

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 |
|--------------|----------------------|------------|--|--|---|---------------------------------------|--|------------------------|
| 29/01/2026 | Public Board | 005/26 | 1.5 RISK REPORT | JC reflected on the number of dashboard-related developments underway, many required at a national level; she suggested asking the Digital, Data, Research and Innovation Committee (DDRIC) to produce an organisation-wide reference map, setting out the strategic requirements underpinning each. Board members supported this and JW and remitted the matter to DDRIC. Action: AG/MJ | Director of Digital (MJ) | | MJ and JC have had a detailed follow up conversation. The requirement is for an Infographic that provides a representation of the dashboards that are available at a local, regional and national level and categorised by themes e.g. by service group. A mock-up is being developed and will be discussed further with JC by Mid April for endorsement. | Underway (with update) |
| 26/03/2026 | Special Public Board | 032/26 | 2.1 Service Considerations: Gorseinon Hospital | JW referenced the need to consider the additional resource requirements associated with a return to Gorseinon in the round, as part of the Annual Plan process. AH confirmed that the Strategic Clinical Services Plan would address this issue. A report from DL to the March Board meeting on Community by Design would also assist discussions on future options for Gorseinon Hospital. Action: DL | Chief Operating Officer (DL) | | On the Agenda for the May Board meeting. | Underway (with update) |
| 29/01/2026 | Public Board | 005/26 | 1.5 RISK REPORT | RT referred to the role of the Public Health Team in raising awareness across SBUHB and also in acting as a bridge in the development of the Clinical Services Strategic Plan. JW also reported that a report on the state of population health in SBUHB would come to the March 2026 Board meeting. Action: GR/HL | Executive Director of Public Health (Interim GR) | | On the Agenda for March Board meeting. | Underway (with update) |
| 29/01/2026 | Public Board | 011/26 | 4.3 INTEGRATED PERFORMANCE REPORT | DL indicated that last year SBUHB had received additional funding to address CAMHS waiting times. 2025/26 had seen additional funding but at a lower level than that for other health boards; the service had optimised the use of the 2024/25 resource and was looking at how to engage with education colleagues effectively to direct referral and assessment appropriately. NZ commented on the need for scrutiny on this matter and confirmed that the AC would consider it. Action: NZ | Third Sector IM (Nuria Zolle) | | On the Agenda for the May Audit Committee meeting. | Underway (with update) |
| 29/01/2026 | Public Board | 008/26 | 3.2 PLANNING AND PARTNERSHIPS REPORT | RO asked for sight of the State of Population report and MD agreed to circulate this. JW advised that the March 2026 Board meeting would include a report on this. Action: MD | Executive Director of Planning and Partnership (MD) | | 18/02 Information shared with Reena and detail to be included in the March Planning and Partnership Report | Underway (with update) |
| 29/01/2026 | Public Board | 008/26 | 3.2 PLANNING AND PARTNERSHIPS REPORT | ALF queried whether any other UK nations had effective Direct Payments systems from which to learn. MD confirmed that such models were available and that SBUHB was working locally with LA colleagues to look at advice from England and develop an integrated approach from the start. She confirmed that the Board would receive and consider a report on the proposed operational systems and processes at its March 2026 meeting. Action: MD | Executive Director of Planning and Partnership (MD) | | 18/02 Hannah Roan to update the action plan and is now aware of the ask to bring Direct Payments back to Board in March | Underway (with update) |
| 29/01/2026 | Public Board | 018/26 | 6.3 AUDIT WALES ANNUAL REPORTING | The Annual Audit Summary for 2024/25 provided an unqualified true and fair audit opinion, but a qualified regularity opinion. SU summarised the reports completed, including the finalisation of the Quality Governance Report, completed after the Audit Summary. Work remained on digital, estates review, and cancer services. SU extended her thanks to all staff involved in helping to deliver the audit programme and invited questions on the Audit Summary Report. JC offered two comments: The slow progress in implementing recommendations related to patient discharge, at Page 12 of the Report. She reflected on earlier discussions about the need for increased pace in responding to recommendations made by a number of bodies. The reference to patient and staff feedback at Page 12; JC confirmed that QSC had included this in its work programme. JW thanked JC for her comments on pace and asked HL to progress this, in line with the AC actions supported under 6.1 above. Action: HL | Director of Corporate Governance (HL) | NT | 24/02 NT - The Director of Workforce & OD has reviewed risks within the Strategic Risk Register and discussed indicative proposals for strategic risk entries for the SRR from 2026/27 onwards with the Workforce & OD Committee in February 2026. These include a risk on Organisational Change which will reflect the risk that performance against national and local targets will be impacted due to the distraction of the organised for success programme and other organisational change programmes. The risk entry will now be worked up further for agreement amongst Executives and addition to the SRR from April 2026. | Underway (with update) |
| 29/01/2026 | Public Board | 004/26 | 1.4 CHIEF EXECUTIVE'S REPORT | TR confirmed the setting up of the DU at pace, to include the different staff whose current roles included business intelligence, performance and programme management. She estimated the numbers of staff involved and advised that the Board would receive an update at its next meeting. Action: TR | Executive Director of Workforce and OD (TR) | | An update will be provided in the Chief Executive Report to the March Board | Underway (with update) |
| 29/01/2026 | Public Board | 005/26 | 1.5 RISK REPORT | JW reminded the Board of her previous correspondence with Ministers on the funding support for prison-based healthcare staff; she confirmed that she would write again and also remitted the matter to QSIC for further consideration. Action: JW/JC/LR | Chair (Jan Williams) | | Letter drafted and with the Chair to agree and send to the Minister SM. | Underway (with update) |

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| 29/01/2026 | Public Board | 011/26 | 4.3 INTEGRATED PERFORMANCE REPORT | JC expressed concern at the lack of traction in improving some services, citing endoscopy as an example. When performance did not improve in the way intended, she asked about 'outside the box' thinking. One example concerned the water ingress in Ty Meddwl. DG outlined discussions with the landlord and the need for a roof replacement. Following on from JCs point, NZ asked about providing alternative premises for the mental health teams, rather than reducing outpatient activity, until the end of April. DL agreed to explore this. Action: DL | Chief Operating Officer (DL) | | ongoing review of estate | Underway (with update) |
| 29/01/2026 | Public Board | 011/26 | 4.3 INTEGRATED PERFORMANCE REPORT | JW thanked everyone for the rich discussion across performance matters. She asked HL to review the format of the report to reduce duplication of information set out in earlier reports. Action: HL | Director of Corporate Governance (HL) | | Feedback provided to the Head of Performance and revised report expected for the March Board meeting. | Underway (with update) |
| 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) | 24/02 SS/GR confirmed it has been tabled for the Committee meeting in June. 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) |
| 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) |
| 27/11/2025 | Public Board | 193/25 | 1.5 RISK REPORT | TR confirmed the intention to reset the WOD Corporate risks , to include a review of the scoring. 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 has been 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 (OTB 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) |
| 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) | SM | 29/01 HL confirmed that a Briefing Note is being prepared | Underway (with update) |
| 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 | 29/01 HL confirmed that a meeting is being arranged between DG and NZ | 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) | SM | 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) | SM | 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) | SM | 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) |
| 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 (H DUHB) 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) | SM | 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) | SM | DG has followed up - no confirmation yet. National meeting regarding the Public Health Wales element to be held in week commencing 24 November 2025. | Underway (with update) |