



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

MINUTES OF MEETING HELD

Date and Time	Wednesday 28th January 2026 at 09:30am	
Venue	Conference Centre, St Cadoc's Hospital and Microsoft Teams	
PRESENT	<p>Ann Lloyd Phil Robson Paul Deneen Dafydd Vaughan Iwan Jones Neil Patrick Penny Jones Akmal Hanuk Helen Sweetland Helen Cunningham Nicola Prygodzicz Tracy Daszkiewicz Jennifer Winslade Rob Holcombe Paul Solloway Hannah Evans</p> <p>Peter Carr Sarah Simmonds Leanne Watkins Dr Seema Srivastava</p>	<p>Chair Vice Chair Independent Member (Community) Independent Member (Digital) Independent Member (Finance) Independent Member (Community) Independent Member (Community) Independent Member (Third Sector) Independent Member (University) Independent Member (Local Authority) 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 Medical Director</p>
IN ATTENDANCE	<p>Rani Dash Karen Newman</p> <p>Bryony Codd Naomi Murtagh Lisa Charles Sarah Goodey</p> <p>Claire Turner Barbara Cunningham Robert Jones Gareth Lewis Sara Utley Andrew Doughton</p>	<p>Director of Corporate Governance Assistant Director of Communications and Engagement Head of Corporate Governance Board Business Manager Regional Director, Llais Cymru Arts in Health Programme Manager (Item 5.1) Arts in Health Project (Item 5.1) Perinatal Peer Support Worker (Item 5.1) Assistant Director of Finance (Item 4.1) Head of Financial Services (Item 4.1) Audit Wales Audit Wales</p>

APOLOGIES	Vivek Goel	Independent Member (Trade Union)
------------------	------------	----------------------------------

PRELIMINARY MATTERS	
ABUHB 2801/01	<p>Welcome and Introductions</p> <p>The Chair welcomed everyone to the meeting, in particular 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 2801/02	<p>Declarations of Interest for Noting</p> <p>There were no declarations of interest raised.</p>
ABUHB 2801/03	<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>
ABUHB 2801/04	<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 reported on the All-Wales review of maternity and neonatal services, which had been led by Professor Sally Holland, Chair of the Maternity and Neonatal National Assurance Assessment Independent Oversight Panel. AL advised that two national stakeholder panels had been established for service users and professional stakeholders. AL represented Health Board Chairs on the review group which had met on three occasions, and that data collection and engagement with parents, voluntary organisations and staff had concluded. AL further advised that she had recommended inclusion of population morbidity analysis and clear articulation of service models across Health Boards and confirmed that the final report was expected to be published in mid-February and brought to a future Board meeting for consideration. • The Chair provided feedback on the Public Accountability Meeting held by the Cabinet Secretary, advising that the meeting had focused on performance and future improvement rather than retrospective scrutiny, with discussion covering financial position, urgent and emergency care pressures (including ambulance handovers), winter preparedness, delayed transfers of care and planned care, noting that the issues raised

were not new to the Health Board and that the meeting had been constructive.

- The Chair advised that she had received correspondence from the Cabinet Secretary confirming the withdrawal of approval for the Integrated Medium Term Plan (IMTP) due to ongoing financial challenges, and confirmed that the Executive Team had been asked to prepare a comprehensive and transparent analysis of delivery against the first year of the IMTP, setting out achievements, areas not delivered and reasons for this, to provide an accurate record for submission to the Cabinet Secretary ahead of further scrutiny.

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

**ABUHB
2801/05**

Report from the CEO

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

- NP updated the Board on the operational pressures experienced during January, advising that despite extensive preparation ahead of winter, a combination of high demand, increased acuity, delayed discharges and significant norovirus outbreaks had led to the declaration of a critical incident in mid-January. NP thanked staff for their sustained resilience and commitment during a period of unrelenting pressure and acknowledged the patience and support of the public, noting that while pressures remained, the Health Board had de-escalated from its critical position.
- NP advised that the Health Board had been escalated to Level 4 in-line with Welsh Government's Escalation Framework for Finance and Planning and Urgent and Emergency Care noting that, while this was disappointing, the reasons were understood and accepted. NP confirmed that work was ongoing to address the challenges outlined by Welsh Government, with further detail to be considered later on the agenda. NP referenced the Public Accountability Meeting had been an opportunity to articulate both the risks faced and the improvements already delivered by the Board.
- An update was provided on planned care and future planning, advising that additional Welsh Government funding had been secured to support waiting list reduction, including progress in significantly reducing long-wait outpatients. NP also noted ongoing work to prepare draft plans for 2026/27 following receipt of the planning framework and allocation letter.
- NP reported on a recent visit by the Director General for Health and Social Services Wales, at the Grange University Hospital. NP noted that the visit had provided an opportunity to highlight both the significant operational challenges being faced and the improvements delivered to date. NP confirmed that the Director

General had enjoyed the visit and opportunity to meet the teams.

- NP highlighted positive staff achievements, including recognition through national honours and internal awards, specifically noting the King's Honour awarded to Kathryn Thomas, Senior Programme Manager, for her contributions to volunteering. NP also reflected on positive patient feedback and compliments received, advising that these served as an important reminder of the quality, compassion and professionalism of care being delivered by staff despite sustained and challenging pressures.

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

**ABUHB
2801/06**

Annual Report and Accounts 2024/25 for the Aneurin Bevan University Health Board Charitable Fund

Rob Holcombe (RH), Director of Finance, presented the Annual Report and Accounts for the Aneurin Bevan University Health Board Charitable Fund for the year ended 31 March 2025, advising that the Health Board acted as the Corporate Trustee for the Charitable Fund. RH confirmed that the Annual Report and Accounts had been subject to audit by Audit Wales, had received an unqualified audit opinion, and had been considered and recommended by the Charitable Funds Committee.

RH reported that total income for the year amounted to £795k, with expenditure of £1.3m, noting that the difference had been supported through a release from investments in line with the agreed strategy to utilise more of the charitable funds for the benefit of patients and staff. RH advised that the Charitable Fund held reserves of approximately £4.9m at year end. Expenditure during the year had supported a wide range of initiatives, including staff training, patient experience improvements, equipment, awards and other projects that enhanced care beyond core NHS funding. RH confirmed that, subject to Board approval, the Annual Report and Accounts would be submitted to the Charity Commission by the statutory deadline.

The Chair thanked Paul Deneen (PD), Independent Member, for his leadership as Chair of the Charitable Funds Committee and for raising the profile of the Charitable Fund across the Health Board. PD reflected on the progress made in increasing awareness of the Charitable Fund and highlighted the positive impact of funded initiatives on patient and staff experience. He emphasised the importance of continuing to raise the profile of the charity among staff, patients and the public, and acknowledged the work of the Charitable Funds team in creating a strong and proactive culture.

The Chair expressed appreciation to all those who had donated to the Charitable Fund, recognising that their generosity had enabled

meaningful improvements to patient care and staff wellbeing. She also thanked the Charitable Funds team and Committee members for their continued work and commitment.

The Board **APPROVED** the Annual Report and Accounts for the Aneurin Bevan University Health Board Charitable Fund for 2024/25, noting the audit undertaken by Audit Wales.

**ABUHB
2801/07**

Patient Experience Presentation

The Board received a presentation from Sarah Goodey (SG), Arts in Health Programme Manager, Claire Turner (CT), Arts in Health Project Officer, and Barbara Cunningham (BC), Perinatal Peer Support Worker, on the impact of the Arts in Health creative programme offered to service users of the Gwent Perinatal and Infant Mental Health Service (GPIMHS).

The presentation centred on the lived experience of a service user and demonstrated how participation in structured creative activities had supported parents experiencing moderate to severe perinatal mental health difficulties. SG outlined the background to the programme, explaining that it had been developed through funding from Arts Council Wales and the Baring Foundation as part of the Arts and Minds initiative, initially responding to the mental health impacts experienced by families following the COVID-19 pandemic. SG advised that the programme had been delivered over several years and had involved a range of creative disciplines, including visual arts, movement and music, working closely with clinical teams and partner organisations.

BC explained that the creative sessions had enabled individuals to build confidence, regulate emotions and form meaningful peer connections, reducing isolation and supporting recovery. BC advised that many participants had continued friendships and creative activities beyond the formal programme, and that some individuals had progressed into volunteering roles, demonstrating longer-term benefits in confidence, wellbeing and contribution.

CT provided further detail on how sessions had been delivered, advising that activities had been adapted to individual needs and had focused on participation and expression rather than artistic output. She highlighted the importance of providing a calm, non-judgemental environment, with qualified clinical staff present to ensure safety and appropriate support for both parents and children. CT noted that the programme had supported bonding between parents and infants and had equipped participants with practical techniques that could be used beyond the sessions.

Peter Carr (PC), Director of Allied Health Professionals and Health Science, commented on the wider value of arts in health activity,

noting that relatively modest investment had delivered significant benefits for mental health, wellbeing and patient experience. He advised that work was ongoing nationally to strengthen the evidence base for arts in health, including evaluation of economic impact and return on investment, and confirmed that the Health Board had contributed to this growing body of evidence. PC also highlighted the importance of sustainability, robust evaluation and partnership working, including links with charitable funding and third-sector organisations.

Board Members welcomed the presentation and commented on the powerful nature of the patient story. Members highlighted the preventative impact of early intervention for parents and families, the benefits for children's longer-term outcomes, and the importance of creativity, connection and peer support in reducing isolation. The contribution of staff and peer support workers was acknowledged, alongside the positive impact of the programme on organisational culture and compassion.

The Board **RECEIVED** and **NOTED** the Patient Experience Presentation and welcomed the positive impact of the Arts in Health creative programme on service users, families and staff.

**ABUHB
2801/08**

Arts in Health Strategy Annual Report 2024/25

Peter Carr (PC), Director of Allied Health Professionals and Health Science, presented the Arts in Health Strategy Annual Report for 2024/25.

PC reminded Members that the Arts in Health Strategy had been approved by the Board in 2022 and advised that the report reflected the significant progress made in embedding arts in health activity across the Health Board. He emphasised that arts in health was now widely recognised nationally and within Wales as an important contributor to physical wellbeing, mental health, patient experience and staff wellbeing, and that it aligned closely with the Health Board's Integrated Medium Term Plan priorities, particularly supporting people in Gwent to live healthier lives.

PC outlined the breadth of activity delivered during the year, advising that a wide programme of participatory arts activity had been delivered across primary, secondary and community settings.

PC advised that progress had been made in strengthening the Health Board's contribution to the national evidence base for arts in health, including increased focus on evaluation and research. He acknowledged that while progress had been strong, further work was required to develop more consistent outcome measurement for patients and staff, to secure sustainable internal and external funding

streams, and to ensure robust governance and risk oversight as activity continued to expand.

Looking ahead, PC outlined that the focus for the coming year would include expanding equitable access to arts in health activity, strengthening partnerships with arts organisations and communities, and continuing to build a robust evidence base to support sustainability and growth. He advised that the strategy was maturing well and that the infrastructure now in place provided a strong platform for continued development.

The Board **NOTED** the Arts in Health Strategy Annual Report 2024/25.

**ABUHB
2801/09**

Report from Llais, Gwent Region

Lisa Charles (LC), 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.

Paul Deneen (PD), Independent Member, queried the extent to which the voices of children and young people were reflected in the feedback. LC advised that Llais received a steady flow of intelligence from children and young people and confirmed that amplifying their voices was a key priority moving forward. She advised that a strategy was being developed to strengthen Llais' presence in settings where children, young people and families accessed services.

Sarah Simmonds (SS), Director of Workforce and OD, highlighted issues raised within the report regarding access and communication for patients, including the experiences of deaf and hard-of-hearing individuals, and noted that work was underway with Health Board teams and primary care contractors to share good practice and address barriers.

Penny Jones (PJ), Independent Member, raised concerns regarding changes to the provision of incontinence pads and the significant impact this had on dignity and independence for service users. LC advised that this issue had been raised through formal representations to both the Health Board and local authorities, and that it had also been raised at a national level. She confirmed that responses were awaited.

Ann Lloyd (AL), Chair, thanked LC for the report and suggested that future Llais reports include feedback on the responses received from the Health Board to issues raised, in order to demonstrate learning and close the loop. LC confirmed that this would be taken forward.

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.

**ABUHB
2801/10**

Maternity and Neonatal Services Reconfiguration

Leanne Watkins (LW), Chief Operating Officer, presented the report on the proposed maternity and neonatal services reconfiguration.

LW explained that the proposals included the reconfiguration of Ward A3 to provide additional postnatal and post-operative beds adjacent to the maternity ward, alongside the introduction of transitional care cots. She advised that the Health Board was the only Level 3 neonatal unit in Wales without transitional care cots and that this gap adversely affected flow, safety and outcomes. LW also highlighted the absence of commissioned neonatal therapy services via the National Joint Commissioning Committee, advising that this was inconsistent with national standards and had implications for providing the best start in life for babies and families.

LW acknowledged concerns regarding the reduction of gynaecology beds as part of the reconfiguration and advised that detailed work had been undertaken to mitigate this risk, including improvements in day-case surgery and reductions in length of stay. She confirmed that the proposals had been developed with patient safety and sustainability as the primary considerations.

Nicola Prygodzicz (NP), Chief Executive, emphasised the risks associated with maternity and neonatal services and advised that the Executive Team viewed this as a priority area for investment. LW confirmed that further work was underway with the Joint Commissioning Committee to understand funding flows, including the impact of out-of-area neonatal care, and advised that affordability and timing would need to be considered through the Integrated Medium Term Plan (IMTP) process.

Members sought assurance regarding the impact of the reduction in gynaecology beds, the robustness of demand and capacity modelling, and the balance between quality, safety and financial sustainability. Assurance was provided that further work had been undertaken to understand bed utilisation, cancer pathways and the impact of surgical transformation, and that risks would continue to be monitored.

The Board recognised the complexity of the decision and the challenging financial context but acknowledged the significant clinical, quality and safety risks associated with not proceeding. Members emphasised the importance of meeting national standards and

prioritising maternity and neonatal services, while ensuring that affordability and implementation were appropriately managed through the IMTP.

The Board **APPROVED** the maternity and neonatal services reconfiguration business cases as a priority for investment, **NOTED** the anticipated quality and safety benefits, and agreed that affordability and implementation would be considered through the Integrated Medium Term Plan 2027/28 process.

**ABUHB
2801/11**

Capital Programme 2026/27

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Capital Programme for 2026/27.

HE explained that the report set out the proposed capital programme for the forthcoming financial year, covering both the All Wales capital schemes and the local discretionary capital programme. She advised that the Health Board's overall capital allocation for 2026/27 had increased compared with the previous year, rising to just under £14.5 million from approximately £12.9 million. HE stated that the programme reflected a balance between nationally mandated schemes and locally prioritised investments, developed within the constraints of the national capital framework.

HE highlighted that the discretionary capital plan included £2.2 million which remained unallocated at the time of reporting. She explained that this was, intended to provide flexibility and ensure that the Health Board was able to respond to emerging risks or urgent priorities during the financial year. HE further advised that, subsequent to the circulation of the paper, the Health Board had received an additional £280,000 of end-of-year capital funding, which further strengthened the overall capital position.

Helen Cunningham (HC), Independent Member, queried whether or not work was being undertaken to quantify potential savings arising from estate refits and capital investment. Rob Holcombe (RH), Director of Finance, responded by outlining the approach taken to consider value for money and the longer-term benefits of capital investment, including efficiency gains and cost avoidance, where these could be evidenced.

The Board **APPROVED** the Capital Programme 2026/27 and noted the content of the report.

**ABUHB
2801/12**

Patient Safety Incident Reporting and Management Policy

Jennifer Winslade (JW), Director of Nursing, presented the Patient Safety Incident Reporting and Management Policy.

JW explained that the revised policy reflected updates to national guidance and learning and strengthened the Health Board's approach to patient safety incident reporting and management. She highlighted that the revisions placed an increased emphasis on providing appropriate, timely and compassionate support to patients, families and staff affected by patient safety incidents, ensuring a consistent and supportive approach across the Health Board.

JW advised that the updated policy also clarified roles, responsibilities and processes to support effective reporting, investigation and learning from incidents, with the aim of promoting openness, learning and continuous improvement in patient safety.

The Board **APPROVED** the Patient Safety Incident Reporting and Management Policy.

**ABUHB
2801/13**

Performance Escalation Status Update

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Performance Escalation Status Update.

HE advised that the report provided an update on the Health Board's current national escalation levels and the position in relation to the two escalated domains, Urgent and Emergency Care and Finance and Planning. She explained that the report also outlined the governance and oversight arrangements in place to manage escalation and support recovery.

In relation to Urgent and Emergency Care, HE outlined the key escalation criteria and described the ongoing pressures being experienced, together with the actions being taken to mitigate risk and improve performance. She emphasised that this remained an area of significant focus for the Health Board, with continued monitoring and oversight at both executive and Board level.

HE also provided an update on the escalation of Finance and Planning, explaining that this reflected a deterioration in the financial forecast position. She advised that, although the national planning framework had not yet been received, the Health Board had undertaken self-assessment against the Planning and Performance Framework criteria to inform its current position and response.

Penny Jones (PJ), Independent Member, asked whether the extension to the Emergency Department had delivered the desired impact. In response, HE explained that a full evaluation had not yet been completed, but that the additional space had unlocked opportunities to test new models of working. She emphasised that patient experience

remained a key consideration in assessing the effectiveness of the changes.

Dafydd Vaughan (DV), Independent Member, referred to comments from Welsh Government regarding a rapid deterioration in the financial position and asked whether any feedback had been received on how this had occurred. Rob Holcombe (RH), Director of Finance, responded that no specific feedback had been provided by Welsh Government. He advised that, during the Public Accountability Meeting, there had been challenge around whether actions could have been taken more quickly, but no formal feedback had been received beyond this.

The Board **NOTED** the Health Board's current national escalation status, the assessment against the two escalated domains, and the oversight arrangements in place to manage and respond to escalation.

**ABUHB
2801/14**

Winter Plan 2025/26, Interim Progress Report

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the interim progress report on the Winter Plan 2025/26.

HE explained that the report set out the actions taken to date to mitigate the impacts of winter pressures across the Health Board. She advised that the Health Board continued to experience sustained operational challenges associated with seasonal increases in demand, infection outbreaks and ongoing delays in patient flow, particularly in relation to hospital discharge. HE confirmed that a range of measures had been implemented to support resilience, including enhanced surge capacity, strengthened escalation arrangements and targeted operational interventions to manage peaks in activity.

HE highlighted that, despite continued pressures, the actions undertaken to date had supported operational stability where possible, and she noted that a full review of the Operational Resilience Plan would be brought to a future meeting to provide a more detailed assessment of the winter response and opportunities for further strengthening.

The Board **NOTED** the actions taken to mitigate the impacts of winter to date and noted that a full review of the Operational Resilience Plan would be presented at a future meeting.

**ABUHB
2801/15**

Digital Programmes Update

Paul Solloway (PS), Director of Digital, presented the Digital Programmes Update. PS advised that the update provided an overview of progress across the Health Board's digital programmes, including work to strengthen digital infrastructure, support clinical and operational services, and enhance data and technology capability

across the Health Board. PS confirmed that the programme continued to align with both national digital priorities and the Health Board's strategic objectives.

PS highlighted that a number of major digital workstreams were active, including improvements to clinical systems, ongoing modernisation of digital infrastructure, and developments intended to support greater operational resilience. PS emphasised that digital programmes were playing an increasingly important role in supporting service transformation, improving staff experience and strengthening the reliability and security of core systems. It was noted that the Digital, Data and Technology Group continued to oversee progress, risks and delivery dependencies across all live projects to ensure coherent implementation.

PS further noted that the update provided assurance regarding governance arrangements surrounding digital activity, including monitoring of programme milestones, risk management and alignment with broader organisational planning. He confirmed that work would continue to progress at pace, with a particular focus on delivering improvements that supported front-line services and enhanced clinical decision-making.

The Board **NOTED** the update from the Digital, Data and Technology Group.

**ABUHB
2801/16**

Artificial Intelligence Review

Paul Solloway (PS), Director of Digital, presented the Artificial Intelligence (AI) Review. He explained that the report provided an overview of the Health Board's current work relating to artificial intelligence, including developments in national and local policy, emerging opportunities, and the governance arrangements required to ensure the safe, ethical and responsible introduction of AI technologies into clinical and corporate services. PS outlined that the review formed part of the Digital, Data and Technology Group's broader oversight of innovation and technological advancement across the Health Board.

PS confirmed that the review summarised work underway to understand potential AI applications within the Health Board, including opportunities to support clinical decision-making, streamline administrative processes and enhance data insight. He emphasised that any adoption of AI would require robust scrutiny, appropriate risk assessment and alignment with national standards to ensure patient safety, data protection and organisational accountability. PS highlighted that the review also recognised the emerging national direction on AI within NHS Wales and the need for the Health Board to maintain alignment with those expectations.

PS noted that the purpose of the report was to brief the Board on the current position and to provide assurance that exploratory work was being undertaken within an appropriate governance framework. He confirmed that further detailed proposals would be brought forward as specific AI initiatives matured.

The Board **NOTED** the Artificial Intelligence Review.

**ABUHB
2801/17**

Report of the Director of Public Health: The Big Gwent Vaccination Conversation

Tracy Daszkiewicz (TD), Director of Public Health, presented the Report of the Director of Public Health, The Big Gwent Vaccination Conversation. TD explained that the report set out a framework to guide continued work across the Health Board and its partners to reduce health inequalities and improve vaccination uptake across Gwent. She advised that the framework aimed to support a more coordinated and targeted approach to vaccination engagement, ensuring that communities experiencing the poorest outcomes or the greatest barriers to access were prioritised.

TD outlined that the report brought together insight from community engagement, intelligence on population needs and learning from previous vaccination programmes. She emphasised the importance of strengthening conversations within communities, improving accessibility of vaccination services and ensuring that the Health Board continued to respond to local need in an evidence-informed way. TD noted that the proposed framework would support ongoing collaboration with local authorities, primary care, schools, community organisations and the third sector, recognising that sustained improvement in uptake required partnership working.

TD highlighted that the report was intended to provide a clear and practical structure to support future activity, enabling the Health Board to drive forward improvement in vaccination coverage and contribute to broader public health goals relating to prevention and inequalities.

The Board **ADOPTED** the report as a framework to drive continued work to reduce health inequalities and improve vaccination uptake across Gwent.

**ABUHB
2801/18**

Integrated Performance Report

Hannah Evans (HE), Director of Strategy, Planning and Partnerships, presented the Integrated Performance Report, which provided an overview of organisational performance at the end of Quarter 2 for 2025/26. HE explained that the report outlined progress against the milestones set out within the IMTP, highlighting areas of improvement

as well as persistent pressures that continued to impact delivery. She confirmed that performance remained variable across domains, reflecting ongoing operational challenges, seasonal pressures and wider system constraints.

HE provided an update on strategic and operational indicators, outlining the key areas where performance had improved and where further action was required. She noted that work continued at pace to strengthen urgent and emergency care pathways, improve patient flow and address the broader escalation issues referenced earlier in the meeting. HE emphasised the importance of continued scrutiny and oversight to ensure delivery against the Health Board's priorities.

Sarah Simmonds (SS), Director of Workforce and OD, outlined the ongoing work to stabilise recruitment, strengthen retention and support staff well-being in the context of sustained operational pressure. SS highlighted continued challenges in key workforce indicators and confirmed that programmes to support attendance, organisational culture and workforce resilience were progressing.

Jennifer Winslade (JW), Director of Nursing, outlined the current position on quality indicators, noting continued pressures driven by demand, infection outbreaks and system constraints. She described the actions underway to support safe care, improve patient experience and strengthen the Health Board's approach to quality governance. JW confirmed that quality oversight mechanisms remained robust and that learning from incidents and adverse trends continued to be incorporated into improvement programmes.

The Board **NOTED** the Integrated Performance Report, including progress against IMTP milestones at the end of Quarter 2 2025/26.

**ABUHB
2801/19**

Financial Performance Report, Month 08

Rob Holcombe (RH), Director of Finance, presented the Financial Performance Report for Month 08. He explained that the report set out the Health Board's in-month and year-to-date financial position and provided an assessment of the Health Board's financial trajectory in the context of its current escalation status. RH confirmed that the financial position continued to reflect significant pressures, consistent with those previously reported to the Board, and emphasised that the deteriorating forecast had contributed to the Health Board's escalation to Level 4 by Welsh Government.

RH outlined that the report provided detail on key cost drivers, including ongoing operational pressures, continued demand for unscheduled care, and the impact of inflationary and workforce-related costs. He explained that the Health Board remained focused on the delivery of savings and efficiency measures, but that the scale of

system pressure continued to limit the extent to which these could offset fully the deficit position. RH highlighted that mitigating actions were underway, with enhanced scrutiny arrangements in place to ensure tight financial control throughout the remainder of the financial year.

RH advised that the report also summarised the main financial risks and uncertainties within the forecast, including those relating to performance trajectories, the delivery of planned savings, and the system-wide challenges affecting cost and demand. He confirmed that discussions continued with Welsh Government regarding the Health Board's financial position, and that further work remained ongoing to support the development of the financial elements of the IMTP.

The Board **NOTED** the Financial Performance Report for Month 08.

**ABUHB
2801/20**

Strategic Risk Report, January 2026

Nicola Prygodzicz (NP), Chief Executive, presented the Strategic Risk Report for January 2026. NP explained that the purpose of the report was to provide the Board with an overview of the Health Board's current strategic risk profile and to confirm whether or not appropriate governance, oversight and management arrangements were in place. She advised that the report set out the most recent assessment of strategic risks, including changes to risk scores, areas of heightened exposure and the mitigating actions being implemented across the Health Board.

NP drew the Board's attention specifically to sub-risk SRR 005A, for which an increase in both the risk score and the level of exposure had been proposed. She explained that the revised scoring reflected the deteriorating financial position, the ongoing operational pressures across urgent and emergency care, and the compounding impact of system-wide constraints. NP advised that the associated mitigating actions were being strengthened, with enhanced executive scrutiny and regular monitoring through established governance mechanisms.

The Board **CONSIDERED** the Strategic Risk Report and was satisfied that appropriate arrangements were in place for the management and review of strategic risks. The Board **ACCEPTED** the change in risk score and exposure for sub-risk SRR 005A.

**ABUHB
2801/21**

Key Matters from Committees of the Board

The Committee Chairs presented the Key Matters from Committees report. The report summarised the key issues considered by the Board's Committees since the previous meeting and highlighted the matters requiring the Board's attention for assurance.

The Committee Chairs confirmed that the report provided an overview of the scrutiny undertaken across the governance framework, including areas relating to quality, finance, performance, workforce, audit and risk, and demonstrated that the Committees continued to discharge their responsibilities in accordance with their terms of reference. It was outlined that the report aimed to ensure transparency and alignment between committee-level scrutiny and the Board's wider oversight role.

The Board **NOTED** the report for assurance and noted the updates provided by the Health Board's Committees.

**ABUHB
2801/21**

External Audit Reports

Andrew Doughton (AD), Audit Wales, and Sara Utley (SU), Audit Wales, presented the Annual Audit Report 2025 and the Structured Assessment 2025. The Board was informed that both reports formed part of Audit Wales' annual programme of work and provided independent assurance on the Health Board's governance, financial management, performance arrangements and wider organisational effectiveness.

AD advised that the Annual Audit Report 2025 summarised the findings from Audit Wales' financial and performance audit work undertaken during the year. The report set out conclusions on the accuracy of the Health Board's financial statements, compliance with relevant accounting standards and the robustness of financial controls. AD highlighted key aspects of assurance, together with areas where further strengthening would support improved financial governance and resilience.

SU outlined the findings of the Structured Assessment 2025, which reviewed the Health Board's corporate governance arrangements, financial planning processes and operational management systems. It was noted that the assessment evaluated the organisation's capability to plan and manage its resources effectively in a challenging environment, and provided a balanced view of both positive progress and areas where improvement actions remained necessary. SU confirmed that the findings were intended to support ongoing learning and the continued development of governance across the Health Board.

Rani Dash (RD), Director of Corporate Governance, thanked SU, AD and Audit Wales for their ongoing work with the Health Board.

The Board **RECEIVED** the Annual Audit Report 2025 and the Structured Assessment 2025 issued by Audit Wales.

CONSENT AGENDA

ABUHB 2801/22	The Board APPROVED the Draft Minutes of the Health Board Meeting, held on 26 th November 2025
	The Board APPROVED the Report on Sealed Documents and Chair's Actions.
	The Board NOTED the Board Action Log with Updates
	The Board NOTED the Annual Report of the Senior Information Risk Owner (SIRO) 2024/25
	The Board NOTED the Strategic Partnership Updates: <ul style="list-style-type: none"> a. Regional Partnership Board b. Public Service Board
	The Board NOTED the Executive Committee Chair's report
	The Board NOTED the overview of Joint and Partnership Committee Activity <ul style="list-style-type: none"> a. NHS Wales Joint Commissioning Committee b. NHS Wales Shared Services Partnership Committee c. Regional Joint Committee
	The Board NOTED the Summary of Board Business held In-Committee, November 2025
OTHER MATERS	
ABUHB 2801/23	Any Other Business There were no further items raised for discussion.
ABUHB 2801/24	Date of the Next Meeting: Wednesday 25 th March 2026