



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

MINUTES OF MEETING HELD

Date and Time	Wednesday 26th March 2025 at 09:30am	
Venue	Conference Centre, St Cadoc's Hospital and Microsoft Teams	
PRESENT	Ann Lloyd Richard Clark Paul Deneen Dafydd Vaughan Iwan Jones Helen Sweetland Neil Patrick Penny Jones Louise Wright Phil Robson Nicola Prygodzicz Tracy Daszkiewicz Sarah Simmonds Jennifer Winslade Rob Holcombe Paul Solloway Leanne Watkins James Calvert Peter Carr Hannah Evans	Chair Independent Member (Local Authority) Independent Member (Community) Independent Member (Digital) Independent Member (Finance) Independent Member (University) Independent Member (Community) Independent Member (Community) Independent Member (Trade Union) Special Advisor to the Board Chief Executive Director of Public Health Director of Workforce and OD Director of Nursing Director of Finance & Procurement Director of Digital Chief Operating Officer Medical Director Director of AHPs and Health Science Director of Strategy, Planning and Partnerships
IN ATTENDANCE	Rani Dash Lisa Charles Daniel Saunders Michelle Jenkins Joanne Hook	Director of Corporate Governance Regional Director, Llais Cymru Patient Advice and Liaison Service (PALS) Patient Advice and Liaison Service (PALS) Senior Nurse - Patient Experience and Involvement Team
APOLOGIES	None received	

PRELIMINARY MATTERS	
ABUHB 2603/01	<p>Welcome and Introductions</p> <p>The Chair welcomed everyone to the meeting, in particular the guests from the Patient Experience and Involvement Team and members of the public who had joined the meeting to observe.</p> <p>It was noted that the meeting would be livestreamed and published on the Health Board’s website following the meeting.</p>
ABUHB 2603/02	<p>Declarations of Interest for Noting</p> <p>There were no declarations of interest raised.</p>
ABUHB 2603/03	<p>Consent Agenda</p> <p>The Chair introduced the Consent Agenda and asked if there were any items to be brought bring forward for discussion. There were no requests made.</p>
ABUHB 2603/04	<p>Report from the Chair</p> <p>Ann Lloyd, Chair, provided her verbal report, with a focus on the following areas:</p> <ul style="list-style-type: none"> • Positive visits to discharge wards in County Hospital and the Royal Gwent Hospital had taken place to see the ongoing work to better integrate health and social care services. • A meeting had taken place with the Chair and Chief Executive of Cwm Taf Morgannwg UHB, Cardiff and Vale UHB and the Cabinet Secretary regarding regional planning for the South-East and updates on this were included on the Board’s meeting agenda. • Attended an interesting seminar with the Monmouthshire Integrated Care Team, focussed on the North Monmouthshire Improvement Scheme following the success of the initial Scheme in the south of the County. • RPB leadership meetings had taken place, focused on transparency and value for money in community schemes. • Attended the Culture, Leadership and Succession Board, led by Health Education and Improvement Wales, focussed on leadership development, including the aspiring CEO Programme and mentorship for managers. • Attended the All-Wales Chair’s peer group, as well as meetings between Chairs and Chief Executives, with a focus on future service design and the long-term strategy for the next 10 years. • Presented at the newly established national induction programme for newly appointed Board members. <p>The Chair noted that the public appointments process was underway for the Third Sector and Trade Union Independent Member positions.</p>

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

**ABUHB
2603/05**

Report from the CEO

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

- System pressures remained, particularly with increased demand in stroke and cardiology services, albeit there had been a reduction in respiratory illnesses.
- A focus remained on strategic planning for the medium and longer term, whilst balancing concerted efforts on performance, including a reduction in 104-week waits.
- The Welsh Government had confirmed that with regard to Escalation Arrangements, the Health Board's position was unchanged at:
 - Level 4 (targeted intervention) for finance, strategy and planning; and
 - Level 3 (enhanced monitoring) for performance and outcomes related to urgent and emergency care pathways at the Grange University Hospital.

Discussions continued with Welsh Government to work towards de-escalation at the earliest appropriate point.

- The Health Board, particularly the Primary Care Team, had maintained a relentless focus on addressing the known concerns with the GP Partnership, Dr J Ahmed and Dr J Allinson. It was confirmed that since the Board last met, three practices had now transferred back to the Health Board from the Partnership, with a further two planned to be transferred in April 2025. This would result in three practices remaining with the Partnership which would continue under enhanced monitoring. Discussions with communities and partners continued whilst concerns remained.
- The Executive Team had held a development session focussed on the prevention agenda, primary care sustainability and place-based care planning; a session with the Board was being arranged.
- Regional planning and associated discussions continued at pace with a substantive paper included on the Board's meeting agenda.
- Attendance at the Cancer Services Conference and the Women's Network Conference, both of which were well attended and focussed on priority areas of work.
- 2025/26 priorities were now a key focus for the Executive Team, with extensive work ongoing towards delivery of the IMTP.

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

**Annual Report of the Executive Director of Public Health:
Working Together to help people live healthier, fairer, safer
and stronger lives**

Tracy Daszkiewicz (TD), Director of Public Health, presented her Annual Report which was a vehicle for informing local people about the health of their community, as well as providing necessary information for decision-makers in local health services and authorities on health gaps and priorities that need to be addressed.

TD outlined that the report focused on preventable early death in Gwent, written for both Gwent residents as well as the NHS and partners. Building on the Health Board's journey to becoming a Marmot Region via our Building a Fairer Gwent work, the report expanded further on the local challenges around health inequalities and the impact this was having on health across Gwent.

The report was intended to support an understanding of the Gwent picture around preventable early deaths, exploring the key causes and contributors, along with what can be done to change the story to help Gwent communities live as long as possible in the very best health possible.

The Board discussed the opportunities to work in partnership with public bodies to address challenges and bring improvement to the lives of the Gwent population. TD set out the arrangements in place with partners, including the Public Services Board and other partnership working with Local Authorities, as well as legislative requirements such as the Future Generations (Wales) Act.

The Board welcomed the informative and comprehensive report as a platform to drive forward improvement in population health and wellbeing and raise awareness of the challenges across Gwent. The Board also welcomed the refreshed and engaging approach to public health and population health management and thanked TD for her valuable leadership in this regard.

The Board **RECEIVED** the Report.

Patient Experience Story

The Chair welcomed to the meeting Joanne Hook (JH), Daniel Saunders (DS) and Michelle Jenkins (MJ) from the Patient Advice & Liaison Service (PALS).

JH led a presentation which provided an overview of the work of the PALS, including support to patients and families whilst in hospital. The Team offers confidential advice, support, and information on health-

related matters. They provide a point of contact for patients, families, and carers and work 8am-8pm 7 days a week, 365 days a year.

JH outlined that PALS Officers supported people who have a problem but do not know who to ask; want to talk to someone not directly involved in a person's care; want to compliment services or individual members of staff; and/or have a suggestion on how the Health Board can make improvements.

It was noted that since commencing in November 2023, the PALS Team had supported 8693 patients and carers up to the end of 18th Feb 2025. Of these only 24 cases have been escalated to Putting Things Right for formal investigation.

The presentation to the Board provided case studies that the PALS Team had managed and highlighted through patient and relative feedback the difference the service had made to people's lives and experience.

The Board praised the success of PALS, especially in sensitive areas such as end-of-life care or bereavement, and the team's continuous efforts to support patients and families. The positive improvements to the experience of patients and families were welcomed.

It was noted that a full evaluation of the PALS would be conducted at 18 months (May 2025).

The Board thanked the PALS team for their attendance and commitment.

The Board **RECEIVED** the presentation from PALS.

2603/08

Report from Llais, Gwent Region

Lisa Charles, Regional Director, Llais Cymru, presented Llais' report which set out current issues of concern and positive observations, and public feedback being addressed by Llais Gwent Region.

The Board thanked Llais for the ongoing support to communities and the insights brought back to the Board to inform ongoing planning and delivery of services.

The Board **RECEIVED** the Report from Llais.

2603/09

Integrated Medium-Term Plan 2025-28

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Integrated Medium-Term Plan (IMTP) for approval, noting that the Health Board had a statutory responsibility to submit

an approved Integrated Medium-Term Plan (IMTP) to Welsh Government that could financially balance over a three period.

HE advised that on 14th February 2025 the Chief Executive had issued an accountable officer letter to Welsh Government confirming the draft position within the financial plan which had identified a range of forecasts with a best case of £7m deficit. This position had now been reassessed following an updated assessment of cost growth, funding opportunities and saving plan assumptions and a recent Plan Scrutiny meeting with Welsh Government where there was a clear expectation around delivery of a financially balanced plan.

HE stated that the plan had been developed with high level engagement across all teams and provided an overview of the engagement that had taken place. HE provided an overview of the documents appended to the plan and noted that the plan set out what the Health Board aimed to achieve for the population over the next three years, but with a greater level of detail for the next 12 months.

HE noted that the plan outlined the priorities and system changes required under the five priority areas:

1. Embedding prevention and population health in all that we do
2. Progressing place-based models of care and sustainability in primary and community services
3. Improving our urgent & emergency care system focusing on experience, access and discharge pathways
4. Continuing to prioritise cancer, urgent and the longest waiting patients for planned care
5. Improving our mental health services

HE advised that in respect of performance and activity, the plan confirmed that with regard to ministerial performance expectations:

- Of the 18 performance expectations, 13 were planned to be delivered in full;
- The ministerial performance expectations with respect to urgent and emergency care (2 of the remaining 5 metrics) showed improvement trajectories, aligned with the plan for 6 goals and the enhanced monitoring improvement plan. These were deemed deliverable but stretching and represented a significant improvement in delivery compared with 2024/25;
- For the expectation of 0 patients waiting more than 104 weeks, the plan aimed to deliver this ministerial priority in 20 out of 24 specialties. The specialties of orthopaedics, ophthalmology, ENT and General surgery were forecast not to meet the target, noting that the significantly improved March 2025 performance for these specialties had been enabled via additional non recurrent monies that were not assumed in the current 2025/26 financial plan. It was noted that discussions with Welsh

Government regarding potential additional non recurrent monies for planned care that would improve this position were ongoing.

- With respect to cancer, the trajectory demonstrated the ambition to achieve consistently 70% against a target of 80% which would be an improvement to the current position of circa 63%.

Robert Holcombe (RH), Director of Finance & Procurement, presented the financial plan element of the Plan which had been developed with reference to the three-year route map previously agreed by the Board.

RH informed the Board that the updated assessment of the 2025/26 financial forecast ranged from a risk of up to £25m to financial balance dependent on a number of assumptions relating to cost levels and confidence ratings of savings delivery as set out within the Plan. RH noted that the Health Board was continuing to make progress in this area and if the estimated level of savings could be delivered fully and all in year mitigating cost reduction and income opportunities secured, there was the opportunity to deliver financial balance which formed the basis of the financial plan for 2025/26 and future years.

Ann Lloyd (AL), Chair, thanked all those involved in developing the Plan recognising the significant work undertaken. AL requested that further consideration of the milestones needed to enable delivery of the Plan in full be given, to enable the Board to have robust mechanisms to oversee delivery and performance.

The Board held discussion regarding the ambition of the Plan and the organisations capacity to deliver the priorities set out. Nicola Prygodzicz (NP) noted that the Executive Team would need to assess capacity continually.

The Board **NOTED** the ongoing work and **APPROVED** the adoption of the IMTP 2025-28 with a commitment to rigorous monitoring and evaluation.

2603/10

Budget Setting Proposals

Robert Holcombe (RH), Director of Finance & Procurement, presented the Budget setting Proposals.

The 2025/26 Health Board financial plan assumed the following:

- Baseline allocation 2024/25 £1,735.8m
- Allocation letter funding uplift of £27.6m
- Anticipated allocation income of £63.5m
- Other central income of £12.6m
- Further income assumed at risk £14.2m

This equated to an available resource limit to support expenditure of £1.853.6bn.

	<p>RH explained the proposed approach would be a 2-part budget setting plan: phase one involved setting budgets based on ledger rollover recurrent budgets, while phase two will finalise budgets with consideration of savings and cost mitigation.</p> <p>The Board APPROVED the proposals as presented.</p>
<p>2603/11</p>	<p>Capital Programme</p> <p>Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Capital Programme for 2025/26, which included discretionary capital and all-Wales capital funding.</p> <p>HE outlined the programme which focussed on managing risks, supporting strategic objectives, and addressing estate priorities, including investments in backlog maintenance, digital, diagnostics, and strategic projects.</p> <p>The Board discussed the importance of balancing new projects with maintaining existing infrastructure.</p> <p>The Board APPROVED the opening programme, recognizing the need for further work on the longer-term estate strategy and potential additional funding opportunities.</p>
<p>2603/12</p>	<p>Regional Planning and Strategic Vision for Llantrisant Health Park</p> <p>Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Strategic Vision for Llantrisant Health Park (LHP).</p> <p>It was noted that the work had taken place under the South-East Wales regional structure; one element of this work was the Llantrisant Health Park development and the need for the region to consider the opportunity that it offers in addressing any capacity issues the Health Board had, particularly in elective care.</p> <p>Nicola Prygodzicz (NP), Chief Executive, reinforced that working on a regional footprint offered opportunities for the best utilisation of regional capacity, where the Health Board determined need through robust demand and capacity planning.</p> <p>The Board NOTED the potential benefits and supported the strategic direction, while emphasizing the need for further consideration of business cases, revenue funding and any recommendations arising from the Ministerial Advisory Group on productivity and performance.</p>
<p>2603/13</p>	<p>Digital Cellular Pathology</p>

Paul Solloway (PS), Director of Digital, presented the Digital Cellular Pathology Business Justification Case (BJC) for approval.

PS outlined the detail of the national business case for digitizing the cellular pathology service which highlighted the importance of modernizing the service to support recruitment, improve efficiency, and enable regional working.

The paper provided an assessment of the Health Board's identified benefits and costs over the term of the proposed contract, aligned to the national business justification case, including additional local costs for supported ICT infrastructure. A total net cost to the Health Board of £4,989,370 for the period 2025/26 to 2034/35 was requested, with cash and non-cash releasing benefits set out within the case. An additional £72.4k was requested to support local ICT infrastructure.

The Board discussed the options set out and agreed that the "do nothing" option could not be supported given the level of service sustainability risks posed by this option.

The Board **APPROVED** the business case, acknowledging the financial implications and the need for regular updates on the implementation process.

2603/14

Strategic Equality Plan

Sarah Simmonds (SS), Director of Workforce and OD, presented the update against the year 1 priorities of the Strategic Equality Plan (SEP) and Equality Objectives for 2024 – 2028, following approval by the Board in March 2024.

SS informed the Board that all of the year 1 priorities had commenced and were in varying stages of progress. There had also been progress made with several priorities that were outlined in the plan to commence in year 2 onwards. SS set out key highlights achieved in respect of:

- The Health and Wellbeing Passport
- Aspiring Board Members scheme
- Improvement of accessibility for patients across various services
- Improvement in widening access for people with protected characteristics for employment and training
- Ongoing work in relation to the Welsh Race Equality Standards.

Louise Wright (LW), Independent Member, acknowledged the hard work in developing and implementing the strategy and expressed her thanks for the teams work in delivering this agenda.

Helen Sweetland (HS), Independent Member, asked if there were areas of particular challenge in progressing this agenda. SS advised

	<p>that there were areas for opportunity to enhance the approach, building on the work to have structural governance around staff networks, whilst also having more input from multidisciplinary perspectives across the organisation.</p> <p>Paul Deneen (PD), Independent Member, suggested considering charitable funds for support for further development where appropriate.</p> <p>The Board NOTED the update provided and APPROVED the document for publication.</p>
<p>2603/15</p>	<p>Complex and Long-Term Care</p> <p>Leanne Watkins (LW), Chief Operating Officer, presented the report on Complex and Long-Term Care, Independent Provider Fee Uplifts for 2025/26.</p> <p>LW highlighted the impact of inflationary factors such as National Insurance contributions and the real living wage on the overall cost and requested approval of the proposed fee uplift as an interim rate of 5.5% for care homes in Gwent, dependent on the NHS pay award announcement; and an increase of 6.9% for domiciliary care.</p> <p>The Board APPROVED the increase in uplifts.</p>
<p>2603/16</p>	<p>Standing Orders</p> <p>Rani Dash (RD), Director of Corporate Governance, presented amendments to the Board’s Standing Orders for ratification.</p> <p>RD advised the Board that there had been amendments to the constitution, membership and procedures regulations for NHS bodies and that the Health Board was required to amend the standing orders accordingly. RD confirmed that the amendments had taken place, in-line with the regulations, and had been published to the Health Boards website.</p> <p>The Board APPROVED the amendments to its Standing Orders.</p>
<p>2603/17</p>	<p>Audit Wales, Annual Audit Report 2024, and the Structured Assessment 2024</p> <p>Rani Dash (RD), Director of Corporate Governance, presented the Audit Wales, Annual Audit Report 2024 and the Structured Assessment 2024 noting that these had been received and discussed by the Audit, Risk and Assurance Committee.</p> <p>The Board RECEIVED both reports.</p>

2603/18

Q3 Quarterly Integrated Performance Report – March

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Quarterly Integrated Performance Report.

Key points included:

- Improvements in performance for the Mental Health measure across both adults and CAMHS.
- Reported Pathway of Care Delays (POCDs) had decreased in the latest period by almost 25% and were predicted to continue to decrease. Challenges remained in delivering and sustaining improvements with some escalation metrics including ambulance handovers and 12-hour waits.
- While the Health Board was not delivering single cancer pathway compliance to the trajectory of 67% the improvement work was in place. In January the Health Board saw a compliance of 61% and further improvements are expected.
- There was a national focus on planned care and there had been good progress in the delivery in-line with revised trajectories because of additional funding. The position for patients waiting more than 104 weeks had reduced from 4,408 at the end of Q1 to 1,695 in February 2025. Patients waiting more than 8 weeks for a specified diagnostic had improved from 4,221 at the end of Q1 to 1,619 in February 2025. Patients waiting more than 156 weeks was at 0 as of February 2025.

Sarah Simmonds (SS), Director of Workforce and OD, highlighted the workforce related metrics noting there were higher than expected sickness spikes in winter, which were now reducing to expected levels of absence and noted the impact of sickness levels on variable pay. There had been a reduction in long-term sickness absences.

Ann Lloyd (AL), Chair, highlighted concerns on performance in stroke admissions dropping to 9% against the assessment time standard. Peter Carr (PC), Director of AHPs and Health Science, discussed the need for ring fencing beds and surge management to improve stroke ward admissions. Nicola Prygodzicz (NP), Chief Executive, highlighted the exceptional peaks in demand for stroke services that the Health Board had seen.

The Board **NOTED** the performance update on ongoing work to address challenged areas.

2603/19

Quality Performance – Interim Report

Jennifer Winslade (JW), Director of Nursing, presented the Quality Performance Interim report for January and February. Key improvements included:

- An improvement in the Risk Adjusted Mortality Indicator (RAMI)

- Civica had been successfully implemented with a satisfaction rate over the 85% benchmark
- Overdue National Reportable Incidents (NRIs) decreased from 71% (July 2024) to 23% (January 2025)
- There had been no new Never Events reported
- Launch of the Safe Care Collaborative in May 2025

JW set out key areas of ongoing challenge, including:

- Infection rates for C.Difficile had risen over the last 12 months
- Variation in the number of inpatient Falls
- Improvement of the uptake of Level 1 and Level 2 Safeguarding training
- The compliance with closure of PTR concerns within 30 days, although the timeliness and quality of responses were improving.

The Board **NOTED** the performance update on ongoing work to address challenged areas.

2603/20

Finance Performance Report – January 2025

Robert Holcombe (RH), Director of Finance & Procurement, presented the Finance performance report at the end of January 2025 (month 10), as:

- The Health Board was reporting a year-to-date deficit of £7.221m, with a forecast year end deficit of £7.356m
- Capital spend at the end of month 10 was £44m, against a £67m plan
- Public sector payment policy performance was at 97%
- Cash holding was £6.2m which was slightly over the best practice level of £6m
- The Health Board's underlying financial position at month 10 was £14.5m
- Total annual plan savings were £40.5m with a current forecast delivery of £45.4m, at month 10 the savings were £35.2m
- Pay expenditure within the Health Board increased by £1.5m compared with December. Variable pay was £6.8m in-month which was an increase of £0.7m compared with the prior month
- Non-pay expenditure (excluding capital adjustments) increased by £1.0m compared with December.
- Overall pay and non-pay run rates were stable and there was confidence in terms of delivering forecast position

RH confirmed that there was a high level of confidence in achieving the forecast position of £7.356m deficit by the end of the 2024/25 financial year.

The Board **NOTED** the financial position as presented.

2603/21	<p>Strategic Risk Report, March 2025</p> <p>Nicola Prygodzicz (NP), Chief Executive, presented the Strategic Risk Report, updating the board on changes to the decarbonization risk and workforce risk. She emphasized the importance of considering these risks in the corporate risk and assurance process.</p> <p>The Board NOTED the report.</p>
2603/22	<p>CONSENT AGENDA</p> <p>The Board APPROVED the Draft Minutes of the Health Board Meeting, held on 28th January 2025.</p> <p>The Board APPROVED the Report on Sealed Documents and Chair’s Actions.</p> <p>The Board NOTED the Board Action Log with Updates.</p> <p>The Board NOTED the Strategic Partnership Updates of the Regional Partnership Board and Public Services Board.</p> <p>The Board NOTED the Executive Committee Chair’s report.</p> <p>The Board NOTED Key Matters from Committees of the Board.</p> <p>The Board NOTED the overview of Joint and Partnership Committee Activity of the Joint Commissioning Committee and NHS Wales Shared Services Partnership Committee.</p>
	<p>OTHER MATERS</p>
2603/23	<p>Any Other Business</p> <p>There was no other business raised for discussion.</p>
2603/24	<p>Date of the Next Meeting:</p> <p>Wednesday 21st May 2025</p>