



**CYFARFOD BWRDD IECHYD PRIFYSGOL
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

MINUTES OF MEETING HELD

Date and Time	Wednesday 24th September 2025 at 09:30am	
Venue	Conference Centre, St Cadoc's Hospital and Microsoft Teams	
PRESENT	Ann Lloyd Paul Deneen Dafydd Vaughan Iwan Jones Neil Patrick Penny Jones Vivek Goel Akmal Hanuk Nicola Prygodzicz Tracy Daszkiewicz Jennifer Winslade Rob Holcombe Paul Solloway Hannah Evans Peter Carr Sarah Simmonds Leanne Watkins Andy Bagwell	Chair Independent Member (Community) Independent Member (Digital) Independent Member (Finance) Independent Member (Community) Independent Member (Community) Independent Member (Trade Union) Independent Member (Third Sector) Chief Executive Director of Public Health Director of Nursing Director of Finance & Procurement Director of Digital Director of Strategy, Planning and Partnerships Director of AHPs and Health Science Director of Workforce and OD Chief Operating Officer Interim Medical Director
IN ATTENDANCE	Rani Dash Karen Newman Thokozani Owino Paquita Sanges	Director of Corporate Governance Assistant Director of Communications and Engagement Aspiring Board Member Programme Lead Nurse, Early Gynaecology Assessment Unit (Patient Story)
APOLOGIES	Phil Robson Helen Sweetland	Vice Chair Independent Member (University)

PRELIMINARY MATTERS

**ABUHB
2409/01**

Welcome and Introductions

The Chair welcomed everyone to the meeting, in particular members of the public who had joined the meeting to observe.

	<p>It was noted that the meeting would be livestreamed and published on the Health Board’s website following the meeting.</p>
<p>ABUHB 2409/02</p>	<p>Declarations of Interest for Noting</p> <p>There were no declarations of interest raised.</p>
<p>ABUHB 2409/03</p>	<p>Consent Agenda</p> <p>The Chair introduced the Consent Agenda and asked if there were any items to be brought forward for discussion. There were no requests made.</p>
<p>ABUHB 2409/04</p>	<p>Report from the Chair</p> <p>Ann Lloyd (AL), Chair, provided her verbal report, with a focus on the following areas:</p> <ul style="list-style-type: none"> • The Chair explained that Chief Executives and Chairs had held meetings to discuss regional working, as directed by the Cabinet Secretary. The results of these discussions would be discussed as part of this meeting’s. Velindre UNHST and Powys LHB had been invited to become associate members. • The Chairs group had met three times to discuss new accountability arrangements with the Cabinet Secretary. ABUHB would be the first to be held to account publicly by the Cabinet Secretary in Cardiff. The Chair expressed disappointment that the agenda appeared to focus on operational performance rather than longer term strategic priorities. • The Wales Maternity and Neonatal Assurance Assessment was due to start imminently, led by national experts. The Board would be updated at the local arrangements. • Concerns were raised regarding the induction and training of Board members. HEIW had been commissioned to review and develop a controlled induction programme for both executive and non-executive directors. • The Chair had attended a meeting to undertake Chair’s Actions regarding outpatient performance and resource utilisation. Concerns about the lack of provision for paediatric patients in the insourcing contract were raised in a letter to Welsh Government. A response was yet to be received. • Interviews had been held for an Independent Member (Local Authority) and a Deputy CEO position. The Chair noted the excellent calibre of candidates and stated that a final decision was awaited for the Independent Member. The Chair congratulated Jennifer Winslade, Director of Nursing, on her appointment to the Deputy CEO position for a 12 month period. • She had taken part of the appointment panel for the Managing Director of NHS Wales Performance and Improvement role.

- The Princess Royal had visited Grange Hospital’s maternity unit. Positive feedback was received following the visit, including a letter from her lady-in-waiting. In the letter, the Princess Royal expressed her appreciation for the opportunity to visit the maternity unit, commended the impressive facilities, and praised the dedication and expertise of the staff. The Princess Royal noted that meeting the core maternity team and witnessing their commitment to delivering high-quality care was truly inspiring, and conveyed gratitude to all involved in organising and facilitating the visit.

The Board **NOTED** the Chair’s updates.

**ABUHB
2409/05**

Report from the CEO

Nicola Prygodzicz (NP), Chief Executive, provided her verbal report, with a focus on the following areas:

- The Health Board was approaching the half-year point for 2025/26, with a heavy focus on three priority areas namely National Planned Care Programme, National “Handover 45” Initiative and Financial Position and Savings.
- The National Planned Care Programme, led by Welsh Government, aimed to remove 200,000 people from waiting lists across Wales, with 30,000–40,000 patients affected locally. Significant work had been undertaken across the Health Board, particularly around the outpatient contract, with additional patients treated on weekends and evenings. The programme had been running for several weeks and was expected to progress at pace in the coming month, starting with ENT and expanding to other specialties.
- The National “Handover 45” Initiative, also led by Welsh Government, sought to ensure all patients in ambulances across Wales were handed over to emergency departments within 45 minutes. The Health Board had been working on this agenda, with the “Your Next Patient” programme commencing its third week. This programme aimed to embed sustainable change at the Grange University Hospital and across the wider system, supported by the executive team. Early improvements had been observed, with ongoing work required to sustain progress.
- There had been ongoing focus on financial pressures over the past four to five months. Intensive work had been undertaken with divisions to identify savings and deliver plans in line with targets. A new savings plan had been developed, but increased cost pressures had resulted in a forecast deficit, which would be further detailed in the Finance Report. Further work was required as the Health Board moved into the winter period.
- Strategic Planning for the next year had commenced, with efforts focused on aligning the Integrated Medium Term Plan (IMTP) with the Health Board’s strategy. Key priorities for the

coming year included prevention, digital transformation, and primary care. National focus remained on primary care plans and winter planning, with the Health Board actively involved in these areas.

- The importance of vaccinations for winter, noting that a downturn in uptake last year, had placed additional pressure on services. The Health Board had been working to promote vaccination rates and implement new initiatives to improve accessibility for staff and the public.
- The “When You Smoke, I Smoke” campaign had launched to raise the profile of smoking cessation.
- The successful opening of the “Big Conversation on Sepsis” all-day event, which brought together staff, the public, and individuals with lived experience of sepsis to discuss improvements. The event was described as powerful and emotional, with further developments anticipated.

The Board **NOTED** the Chief Executive’s updates.

**ABUHB
2409/05**

Patient Experience Presentation

The Board received a presentation focusing on early pregnancy and emergency gynaecology care. The presentation was delivered by Paquita Sanges (PS), Lead Nurse, Early Gynaecology Assessment Unit, and Rachel Robbins (RR), a patient who shared her personal story of pregnancy loss.

RR described the emotional and clinical challenges she faced, including the distress caused by waiting for confirmation of miscarriage and the lack of recognition for private scan results. Her experience had prompted the Health Board to review its service provision, resulting in several improvements. These included the introduction of a three-week follow-up call for women who had experienced miscarriage, enhanced staff training on communication and empathy, adjustments to staffing in the early pregnancy unit, and the development of a written information pack for patients.

The Board also noted the establishment of the Butterfly Room, a dedicated bed for patients experiencing miscarriage, and the creation of a counselling room for private support. Memory boxes and certificates of life were introduced to acknowledge pregnancy loss, and plans were underway to create a bereavement garden at the Grange Hospital. The Board discussed the importance of recognising the emotional impact of pregnancy loss and the need for flexibility in clinical guidelines, particularly regarding the acceptance of private scans.

Rachel’s story was commended for its bravery and for driving positive change within the Health Board and the Board thanked Rachel for her attendance at the meeting. The Board acknowledged the improvements

made and the ongoing commitment to compassionate care and noted that further research and evaluation would be undertaken to inform future service development.

The Board **RECEIVED** the presentation.

**ABUHB
2409/06**

People Plan 2025-2028

Sarah Simmonds (SS), Director of Workforce & OD, presented the People Plan for 2025–2028 to the Board.

SS explained that the new People Plan provided an opportunity to refresh the Health Board’s workforce and organisational development strategy. The plan had been created through reflection on previous achievements and extensive engagement with staff, trade union representatives, staff networks, and other groups. The themes of the plan remained consistent with previous core pillars, but the language and imagery had been updated to support the long-term strategy.

Feedback received during the development process indicated that priorities in the previous plan had been muddled. The new plan addressed this by introducing more thematic actions under each core pillar, which would be measured by specific outcomes. The plan had been designed as a five-year programme, aligning with the halfway point of the Health Board’s ten-year strategy, and would be reviewed annually.

An equality impact assessment had been undertaken, with no adverse impact reported. The aim was to launch the People Plan on 16th October 2025, alongside the refreshed values and behaviours framework.

The Board discussed the importance of promoting the staff survey, as staff feedback was crucial to measuring the success of the plan. SS acknowledged that return rates for the staff survey had been low in the past and outlined ongoing efforts to improve engagement, including providing incentives for staff participation.

The Board discussed the issue of staff survey fatigue, noting the large number of surveys distributed throughout the year and the resulting low response rates. Members emphasised the importance of targeted communication, incentives, and union involvement to improve engagement and ensure meaningful feedback.

Sickness absence rates were identified as a challenge for the Health Board, with Board members emphasising that even marginal improvements would provide a significant positive impact. The People Plan was commended for bringing sickness absence into central focus, and the Board supported ongoing efforts to develop measurable

actions and monitor progress through the People and Culture Committee.

The Board **APPROVED** the People Plan 2025–2028.

**ABUHB
2409/07**

Winter Plan 2025/26

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Winter Plan for 2025/26 to the Board.

HE explained that the Health Board’s approach to winter planning had been iterative, building on lessons learned from previous years. The plan relied on national modelling from Public Health Wales to anticipate the timing and scale of infection surges. The latest modelling had not yet been received and was expected by the end of September. The Board noted that the plan would be further refined once this information became available.

HE highlighted several key areas of focus for the coming winter. Vaccination uptake remained a priority, as low rates in the previous year had contributed to increased pressure on services. The Health Board had already commenced its vaccination programme, with early indications of improved uptake compared with the previous year. Proactive management of high-risk patients in the community and the targeting of priority pathways, such as falls prevention, were also emphasised.

The plan included the development of granular surge bed capacity plans, recognising that additional beds would be required to manage increased demand. The Health Board had been working closely with partners, particularly within the Regional Partnership Board (RPB), to support patient discharge and maintain flow throughout the winter period. Investment had been made in discharge support schemes and seven-day working for social care.

Risks identified in the plan included uncertainty around funding, workforce capacity, and the timing of infection surges. HE noted that confirmation of any additional Welsh Government initiatives or funding had not yet been received. The Board acknowledged that operational and clinical teams would be working in parallel on the “Your Next Patient” initiative, which aimed to create headroom ahead of winter.

HE reported that governance arrangements had been strengthened, with weekly meetings to monitor vaccination uptake and progress against the plan. The Board discussed the importance of early action, robust modelling, and proactive engagement with partners. The need to address staff vaccination rates and ensure effective use of community assets was also highlighted.

The Board noted that contingency planning would be included in the final version of the Winter Plan, once national modelling and any funding information had been confirmed.

The Board **NOTED** the Winter Plan 2025/26 and endorsed the ongoing preparatory work.

**ABUHB
2409/08**

Regional Planning – Llantrisant Health Park OBC 1

Hannah Evans, Director of Strategy, Planning and Partnerships, presented the Outline Business Case (OBC) for Llantrisant Health Park (LHP) to the Board.

HE explained that the Board had approved the vision document for LHP in March, which set out the strategic opportunity and emerging thinking for the site. The OBC presented at this meeting was the first in a suite of business cases expected relating to the development of LHP. HE clarified that this OBC had been brought forward by Cwm Taf Morgannwg University Health Board (CTM) and was not for Aneurin Bevan University Health Board (ABUHB) to approve, but to note.

The focus of the OBC was development of the the community diagnostic hub element of LHP, which included radiology scans, endoscopies, and provision for an endoscopy training facility. HE noted that the radiology provision would support CTM only, while the endoscopy suites would serve CTM, Cardiff and Vale, and ABUHB. The inclusion of an endoscopy training facility, led by Health Education and Improvement Wales (HEIW), was highlighted as a regional benefit, addressing workforce challenges in endoscopy.

HE reported that a detailed assessment had been undertaken within ABUHB to determine future endoscopy requirements. The Health Board had recently opened a new endoscopy facility at the Royal Gwent Hospital, which was not yet fully optimised. The Board's assumption was that existing capacity would be maximised before commissioning any additional activity from LHP in 2028/29, when a capacity gap was anticipated due to growing demand in screening diagnostics and cancer pathways.

HE emphasised that any commissioning of endoscopy activity from LHP would be subject to value for money review and further work on costs and pricing, given the use of a managed service contract. The Board was advised that ongoing due diligence would be required as the business case progressed.

It was noted that the regional committee overseeing LHP was broader than the LHP project itself. The financial commitment and activity for ABUHB were minimal at this stage, reflecting the strategy to maximise

internal capacity before commissioning externally. The Board recognised the importance of maintaining oversight of workforce arrangements, particularly the development of the endoscopy training academy, to ensure a sustainable pipeline of skilled staff. Any agreement to invest in LHP would be subject to the required additional resources being made available.

The Board **NOTED** the Llantrisant Health Park OBC 1 and endorsed the regional approach, subject to ongoing due diligence and value for money tests.

**ABUHB
2409/09**

Regional Planning – Establishment of the South East Wales Regional Joint Committee

Rani Dash (RD), Director of Corporate Governance, presented the proposal for the establishment of the South East Wales Regional Joint Committee to the Board.

RD explained that the Committee had been established in response to a Cabinet Secretary direction issued in April. The Terms of Reference (ToRs) for the Committee had been developed collaboratively by Directors of Corporate Governance from Aneurin Bevan University Health Board (ABUHB), Cwm Taf Morgannwg University Health Board (CTM), and Cardiff & Vale University Health Board (C&V). The ToRs had been subject to extensive engagement and comment from Chairs, Chief Executives, and Directors of Planning across the region.

RD advised that the Joint Committee would provide a formal structure for regional cooperation and development, supporting the move towards integrated planning and delivery of services across South East Wales. The ToRs included a scheme of delegation and reservation of powers, outlining the scope of the Committee's authority and those matters reserved for individual Health Boards as statutory bodies. The priorities for the Joint Committee would be determined by the Boards, ensuring alignment with local and regional strategic objectives.

The Board noted that the establishment of the Joint Committee represented a significant step towards enhanced regional collaboration and governance. The Board noted the importance of clear delegation, robust terms of reference, and ongoing engagement with partner organisations.

The Board **APPROVED** the establishment of the South East Wales Regional Joint Committee and **ADOPTED** the Terms of Reference.

**ABUHB
2409/10**

Performance Management and Accountability Framework

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the updated Performance Management and Accountability Framework to the Board.

HE explained that the framework had been reviewed following two years of implementation, with feedback gathered from divisional teams, executive colleagues, and an internal audit report. The review aimed to strengthen the framework, clarify escalation processes, and incorporate best practice from similar frameworks elsewhere.

HE reported that the revised framework proposed an expansion of the domains considered for escalation, now including leadership and governance alongside finance, operational delivery, and quality. The triggers for escalation within each domain had been updated, and a broader suite of actions was available in response to escalation, including inviting teams to relevant committees to discuss improvement plans and progress.

HE noted that the framework continued to set out expectations for oversight and performance review through established meeting structures. The Finance and Performance Committee would maintain responsibility for tracking implementation and monitoring both internal and national escalation frameworks.

Neil Patrick (NP), Independent Member, raised concerns about the potential impact on committee agendas and time pressures should escalation with teams become a focus, but supported the approach if it delivered improved results. Rani Dash (RD), Director of Corporate Governance, suggested that additional space could be created for dedicated scrutiny, rather than detracting from core Committee business. Joining up with other committees where an integrated focus could be beneficial would also be considered.

HE confirmed that the framework would continue to evolve, with ongoing feedback and refinement as the organisation matured in its approach to performance management and accountability.

The Board **APPROVED** the updated Performance Management and Accountability Framework.

**ABUHB
2409/11**

General Medical Services – Aberbeeg Medical Centre Outcome of Vacant Practice Process

Leanne Watkins (LW), Chief Operating Officer, presented the outcome of the vacant practice process for Aberbeeg Medical Centre to the Board.

LW explained that Aberbeeg Medical Centre had previously operated as a managed practice. The Health Board had been approached by a number of local General Practitioners (GPs) expressing interest in taking on the contract for the practice. Following a thorough evaluation, the panel recommended the award of the contract to the interested local GPs.

The Board held a detailed discussion regarding the procurement process for, particularly the contract award for Aberbeeg Medical Centre. Members sought assurances on value for money, financial commitment, and the robustness of due diligence processes.

The Board noted that a number of local GPs had expressed interest in taking on the Aberbeeg Medical Centre contract. The panel had undertaken a comprehensive review of the applications, ensuring that the process was fair, transparent, and aligned with organisational procurement standards.

The Board emphasised the importance of safeguarding service continuity, maintaining workforce stability, and ensuring that the procurement process would not destabilise existing services. It was agreed that any commissioning of activity would be subject to further scrutiny, with safeguards to ensure that the procurement process would not compromise service quality or workforce arrangements.

The Board endorsed the recommendation to award the contract to the successful local GPs, subject to ongoing monitoring and assurance about the procurement process.

The Board **NOTED** the contract award for Aberbeeg Medical Centre.

**ABUHB
2409/12**

General Medical Services - North Celyn Practice – Branch Closure Request

Leanne Watkins (LW), Chief Operating Officer, presented the request for branch closure at North Celyn Practice to the Board.

LW explained that a formal request had been submitted to close the branch of North Celyn Practice. A consultation process had been undertaken, with 9.3% of patients responding to the consultation. The panel reviewed the feedback and recommended supporting the application to close the branch.

The Board **ENDORSED** the recommendation to support the application for closure of North Celyn Practice branch.

**ABUHB
2409/13**

Annual Quality Reporting 2024/25 - Annual Quality Report

Jennifer Winslade (JW), Director of Nursing, presented the Annual Quality Report for 2024/25 to the Board.

JW explained that the report set out achievements against the Health Board's quality pillars and outlined priorities for the year ahead. The Board noted that patient satisfaction rates had reached 87%, which was recognised as a significant achievement. JW reported that considerable work had been undertaken to establish patient participation panels, with a formal evaluation of the Patient Advice and Liaison Service (PALS) scheduled for the autumn. The Board was informed that the service continued to see a high number of patients using PALS and that the number of volunteers had increased.

From a patient safety perspective, JW highlighted the development of divisional dashboards and active participation in national clinical audit programmes. The Health Board had achieved success in the Head and Neck Q Lab programme and had improved rates of health and safety training. Ward accreditation had been extended, with plans to include teams beyond wards, such as the mortuary team.

Ann Lloyd (AL), Chair, raised the issue of the increased number of inquests. JW responded that the coroner had been supportive and that the increase was partly driven by the additionality of the Medical Examiner (ME) service. Andy Bagwell (AB), Interim Medical Director, confirmed that the ME service had contributed to the higher number of inquests.

The Board **APPROVED** and **NOTED** the Annual Quality Report for 2024/25.

**ABUHB
2409/14**

Annual Quality Reporting 2024/25 – Annual Putting Things Right Report

Jennifer Winslade (JW), Director of Nursing, presented the Annual Putting Things Right (PTR) Report for 2024/25 to the Board.

JW explained that the report set out the Health Board's achievements and ongoing work in relation to PTR regulations, which formed a key part of the organisation's quality management framework. JW reported that the Health Board had maintained high rates of early resolutions for complaints, which had contributed to improved processes and communication standards. The Board noted that significant efforts had been made to learn from complaints and drive service improvements.

JW highlighted that the Health Board had been working to improve the logging and management of compliments, recognising the value of positive feedback in supporting staff morale and organisational

learning. The report also noted that personal injury claims had continued a downward trend for the sixteenth consecutive year.

The Board discussed the importance of robust reporting mechanisms for overdue cases, recognising the need for enhanced scrutiny and accountability. It was agreed that the updated Performance Management and Accountability Framework would strengthen escalation processes and committee oversight, ensuring overdue cases are monitored and addressed in a timely manner. Changes had been made to the process applied to the most complex cases to improve performance.

JW advised that, in the coming year, the Health Board intended to combine the Annual Quality Report and the Annual PTR Report to provide a more integrated overview of quality and patient experience.

The Board **APPROVED** and **NOTED** the Annual Putting Things Right Report for 2024/25.

**ABUHB
2409/15**

2025/26 Performance Reporting - Integrated Performance Report Q1

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Integrated Performance Report for Quarter 1 of 2025/26 to the Board.

Planned care performance was highlighted, with delivery against the 104-week target noted as a key achievement. HE reported that national outpatient activity had started to increase in several specialties, although the summer months had presented challenges for some specialities.

The Board was informed that the "Your Next Patient" initiative had already demonstrated positive impact, with ambulance hours lost to delays on the forecourt reduced from 170 hours the weekend before the initiative went live to only 20 hours the following week.

The Board discussed the effectiveness of initiatives such as "Your Next Patient" in improving ambulance handover times, and sought clarification on workforce challenges including recruitment, retention, and sickness absence rates. The Board was advised that the "Your Next Patient" initiative was already yielding measurable improvements in ambulance handover times, and that workforce challenges were being actively addressed through targeted interventions, continuous review, and transparent reporting.

The Board discussed the reliability and relevance of key performance metrics, the practicalities of meeting national targets, and the impact of workforce issues on service delivery and financial outcomes. The

importance of ongoing monitoring and transparent reporting to support continuous improvement was emphasised.

Sarah Simmonds (SS), Director of Workforce & OD, reported that the Health Board continued to face workforce challenges, particularly in relation to recruitment, retention, and sickness absence rates. SS confirmed that work was underway to clarify expectations for workforce performance and to address ongoing issues, including the implementation of targeted interventions to support staff wellbeing and reduce absence levels.

The Board **NOTED** the Integrated Performance Report for Q1 2025/26.

**ABUHB
2409/16**

2025/26 Performance Reporting - Financial Performance Report, Month 5

Robert Holcombe (RH), Director of Finance & Procurement, presented the Financial Performance Report for Month 5 to the Board.

RH explained that the year-to-date financial position for the Health Board remained positive in terms of capital and cash. However, the revenue forecast had shifted from a balanced position to a £19.9 million deficit, reflecting emerging risks and ongoing financial pressures. RH reported that informal sessions had been held with the Board to discuss the evolving financial situation and the actions required to support recovery.

The Board was informed that the Health Board had managed to increase savings and implement additional financial recovery actions. RH noted that the Band 2/3 national regrading proposal remained a national issue that needed resolution.

Reserves were currently being held at £1 million to support the forecast position, and the Board was advised that further requests from Welsh Government regarding the identification of financial balance were anticipated.

The Board acknowledged the challenges posed by inflation, pay awards, and rising operational costs. The importance of maintaining financial discipline while safeguarding service quality was emphasised. Every effort was being made to reduce the financial deficit.

The Board **NOTED** the Financial Performance Report for Month 5.

**ABUHB
2409/17**

Maternity and Neonatal Services – Annual Report

Jennifer Winslade (JW), Director of Nursing, presented the Annual Report on Maternity and Neonatal Services to the Board.

JW explained that the Health Board had supported approximately 6,000 maternity and neonatal appointments during the reporting period, with four birth settings available to service users.

JW highlighted several key achievements, including the implementation of a self-referral system for maternity services and the introduction of a digital maternity system which was the first of its kind in Wales. This digital system enabled women to access their own data and make informed choices about their care.

JW reported that birth numbers had remained relatively stable, with an increase in women choosing to have a caesarean.

The Board was informed that bereavement care and mortality reviews had continued to be a priority, and that a listening event had been commissioned in the neonatal unit, with plans to conduct a similar event in maternity services. The reviews had shown that a transitional care unit was needed.

The Board acknowledged the importance of continuous evaluation and engagement with service users to maintain high standards of care.

The Board **NOTED** the Annual Report on Maternity and Neonatal Services.

**ABUHB
2409/18**

Maternity and Neonatal Services – Assessment against SBUHB’s Review of Maternity and Neonatal Services

Jennifer Winslade (JW), Director of Nursing, presented the assessment against Swansea Bay University Health Board’s (SBUHB) review of maternity and neonatal services to the Board.

JW explained that the Health Board had completed a detailed analysis of its maternity and neonatal services in the light of the findings and recommendations from SBUHB’s review. The assessment process had involved a comprehensive review of current practices, outcomes, and service user feedback to ensure alignment with best practice and national standards.

JW reported that the Health Board had identified areas of strength, including the implementation of a digital maternity system, robust bereavement care, and ongoing engagement with service users through listening events. The assessment had also highlighted opportunities for further improvement, particularly in relation to

workforce development, patient choice, and the continued evaluation of service quality.

The Board discussed the importance of benchmarking local services against external reviews and welcomed the commitment to continuous improvement. The Board acknowledged the value of learning from the experiences of other Health Boards and the need to maintain high standards of care for mothers, babies, and families.

The Board **NOTED** the assessment against SBUHB's review of maternity and neonatal services and endorsed the ongoing work to address identified priorities.

**ABUHB
2409/19**

General Dental Services Reform Update

Leanne Watkins (LW), Chief Operating Officer, introduced the General Dental Services (GDS) Reform Update and invited Lloyd Hambridge (LH), Dental Programme Manager, Divisional Director – Community and Primary Care Services, to present to the Board.

LH delivered a detailed presentation on the progress and impact of the national dental contract reform programme. LH explained that the reform aimed to improve access to NHS dental services, enhance patient outcomes, and support the sustainability of dental practices across the region. The presentation outlined the key objectives of the reform, including a greater focus on prevention, patient-centred care, and the introduction of new performance monitoring and reporting standards.

LH reported that engagement with local dental practices had been ongoing, with the Health Board providing guidance and resources to support the transition to the new contract model. LH highlighted early feedback from dental practices, which had generally been positive, particularly regarding the increased emphasis on preventive care and improved patient pathways. However, LH also acknowledged ongoing challenges, including workforce recruitment and retention, and the need to ensure equitable access to dental services for all communities.

The Board discussed the importance of continued engagement with dental professionals and patients to monitor the impact of the reforms. Board members recognised the value of the data and insights provided in LH's presentation and commended both LH and the Primary Care team for their efforts in supporting practices and maintaining service continuity during the reform process.

The Board **NOTED** the General Dental Services Reform Update and thanked Lloyd Hambridge for his informative presentation.

**ABUHB
2409/20**

Strategic Risk Report, September 2025

Nicola Prygodzicz (NP), Chief Executive, presented the Strategic Risk Report for September 2025 to the Board.

NP explained that the report maintained a focus on the Health Board's key strategic risks, with particular attention given to those risks that remained outside the Board's risk appetite. NP reported that the overall risk rating had increased for financial sustainability, reflecting the ongoing and emerging challenges faced by the organisation driven by cost pressures, savings delivery challenges, and the need for rigorous financial control.

NP highlighted other key risks, including health and safety, business continuity, and the delivery of major service transformation programmes. The Board was informed that progress had been made in strengthening governance and oversight in these areas, but that continued focus and mitigation efforts were essential.

The Board agreed that the report clearly reflected the current risk landscape and that the organisation was maintaining appropriate oversight and mitigation strategies. The Board acknowledged the importance of regular review and proactive management of strategic risks to ensure the ongoing resilience and effectiveness of the Health Board.

The Board **NOTED** the Strategic Risk Report for September 2025.

**ABUHB
2409/21**

CONSENT AGENDA

The Board **APPROVED** the Draft Minutes of the Health Board Meeting, held on 16th July 2025

The Board **APPROVED** the Report on Sealed Documents and Chair's Actions.

The Board **APPROVED** the Interim changes to NHS model Standing Financial Instructions

The Board **NOTED** the Board Action Log with Updates

The Board **NOTED** the Report from Llais, Gwent Region

The Board **NOTED** the Community Therapy MSK Transformation Update Report

The Board **NOTED** the Social Partnership Duty Report

The Board **NOTED** the Welsh Language Annual Report

The Board **NOTED** the Strategic Partnership Updates:
a. Regional Partnership Board

The Board **NOTED** the Executive Committee Chair's report

The Board **NOTED** the Key Matters from Committees of the Board

	<p>The Board NOTED the overview of Joint and Partnership Committee Activity</p> <p>a. NHS Wales Shared Services Partnership Committee</p>
	OTHER MATERS
ABUHB 2409/22	<p>Any Other Business</p> <p>There were no further items raised for discussion.</p>
ABUHB 2409/23	<p>Date of the Next Meeting:</p> <p>Wednesday 26th November 2025</p>