

## SBUHB Board Log 2025-26

Meeting Date	Type of Meeting	Minute Ref	Agenda Item (Number & Title)	Narrative	Assigned to (individual)	Supporting (additional staff members)	Update	Status
27/11/2025	Public Board	204/25	4.8 CAPITAL AND ESTATES UPDATE	JC reflected on WG commendation of the Strategy; Board discussions and reports in 2025/26 had included reference to significant estate-related concerns and potential catastrophic infrastructure failings. This was a significant point and JW asked DG to produce a briefing on estates-related business continuity planning Action: DG	Executive Director of Finance and Performance (DG)			Open
16/12/2025	Special Public Board	223/25	2.1 THE 2025/26 PLAN AND UPDATED FINANCIAL ASSESSMENT	On behalf of NZ, JW sought assurance that non recurrent opportunities were feasible in the time available and that the groundwork in place to support delivery. NZ wanted to remind the Board of the importance that Audit Wales would place on this when giving its external opinion at the year-end. Responding, DG confirmed that he could give assurance for the delivery of the opportunities and that he had no professional concerns around the actions to be reviewed; he referred to Page 14 of the paper, that set out the opportunities in detail. DG agreed to discuss the matter with NZ outside of the meeting. Action: DG/NZ	Executive Director of Finance and Performance (DG)	Nuria Zolle		Open
27/11/2025	Public Board	206/25	5.2 ORGANISED FOR SUCCESS PROGRAMME UPDATE	On the risk of distraction from delivery of the urgent operational agenda, both TR and DL recognised this as an inevitable risk that required firm management oversight and action. NZ sought the inclusion of this risk on the relevant risk register. Board colleagues supported this. Action: HL	Director of Corporate Governance (HL)		Action is underway and will be reported in the next risk report to Board in March 2026.	Underway (with update)
31/07/2025	Public Board		4.6 GENERAL MEDICAL SERVICES	JW suggested that CW and SM return to a future meeting, with a specific 'ask' that the Board would frame, through the Population Health Committee, on the role of primary care in delivering the population health agenda.	Executive Director of Public Health (Interim GR)	Vice Chair (Steve Spill)	19/01 Action shared with SM & CW to work with Penny Cresswell-Jones as the Public Health Consultant link. 19/11 GR an update will come to March Population Health Committee. 18/08 SS advised that the overarching "what does PC do in the PH arena needs more time and thought. I would suggest a target date either of December or the next one. Gill to advise.	Underway (with update)
29/05/2025	Public Board	78/25	Audit Committee Key Issues Report	In addition, NZ drew attention to the need to agree a debt write off of £2500, in accordance with regulations. DG confirmed the need for a write off, as pursuit of the matter had not proved successful. Responding to the request for a zero-tolerance approach to audit findings that impacted on patient safety and quality, AH agreed to explore this further and to report back to the Board.	Chief Executive Officer (AH)	HL / LC	15/10 HL has requested LC to run a report focussing on any overdue, open actions, specifically those noted. Going forward any new actions from new audits will report into Weekly Execs as part of the monthly Exec report on open IA/AW actions for regular discussion and taking forward. By January we aim to be moving to AMaT.	Underway (with update)
11/09/2025	Public Board	148/25	2.1 ANNUAL PLAN - FINANCE UPDATE	DG to provide a separate briefing on the Financial position to the Stakeholder Reference Group; PD welcomed this.	Executive Director of Finance and Performance (DG)		Arrangements made for the Deputy Director of Finance to attend the next Stakeholder Reference Group.	Underway (with update)

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11/09/2025	Public Board	148/25	2.1 ANNUAL PLAN - FINANCE UPDATE	SS referred to the £9m 'gap' and sought further detail and assurance on this component. Responding, DG advised that actions to deliver this included a reduction of £6.25m in variable pay spend, £750k gain through theatre efficiency, with the remainder identified from procurement controls. DG agreed to provide a detailed briefing on these actions.	Executive Director of Finance and Performance (DG)		Currently being drafted. Will provide a verbal update at the Board and circulate a separate note.	Underway (with update)
25/09/2025	Public Board	155/25	1.5 CHIEF EXECUTIVE'S REPORT	On the new road access to Morriston Hospital, DG confirmed that the City and County of Swansea had received a full planning application; the Planning Committee would consider it in October/November and DG agreed to provide an update to the Board following this. KL welcomed the progress, reminding the Board that the work on the Swansea city Deal first identified the need for a new road.	Executive Director of Finance and Performance (DG)		Awaiting November planning meeting of the City and County of Swansea Local Authority which is the date we believe the application will be considered. Update available after that. Timescales not in control of HB.	Underway (with update)
25/09/2025	Public Board	158/25	3.2 PLANNING AND PARTNERSHIPS REPORT	JW invited DG to comment on the resource allocation process, and he outlined the specialty costing approach. SBUHB provided £140m to assist JCC services and there was then a need to ensure that SBUHB received the right funding level for its services. This was explored in detail as part of the full pathway approach to budgeting, providing a different perspective on the distribution of resources. There could be an 'information lag' in respect of service provision; 2024/25 data would be available in October, following completion of the accounting process. JW asked DG to supply a detailed briefing outside the meeting.	Executive Director of Finance and Performance (DG)		Discussions still ongoing at an All Wales level through the costing group - likely update available in Q1 2026/27 as work will be done in Q4 2025/26	Underway (with update)
25/09/2025	Public Board	165/25	4.7 COMMUNITY PHARMACY	SBUHB did not hold information on the translation facilities at individual community pharmacy level, but all pharmacies could access language line translation services JW asked SM to review the ways in which SBUHB could improve its records on language options available in community pharmacy settings.	Chief Operating Officer (DL)	Sharon Miller, Associate Service Group Director	19/11 SM In discussion with community pharmacy Wales ( CPW) we are planning to undertake a baseline assessment of community pharmacies against the recently issued all Wales communication standards. This is expected to take place, following discussion in the new year.	Underway (with update)
29/05/2025	Public Board	79/25	Mental Health Legislation Committee Key Issues Report	DL drew attention to the increase in BI assessment linked to the ageing population; this was the case in both mental health and general hospital settings. She agreed to investigate further and explore options to improve the efficiency and timeliness of the process.	Chief Operating Officer (DL)	Director of Population Health	21/11 Sarah Morse confirmed to COO's office that she is working with the Programme Manager on a 9–12-month plan outlining all wards across the Health Board, including dates for workshops and the implementation schedule, which will be shared once the completed plan is finalised. Additionally, she noted that the BI tool, along with a SOP that was approved by Board earlier this year, was designed to support professionals in making BI discharge decisions where there is no conflict. In practice, it has been shown to work effectively and helps reduce length of stay, with wider engagement now needed to support consistent use of the tool and the Board Round implementation work to be used to promote and embed it.	Underway (with update)

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29/05/2025	Public Board	73/25	Integrated Performance Report	NM asked about the 265 patients whose waiting time had exceeded 63 days, seeking more detail on how long the waits actually were and the communication with patients during that time. DL assured the Board that there were communication arrangements in place and agreed to supply further detail on actual waiting times, including the longest time.	Chief Operating Officer (DL)	Director of Population Health	20/11 Information supplied by Hannah Parsons: There are 324 patients currently beyond the 63-day target. 80% have had recent contact (within the last two weeks), have an upcoming appointment, or have recently agreed a date, providing assurance that communication is being maintained across the cohort. Around 30% of patients have recorded periods of unavailability (2-70 days), which has contributed to extended waits. Patients with longer gaps in contact are primarily those awaiting histology, BSW patients where contact data is held externally, and those awaiting robotic surgery but who have been informed of expected delays in clinic. Of the 10 "not yet seen" patients, the majority are BSW referrals; all have either been recently contacted, rebooked, risk assessed, or have appointments arranged. Longest waits (up to 279 days) are linked to diagnostic complexity, multiple MDT reviews, patient unavailability or consent issues, tertiary referrals, non-USC imaging delays, and national PET tracer supply problems earlier this year. All longest-wait patients now have treatment planned or imminent, with learning identified where pathways could have been shorter. Overall, robust communication processes are in place, and pathway issues are being addressed on a patient-level basis.	Underway (with update)
31/07/2025	Public Board	121/25	3.1 POPULATION HEALTH COMMITTEE KEY ISSUES REPORT	DG commented on the significance of this work to the future financial sustainability of SBUHB services. He advised of discussions with Hywel Dda University Health Board (HDUHB) colleagues on the allocation of resources to support the population health and prevention agenda. The Board would receive updates on the work in the coming months.	Executive Director of Finance and Performance (DG)		Work is progressing well. Discussion with both Health Economic Unit and Swansea University/Welsh Government have commenced. Work is targeting the January Regional Joint Committee meeting.	Underway (with update)
25/09/2025	Public Board	157/25	3.1 POPULATION HEALTH COMMITTEE KEY ISSUES REPORT	The second alert referred to the all-Wales Diabetes Prevention Programme in place across all eight clusters in SBUHB. Public Health Wales had reviewed the effectiveness of the programme, with its report anticipated in the near future. Funding arrangements differed across the clusters, with five clusters funded through external resources, expected to end in March 2026. Collectively this would result in a loss of £430k, and maintaining the programme would require SBUHB to provide this additional resource. DG acknowledged the challenge in identifying resources but recognised the value of the programme. He would make enquiries about the funding position for 2026/27 and possible options.	Executive Director of Finance and Performance (DG)		DG has followed up - no confirmation yet. National meeting regarding the Public Health Waels element to be held in week commencing 24 November 2025.	Underway (with update)
27/11/2025	Public Board	193/25	1.5 RISK REPORT	TR confirmed the intention to reset, to include a review of the scoring methodology. WODC would oversee the training programme around consistency of scoring and report back to the Board. Action: RO/TR	Executive Director of Workforce and OD (TR)	Reena Owen	A review of the workforce operational, corporate and strategic risks will be undertaken with a report to WOD Committee in February 2026	Underway (with update)
27/11/2025	Public Board	198/25	4.2 INTEGRATED PERFORMANCE REPORT - ANNUAL PLAN PROGRESS (QTR 2)	On stroke services, DL advised that a National Stroke Standards benchmarking exercise was underway; she would share the outcome from that with the Board. Action: DL	Chief Operating Officer (DL)		Standards are yet to be published and unlikely to be available before the end of March 2026.	Underway (with update)