executive Director of Nursing to provide a briefing note outside of the meeting on the legislation requirements and implementation plan for the amendment to the Deprivation of Liberty Safeguards guidance.

It was resolved that the Board:

- **NOTED** the contents of the Integrated Quality Report and the progress being made across the quality domains.
- **SUPPORTED** the continued focus on delivering improvement in those areas.
- **ENDORSED** the continued focus on reducing regulatory and patient safety risks, including delivery of Health Inspectorate Wales improvement plans, completion of overdue actions, and strengthening organisational learning arrangements.
- **AGREED** that the Quality, Safety and Experience Committee maintain oversight of the key exception areas identified within this report and provide escalation to the Board where improvement trajectories are not achieved.

26.149 Chairs Assurance Report - Performance, Finance and Information Governance Committee

The Board received the report and **NOTED** the content.

26.150 Integrated Quality and Performance Report

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

- The report continues to be developed and will be aligned with Executive Committee and Performance, Finance and Information Governance Committee reporting arrangements.
- Further meetings are required with key Committee members to review and refine the approach.
- The report structure comprises of an introductory section, an Executive synopsis and individual supporting reports noting that the data charts have been strengthened to provide a clearer forward look and aligned to the **Integrated Medium-Term Plan**, the de-escalation criteria and the Ministerial requirements.
- Moving forward duplication of information will be reduced as the detail develops into a substantive and comprehensive oversight report, bringing together key information from existing reports into one consolidated report.

In discussing the report, the Board:

- Welcomed the move towards an integrated report and requested that future iterations clearly show actions taken, resulting impact, historical data and improvement trajectories, including status updates and movement over time.
- Referred to the vacancy rate and queried whether this is an area of concern. It was confirmed that there is work underway to review budgets and ensure baselines are accurate. Vacancies are being held to support newly qualified students and the **Foundation for the Future Programme**, with the position expected to improve over the coming months as this work progresses.
- Highlighted the current **Cancer** performance and queried whether any assurance can be provided in this area. It was confirmed that a **Cancer Recovery Plan** has been developed, with performance currently at 90% against plan, although sustaining improvements remains essential given the significant volume of patients.
- Queried the plan to address longstanding **Neurodevelopmental** assessment delays for children. It was confirmed that additional support will be provided noting that improved data analysis and delivery of legacy assessments would inform future reporting and service improvements.

It was resolved that the Board:

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

26.151 Finance Report

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

- The **Annual General Meeting** held on 29 July 2026 concluded the 2025-2026 review of accounts with an unqualified opinion and thanks were extended to the team for their work in this area.
- The year-to-date position is reporting a deficit of £17.1m against the currently planned deficit of £46m by the end of the financial year noting the aim to attain the key statutory duty of break-even.
- There is a need to deliver a savings stretch target of £63m to submit a balanced plan noting that delivery of plan would result in £26m of Welsh Risk Pool costs being mitigated.
- There is a continued focus in this area with teams reviewing green savings schemes and value and sustainability noting that the next stage of the process will require decisions to be made by the Board to close the remaining gap. If that position is reached, the plan will be to reprofile while maintaining appropriate cost controls.

In discussing the report, the Board:

- Queried the historical delivery rate of red savings schemes, it was noted that early articulation and timely sign-off would be key to maintaining a high conversion rate.

It was resolved that the Board:

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

GOVERNANCE, RISK AND ASSURANCE

26.152 Chair's Assurance Report: Audit Committee

The Board received the report and **NOTED** the content.

26.153 Corporate Risk Register

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

- The ongoing review of the Health Board's corporate risks and assurance arrangements, including work to strengthen Executive Committee scrutiny of Corporate Risks.
- The development of a revised reporting format to provide greater focus on key issues, risk movement, mitigating actions and assurance.
- That one Corporate Risk relating to regulatory oversight had reduced and was now within the Health Board's agreed risk appetite.

In discussing the report, the Board:

- Noted that nine Corporate Risks remained above the Health Board's agreed risk appetite.
- Emphasised the importance of clear mitigation plans, realistic timescales and measurable risk reduction for risks remaining above appetite.
- Welcomed the continued Executive oversight of Corporate Risks but stressed the need for greater evidence of the effectiveness of mitigating actions and progress in reducing risk exposure.
- Discussed the development of a more outcome-focused approach to risk reporting and sought assurance that future reports would provide clearer risk reduction trajectories and strengthen the link between risk, assurance and organisational performance.

It was resolved that the Board:

- **NOTED** the current Corporate Risk Register and assurance position.
- **NOTED** that nine Corporate Risks remain above the Health Board's agreed risk appetite.
- **ENDORSED** the continued Executive review and scrutiny of Corporate Risks.
- **REQUIRED** Executive Leads to establish clear risk reduction trajectories for all risks that remain above appetite.
- **SUPPORTED** the continued development of outcome-focused risk reporting and assurance arrangements.

26.154 Response to UK Covid 19 Inquiry

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

- The Health Board's consideration of the findings from Modules 2, 3 and 4 of the UK Covid-19 Inquiry and the assessment of their relevance to local services.
- That many of the themes identified reflected wider national and system-level challenges rather than issues unique to the Health Board.
- Plans to establish a Learning and Discovery Group to consider the findings in greater detail, identify any lessons and required actions, and oversee the Health Board's response, with meetings commencing in September 2026.
- The key themes emerging from the Inquiry findings and the importance of ensuring that future external reports are systematically reviewed to identify implications for the organisation.
- The work underway to strengthen organisational preparedness and ensure that lessons identified can be applied to future public health incidents and major system challenges.

In discussing the report, the Board:

- Welcomed the proactive approach being taken to review the Inquiry findings and consider their relevance to local services.

- Recognised the importance of capturing learning from national reviews and inquiries to support continuous improvement.
- Emphasised the need to ensure that lessons identified are translated into practical actions and embedded within organisational arrangements.
- Supported the establishment of the Learning and Discovery Group to oversee this work and provide assurance on progress.

It was resolved that the Board:

- **NOTED** the findings of the UK Covid-19 Inquiry Modules 2, 3 and 4 Reports.
- **ACKNOWLEDGED** the distinction between system-wide constraints and organisational response.
- **NOTED** the strengths demonstrated by the Health Board.
- **ENDORSED** the Executive Nurse-led approach to organisational learning.
- **SUPPORTED** the governance arrangements and next steps.

26.155 Corporate Governance Report

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

- The Corporate Policy Management Policy, provided within the supporting papers for ratification, had been subject to Health Board-wide consultation and review through the appropriate governance processes.
- Whilst significant progress had been made in strengthening the Health Board's policy framework, the policy management process remained complex and further work was required to simplify arrangements and improve usability.
- A transfer log between Committees and the Board had been developed and would be incorporated into future reports to provide greater transparency regarding the movement and oversight of items through the governance structure.
- The Audit Committee would retain oversight of the effectiveness of these arrangements.
- A protocol had been developed to establish a clear and consistent process for managing questions from members of the public.
- Future public questions and responses would be reported through the governance report to support transparency and accountability.
- A supporting flowchart setting out the process for managing public questions would be circulated in due course.

In discussing the report, the Board:

- Welcomed the improvements being made to strengthen governance processes and reporting arrangements.
- Supported the introduction of the transfer log as a mechanism to enhance transparency and visibility of matters progressing between Committees and the Board.
- Recognised the importance of ensuring governance processes remain proportionate, accessible and easy to navigate.
- Welcomed the development of a formal protocol for managing questions from members of the public and the increased transparency this would provide.

It was resolved that the Board:

- **NOTED** the contents of the Corporate Governance Report.
- **NOTED** the decisions taken in private session and the affixing of the Common Seal.

- **RATIFIED** the approvals of Approved Clinicians and Section 12(2) Doctors in line with national requirements.
- **NOTED** the assurance provided through the NHS Wales Shared Services Partnership Committee
- **RATIFIED** the Corporate Policy Management Policy noting that it has completed the required governance pathway, consultation process and approval through the Executive Policy Oversight Group.
- **NOTED** the accompanying Corporate Policy Management Procedure which provides the operational framework supporting implementation of the Policy across the Health Board.
- **APPROVED** the Protocol for Managing Questions from Members of the Public.

26.156 Committees and Advisory Group Chair's Reports:

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

- Remuneration Committee, Dyfed Edwards
- Planning, Population Health and Partnerships Committee, Clare Budden
- People and Culture Committee, Dyfed Jones
- Charitable Funds Committee, Dyfed Jones
- Stakeholder Reference Group, Peter Lewis
- Healthcare Professionals Forum, Emma Adamson
- Executive Committee, Carol Shillabeer

It was resolved that the Board:

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

CLOSING BUSINESS

26.157 Review of Meeting Effectiveness

The Board reflected on the discussions held and noted that further consideration would be given to the development of a consent agenda for future meetings.

26.158 Date of Next Meeting:

Thursday 24 September 2026 at 9.30am in Venue Cymru. Llandudno.

26.159 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."