Bwrdd Iechyd Prifysgol Bae Abertawe

Heb eu cadarnhau
Cofnodion Cyfarfod y Bwrdd Iechyd
a gynhaliwyd ar 26 Tachwedd 2020
yn Ystafell y Mileniwm, Pencadlys y Bwrdd Iechyd, Baglan a thrwy Microsoft Teams

Presennol	
Emma Woollett	Cadeirydd
Martyn Waygood	Is-gadeirydd Dros Dro
Christine Williams	Cyfarwyddwr Dros Dro Nyrsio a Phrofiad y Claf
Chris White	Prif Swyddog Gweithredu / Cyfarwyddwr Therapïau a Gwyddor Iechyd Cyfarwyddwr Gofal Sylfaenol ac Iechyd Meddwl / Dirprwy Brif Weithredwr
Keith Reid	Cyfarwyddwr Iechyd y Cyhoedd
Darren Griffiths	Cyfarwyddwr Cyllid Dros Dro
Jackie Davies	Aelod Annibynnol
Tom Crick	Aelod Annibynnol
Kathryn Jones	Cyfarwyddwr Dros Dro y Gweithlu a Datblygu Sefydliadol
Mark Child	Aelod Annibynnol
Maggie Berry	Aelod Annibynnol
Martin Sollis	Aelod Annibynnol
Andrew Jarrett	Aelod Cysylltiol o'r Bwrdd
Reena Owen	Aelod Annibynnol
Richard Evans	Cyfarwddwr Meddygol Gweithredol
Keith Lloyd	Aelod Annibynnol
Nuria Zolle	Aelod Annibynnol
Siân Harrop-Griffiths	Cyfarwyddwr Strategaeth (tan gofnod 344/20)
Hefyd yn Bresennol:	
Mark Hackett	Darpar Brif Weithredwr
Steve Spill	Cynghorydd Arbenigol i'r Bwrdd
Pam Wenger	Cyfarwyddwr Llywodraethu Corfforaethol
Matt John	Cyfarwddwr Digidol
Hannah Evans	Cyfarwyddwr Trawsnewid
Irfon Rees	Pennaeth y Staff
Hugh Patrick	Cyngor Iechyd y Cyhoedd
Liz Stauber	Pennaeth Llywodraethu Corfforaethol
Deb Lewis	Cyfarwyddwr Gwasanaeth Grŵp, Ysbyty Treforys (cofnod 334/20)

Rhif Munud		Camau gweithredu
319/20	**CROESO AC YMDDIHEURIADAU**	

	Croesawodd Emma Woollett bawb i'r cyfarfod, yn enwedig Mark Hackett, y Darpar Brif Weithredwr. Cynghorodd y byddai hwn wedi bod yn gyfarfod olaf Tracy Myhill cyn iddi ymddeol ym mis Rhagfyr 2020. Yn anffodus, oherwydd profedigaeth yn ei theulu, rhoddodd Tracy ei hymddiheuriadau am golli'r cyfarfod. Talodd Emma Woollett deyrnged i gyfraniad Tracy Myhill i'r Bwrdd Iechyd, a'r ffordd sylfaenol iddi newid y sefydliad oherwydd ei gonestrwydd a'i thryloywder. Cynghorodd Emma Woollett, ers y cyfarfod bwrdd diwethaf, fod Chris White wedi cyhoeddi ei ymddeoliad am fis Mawrth 2021. Talodd deyrnged i'r ffordd iddo arwain trawsffurfiad wrth reoli gwasanaethau gweithredol. Derbyniwyd ymddiheuriadau absenoldeb wrth Tracy Myhill, y Prif Weithredwr, a Sue Evans, Iechyd Cymunedol y Cyhoedd.	
320/20	**DATGANIAD O FUDDIANT**	
	Nid oedd unrhyw ddatganiadau o fuddiant.	
321/20	**STORI CLAF**	
	Derbyniwyd stori claf, a oedd yn sôn am brofiad claf oedd eisiau siarad Cymraeg yn ystod ei hymweliadau i'r ysbyty fel y gallai hi gyfrannu at sgyrsiau ar y ward. Amlygodd hyn pa mor bwysig yw hi i beidio â rhagdybio'r iaith yr hoffai cleifion siarad ynddi, sy'n ffocws i'r bwrdd iechyd. Wrth drafod stori'r claf, codwyd y pwyntiau canlynol: Cynghorodd Pam Wenger na roddwyd cyfle i'r claf siarad ei hiaith ddewisol. Ers y stori hon, ymgymerwyd â gwaith sylweddol gan y bwrdd iechyd i sicrhau bod dewis iaith yn opsiwn i gleifion, a bod sgiliau Cymraeg staff yn cael eu coladu. Cymerodd Christine Williams y cyfle i ddiolch i'r hyfforddeion graddedig am eu gwaith i wella mynediad at yr iaith Gymraeg i gleifion. Dangosodd Tom Crick, Hyrwyddwr Iaith Gymraeg y Bwrdd Iechyd, ei hapusrwydd tuag at stori'r claf oherwydd, fel gwasanaeth cyhoeddus, roedd yn orfodol y gallai cleifion drafod yn eu hiaith	

	ddewisol. Ychwanegodd pa mor foddhaol yw'r gwaith i ddeall sgiliau Cymraeg staff yn well. Gwnaeth Reena Owen sylw y gallai cleifion sy'n colli eu cof gyfathrebu yn eu hiaith gyntaf yn unig, ac felly bydd yn rhaid ystyried hyn hefyd.	
Penderfyniad:	- **Nodwyd** y stori claf hon.	
322/20	**COFNODION Y CYFARFOD BLAENOROL**	
	Derbyniwyd a **chadarnhawyd** cofnodion y cyfarfod a gynhaliwyd ar 24 Medi 2020 a'r cyfarfod cyffredinol a gynhaliwyd ar 14 Hydref 2020 fel cofnod gwir a chywir, ac eithrio nodi bod Tom Crick yn bresennol ar gyfer y cyfarfod a gynhaliwyd ar 24 Medi 2020 yn unig.	
323/20	**MATERION SY'N CODI**	
	Nid oedd materion yn codi nad oeddent ar yr agenda fel arall.	
324/20	**COFNOD GWEITHREDU**	
	Derbyniwyd a **nodwyd** y cofnod gweithredu.	
325/20	**ADRODDIAD Y CADEIRYDD**	
	Derbyniwyd diweddariad ar lafar gan y Cadeirydd. Wrth gyflwyno'r adroddiad, cododd Emma Woollett y pwyntiau canlynol: - Roedd Covid-19 yn dal yn ganolbwynt i'r bwrdd iechyd a'r rhanbarth; - Rhoddwyd diolch i staff a'r gymuned leol am gydymffurfio â'r cyfnod clo llym yn ôl ym mis Hydref a Thachwedd; - Roedd y rhan fwyaf o bwyllgorau'r bwrdd iechyd yn parhau i gyfarfod, a rhannwyd cofnodion gweithredu yn weithrediadau brys a gweithrediadau i'w gwneud; - Roedd hi wrth ei bodd i gyhoeddi i Mark Hackett gael ei benodi fel Prif Weithredwr;	

	- Roedd y broses i recriwtio Is-Gadeirydd parhaol ar y gweill, a rhoddwyd diolch i Martyn Waygood am ei gyfraniad yn y rôl dros dro; - Roedd briffiau rheolaidd yn parhau i gael eu cynnal gydag arweinwyr, prif weithredwyr a chyfarwyddwyr gwasanaethau cymdeithasol awdurdodau lleol, yn ogystal ag Aelodau'r Senedd; - Gwnaeth cyfarfodydd mewn perthynas â rhaglen ARCH (Cydweithrediad Rhanbarthol ar gyfer Iechyd) ailddechrau gyda Byrddau Iechyd Prifysgol Bae Abertawe a Phrifysgol Hywel Dda; - Bu datblygiadau yn nhermau'r Fargen Ddinesig, yn enwedig mewn perthynas â'r ganolfan les yn Llanelli; - Derbyniwyd cyflwyniad gan y Bwrdd Partneriaeth Rhanbarthol ynglŷn â'r ymateb i Covid-19 a'r gwaith strategol ehangach; - Fel rhan o drawsnewid Gwasanaeth Gwybodeg GIG Cymru (NWIS) i awdurdod iechyd arbennig, cafodd hi ei gwahodd i gefnogi'r broses recriwtio ar gyfer aelodau annibynnol.	
Penderfyniad	- Dylid **nodi'r** adroddiad.	
326/20	**ADRODDIAD Y PRIF WEITHREDWR**	
	Derbyniwyd adroddiad diweddaru gan y Prif Weithredwr. Wrth gyflwyno'r adroddiad, cododd Chris White y pwyntiau canlynol: - Rhoddwyd dymuniadau da i Tracy Myhill am ymddeoliad hapus ac iachus; - Rhoddwyd croseo cynnes i Mark Hackett, a chynigodd y tîm gweithredol gefnogaeth iddo wrth iddo ddechrau yn ei swydd; - Er bod yr ymateb i Covid-19 yn ffocws o'r pwys mwyaf, dylid nodi y cafodd lefel uwchgyfeirio'r bwrdd iechyd ei gostwng o ymyrraeth wedi'i thargedu i fonitro uwch, a oedd yn bleidlais o hyder gan Lywodraeth Cymru; - Roedd Profi, Olrhain a Diogelu yn rhan hanfodol o ymateb y bwrdd iechyd i'r pandemig, fel y byddai'r rhaglen frechu unwaith iddi gychwyn;	

	- Oherwydd pwysau gweithredol cynyddol, agorodd yr uned gofal dwys (ITU) ychwanegol yn Ysbyty Treforys; - Roedd y bwrdd iechyd yn parhau i ddarparu gwasanaethau hanfodol ar y cyd â'i ymateb i Covid-19; - Roedd paratoadau ar gyfer Brexit (sef y DU yn gadael yr Undeb Ewropeaidd) yn parhau; - Roedd gwasanaethau lles yn parhau yn eu lle ar gyfer staff, a chydnabuwyd a gwerthfawrogwyd ymdrechion pawb.	
Penderfyniad:	- Dylid **nodi'r** adroddiad.	
327/20	**DIWEDDARIAD AR COVID-19**	
	Derbyniwyd adroddiad yn nodi diweddariad mewn perthynas â Covid-19. Wrth gyflwyno'r adroddiad, cododd Keith Reid y pwyntiau canlynol: - Roedd gostyngiad mewn nifer o achosion Covid-19 oherwydd y cyfnod clo llym am oddeutu 10 diwrnod, ond nid oedd y gostyngiad hwnnw wedi parhau; - Roedd cynnydd sylweddol mewn nifer o achosion, gydag oddeutu 1,100 o achosion newydd wedi'u hadrodd yn yr wythnos ddiwethaf; - Ar hyn o bryd, roedd 217 o achosion o fewn ysbytai'r bwrdd iechyd, gydag oddeutu 20 ohonyn nhw'n derbyn gofal critigol; - Mae'r bwrdd iechyd wedi profi sawl clwstwr trosglwyddo ar safleoedd ysbytai, a bu farw 65 o bobl wedi iddynt ddal y feirws yn yr ysbyty. Gwnaed ymdrechion mawr i reoli'r trosglwyddo nosocomaidd; - Roedd y rhan fwyaf o achosion cymunedol yn oedolion o oedran gweithio, yn enwedig rhai sy'n gweithio i gyflogwyr mawr, a gwnaeth y cynnydd mewn achosion ymhlith myfyrwyr ddod i ben, gyda dim ond clwstwr bach achlysurol yn y grŵp hwn nawr; - Roedd 38 cartref gofal yn rheoli achosion; - Adroddwyd achosion gan glwstwr o ysgolion, ac mae tystiolaeth o drosglwyddo o fewn ysgolion bellach; - Cafodd y gwasanaeth Profi, Olrhain a Diogelu ei herio ar frig yr ail don, a wnaeth arwain at dagfa yn y nifer o achosion a	

	oedd yn cael eu hadrodd, ond cafodd hwn ei ddatrys yn gyflym; - Roedd y rhaglen imiwneiddio ar fin cychwyn ar ddechrau mis Rhagfyr 2020, ond roedd rhaid aros am gadarnhad o argaeledd a chymhwystra'r brechlyn; - Roedd gobaith y byddai nifer o staff iechyd a gofal cymdeithasol rheng flaen wedi'u brechu cyn Nadolig 2020, ond nid oedd yn glir a allai'r rhaglen gael ei hestyn i breswylwyr cartrefi gofal. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Gofynnodd Mark Child am fanylion o'r amseroedd a'r cyfleusterau ar gyfer darparu'r rhaglen frechu i gymunedau. Atebodd Keith Reid fod canolfan frechu dorfol yn cael ei threfnu gyda safleoedd mewn tri lleoliad; sef Ysbyty Maes y Bae, Gorseinon a Margam, gyda chapasiti ar eu traws i roi oddeutu 3,300 o frechlynnau y dydd, yn dibynnu ar allu recriwtio staff i weithio saith diwrnod yr wythnos. Y cynllun arall i'w ystyried oedd argaeledd y brechlyn, am fod y wybodaeth amdano yn amrywiol, sy'n ei gwneud hi'n anodd trefnu. Hefyd, byddai canolfannau brechu ar safleoedd ysbytai acíwt i staff. Ychwanegodd fod y bwrdd iechyd yn symud i gyfnod gaeaf heriol. Er i Lywodraeth y DU gredu'n optimistaidd y byddai'r rhaglen frechu yn cael ei chwblhau erbyn Pasg 2021, roedd y bwrdd iechyd o'r farn y byddai'n cymryd hirach, tan Hydref 2021, mae'n debyg. Roedd gan y bwrdd iechyd ymrwymiad i frechu 160,000 o bobl o blith poblogaeth o 390,000. Roedd hwn yn nifer sylweddol, a byddai angen gwasanaethau gofal sylfaenol er mwyn cynorthwyo hyn. Holodd Martin Waygood am y cynnydd sy'n cael ei wneud i recriwtio i'r gweithlu Profi, Olrhain a Diogelu, gan nodi gostyngiad yn nefnydd y canolfannau profi gyrru drwodd. Ymatebodd Siân Harrop-Griffiths fod y tîm olrhain cysylltiadau, a'r bobl a wnaeth eu recriwtio, yn cael ei reoli drwy awdurdodau lleol, a oedd yn gweithio i gyflogi 100% o'r sefydliad. Roedd y galw am y gwasanaeth yn cynyddu, ac roedd angen ystyried sut i facsimeiddio argaeledd y rhai a oedd yn darparu'r gwasanaeth ar hyn o bryd, yn enwedig y rhai o'r tîm diogelu iechyd cyhoeddus. Roedd tîm cenedlaethol i'w sefydlu gan Fwrdd Iechyd Prifysgol Caerdydd a'r Fro, a byddai staff y bwrdd iechyd yn cael eu hadleoli i'r tîm o dan amgylchiadau y cytunwyd arnynt. Ychwanegodd Keith Reid fod adleoli'r capasiti profi yn hyblyg ar sail y galw. Roedd gostyngiad yn y nifer o geisiadau am y cyfleuster gyrru drwodd yn Hydref 2020, er nad oedd y rhesymau'n glir. Dywedodd y cafodd unrhyw slotiau rhydd eu trosglwyddo i'r system archebu genedlaethol er mwyn lleihau gwastraff.	

	Holodd Nuria Zolle a gafodd unrhyw beth ei ddysgu o’r don gyntaf yn nhermau trosglwyddo ar draws cartrefi gofal. Cynghorodd Keith Reid fod sawl gwers wedi’i dysgu, yn enwedig mewn perthynas â phrofi a rheoli heintiau er mwyn ymateb i nifer gynyddol o achosion yn gyflym ac yn effeithiol, yn ogystal â chydymffurfio â chyfarpar diogelu personol (PPE) ac ymbellhau corfforol. Ychwanegodd fod cynorthwyo cartrefi gofal yn ystod adegau o bwysau uchel yn brif ffocws gweithrediadu’r bwrdd iechyd. Gofynnodd Nuria Zolle am eglurhad a oedd gwaith yn cael ei wneud gyda phartneriaid i rannu negeseuon o fewn ardaloedd o amddifadedd ynghylch pa gamau y dylid eu cymryd. Ymatebodd Keith Reid ei bod hi’n anodd nodi lledaeniad daearyddol achosion gyda’r wybodaeth sydd ar gael i'r bwrdd iechyd; roedd y rhan fwyaf o achosion yn ymwneud â gweithleoedd yn hytrach nag ardaloedd daearyddol penodol. Ychwanegodd nad oedd bregusrwydd economaidd pobl wedi cael ei ddeall yn dda iawn, yn enwedig ymhlith y rhai a oedd yn penderfynu i barhau i fynd i'r gwaith er y canllawiau hunanynysu. Hefyd, roedd angen ystyried rhyng-ymgysylltiad teuluoedd, gyda sawl un yn byw mewn aelwydydd estynedig. Holodd Tom Crick a oedd unrhyw dystiolaeth o drosglwyddo ymhlith plant iau. Dywedodd Keith Reid fod y bwrdd iechyd yn parhau’n wyliadwrus i'r hyn a oedd yn digwydd mewn ysgolion. I ddechrau, er y bu’r nifer o achosion ymhlith plant yn isel, gwnaeth rhai a wnaeth ddal y feirws wneud hynny y tu allan i'r ysgol, trwy drosglwyddiadau cartref yn gyffredinol, ond o ganlyniad, roedd yn rhaid i'r swigen ysgol gyfan hunanynysu. Arweiniodd hyn at gais i ailystyried maint y swigod yn genedlaethol. Fodd bynnag, yn fwy diweddar, gwelwyd troslgwyddiadau o fewn ysgolion. Cydnabu Emma Woollett y gwaith sylweddol a oedd yn cael ei wneud mewn ymateb i'r pandemig, a diolchodd i weithwyr rheng flaen ar ran y Bwrdd.	
Penderfyniad:	- Dylid **nodi’r** cynnydd wrth ymateb i Covid-19 a’r gweithgarwch allweddol ym misoedd Hydref a Thachwedd; - Dylid **nodi’r** risgiau critigol trosfwaol i'r bwrdd iechyd mewn perthynas â’r pandemig.	
328/20	**COFRESTR RISG**	
	Derbyniwyd adroddiad yn amlinellu cofrestr risg bresennol y bwrdd iechyd.	

	Wrth gyflwyno'r adroddiad, cododd Pam Wenger y pwyntiau canlynol: - Diweddarwyd cofrestr risg y bwrdd iechyd, ac fe'i haliniwyd â chofrestr risg Covid-19; - Gwnaed newidiadau sylweddol i reoli risgiau yn dilyn diweddariad i fwrdd Mawrth 2020, gan gynnwys pwyllgorau yn ystyried y risgiau y dyrannwyd iddynt; - Ychwanegwyd risgiau ariannol newydd i'r gofrestr; - Roedd y Pwyllgor Archwilio yn parhau i oruchwylio'r system reoli risgiau; - Roedd y broses wedi gwella, gyda phob grŵp gwasanaeth bellach â'u cofrestr risg eu hun. Roedd angen cofnodi diweddariadau misol, ac anfonwyd materion at banel archwilio'r bwrdd iechyd; - Ar ddechrau'r pandemig, cytunodd y bwrdd i gynyddu'r lefel risg er mwyn anfon materion at y Bwrdd o lefel 16 i lefel 20, a gofynnwyd i'r lefel hon aros. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Emma Woollett fod rheoli risg yn tanategu gwaith y Bwrdd, felly roedd angen iddo fod yn gadarn. Diolchodd Martyn Waygood i Pam Wenger a Christine Williams am adolygu'r risgiau a roddwyd i'r Pwyllgor Ansawdd a Diogelwch, a oedd ganddo lefel risg o o leiaf 20. Byddai'r risgiau hyn yn creu sylfaen i gyfres o adroddiadau at wraidd y mater, gan ddechrau gyda thwf y ffetws.	
Penderfyniad:	- Dylid **nodi'r** diweddariadau i gofrestr risg y bwrdd iechyd a chofrestr risg trefn reoli aur Covid-19 a'r newidiadau pellach sy'n cael eu gwneud i gydnabod y risgiau newidiol sy'n wynebu'r bwrdd iechyd a'r ansicrwydd o ran y modelu sy'n ofynnol o ganlyniad i effaith yr ail don bresennol, a'r risg bosibl o drydedd don Covd-19; - Dylid **nodi'r** diweddariadau i gofrestr risg y bwrdd iechyd a gadarnhawyd gan y tîm gweithredol, ac adroddwyd gan y Pwyllgor Archwilio ym mis Tachwedd 2020; - **Cytunir** i'r lefel goddefgarwch ar gyfer risgiau aros ar lefel 20;	

	- Dylid **nodi'r** diweddariadau i'r polisi rheoli risg, cylch gorchwyl grwpiau rheoli risg, a chylch gorchwyl y panel archwilio risg.	
329/20	**ADRODDIADAU MATERION ALLWEDDOL**	
	(i) <u>Pwyllgor Ansawdd a Diogelwch</u> **Derbyniwyd** a **nodwyd** adroddiad yn nodi trafodaethau allweddol y Pwyllgor Ansawdd a Diogelwch a gynhaliwyd ar 27 Hydref 2020. Ymgymerwyd â'r drafodaeth ganlynol: Cynghorodd Martyn Waygood fod rheoli heintiau yn dal i fod yn brif ffocws i'r pwyllgor. Gwnaed gwaith da ym mhob maes, ac eithrio *clostridium difficile*. Ychwanegodd Richard Evans y gwelwyd cyfraddau uwch o'r haint yn gyffredinol ar draws y DU, oherwydd i bobl ddefnyddio gwrthfiotegau i drin Covid-19, mae'n debyg. Cynghorodd, gan fod y straen newydd yn amrywio rhwng cleifion, ei bod hi'n debygol bod y rhan fwyaf o bobl yn ei ddal yn y gymuned. (ii) <u>Pwyllgor Perfformiad a Chyllid</u> **Derbyniwyd** a **nodwyd** adroddiad yn nodi trafodaethau'r Pwyllgor Perfformiad a Chyllid a gynhaliwyd ar 27 Hydref 2020. Ymgymerwyd â'r drafodaeth ganlynol: Dywedodd Reena Owen fod y pwyllgor wedi nodi cynnydd yn y nifer a oedd yn dod i'r adran achosion brys, yn ogystal â chynnydd mewn atgyfeiriadau meddygon teulu, a oedd yn effeithio ar restrau aros gofal a gynlluniwyd. Ychwanegodd y gwnaed adroddiadau at wraidd y mater mewn perthynas â gofal a gynlluniwyd, canser ac effeithiolrwydd theatrau, yn ogystal â ffocws clir yn cael ei roi i'r sefyllfa ariannol. (iii) <u>Pwyllgor Archwilio</u> **Derbyniwyd** a **nodwyd** adroddiad yn nodi trafodaethau'r Pwyllgor Archwilio a gynhaliwyd ar 12 Tachwedd 2020. Ymgymerwyd â'r drafodaeth ganlynol: Cynghorodd Martin Sollis y rhoddwyd diweddariadau rheolaidd ynghylch y gwaith i fynd i'r afael ag argymhellion yr adolygiadau llywodraethu a wnaed yn ystod ton gyntaf y pandemig. Diolchodd i'r gweithredwyr a gymerodd ran, gan ychwanegu y cafodd y rhain eu sicrhau gan y pwyllgor. Yn ogystal, derbyniodd y pwyllgor ddiweddariad mewn perthynas â *The Guardian Service*, y rhoddodd aelodau eu cefnogaeth lawn iddo. (iv) <u>Pwyllgor Deddfwriaeth Iechyd Meddwl</u>	

	Derbyniwyd a **nodwyd** adroddiad yn nodi trafodaethau'r Pwyllgor Deddfwriaeth Iechyd Meddwl a gynhaliwyd ar 5 Tachwedd 2020. Ymgymerwyd â'r drafodaeth ganlynol: Dywedodd Martyn Waygood fod y pwyllgor yn parhau i fonitro'r asesiad o drefniadau diogelu wrth amddifadu o ryddid gan nad oedd aseswyr budd pennaf mewnol yn cael eu defnyddio i'w llawn botensial. (v) Pwyllgor Cronfeydd Elusennol **Derbyniwyd** a **nodwyd** adroddiad yn nodi trafodaethau'r Pwyllgor Cronfeydd Elusennol a gynhaliwyd ar 14 Hydref 2020 a 6 Tachwedd 2020. Ymgymerwyd â'r drafodaeth ganlynol: Cynghorodd Martyn Waygood y cadarnhawyd gwariant sylweddol er mwyn estyn cytundeb dau gwnselwr lles tan Ragfyr 2021, oherwydd i'r gwasanaeth hwn gael ei ddefnyddio lawer gan staff.	
330/20	**DEDDF LEFELAU STAFFIO NYRSIO (CYMRU) 2016**	
	Derbyniwyd adroddiad yn nodi diweddariad ar Ddeddf Lefelau Staffio Nyrsio (Cymru) 2016. Wrth gyflwyno'r adroddiad, cododd Christine Williams y pwyntiau canlynol: - Roedd y bwrdd iechyd yn parhau i weithredu er mwyn sicrhau bod y staffio addas ar wardiau meddygol a llawfeddygol yn cydymffurfio â'r Ddeddf; - Cymerwyd camau i leihau risgiau, gan gynnwys mwy o weithwyr cymorth gofal iechyd a myfyrwyr nyrsio yn cael eu defnyddio; - Gan fod wardiau wedi'u haddasu mewn ymateb i'r pandemig, adolygwyd y sefydliad nyrsio hefyd. Gwnaeth yr adolygiadau hyn ystyried aciwtedd cleifion, a chawsant eu rheoli drwy broses panel craffu; - Ymgymerwyd ag asesiadau risg yn rheolaidd i sicrhau bod lefelau staffio yn cydymffurfio â'r ddeddf. Wrth drafod yr adroddiad, cydnabu Jackie Davies y gwaith caled a wnaed gan y tîm nyrsio, ond gofynnodd sut yr adroddwyd diffyg cydymffurfio â'r Ddeddf. Ymatebodd Christine Williams gan ddweud, er nad oedd templed Cymru gyfan a oedd yn gofyn am ddiffyg cydymffurfio i gael ei adrodd, roedd pob maes o fewn y bwrdd iechyd yn cwblhau pecyn gweithlu er mwyn cofnodi lefelau staffio yn ddyddiol, a dangosodd hyn a gydymffurfiwyd â'r Ddeddf ai	

	peidio. Adroddwyd canfyddiadau'r cofnodion dyddiol hyn wrth y Bwrdd Nyrsio a Bydwreigiaeth. Dywedodd Emma Woollett y byddai'n ddefnyddiol i'r wybodaeth hon gael ei hadrodd wrth y Pwyllgor Ansawdd a Diogelwch er mwyn ei gwirio. Ymatebodd Pam Wenger y bydd hyn yn destun adroddiad at wraidd y mater yn y dyfodol.	
Penderfyniad:	- **Cytunwyd** ar newidiadau o fewn sefydliadau a ariennir i sicrhau bod y Bwrdd yn parhau i gydymffurfio â Deddf Lefelau Staffio Nyrsio (Cymru) 2016. - Dylid **nodi'r** camau a gymerwyd i sicrhau lefelau staffio priodol yn ystod pandemig Covid-19.	
331/20	**CADARNHAD O BENDERFYNIAD Y CADEIRYDD I GYMERADWYO CYNLLUN GWEITHREDOL AR GYFER CHWARTERAU TRI A PHEDWAR**	
	Dyma adroddiad sy'n gofyn am gadarnhad o benderfyniad y Cadeirydd i gymeradwyo'r cynllun gweithredol ar gyfer chwarterau tri a phedwar. Wrth gyflwyno'r adroddiad, cododd Siân Harrop-Griffiths y pwyntiau canlynol: - Cytunwyd ar y cynllun gweithredol ar gyfer chwarterau tri a phedwar wedi i'r Cadeirydd ei gyflwyno i Lywodraeth Cymru; - Cyn hyn, cafodd ei ystyried mewn sesiwn friffio'r Bwrdd a'i gylchredeg ar gyfer sylwadau. Penderfynwyd bod y cyfan yn addas; - Roedd y cynllun yn gosod blaenoriaethau ar gyfer ymateb i Covid-19, yn ogystal â darparu gwasanaethau hanfodol; - Adroddwyd cynnydd yn erbyn pob un o'r cynlluniau chwarterol wrth y Pwyllgor Perfformiad a Chyllid a'r Pwyllgor Ansawdd a Diogelwch, yn ogystal â'r bwrdd; - Ni fyddai adborth ffurfiol am y cynllun yn cael ei dderbyn gan Lywodraeth Cymru, ond byddai cynnydd yn cael ei drafod mewn cyfarfod ym mis Rhagfyr 2020; - Dechreuwyd cynllunio ar gyfer cynllun blynyddol ar gyfer 2021-22, a byddai hwn yn cael ei rannu â'r bwrdd ym mriff ym mis Rhagfyr 2020; - Byddai angen cyflwyno'r cynllun blynyddol ym mis Mawrth 2021.	

	Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Ailadroddodd Emma Woollett fod gwaith sylweddol wedi'i wneud i baratoi'r cynllun gweithredol ar gyfer chwarter tri a phedwar, a chafwyd cyfraniadau gan yr Aelodau Annibynnol. Cynghorodd Darren Griffiths mai £26.4m oedd y diffyg ariannol rhagolygol wrth i'r cynllun gweithredol ar gyfer chwarter tri a phedwar gael ei gyflwyno. Yn dilyn sesiwn archwilio bellach gyda Llywodraeth Cymru, gwelwyd lleihad o £1 filiwn ar ôl cyngor y gellid dod o hyd i arian ar gyfer digomisiynu'r adeiladau yn Ysbyty Treforys. Cynghorodd Kathryn Jones fod Pwyllgor y Gweithlu a Datblygu Sefydliadol wedi cwrdd yn ddiweddar ac wedi adolygu manylion y cynllun, a threfnwyd sesiwn archwilio gyda Llywodraeth Cymru hefyd.	
Penderfyniad:	- Dylid **cadarnhau'r** cynllun gweithredol ar gyfer chwarter tri a phedwar 2020-21 yn dilyn cymeradwyaeth y cadeirydd a'r cyflwyniad i Lywodraeth Cymru.	
332/20	**PARTNERIAETHAU'R GIG**	
	Derbyniwyd adroddiad yn nodi diweddariad mewn perthynas â gweithio mewn partneriaeth gyda sefydliadau GIG Cymru eraill. Wrth gyflwyno'r adroddiad, cododd Siân Harrop-Griffiths y pwyntiau canlynol: - Mae'r uned iechyd meddwl amenedigol y fam a'i babi yn Ysbyty Tonna ar y trywydd iawn ar gyfer Ebrill 2021; - Roedd cynnydd glir yn cael ei gwneud drwy ARCH, gan gynnwys datblygu achos busnes ar gyfer y campws iechyd; - Roedd gweithio mewn partneriaeth gyda Byrddau Iechyd Cwm Taf Morgannwg a Chaerdydd a'r Fro yn mynd yn dda.	
Penderfyniad:	- Dylid **nodi'r** diweddariad ar gyd-bartneriaeth GIG y bwrdd a threfniadau comisiynu.	
333/20	**PARTNERIAETHAU ALLANOL**	
	Derbyniwyd adroddiad yn nodi diweddariad ar bartneriaethau allanol.	

	Wrth gyflwyno'r adroddiad, cododd Siân Harrop-Griffiths y pwyntiau canlynol: - Roedd y Bwrdd Partneriaeth Rhanbarthol wedi cwrdd yn ddiweddar, a chynghorodd y cadeirydd y bydd yn ymddiswyddo o fis Mawrth 2021 ymlaen; - Mae'r Bwrdd Cyfiawnder Ieuenctid yn parhau i ddatblygu; - Gwnaed gwaith i leihau trais yn erbyn menywod; - Ymdriniwyd â chamdrin sylweddau fel mater o flaenoriaeth ranbarthol; - Roedd gwaith tai rhanbarthol yn rhoi lloches i'r rhai a oedd yn cysgu allan. Wrth drafod yr adroddiad, dywedodd Mark Child pa mor dda oedd gweld cyfarfod cyntaf y Grŵp Iechyd a Thai cyfunol, ac roedd yn edrych ymlaen at y cyfraniad gwerthfawr y byddai'n ei wneud.	
Penderfyniad:	- Dylid **nodi'r** partneriaethau allanol allweddol y mae Bwrdd Iechyd Prifysgol Bae Abertawe yn rhan ohonynt; - Dylid **nodi'r** materion a drafodwyd yn y partneriaethau allanol hyn a'r goblygiadau allweddol ar gyfer y bwrdd iechyd; - Dylid **nodi** cofnodion y cyfarfodydd partneriaethau diweddar a gynhaliwyd.	
334/20	**ACHOS AMLINELLOL STRATEGOL AR GYFER ORTHOPAEDEG**	
	Derbyniwyd adroddiad yn nodi'r achos amlinellol strategol ar gyfer datblygu uned triniaethau orthopaedig dewisol. Wrth gyflwyno'r adroddiad, cododd Deb Lewis y pwyntiau canlynol: - Mae'r rhestr aros ar gyfer gwasanaethau orthopaedig wedi cynyddu'n sylweddol dros y blynyddoedd diwethaf, ac mae pandemig Covid-19 wedi gwneud y sefyllfa'n waeth; - Rhannwyd astudiaeth dichonoldeb â Llywodraeth Cymru yn cynnig sefydliad canolfan orthopaedig etholedig; - Derbyniwyd y cynnig yn ffafriol, gyda chyngor i ystyried cynifer o opsiynau ag sy'n bosibl yn hytrach na dewis un ffafriedig;	

	- Roedd y costau cyfalaf yn amrywio rhwng £1.3m i £13.5m i bob opsiwn, ond gan mai arloesedd newydd ar gyfer Cymru oedd hwn, roedd yn debygol y byddai cefnogaeth allanol; - Roedd gwaith i'w wneud gyda 'Gwneud Pethau'n Iawn y Tro Cyntaf' (GIRFT), a oedd yn canolbwyntio ar effeithlonrwydd o fewn y GIG, ac er y gallai hyn newid yr opsiynau a gynigiwyd, roedd yn debyg y byddai'r costau'n aros yr un peth. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Cynghorodd Emma Woollett fod hwn yn ddarn o waith pwysig, a nododd fod rhestrau aros orthopaedig yn cyfrannu at ran sylweddol o'r cwynion iddi dderbyn. Cefnogodd Reena Owen y papur, gan gynghori bod adroddiad at wraidd gofal a gynlluniwyd wedi digwydd yng nghyfarfod diwethaf y Pwyllgor Perfformiad a Chyllid, a wnaeth amlygu bod y pandemig wedi chwalu gallu'r gwasanaeth i wella ei sefyllfa. Ychwanegodd, er nad oedd y cyflyrau yn bygwth bywydau'r rhai oedd yn aros am driniaeth gan amlaf, roedd yn effeithio ar eu bywydau dyddiol. Dywedodd Chris White y byddai canoli orthopaedeg yn un lle yn creu capasiti ar safleoedd eraill i ddarparu gwasanaethau eraill, a fyddai'n gwella gwasanaethau dewisol yn ehangach. Ychwanegodd y byddai gwahanu llawdriniaeth dewisol a llawdriniaeth frys lle bo hynny'n bosibl yn hanfodol i wella perfformiad amseroedd aros dewisol, er y byddai'n cymryd rhwng 3-5 mlynedd i wella'r sefyllfa o ran perfformiad. Gofynnodd Martin Sollis am sicrwydd bod y bwrdd iechyd yn gweithio'n agos gyda chydweithwyr o Fwrdd Iechyd Prifysgol Hywel Dda. Ymatebodd Deb Lewis fod y bwrdd iechyd wedi darparu ychydig o wasanaethau orthopaedig a sbinol i'r sefydliad, ac roedd cydweithwyr yn rhan o hyn, ond nid oedd yn gyd-achosachos ar y cyd. Dywedodd Nuria Zolle fod yr achos ar gyfer newid yn un cymhellol, ond byddai hefyd yn hanfodol peidio ag anghofio am y canlyniadau personol a'r hyn sydd o bwys i gleifion, gan nad llawdriniaeth yw'r dewis gorau bob tro. Dywedodd Darren Griffiths fod goblygiadau ariannol yn berthnasol, ond gallai'r gwaith drawsnewid cyfeiriad y bwrdd iechyd, a'r ffordd y mae'n darparu gofal dewisol. Cynghorodd Richard Evans fod GIRFT wedi ymwneud â'r bwrdd iechyd am y tro cyntaf mewn perthynas â thorasgwrn gwddf y ffemwr. Nid oedd y perfformiad ar eu cyfer yn dda iawn. Mae	

	perfformiad bellach wedi gwella'n sylweddol, a byddai'n dda cael y gefnogaeth honno ar gyfer y datblygiad hwn. Diolchodd Emma Woollett i Deb Lewis a'i thîm am y gwaith hyd yn hyn, gan ychwanegu ei fod yn ddatblygiad cyffrous i'r bwrdd iechyd.	
Penderfyniad:	- **Cadarnhawyd** yr achos amlinellol strategol i'w gyflwyno i Lywodraeth Cymru	
335/20	**MEMORANDWM CYD-DDEALLTWRIAETH AR GYFER TROSGLWYDDO'R GWASANAETH LYMFFOEDEMA**	
	Derbyniwyd adroddiad i'w gymeradwyo yn nodi'r memorandwm cyd-ddealltwriaeth ar gyfer trosglwyddo'r gwasanaeth lymffoedema. Wrth gyflwyno'r adroddiad, cododd Pam Wenger y pwyntiau canlynol: - Cynhaliwyd y tîm clinigol gan y bwrdd iechyd am sawl blwyddyn; - Cynigiwyd bod y trefniadau'n cael eu ffurfioli a bod y bwrdd iechyd yn cynnal y gwasanaeth yn ei gyfanrwydd o fis Ebrill 2021; - Roedd hwn yn wasanaeth cenedlaethol a drafftiwyd memorandwm cyd-ddealltwriaeth i bob bwrdd iechyd ei lofnodi, er mwyn gosod rolau a dyletswyddau; - Yn unol â sefydliadau eraill, byddai adroddiad blynyddol yn cael ei rannu â'r Pwyllgor Archwilio.	
Resolved:	- **Cymeradwywyd** y memorandwm cyd-ddealltwriaeth.	
336/20	**GWASANAETHAU IAITH GYMRAEG**	
	Derbyniwyd adroddiad yn nodi diweddariad ar wasanaethau iaith Gymraeg. Wrth gyflwyno'r adroddiad, cododd Pam Wenger y pwyntiau canlynol: - Roedd angen i'r bwrdd iechyd gydymffurfio â Safonau'r Gymraeg;	

	- Roedd rhan o'r cydymffurfio yn cynnwys cynhyrchu adroddiad blynyddol gan osod cynnydd yn erbyn y safonau, y rhoddwyd estyniad i sefydliadau tan Dachwedd 2020 oherwydd y pandemig; - Yn ystod y flwyddyn, ymddeolodd Swyddog y Gymraeg, ac roedd bwlch yn y gwasanaeth; - Comisiynwyd adroddiad allanol i benderfynu sefyllfa'r bwrdd iechyd ac i osod cynllun gweithredol dilynol; - Gwnaed buddsoddiadau i'r gwasanaeth cyfieithu, gan alluogi i fwy o waith gael ei wneud yn fewnol, yn hytrach na gan wasanaeth allanol; - Rodd gwaith yn parhau i gael ei wneud i gofnodi sgiliau Cymraeg staff, yn ogystal â'r rhai oedd yn awyddus i ddysgu'r iaith. Mae oddeutu 900 o ymatebion wedi'u cofnodi erbyn hyn. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Reena Owen fod hwn yn faes pwysig i'r bwrdd iechyd, a holodd a oedd cyfle i ddysgu oddi wrth rwydeithiau eraill. Ymatebodd Pam Wenger gan ddweud bod rhwydwaith hyrwyddwyr y Gymraeg, y mae pob bwrdd iechyd yn rhan ohono, a bod hyn yn gyfle i rannu dysgu ac arfer da. Ychwanegodd fod y bwrdd iechyd wedi bod yn ffodus i elwa o gefnogaeth Swyddog y Gymraeg Partneriaeth Cydwasanaethau GIG Cymru (NWSSP) tra oedd bwlch yn ei wasanaeth, ac roedd hyn wedi nodi cyfleoedd i nodi ffyrdd gwahanol o wneud pethau. Croesawodd Richard Evans yr adroddiad fel arweinydd gweithredol y Gymraeg, gan nodi ei bod hi'n bwysig integreiddio'r gwaith i ryngweithiadau dyddiol, i alluogi'r rhai a oedd yn siarad Cymraeg i fod gyda'r cleifion sydd eu hangen.	
Penderfyniad:	- Dylid **nodi'r** cynnydd yn erbyn darparu'r safonau fel y'i gosodir yng nghorff yr adroddiad hwn a drafft yr adroddiad blynyddol; - **Derbyniwyd** sicrwydd y caiff fersiwn derfynol yr adroddiad blynyddol ei gwblhau erbyn y terfyn amser newydd, sef 30 Tachwedd 2020; - Dylid **nodi'r** gweithredoedd allweddol a gymerwyd yn ystod 2020-21 i weld pa waith arall sydd angen cael ei wneud yn y dyfodol.	
337/20	**CYNNYDD O RAN TRAWSNEWID DIGIDOL**	

	Derbyniwyd adroddiad yn nodi diweddariad ar gynnydd o ran trawsnewid digidol. Wrth gyflwyno'r adroddiad, cododd Matt John y pwyntiau canlynol:: - Rhoddodd yr adroddiad grynodeb o gyfarfod cyntaf y Grŵp Trawsnewid Digidol Arweiniol. Gwnaeth hyn ddisodli trefniadau llywodraethol blaenorol o fewn y gwasanaeth; - Gwelwyd presenoldeb ar draws y bwrdd iechyd, gan gynnwys cynrychiolwyr corfforaethol a grŵp gwasanaethau; - Roedd y bwrdd iechyd yn parhau i ymateb yn ddigidol i'r pandemig, gan gynorthwyo gwasanaethau cleifion o bell, a gweithio gartref i staff; - Gwnaed llwyddiannau sylweddol yng Nghastell-nedd Port Talbot yn nhermau llif cleifion ac e-ragnodi, gan fynd â'r ysbyty'n agosach at ddarparu ward ddigidol; - Roedd toriadau cenedlaethol yn parhau i fod yn risg i gofrestr risg y bwrdd iechyd, ond roedd diweddariad i ganolfannau data cenedlaethol ar fin cychwyn a fyddai'n cynnig cryfder gwell; - Roedd achos busnes yn cael ei ddatblygu ar gyfer System Wybodaeth Gofal Cymunedol Cymru (WCCIS), y mae angen ystyried y cyllid amdani bellach; - Roedd trafodaethau ynghylch sut i wrthod y cytundeb lefel gwasanaeth gyda Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg, a sefydlwyd fel rhan o newid ffiniau Pen-y-bont ar Ogwr. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Chris White, o safbwynt gweithredol, ei bod hi'n bwysig y caiff yr enillion effeithlonrwydd yn Ysbyty Castell-nedd Port Talbot eu dyblygu ar safleoedd eraill. Holodd pa mor hir fydd cyn i'r bwrdd iechyd gael ysbytai digidol. Ymatebodd Matt John fod y sefydliad eisoes mewn sefyllfa dda oherwydd yr arloesi a wnaed ganddo, yn ogystal â'r hyn a ddysgwyd gan eraill. Ychwanegodd na all ysbyty digidol gael ei greu dros nos, ond roedd yna chwe llif gwaith ar y gweill a fyddai'n mynd â'r bwrdd iechyd ar y trywydd iawn, gan gynnwys rhai a fyddai'n cynorthwyo cleifion i fod yn fwy hunangynhaliol. Dywedodd Mark Child y byddai WCCIS yn ddatblygiad a fyddai'n cael ei groesawu, a holodd ynghylch yr amserlen i'w roi ar waith. Ymatebodd Matt John fod achos busnes y bwrdd iechyd bellach yn cael ei ddatblygu, ond byddai Dinas a Chyngor Abertawe yn mynd	

	â'r system yn fyw yn Ionawr 2021, a byddai hyn yn rhoi mynediad i 500 o staff y bwrdd iechyd oherwydd y systemau a rennir. Dywedodd Tom Crick pa mor dda oedd gweld uchelgais digidol, yn ogystal â'r diweddariadau a gynlluniwyd i'r canolfannau data cenedlaethol. Dywedodd fod recriwtio pobl â'r sgiliau cywir yn heriol gan amlaf. Ymatebodd Matt John fod datblygu digidol o'r gweithlu, a dull newid busnes effeithiol, yn hanfodol ac roedd angen cydweithrediad ag Addysg a Gwella Iechyd Cymru (HEIW). Hefyd, roedd NWIS yno i gynorthwyo'r sefydliad wrth ddatblygu gweithwyr proffesiynol digidol. Yn ariannol, roedd heriau mawr i fuddsoddi'n ddigidol, ond roedd y bwrdd iechyd wedi ymrwymo i sefydlu cynllun buddsoddi a budd-daliadau digidol effeithiol gan weithio gyda NWIS, HEIW a chydweithwyr o Lywodraeth Cymru. Dywedodd Darren Griffiths ei fod yntau a Matt John yn cwrdd ac yn datblygu perthynas gweithio agos gyda NWIS er mwyn gwell gynorthwyo fframwaith strategol ac ariannol ar gyfer yr Adran Ddigidol.	
Penderfyniad:	- Dylid **nodi'r** cynnydd a wnaed ar draws y rhaglenni trawsnewid a galluogi digidol i gynorthwyo ymateb y bwrdd iechyd i Covid-19 a darparu gwasanaethau hanfodol.	
338/20	**YMATEB I'R YMGYNGHORIAD YNGHYLCH AWDURDOD IECHYD ARBENNIG DIGIDOL NEWYDD**	
	Derbyniwyd adroddiad yn nodi ymateb arfaethedig y bwrdd iechyd i'r ymgynghoriad ynghylch awdurdod iechyd arbennig digidol newydd. Wrth gyflwyno'r adroddiad, cododd Matt John y pwyntiau canlynol: - Holwyd am deimladau cyfarwyddwyr gweithredol ac aelodau annibynnol am yr ymateb, yn ogystal ag adborth gan y Grŵp Trawsnewid Digidol Arweiniol; - Roedd y bwrdd iechyd yn cefnogi'r cynnig, gan y byddai'n rhoi atebolrwydd clir; - Byddai'n bwysig i Lywodraeth Cymru gadw swydd y Prif Swyddog Digidol yn ogystal â sefydlu'r awdurdod iechyd arbennig er mwyn atal gwrthdrawiadau buddiannau; - Roedd yr ymgynghoriad yn cynnig tîm gweithredol o bum aelod, felly roedd ymateb y bwrdd iechyd yn argymell bod angen ysgrifennydd y bwrdd, er yr hysbysebwyd amdano yers hynny, yn ogystal â Chyfarwyddwr y Gweithlu a Datblygu Sefydliadol.	

	Wrth drafod yr adroddiad, dywedodd Tom Crick fod yr ymateb yn deg ac yn gytbwys, ac yn nodi'r prif bwyntiau sydd eu hangen yn nhermau atebolrwydd, darpariaeth ac eglurder swyddi. Ychwanegodd y byddai cadw'r Prif Swyddog Digidol yn allweddol ar gyfer amhleidioldeb, gan i rai systemau cenedlaethol gael trafferth â hyn yn y gorffennol.	
Penderfyniad:	- **Cadarnhawyd** yr ymateb.	
339/20	**ADRODDIAD MEWNWELEDIADAU**	
	Derbyniwyd adroddiad yn nodi'r themâu a goladwyd fel rhan o adolygiad o newidiadau a datblygiadau a wnaed fel rhan o'r ymateb i Covid-19. Wrth gyflwyno'r adroddiad, cododd Hannah Evans y pwyntiau canlynol: - Ystyriwyd yr adroddiad gan y Grŵp Llywio Adfer, Dysgu ac Arloesedd, a wnaeth roi arweiniaeth ac adborth defnyddiol; - Rhoddodd gasgliad o themâu o'r newidiadau a wnaed mewn ymateb i Covid-19, nid yn unig i wasanaethau a llwybrau, ond hefyd dulliau gweithio i symud y dysgu yn ei flaen; - Roedd yn bwysig i bob un a gyfranodd dderbyn adborth; - Y cam nesaf oedd "beth yw'r ots?", a sut byddai'r wybodaeth yn cael ei defnyddio ar gyfer cynllunio'r dyfodol. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Nuria Zolle y byddai newid diwylliannol yn rhan allweddol o symud yr arloesiadau ymlaen. Cytunodd Kathryn Jones, gan ychwanegu y byddai unrhyw newidiadau angen cefnogaeth gan y rhai sy'n cymryd rhan a'r rhai yr effeithir arnynt. Roedd yn bwysig mynd â nhw ar daith er mwyn eu helpu i dderbyn a harneisio'r newid. Diolchodd Reena Owen, fel Cadeirydd y Grŵp Llywio Adfer, Dysgu ac Arloesedd, i Hannah Evans a phawb arall a gyfrannodd at y gwaith. Dywedodd ei fod yn ddarn o waith da ac ysgogol, a oedd yn dangos nad oedd yr un ateb yn addas i bawb mewn perthynas â newdidadau. Ychwanegodd y byddai sylweddoli'r buddiannau yn hanfodol wrth yrru'r gwaith yn ei flaen.	
Penderfyniad:	- Dylid **derbyn** y prif negeseuon dysgu; - Dylid **nodi'r** gweithredoedd a gymerir i roi'r dysgu ar waith**;**	

	- Dylid **nodi'r** risgiau a'r mesurau lliniaru; - **Ystyriwyd** cyfleoedd pellach ar gael i'r bwrdd iechyd sefydlu'r dysgu.	
340/20	**FFORWM PARTNERIAETH LLEOL**	
	Derbyniwyd a **nodwyd** adroddiad yn nodi crynodeb o drafodaethau allweddol y fforwm partneriaeth lleol.	
341/20	**DARPARU CAMAU GWEITHREDU CYNLLUN GWEITHREDOL CHWARTER DAU**	
	Derbyniwyd adroddiad yn nodi'r cynnydd i ddarparu camau gweithredu cynllun gweithredol chwarter dau. Wrth gyflwyno'r adroddiad, cododd Siân Harrop-Griffiths y pwyntiau canlynol: - Mae'r adroddiad eisoes wedi'i ystyried gan Bwyllgorau Perfformiad a Chyllid ac Ansawdd a Diogelwch; - Roedd nifer sylweddol o weithredoedd naill ai wedi'u cwblhau, neu ar y gweill; - Yn ystod y chwarter, gwelwyd 13 cam gweithredu lle nad oedd cynnydd digonol, sydd bellach wedi'i leihau i 2 weithred, a ddylai gael eu cyflawni ym mis Ionawr 2021.	
Penderfyniad:	- Dylid **nodi'r** gweithredoedd a'r cerrig milltir i'w gweld yng nghynllun chwarter dau; - Dylid **nodi'r** statws RAG (sef coch, ambr, gwyrdd) a'r sylwadau ychwanegol yn erbyn pob cam gweithredu lle nad oedd cynnydd digonol, a'r garreg filltir a adolygwyd; - Dylid **nodi** y byddai adroddiad yn mynd i bwyllgorau Perfformiad a Chyllid ac Ansawdd a Diogelwch yn chwarterol, ac wedyn i'r bwrdd.; - Dylid **nodi'r** amserlenni ar gyfer adrodd trefniadau am weddill 2020-21.	
342/20	**ADRODDIAD PERFFORMIAD**	
	Derbyniwyd yr adroddiad perfformiad integredig.	

	Wrth gyflwyno'r adroddiad, cododd Darren Griffiths y pwyntiau canlynol: - Gwnaed yr adroddiad perfformiad yn gyson â'r pedwar cwadrant o niwed a osodwyd gan Lywodraeth Cymru; - Erbyn heddiw, mae'r bwrdd iechyd wedi adrodd 11,000 o achosion positif o Covid-19; - Roedd cyfradd ymateb y bwrdd iechyd i geisiadau am ambiwlansys 'coch' yn parhau'n uwch na'r darged o 65%; - Roedd presenoldeb yn yr adran achosion brys yn Dechrau lleihau, fel y gwnaeth yn ystod ton gyntaf y feirws. Roedd llwybrau argyfwng yn gymhleth, oherwydd yr angen i wahanu llwybrau cleifion â Covid-19 a chleifion heb Covid-19, ond mae perfformiad wedi aros yn 77%; - Roedd nifer yr atgyfeiriadau gan feddygon teulu wedi dechrau cynyddu, ac roedd dros 30,000 o achosion yn aros am fwy na 36 wythnos ar gyfer gofal a gynlluniwyd. Bydd angen ffocws o dros 3 i 5 mlynedd i fynd i'r afael â hyn; - Roedd y sefyllfa ddiagnostig yn dechrau sefydlogi; - Adroddwyd mai 77% yw'r perfformiad ar gyfer achosion brys o ganser a amheuir, ond gallai hyn wella ar ôl ei ddilysu. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Emma Woollett bod ailsefydlu'r meincnodi cenedlaethol yn ddefnyddiol er mwyn amlygu meysydd i ganolbwyntio arnynt. Cynghorodd Martyn Waygood i'r Pwyllgor Ansawdd a Diogelwch godi pryder ynghylch dirywiad perfformiad yn ymwneud ag anhwylderau niwroddatblygol, a byddai'r Pwyllgor yn monitro hyn yn agos.	
Penderfyniad:	- Dylid **nodi** perfformiad y bwrdd iechyd yn erbyn mesurau a thargedau allweddol.	
343/20	**ADRODDIAD ARIANNOL**	
	Derbyniwyd adroddiad yn nodi'r sefyllfa ariannol ar gyfer mis saith. Wrth gyflwyno'r adroddiad, cododd Darren Griffiths y pwyntiau canlynol:	

	- Y diffyg ariannol rhagolygol ar gyfer y flwyddyn oedd £24.4m, yn seiliedig ar £23m o arbedion; - Roedd sefyllfa gronnol mis saith yn £14.2m oherwydd y cafodd arian gan Lywodraeth Cymru ar gyfer taliadau Covid-19 eu rhyddhau dros fisoedd chwech a saith, gyda chyfanswm o £117m; - Rhoddwyd cyngor i dybio y byddai costau'r brechlyn hefyd yn cael eu talu; - £25.4m oedd y rhagolwg ar gyfer diwedd y flwyddyn, gostyngiad o £98 o'r mis blaenorol, ac £1m yn uwch na'r targed gwreiddiol; - Gosodwyd sefyllfa'r bwrdd iechyd mewn llythyr swyddog atebolrwydd i Lywodraeth Cymru, a ychwanegwyd er tryloywder.	
Penderfyniad:	- **Ystyriwyd** a **sylwyd** ar berfformiad ariannol y bwrdd ar gyfer cyfnod saith (Hydref) 2020-21, yn benodol: i. Sefyllfa alldro refeniw'r diffyg o £14.825m; ii. Sefyllfa alldro refeniw cyfalaf; iii. Symudiadau'r mantolenni; iv. Sefyllfa arian parod; a v. Pherfformiad yn erbyn y cydymffurfiad â pholisi talu'r sector cyhoeddus; - Dylid **nodi** effaith refeniw Covid-19 ar gyfer cyfnod saith 2020-21 a'r amcangyfrif o alldro diwedd y flwyddyn; - Dylid **nodi'r** risgiau a'r cyfleoedd.	
344/20	**GWASANAETH GWARCHEIDWAID (GUARDIAN SERVICE)**	
	Derbyniwyd adroddiad yn nodi diweddariad ar gytundeb gyda *The Guardian* Service. Wrth gyflwyno'r adroddiad, cododd Kathryn Jones y pwyntiau canlynol: - Comisiynwyd *The Guardian Service* yn 2019 yn dilyn 20% yn adrodd bwlio yn yr arolwg cenedlaethol staff; - Ers hynny, gwnaed 133 cytundeb a oedd yn unol â phrofiadau mewn man arall;	

	- Roedd y gwasanaeth ar gael 24 awr y dydd, drwy gydol y flwyddyn; - Am 12 mis oedd y cytundeb gwreiddiol, ac fe'i estynnwyd am chwe mis ychwanegol; - Codwyd pryderon gan gydweithwyr undebau llafur ynghlych comisynu'r gwasanaeth, a gwnaed gwaith i fynd i'r afael â'r pryderon hyn; - Wrth ystyried pwysau presennol ar staff, teimlwyd ei bod yn bwysig parhau â'r gwasanaeth, a chytunodd yr uwch dîm arwain ar estyniad pellach i'w adolygu ymhen naw mis. Wrth drafod yr adroddiad, codwyd y pwyntiau canlynol: Dywedodd Jackie Davies fod *The Guardian Service* yn wasanaeth pwysig gan ei fod yn wasanaeth annibynnol a oedd yn rhoi hyder i staff siarad. Roedd hi'n croesawu'r estyniad i'r cytundeb, gan ychwanegu y dylai fod yn wasanaeth parhaol. Cytunodd Emma Woollett, gan ddweud ei fod yn wasanaeth hanfodol ac yn un gorfodol o fewn GIG Lloegr. Holodd Mark Child am y gwaith oedd yn cael ei wneud i fynd i'r afael â'r ffaith i 20% o staff deimlo eu bod nhw wedi cael eu bwlio yn y gwaith, ac i atal yr ymddygiadau hynny gan reolwyr. Ymatebodd Kathryn Jones fod gwaith sylweddol yn cael ei wneud i unioni'r cydbwysedd, gan gynnwys rhaglenni arweinyddiaeth megis 'Bridges' a 'Footprints'. Ychwanegodd fod yr arolwg staff cenedlaethol cyfredol bellach ar agor, a bydd yn rhoi'r sefyllfa ddiweddaraf ynghylch teimladau staff. Dywedodd Tom Crick fod bwlio yn fater amlochrog, ac yn parhau i fod yn ffocws ar gyfer Pwyllgor y Gweithlu a Datblygu Sefydliadol, yn ogystal â phryderon yr undebau llafur mewn perthynas â *The Guardian Service*. Dywedodd Martin Sollis ei bod hi'n bwysig i'r bwrdd iechyd ddangos ei fod yn gweithredu ar y pryderon a godwyd gan staff, ac mae *The Guardian Service* yn hanfodol ar gyfer gwneud hyn. Ychwanegodd fod y Pwyllgor Archwilio yn gefnogol o'r gwasanaeth, ac roedd ef yn edrych ymlaen at weld y gwelliannau a roddwyd. Cyfeiriodd Martyn Waygood at ddau gwnselydd lles a gefnogwyd drwy gronfeydd elusennol, a holodd a oedden nhw'n gweithio gyda *The Guardian Service*. Ymatebodd Kathryn Jones yr anogwyd cysondeb rhwng y ddau.	
Penderfyniad:	- **Derbyniwyd** sicrwydd bod adborth gan staff yn ymwneud â bwlio wedi cael, ac yn parhau i gael, ei ystyried, drwy'r camau parhaol a gymerwyd gan y bwrdd iechyd;	

	- Dylid **nodi'r** datblygiad a'r gweithrediad o wella gweithio partneriaethol; - Dylid **nodi'r** diweddariad a'r argymhellion a nodir yn adroddiad diwedd y flwyddyn gan *The Guardian Service*; - Dylid **nodi'r** penderfyniad i estyn y cytundeb *The Guardian Service* am 12 mis ychwanegol, i sicrhau bod staff a gweirfoddolwyr yn parhau i gael eu cefnogi yn ystod yr amgylchiadau digynsail o ganlyniad i Covid-19.	
345/20	**ADRODDIAD BLYNYDDOL GAN YR UWCH-BERCHENNOG RISG GWYBODAETH**	
	Derbyniwyd adroddiad yn nodi adroddiad blynyddol gan yr uwch-berchennog risg gwybodaeth (SIRO). Wrth gyflwyno'r adroddiad, cododd Pam Wenger y pwyntiau canlynol: - Gwnaed cynnydd sylweddol yn ystod y flwyddyn; - Roedd cydymffurfio ag hyfforddiant llywodraethu gwybodaeth yn parhau i fod yn ffocws, gyda'r tîm yn datblygu fideo dwyieithog; - Roedd sesiwn ddatblygu gan y Bwrdd ynghylch codio clinigol a pherfformiad uchel yn parhau i gael ei darparu; - Roedd ffocws o'r newydd wedi'i roi i seiberddiogelwch gan recriwtio i dîm pwrpasol a buddsoddi ynddo.	
Penderfyniad:	- **Cytunwyd** ar adroddiad i'w gyhoeddi; - Dylid **nodi'r** sicrwydd a'r cynnydd a roddwyd ar draws pob rhan o'r adroddiad; - Dylid **nodi'r** amcanion a'r blaenoriaethau ar draws pedair rhan yr adroddiad ar gyfer 2020-22.	
346/20	**MATERION LLYWODRAETHU CORFFORAETHOL**	
	Derbyniwyd adroddiad yn nodi materion llywodraethu corfforaethol. Wrth gyflwyno'r adroddiad, cododd Pam Wenger y pwyntiau canlynol:	

	- Nododd yr adroddiad newidiadau arfaethedig i drefniadau pwyllgor yn sgil ail don y pandemig. Byddai'r rhain yn parhau i fod yn hyblyg; - Cynigiwyd newidiadau i'r rheolau sefydlog i roi cyfres ddiweddar o ddogfennau; - Adolygwyd safonau'r ymddygiad busnes, yn rhannol i'w gwneud hi'n haws datgan buddiannau. Byddai'r ddogfen newydd yn fyw o Ebrill 2021; - Dylid cadarnhau'r Cadeirydd a'r Is-gadeirydd newydd ar gyfer y Grŵp Cyfeirio Rhanddeiliaid. Wrth drafod yr adroddiad, cynghorodd Martin Sollis, fel Cadeirydd y Pwyllgor Archwilio, fod safonau'r ymddygiad busnes yn hanfodol i lywodraethu'r sefydliad. Cytunwyd i weithredu'r ddogfen o Ebrill 2021 er mwyn galluogi i'r paratoadau cywir gael eu rhoi ar waith fel y bydd staff yn ymwybodol ohoni.	
Penderfyniad:	- Dylid **nodi'r** adroddiad; - Dylid **cadarnhau'r** cynnig i adolygu trefniadau'r bwrdd a'r pwyllgor o ganlyniad i ail don Covid-19; - Dylid **cadarnhau'r** newidiadau penodol i reolau sefydlog er mwyn creu cyfres lawn o ddogfennau; - Dylid **cadarnhau'r** newidadau arfaethedig i safonau'r ymddygiadau busnes i'w rhoi ar waith; - **Cadarnhawyd** y Cadeirydd a'r Is-gadeirydd ar gyfer y Grŵp Cyfeirio Rhanddeiliaid.	
347/20	**UNRHYW FUSNES ARALL**	
	(i) <u>Datganiad gan y Darpar Brif Weithredwr</u> Gwahoddodd Emma Woollett i Mark Hackett drafod ei ystyriaethau. Cododd ef y pwyntiau canlynol: - Dylid talu teyrnged i arweinyddiaeth Tracy Myhill a phopeth y cyflawnodd hi yn ystod ei deiliadaeth; - Roedd yn edrych ymlaen at weithio gyda'r Bwrdd; - Bydd angen i Covid-19 aros yn brif ffocws am gryn dipyn o amser, yn enwedig wrth frechu a phrofi, a byddai'r pandemig yn gadael etifeddiaeth y byddai angen mynd i'r afael â hi;	

	- Byddai'r ffordd y caiff adnoddau, staff a gwasanaethau eu rheoli yn hanfodol i ddatblygu ateb i wella iechyd yn y dyfodol; - Byddai penodi aelodau sylweddol o'r tîm gweithredol yn flaenoriaeth allweddol wrth weithio gydag Emma Woollett ac aelodau annibynol; - Roedd yn edrych ymlaen at yr heriau i ddod.	
	Nid oedd busnes pellach, ac felly daeth y cyfarfod i ben.	
348/20	**DYDDIAD Y CYFARFOD BWRDD NESAF**	
	Cadarnhawyd y cynhelir y cyfarfod bwrdd nesaf ar 28 Ionawr 2021.	

Swansea Bay University Health Board

Unconfirmed
Minutes of the Meeting of the Health Board
held on 26th November 2020
in the Millennium Room, Health Board HQ, Baglan and via Microsoft Teams

Present	
Emma Woollett	Chair
Martyn Waygood	Interim Vice-Chair
Christine Williams	Interim Director of Nursing and Patient Experience
Chris White	Chief Operating Officer/Director of Therapies and Health Science/Director of Primary Care and Mental Health/Deputy Chief Executive
Keith Reid	Director of Public Health
Darren Griffiths	Interim Director of Finance
Jackie Davies	Independent Member
Tom Crick	Independent Member
Kathryn Jones	Interim Director of Workforce and Organisational Development (OD)
Mark Child	Independent Member
Maggie Berry	Independent Member
Martin Sollis	Independent Member
Andrew Jarrett	Associate Board Member
Reena Owen	Independent Member
Richard Evans	Executive Medical Director
Keith Lloyd	Independent Member
Nuria Zolle	Independent Member
Siân Harrop-Griffiths	Director of Strategy (until minute 344/20)
In Attendance:	
Mark Hackett	Chief Executive Designate
Steve Spill	Special Advisor to the Board
Pam Wenger	Director of Corporate Governance
Matt John	Director of Digital
Hannah Evans	Director of Transformation
Irfon Rees	Chief of Staff
Hugh Patrick	Community Health Council
Liz Stauber	Head of Corporate Governance
Deb Lewis	Service Group Director, Morriston Hospital (for minute 334/20)

Minute No.		Action
319/20	**WELCOME AND APOLOGIES**	

	Emma Woollett welcomed everyone to the meeting, particularly Mark Hackett, Chief Executive Designate. She advised that this would have been Tracy Myhill's final board meeting before she retired in December 2020. Unfortunately, due to a family bereavement, she had given her apologies for the meeting. Emma Woollett paid tribute to Tracy Myhill's contribution to the health board, and the fundamental way in which she had changed the organisation, thanks to her openness and transparency. Emma Woollett advised that since the last board meeting, Chris White has announced his retirement for March 2021. She paid tribute to the way in which he had led a transformation in the management of operational services. Apologies for absence were received from Tracy Myhill, Chief Executive, and Sue Evans, Community Health Council.	
320/20	**DECLARATION OF INTERESTS**	
	There were no declarations of interest.	
321/20	**PATIENT STORY**	
	A patient story was **received** which set out the experience of a patient who wanted to speak Welsh during her hospital visits so she could participate in the conversations on the ward. This highlighted the importance of not making assumptions as to the language patients wish to use, which was a focus for the health board. In discussing the patient story, the following points were raised: Pam Wenger advised that the patient was not given the opportunity to speak her language of choice. Since this story, a significant amount of work had been undertaken by the health board to ensure language choice was option for patients, and the Welsh language skills of staff were being collated. Christine Williams took the opportunity to thank the graduate trainees for their work to improve the access to Welsh language for patients. Tom Crick expressed his delight at the patient story as the board's Welsh language champion because, as a public service, it was imperative that patients could engage in the language they preferred. He added it was pleasing to see the work to better understand the Welsh language skills of staff.	

	Reena Owen commented that patients with memory loss could often only converse in their first language, and this also needed to be taken on board.	
Resolved:	- The patient story was **noted.**	
322/20	**MINUTES OF THE PREVIOUS MEETING**	
	The minutes of the meeting held on 24th September 2020 and the annual general meeting on 14th October 2020 were **received** and **confirmed** as a true and accurate record except to note Tom Crick was in attendance for the meeting on 24th September 2020.	
323/20	**MATTERS ARISING**	
	There were no matters arising not otherwise on the agenda.	
324/20	**ACTION LOG**	
	The action log was **received** and **noted**.	
325/20	**CHAIR'S REPORT**	
	A verbal report providing an update from the Chair was **received.** In introducing the report, Emma Woollett highlighted the following points: - Covid-19 remained a focus for the health board and the region; - Thanks were offered to staff and the local community for compliance with the fire break; - The majority of board committees were continuing to meet with action logs now divided into urgent and pending actions; - She was delighted to announce that Mark Hackett has been appointed as Chief Executive; - The process was underway to recruit a substantive Vice-Chair and thanks were offered to Martyn Waygood for his contribution in the interim role;	

	- Regular briefings were continuing with the leaders, chief executives and directors of social services of the local authorities as well as members of the Senedd and Parliament; - Meetings in relation to the ARCH (A Regional Collaboration for Health) programme had recommenced with Swansea University and Hywel Dda University Health Board; - Progress was being made in terms of the City Deal, particularly in relation to the wellness centre in Llanelli; - A presentation had been received by the Regional Partnership Board as to the response to Covid-19 and the wider strategic work; - As part of the transition of the NHS Wales Informatics Service (NWIS) to a special health authority, she had been invited to support the recruitment process for independent members.	
Resolved	- The report be **noted.**	
326/20	**CHIEF EXECUTIVE'S REPORT**	
	A report providing an update from the Chief Executive was **received.** In introducing the report, Chris White highlighted the following points: - Best wishes were sent to Tracy Myhill for a happy and healthy retirement; - A warm welcome was extended to Mark Hackett and the executive team offered its support as he took up post; - While the response to Covid-19 was a critical focus, it should be highlighted that the health board's escalation progress had been downgraded from targeted intervention to enhanced monitoring which was a vote of confidence from Welsh Government; - Test, Trace and Protect was an integral part of the health board's response to the pandemic as would be the vaccination programme once it commenced; - Due to the increased operational pressures, the additional intensive care unit (ITU) capacity had opened at Morriston Hospital; - The health board was continuing to provide essential services alongside its Covid-19 response;	

	- Preparations for Brexit (the UK's exit from the European Union) were continuing; - Wellbeing services remained in place for staff and the efforts of all were recognised and greatly appreciated.	
Resolved:	- The report be **noted.**	
327/20	**COVID-19 UPDATE**	
	A report providing an update on Covid-19 was **received.** In introducing the report, Keith Reid highlighted the following points: - The firebreak had led to a decrease in the rate of new Covid-19 cases for around 10 days, but this had not been sustained; - An increase in new cases was now evident once again with around 1,100 new infections in the last week; - There were currently 217 cases within the health board's hospitals, with around 20 in critical care; - The health board had experienced a number of transmission clusters within hospital sites, and 65 people had died after contracting the virus while in hospital. Enormous efforts had been made to control this nosocomial transmission; - The majority of community cases were in adults of working age, particularly in large employers, and the surge in student cases had passed, with just a small sporadic cluster in this group now; - 38 care homes were currently managing outbreaks; - A cluster of schools had reported outbreaks, and there was starting to be evidence of in-school transmission; - The Test, Trace and Protect service had been challenged at the peak of the second wave leading to a backlog of cases, but this had been cleared quickly; - The immunisation programme was due to commence in early December 2020 but confirmation was still awaited of the availability and eligibility of the vaccine. - It was hoped that a number of frontline health and social care staff would be vaccinated before Christmas 2020, but it was unclear as to whether the programme could be extended to care home residents. In discussing the report, the following points were raised:	

	Mark Child sought details of the timescales and facilities in which the vaccination programme would be delivered to communities. Keith Reid responded that a mass vaccination centre approach was being taken with sites in three locations; the Bay Field Hospital, Gorseinon and Margam, with capacity across the three to provide around 3,300 vaccines a day, dependent on recruitment of staff for seven-day working. The other contingency to consider was the availability of the vaccine as the information in this regard was variable, making it difficult to plan. There would also be vaccination centres on the acute hospital sites for staff. He added that the health board was entering a difficult winter period. Although the UK Government had taken an optimistic view that the vaccination programme would be completed by Easter 2021, the health board was of the opinion that it would take much longer than this, probably until autumn 2021. The health board had a commitment to vaccinate 160,000 people out of a 390,000 population. This was a significant number, and primary care services would be needed to support this. Martyn Waygood queried the progress being made to recruit to the Test, Trace and Protect workforce, noting that the usage of the drive-thru test centre had decreased. Siân Harrop-Griffiths responded that the contact tracing team, and its recruitment, was primarily managed through the local authorities, which were working to employ 100% of the establishment. Demand on the service was increasing, and consideration was needed as to how to maximise the availability of those currently providing the service, particularly those from the public health protection team. A national team was to be set-up by Cardiff and Vale University Health Board to which health board staff would be deployed under agreed parameters. Keith Reid added that the deployment of testing capacity was flexed depending on demand. There had been a dip in requests in October 2020 for the drive-thru facility, although the reasons why were not clear. He stated that any spare slots were transferred to the national booking system to reduce wastage. Nuria Zolle queried if any learning had been taken from the first wave in terms of transmissions across care homes. Keith Reid advised that a number of lessons had been learned, particularly in relation to testing and infection control measures in order to respond to an outbreak quickly and effectively, as well as compliance with personal protection equipment (PPE) and physical distancing. He added that supporting care homes during periods of significant pressure was a key focus of the health board's activity. Nuria Zolle sought clarity as to whether work was being undertaken with partners to share messages within deprived areas of what action should be being taken. Keith Reid responded that it was difficult to identify the geographical spread of cases with the information available to the health	

	board; the majority of outbreaks were related to workplaces rather than particular geographical areas. He added that the economic vulnerability of people was not well understood, particularly among some choosing to continue to go to work despite being advised to self-isolate. There was also the fact of the interconnectedness of families, with many living in extended households, which also needed to be considered. Tom Crick queried whether there was any evidence of transmission within younger children. Keith Reid stated that the health board remained alert as to what was happening within schools. To begin with, while the rates of cases among children was low, those who had contracted the virus did so outside school, generally through household transmissions, but as a consequence, the whole school bubble had to isolate. This had led to a request to reconsider the bubble sizes nationally. However, more recently a trend of in-school transmissions was starting to be observed. Emma Woollett acknowledged the enormous amount of work being undertaken in response to the pandemic and expressed thanks on behalf of the Board to those working on the frontline.	
Resolved:	- The progress in responding to Covid-19 and key activity in October and November be **noted**; - The overarching critical risks to the health board relating to the pandemic be **noted**.	
328/20	**RISK REGISTER**	
	A report setting out the current health board risk register was **received.** In introducing the report, Pam Wenger highlighted the following points: - The health board risk register had been updated and aligned with the Covid-19 risk register; - Significant changes had been made to the management of risk following the update to the March 2020 board, including committees considering the risks allocated to them; - New financial risks had been incorporated into the register; - The Audit Committee continued to have oversight of the risk management system; - The process had improved, with all service groups now having their own risk registers, for which monthly updates were required and issues escalated to the health board-wide scrutiny panel;	

	- At the start of the pandemic, the board agreed to increase the level of risk for escalation to Board from level 16 to level 20 and it was proposed that this remained. In discussing the report, the following points were raised: Emma Woollett stated that risk management underpinned the work of the Board and so needed to be robust. Martyn Waygood offered his thanks to Pam Wenger and Christine Williams for reviewing those risks aligned to the Quality and Safety Committee which had a risk score of at least 20. These risks would then form the basis of a series of deep dives, starting with foetal growth.	
Resolved:	- The updates to the health board risk register and Covid-19 gold command risk register and the further changes being made in recognition of the changing risks facing the health board and the uncertainty in terms of modelling required as a result of the current second wave of Covid-19, and the risk of a potential third wave be **noted**; - The updates to the health board risk register approved by the executive team and reported to the Audit Committee in November 2020 be **noted**; - It be **agreed** for the tolerance level to risks to remain at 20; - The updates to the risk management policy, risk management group terms of reference and terms of reference for the risk scrutiny panel be **noted**.	
329/20	**KEY ISSUES REPORTS**	
	(vi) Quality and Safety Committee A report setting out the discussions of the Quality and Safety Committee held on 27th October 2020 was **received** and **noted,** with the following discussion undertaken: Martyn Waygood advised that infection control remained a key focus for the committee. Good progress had been made in all areas with the exception of *clostridium difficile.* Richard Evans added that there were higher rates of this infection being seen generally across the UK, most likely due to the use of antibiotics to treat Covid-19. He advised that, as the strain of the infection varied between patients, it was likely the majority were acquiring it in the community. (vii) Performance and Finance Committee	

	A report setting out the discussions of the Performance and Finance Committee held on 27th October 2020 was **received** and **noted,** with the following discussion undertaken: Reena Owen stated that the committee had noted the increase in attendances at the emergency department as well as the increase in GP referrals, which was affecting the planned care waiting lists. She added that deep dives had been undertaken in relation to planned care, cancer and theatre efficiency as well as a clear focus given to the financial position. (viii) Audit Committee A report setting out the discussions of the Audit Committee held on 12th November 2020 was **received** and **noted,** with the following discussion undertaken: Martin Sollis advised that regular updates were provided as to the work to address the recommendations of the governance reviews undertaken during the first wave of the pandemic. He offered his thanks to the executives involved, adding that assurance had been taken by the committee. In addition, the committee had also received an update in relation to the Guardian Service, for which members had pledged their full support. (ix) Mental Health Legislation Committee A report setting out the discussions of the Mental Health Legislation Committee held on 5th November 2020 was **received** and **noted,** with the following discussion undertaken: Martyn Waygood stated that the committee continued to monitor the assessment of deprivation of liberty safeguards as the internal best interest assessors were not currently being used to the extent that might be expected. (x) Charitable Funds Committee A report setting out the discussions of the Charitable Funds Committee held on 14th October 2020 and 6th November 2020 was **received** and **noted,** with the following discussion undertaken: Martyn Waygood advised that a significant spend had been approved to extend the contract of two wellbeing counsellors until December 2021, as this service was well used by staff.	
330/20	**NURSE STAFFING LEVELS (WALES) ACT 2016**	
	A report providing an update on the Nurse Staffing Levels (Wales) Act 2016 was **received.**	

	In introducing the report, Christine Williams highlighted the following points: - The health board continued to take action to ensure the appropriate staffing of medical and surgical wards in accordance with the Act; - Steps were taken to mitigate risks, including increased use of healthcare support workers and student nurses; - As wards had been repurposed in response to the pandemic, the nursing establishment had also been reviewed. These reviews took into account patient acuity and were managed through a scrutiny panel process; - Risk assessments were undertaken on a regular basis to ensure staffing levels remained compliant. In discussing the report, Jackie Davies acknowledged the hard work by the nursing team but queried how non-compliance with the Act was reported. Christine Williams responded that, although there was not currently an all-Wales template which required the reporting of non-compliance, each area of the health board completed a workforce tool to record staffing on a daily basis, and this demonstrated whether the Act had been met. The findings of these daily records were reported to the Nursing and Midwifery Board. Emma Woollett stated that it would be useful for the information to be reported to the Quality and Safety Committee as a sense check. Pam Wenger responded that this was to be the subject of a future deep dive.	
Resolved:	- Changes in funded establishments to ensure the Board remains fully compliant with the Nurse Staffing Levels (Wales) Act 2016 be **agreed.** - The actions undertaken to ensure appropriate staffing levels during the Covid-19 pandemic be **noted**.	
331/20	**RATIFICATION OF CHAIR'S ACTION TAKEN TO APPROVE THE QUARTER THREE/FOUR OPERATIONAL DELIVERY PLAN**	
	A report seeking ratification of the Chair's action taken to approve the quarter three/four operational delivery plan. In introducing the report, Siân Harrop-Griffiths highlighted the following points:	

	- The quarter three/four operational delivery plan had been agreed through Chair's action for submission to Welsh Government; - Prior to this, it had been considered at a Board briefing session and circulated for comments, all of which had been incorporated as appropriate; - The plan set out the priorities for responding to Covid-19 as well as providing essential services; - Progress against each of the quarterly delivery plans was reported to the Performance and Finance and Quality and Safety committees as well as the board; - Formal feedback on the plan would not be received from Welsh Government, but progress would be discussed at a meeting in December 2020; - Planning had commenced for an annual plan for 2021-22 and this would be shared with the board at a briefing in December 2020; - The annual plan would need to be submitted in March 2021. In discussing the report, the following points were raised: Emma Woollett reiterated that a significant amount of work had been undertaken to prepare the quarter three/four operational delivery plan, and there had been input from the Independent Members. Darren Griffiths advised that £26.4m had been the forecast deficit at the time that the quarter three/four operational delivery plan had been submitted. Following a further scrutiny session with Welsh Government this had been reduced by £1m following advice that funds could be found for the planned decommissioning of buildings at Morriston Hospital. Kathryn Jones advised that the Workforce and OD Committee had recently met and reviewed the detail of the plan and a scrutiny session was also arranged with Welsh Government.	
Resolved:	- The quarter three/four operational plan 2020-21 following approval by chair's action and submission to Welsh Government be **ratified.**	
332/20	**NHS PARTNERSHIPS**	
	A report providing an update in relation to partnership working with other NHS Wales organisations was **received.** In introducing the report, Siân Harrop-Griffiths highlighted the following points:	

	- The mother and baby perinatal mental health unit at Tonna Hospital was on track for April 2021; - Clear progress was being made through ARCH, including the development of a business case for the health campus; - Partnership working with Cwm Taf Morgannwg and Cardiff and Vale university health boards was progressing well.	
Resolved:	- The update on the health board's joint NHS partnership and commissioning arrangements be **noted**.	
333/20	**EXTERNAL PARTNERSHIPS**	
	A report providing an update on external partnerships was **received.** In introducing the report, Siân Harrop-Griffiths highlighted the following points: - The Regional Partnership Board had met recently, during which the chair had advised he was stepping down from March 2021; - The Youth Justice Board continuing to develop; - Work was being undertaken to reduce violence against women; - Substance misuse was being tackled as a regional priority; - Regional housing work was providing shelter for rough sleepers. In discussing the report, Mark Child stated that it was pleasing to see the first meeting of the combined Health and Housing Group and he was looking forward to the valuable input it would have.	
Resolved:	- The key external partnerships of which Swansea Bay University Health Board is part be **noted;** - The issues discussed in these external partnerships and the key implications for the health board be **noted**; - The minutes of the recent partnership meetings which have taken place be **noted**.	
334/20	**STRATEGIC OUTLINE CASE FOR ORTHOPAEDICS**	
	A report setting out the strategic outline case for the development of an elective orthopaedic unit was **received.** In introducing the report, Deb Lewis highlighted the following points:	

	- The waiting list for orthopaedic services had increased significantly over recent years, and the Covid-19 pandemic had made the situation even worse; - A feasibility study had been shared with Welsh Government proposing the establishment of an elective orthopaedic centre; - It has been received favourably, with advice to consider as many options as possible rather than decide on a preferred one; - The capital costs varied for each option from £1.3m to £13.5m, but as this was a new innovation for Wales there was a likelihood of external support; - Work was to take place with 'Getting it Right First Time' (GIRFT), who focussed on efficiencies within the NHS, and while this may change the options proposed, it was likely the costs would remain similar. In discussing the report, the following points were raised: Emma Woollett advised that this was an important piece of work and noted that orthopaedic waiting lists accounted for a significant proportion of the complaints she received. Reena Owen supported the paper, advising that a deep dive into planned care had taken place at the most recent Performance and Finance Committee highlighting that the pandemic had decimated the service's ability to improve its position. She added that, while often the conditions were not life threatening to those waiting for treatment, it was debilitating for their everyday lives. Chris White commented that centralising orthopaedics in one place would create capacity on other sites to provide other services, improving elective services more broadly. He added that separating elective and emergency surgery where possible would be integral to improving the performance of elective waiting times, although it would take three to five years to recover the performance position. Martin Sollis sought assurance that the health board was working closely with Hywel Dda University Health Board colleagues. Deb Lewis responded that the health board provided some orthopaedic and spinal services to the neighbouring organisation, so colleagues were implicitly involved, but it was not a joint case. Nuria Zolle stated that the case for change was compelling but it would also be critical not to lose sight of personal outcomes and what mattered to patients as surgery may not always be the best option.	

	Darren Griffiths commented that the financial implications were material but the work could transform the health board's direction of travel and the way in which it provided elective care. Richard Evans advised that GIRFT first became involved with the health board in relation to fractured neck of femur, for which performance had been very poor. Performance had since improved significantly, and it would be good to have that support for this development. Emma Woollett thanked Deb Lewis and her team for the work to date, adding that it was an exciting development for the health board.	
Resolved:	- The strategic outline case for submission to Welsh Government be **endorsed.**	
335/20	**MEMORANDUM OF UNDERSTANDING FOR THE TRANSFER OF THE LYMPHOEDEMA SERVICE**	
	A report setting out the memorandum of understanding for the transfer of the lymphoedema service for approval was **received** In introducing the report, Pam Wenger highlighted the following points: - The clinical team had been hosted by the health board for a number of years; - It was proposed that the arrangements be formalised and the health board host the service in its entirety from April 2021; - This was a national service and a memorandum of understanding had been drafted for all health boards to sign, to set out roles and responsibilities; - In-line with other hosted organisations, an annual report would be shared with the Audit Committee.	
Resolved:	- The memorandum of understanding be **approved.**	
336/20	**WELSH LANGUAGE SERVICES**	
	A report providing an update on Welsh language services was **received.** In introducing the report, Pam Wenger highlighted the following points: - The health board was required to comply with the Welsh Language Standards;	

	- Part of the compliance included the production of an annual report setting out progress against the standards, for which organisations had been given an extension to November 2020 due to the pandemic; - During the year, the Welsh language officer had retired and there had been a gap in the service; - An external report had been commissioned to determine the health board's position and to set a subsequent action plan; - Investment had been made into the translation service enabling more work to be undertaken in-house rather than contracted to an external service; - Work was ongoing to capture the Welsh language skills of staff as well as those keen to learn the language. Around 900 responses had been returned to date. In discussing the report, the following points were raised: Reena Owen stated that this was an important area for the health board and queried if there was an opportunity to learn from other networks. Pam Wenger responded that there was a Welsh language champions' network of which all health boards were members, and this was an opportunity to share learning and best practice. She added the health board had been fortunate to benefit from the support of the Welsh language officer at the NHS Wales Shared Services Partnership (NWSSP) while it had a gap in its own service, and this had identified opportunities to identify ways to do things differently. Richard Evans welcomed the report as the executive lead for Welsh language, noting that it was important to integrate the work into day-to-day interactions. He added that it was important to have flexible staff, to enable those who speak Welsh to be with patients that need them.	
Resolved:	- Progress against delivering the standards as set out in the body of this report and the draft annual report be **noted**; - Assurance that the final version of the annual report would be completed by the revised deadline of 30th November 2020 be **received**; - The key actions taken during the 2020-21 year to date to further work in this area be **noted.**	
337/20	**PROGRESS OF DIGITAL TRANSFORMATION**	

	A report providing an update on the progress of digital transformation was received. In introducing the report, Matt John highlighted the following points: - The report provided a summary of the inaugural meeting of the Digital Transformation Leadership Group. This superseded previous governance arrangements within the service; - Attendance was health board-wide, including corporate and service group representatives; - The health board continued to respond digitally to the pandemic, supporting remote patient services and home working for staff; - Significant achievements had been made in Neath Port Talbot in terms of patient flow and e-prescribing, taking the hospital closer to being able to deliver a digital ward; - National outages remained a risk on the health board risk register but an upgrade of the national data centres was soon to take place which would provide greater robustness; - A business case was in development for the Welsh Community Care Information System (WCCIS), for which the financials now needed to be considered; - Discussions were taking place as to how to stand-down the service level agreement with Cwm Taf Morgannwg University Health Board, established as part of the Bridgend boundary change. In discussing the report, the following points were raised: Chris White stated that from an operational perspective, it was important that the efficiency gains seen at Neath Port Talbot Hospital were replicated at other sites. He queried as to how long before the health board had digital hospitals. Matt John responded that the organisation was already well placed due to the innovations it had taken forward as well as the learning from others. He added that a fully digital hospital could not happen overnight, but there were already six workstreams ongoing that would move the health board in the right direction, including some which would support patients to be more self-sufficient. Mark Child commented that WCCIS would be a welcome development and queried the timeframe for implementation. Matt John responded that the health board's business case was in development, but the City and Council of Swansea would be going live with the system in January 2021 and this would include access for 500 health board staff due to shared systems.	

	Tom Crick stated it was pleasing to see the digital ambition as well as the planned upgrades to the national data centres. He commented that recruiting the right skillset was often a challenge and queried the work to address this. Matt John responded that digital development of the workforce and an effective business change approach was essential and needed collaboration with Health Education and Improvement Wales (HEIW). Also NWIS was there to support the organisation on the development of digital professionals. Financially, there were huge challenges to invest digital, but the health board was dedicated to establishing an effective digital investment and benefits plan working with NWIS, HEIW and Welsh Government colleagues. Darren Griffiths stated that he and Matt John were meeting and developing a close working relationship with NWIS to better support a strategic and financial framework for digital.	
Resolved:	- The progress that has been made across the digital transformation and enabling programmes to support the health board's response to Covid-19 and the provision of essential services be **noted.**	
338/20	**RESPONSE TO THE CONSULTATION FOR A NEW DIGITAL SPECIAL HEALTH AUTHORITY**	
	A report setting out the health board's proposed response to the consultation for a new digital special health authority was **received.** In introducing the report, Matt John highlighted the following points: - The views of executive directors and independent members had been sought on the response as well as feedback from the Digital Transformation Leadership Group; - The health board was supportive of the proposal, as it would provide clearer lines of accountability; - It would important for Welsh Government to retain the Chief Digital Officer post in addition to establishing the special health authority to prevent conflicts of interests; - The consultation proposed an executive team of five members, so the health board's response recommended the need for a board secretary, although this had since been advertised, as well a Director of Workforce and OD. In discussing the report, Tom Crick stated that the response was fair and balanced, picking up the key points needed in terms of accountability, delivery and clarity of roles. He added that retaining the Chief Digital	

	Officer would be key for impartiality as some national systems had proved challenging previously.	
Resolved:	- The response be **approved.**	
339/20	**INSIGHTS REPORT**	
	A report setting out the themes collated as part of a review of changes and developments made as part of the response to Covid-19 was **received.** In introducing the report, Hannah Evans highlighted the following points: - The report had been considered by the Recovery, Learning and Innovation Steering Group which had provided helpful guidance and feedback; - It provided a collection of themes emerging from the changes made in response to Covid-19, not only to services and pathways but also to ways of working to take forward the learning; - It was important that feedback was provided to all who contributed; - The next step was the 'so what?' and how the information would be used to support the planning for the future. In discussing the report, the following points were raised: Nuria Zolle commented that cultural change would be a key component in driving forward the innovations. Kathryn Jones concurred, adding that any change would need the support of those involved and affected. It was important to take them on the journey in order to help them accept and harness the change. Reena Owen as Chair of the Recovery, Learning and Innovation Steering Group offered her thanks to Hannah Evans and all those involved in the work. She stated that it was a good and engaging piece of work, which demonstrated that 'one size did not fit all' when it came to change. She added that the benefits realization would be critical to driving forward the work.	
Resolved:	- The key learning messages be **received;** - Actions being taken to implement the learning be **noted;** - The risks and mitigations be **noted**; - Further opportunities available to the health board to embed the learning were **considered.**	

340/20	**LOCAL PARTNERSHIP FORUM**	
	A report providing a summary of the key discussions of the local partnership forum was **received** and **noted.**	
341/20	**DELIVERY OF THE QUARTER TWO OPERATIONAL DELIVERY PLAN ACTIONS**	
	A report setting out the progress to deliver the actions of the quarter two delivery plan was **received.** In introducing the report, Siân Harrop-Griffiths highlighted the following points: - The report had already been considered by the Performance and Finance and Quality and Safety committees; - A significant number of the actions were either completed or on track; - During the quarter, there had been 13 actions off track and this had since reduced to two, which should be delivered in January 2021.	
Resolved:	- The actions and milestones identified within the quarter two plan be **noted**; - The reported RAG (red, amber, green) status and supplementary comments against each action that was off-track and the revised milestone be **noted**; - It be **noted** that a report would be taken to Performance and Finance and Quality and Safety committees on a quarterly basis, followed by board.; - The timelines for the reporting arrangements for the remainder of 2020-21 be **noted**.	
342/20	**PEFORMANCE REPORT**	
	The integrated performance report was received. In introducing the report, Darren Griffiths highlighted the following points: - The performance report was aligned to the four quadrants of harm as set out by Welsh Government;	

	- To date, the health board had reported 11,000 positive cases of Covid-19; - The health board's response rate to red ambulance release requests remained above the 65% target; - Attendances at the emergency department were starting to reduce, as they had during the first wave of the virus. Emergency pathways were complex, owing to the need to separate Covid-19 and non Covid-19 patient pathways, but performance had been maintained at 77%; - Referrals from GPs had started to increase and there were now more than 30,000 cases waiting more than 36 weeks for planned care. This would require a focus over three to five years to address; - The diagnostic position was starting to stabilise; - Urgent suspected cancer performance was currently reported at 77% but this could improve after validation. In discussing the report, the following points were raised: Emma Woollett stated that the reinstatement of national benchmarking was useful to highlight areas of focus. Martyn Waygood advised that the Quality and Safety Committee had raised concern about the deterioration of performance relating to neuro-development disorders and would be monitoring this closely.	
Resolved:	- The health board performance against key measures and targets be **noted.**	
343/20	**FINANCIAL REPORT**	
	A report setting out the financial position for month seven was **received.** In introducing the report, Darren Griffiths highlighted the following points: - The original forecast deficit for the year had been £24.4m, predicated on £23m of savings; - The month seven cumulative position was £14.2m as funding received from Welsh Government to cover Covid-19 expenditure had been deployed over months six and seven, totaling £117m; - Advice had been to assume vaccination costs would also be covered;	

	- The end-of-year forecast stood at £25.4m, a reduction from £98 the previous month and £1m above the original target; - The health board's position had been set out in an accountable officer letter to Welsh Government which was appended for transparency.	
Resolved:	- The board's financial performance for period seven (October) 2020-21, was **considered** and **commented** upon**,** in particular: vi. the revenue outturn position of £14.825m deficit; vii. the capital outturn position; viii. balance sheet movements; ix. cash position; and x. performance against the public sector payment policy compliance; - The Covid-19 revenue impact for period seven 2020-21 and the current estimated year-end outturn be **noted**; - The risk and opportunities be **noted.**	
344/20	**GUARDIAN SERVICE**	
	A report providing an update on the contract with the Guardian Service was **received.** In introducing the report, Kathryn Jones highlighted the following points: - The Guardian Service had been commissioned in 2019 following 20% of staff reporting bullying in the national staff survey; - Since then, 133 contacts had been made which was in-line with the predictions and experience elsewhere; - The service was available 24 hours a day, every day of the year; - The original contract had been for 12 months and then extended for a further six; - Concerns had been raised by trade unions colleagues as to the commissioning of the service, and work was being undertaken to address these; - Given the current pressures on staff, it was felt important to retain the service, and the senior leadership team had agreed a further contract extension to be reviewed in nine months.	

	In discussing the report, the following points were raised: Jackie Davies commented that the Guardian Service was an important one as it was an independent service which gave staff the confidence to speak up. She welcomed the contract extension, adding that it should be a permanent asset. Emma Woollett concurred, stating that it was a fundamental service and one which was mandated within NHS England. Mark Child queried the work being undertaken to address the fact that 20% of staff felt bullied at work and to stop such behaviours by managers. Kathryn Jones responded that a significant amount of work was being undertaken to redress the balance including leadership programmes such as 'Bridges' and 'Footprints'. She added that the current national staff survey was now open and would provide a more up-to-date position of how staff felt. Tom Crick commented that bullying was a multi-faceted issue and it remained a focus for the Workforce and OD Committee as did the concerns of the trade unions in relation to the Guardian Service. Martin Sollis stated that it was important that health board demonstrated that it was taking action to the concerns raised by staff and the Guardian Service was essential to this. He added that the Audit Committee was supportive of the service and he looked forward to seeing the improvements it provided. Martyn Waygood referenced two wellbeing counsellors supported through charitable funds and queried if they worked with the Guardian Service. Kathryn Jones responded that alignment between the two was actively encouraged.	
Resolved:	- Assurance be **received** that feedback from staff relating to bullying have been and continue to be listened to, through the continued action the health board has taken; - The development and implementation of a partnership working improvement plan be **noted**; - The update and recommendations detailed in the end-of-year report from the Guardian Service be **noted**; - The decision to contract for a further 12 months with the Guardian Service to ensure staff and volunteers continue to be supported during the adverse circumstances presented by the Covid-19 crisis be **noted**.	
345/20	**ANNUAL REPORT FROM THE SENIOR INFORMATION RISK OWNER**	

	A report setting out the annual report of the senior information risk owner (SIRO) was **received.** In introducing the report, Pam Wenger highlighted the following points: - Significant progress had been made during the year; - Compliance with information governance training remained a focus with the team developing a bi-lingual video; - A Board development session had taken place around clinical coding and high performance continued to be provided; - A renewed focus had been given to cyber security with recruitment and investment made into a dedicated team.	
Resolved:	- The report for publication be **agreed**; - The assurances and progress provided across all areas of the report be **noted**; - The objectives and priorities across the four sections of the report for 2020-202 be **noted**.	
346/20	**CORPORATE GOVERNANCE ISSUES**	
	A report setting out corporate governance matters was **received.** In introducing the report, Pam Wenger highlighted the following points: - The report set out proposed changes to committee arrangements in light of the second wave of the pandemic. These would continue to be flexible; - Changes to the standing orders were proposed to provide a fully up-to-date suite of documents; - The standards of business conduct had been revised, partly to make it easier to declare interests. The new document would be live from April 2021; - The new Chair and Vice-Chair for the Stakeholder Reference Group needed to be ratified. In discussing the report, Martin Sollis, as Chair of the Audit Committee, advised that the standards of business conduct was essential to the governance of the organisation. Implementation had been agreed from April 2021 to enable the right preparations to be put in place so that staff were aware of it.	

Resolved:	- The report be **noted**; - The proposal to revise the board and committee arrangements as a result of the second wave of Covid-19 be **approved**; - The specified changes to standing orders to create a full suite of documents be **approved**; - The proposed amendments to the standards of business conduct for implementation be **approved**; - The Chair and Vice-Chair roles for the Stakeholder Reference Group be **ratified**.	
347/20	**ANY OTHER BUSINESS**	
	(ii) Statement from the Chief Executive Designate Emma Woollett invited Mark Hackett to give his reflections. He highlighted the following points: - Testament should be paid to Tracy Myhill's leadership and all she had achieved during her tenure; - He looked forward to working with the Board; - Covid-19 would need to remain a focus for some time, especially in vaccination and testing, and the pandemic would leave a legacy which would need to be addressed; - How resources, staff and services were managed would be integral to developing a solution to improve health for the longer-term; - Appointing substantive members of the executive team would be a key priority working with Emma Woollett and the independent members; - He was looking forward to the challenges ahead.	
	There was no further business and the meeting was closed.	
348/20	**DATE OF NEXT BOARD MEETING**	
	The date of the next meeting was confirmed as 28th January 2020.	