

SBUHB Board Log 2025-26

Meeting Date	Type of Meeting	Minute Ref	Agenda Item (Number & Title)	Narrative	Type of Action	Assigned to (Individual)	Supporting (additional staff members)	Update	Status
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.	Action	Executive Director of Public Health (Interim GR)	Vice Chair (Steve Spill)	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.	Action	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	157/25	3.1 POPULATION HEALTH COMMITTEE KEY ISSUES REPORT	PD indicated that the Stakeholder Reference Group could add additional detail to build on this report. GR thanked PD and agreed to meet with PD to progress her suggestion.	Action	Executive Director of Public Health (Interim GR)		22/10 CORP GOV provided PD email to GR so they can arrange to discuss further	Underway (with update)
25/09/2025	Public Board	160/25	4.2 QUALITY AND SAFETY COMMITTEE KEY ISSUES REPORT	SS commented on the involvement of the Ministry of Justice in respect of specialist nursing provision and JC agreed to review all the documentation available on the matter, together with the terms of reference for the Community Services Review. She agreed to provide a further update at the November Board meeting.	Action	General IM (Jean Church)		Update meeting on review of staff to be held 30/11/25; Pharmacy technicians now at full complement, two Band 6 posts out to advertisement (03/11/25), admin. support (23/10/25). Liz Rick's resetting site visit has held meeting with Matron from HMP.	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.	Action	Executive Director of Finance and Performance (DG)		Need to know when the next meeting is and I'll attend. I haven't been told when it is.	Underway (with update)
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.	Action	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.	Action	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.	Action	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)

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25/09/2025	Public Board		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.	Action	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)
		165/25							
25/09/2025	Public Board		1.4 SERVICE CHANGE CONSIDERATIONS	REd reminded the Board that Covid-19 had resulted in the 'pausing' of some services at Gorseinon Hospital; the refresh of the Clinical Services Strategic Plan could include the possibility of reintroducing some services.	Action	Executive Director of Planning and Partnership (MD)		20/11 MD confirmed she would be updating Board on this action in her November Planning and Partnership item	Underway (with update)
		154/25							
25/09/2025	Public Board		3.2 PLANNING AND PARTNERSHIPS REPORT	JW asked MD to provide Board members with a briefing note on the timelines associated with some of the updates set out in the wide-ranging report.	Action	Executive Director of Planning and Partnership (MD)		20/11 MD confirmed she would be updating Board on this action in her November Planning and Partnership item	Underway (with update)
		158/25							
25/09/2025	Public Board		3.2 PLANNING AND PARTNERSHIPS REPORT	PP welcomed the incorporation of the benefits realisation framework into the business planning cycle; she asked about 2026/27 planning and the timeline for delivery. On delayed pathways of care, she asked about the role of the RPB. On timelines, MD offered to provide the PFC with a detailed critical path setting out the timeline up to submission of the 2026/27 Annual Plan to WG on 31 March.	Action	Executive Director of Planning and Partnership (MD)		20/11 MD confirmed she would be updating Board on this action in her November Planning and Partnership item	Underway (with update)
		158/25							
29/05/2025	Public Board		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.	Action	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)
		79/25							
29/05/2025	Public Board		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.	Action	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)
		73/25							

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29/05/2025	Public Board		Population Health Committee Key Issues Report	RT advised that he would be spending time at Morriston Hospital as part of Volunteer Week and would take the opportunity to discuss better signposting to healthier food service options. The Strategic Equity Plan also identified the importance of access to healthy eating options.	Action	Director of Insight, Communications and Engagement (RT)			Open
		65/25							
25/06/2025	Public Board		Mental Health And Learning Disabilities Report	NZ found the report uncomfortable but worthwhile reading. She supported the need to address immediate issues and to manage this in parallel with service transformation; she welcomed AHS assurance over securing the leadership capacity to drive the transformation. The Board and Committees would also need appropriate oversight arrangements. On informatics and data, NZ looked for assurance that the Digital Strategy included the requirements; and that wider transformation issues, such as culture and coproduction, were in scope. Referring to the oversight and governance points raised by NZ, JW confirmed that she would work with HL and committee chairs to agree the approach. JW/HL/relevant committee chairs.	Action	Chair (Jan Williams)			Open
		110/25							
31/07/2025	Public Board		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.	Action	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.	Open
		121/25							
31/07/2025	Public Board		3.1 POPULATION HEALTH COMMITTEE KEY ISSUES REPORT	JW asked PHC and WODC to work together on staff vaccination rates, with PHC researching the evidence of what worked, to assist WODC oversight of action plans, particularly to inform this coming winter.	Action	Community IM (Reena Owen)	Vice Chair (Steve Spill)		Open
		121/25							
11/09/2025	Public Board		AOB: WEST WARD: GORSEINON HOSPITAL	RT reported on the plan to issue a written statement immediately following the meeting; this would emphasise that the Board had not made a final decision, set out the rationale for considering an urgent, temporary closure of the ward area and refute irresponsible rumours circulating on alternative uses. The statement would confirm that the rest of the Hospital would continue to act as a vibrant local hub and that Gorseinon was an important part of the SBUHB NHS estate. JW extended her thanks to NM for facilitating the meeting with local councillors; she asked RT to liaise with NM on the statement.	Action	Executive Director of Insight, Communications and Engagement (RT)			Open
		149/25							
25/09/2025	Public Board		1.4 SERVICE CHANGE CONSIDERATIONS	JC asked about the arrangements made to support both Singleton and Gorseinon staff in preparing for the transfer. LJ summarised the detailed work underway with staff on both sites and agreed to circulate the full Transition Plan, to enable the Board to take assurance.	Action	Executive Director of Nursing and Patient Experience (LR)	Leslie Jenkins, Assistant Director of Nursing		Open
		154/25							

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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.	Action	Executive Director of Finance and Performance (DG)		DG has followed up - no confirmaiton yet. National meeting regarding the Public Health Wael element to be held in week comencing 24 November 2025.	Open
25/09/2025	Public Board	157/25	3.1 POPULATION HEALTH COMMITTEE KEY ISSUES REPORT	JC sought assurance that SBUHB did not allow the sale of 'slush drinks' on the health board's premises; Scotland had issued a health alert indicating that such drinks were not suitable for children under 10, as they contained glycerol. Wales had not followed suit. JW asked GR to follow up on this and brief Board members outside the meeting.	Action	Executive Director of Public Health (Interim GR)			Open
25/09/2025	Public Board	160/25	4.2 QUALITY AND SAFETY COMMITTEE KEY ISSUES REPORT	JW recollected her correspondence with WG ministers and discussions with DG on the extent to which the NHS resource allocation formulae made provision for prison health care. She agreed to forward the correspondence to JC.	Action	Chair (Jan Williams)			Open
25/09/2025	Public Board	163/25	4.5 INTEGRATED PERFORMANCE REPORT	NM asked about mental health patients waiting over 26 weeks for therapy and the support available to those waiting. She also asked about Child and Adolescent Mental Health Services (CAMHS), given the low numbers seen within the target time. Responding, DL referenced a review of psychological therapy delays, to explore how best to improve the position. This was a complex and time-consuming form of therapy, with challenges across Wales. Group therapy was one option, if patients were content to access this. DL agreed to provide a briefing note with further information.	Action	Chief Operating Officer (DL)			Open
25/09/2025	Public Board	173/25	6.4 PERINATAL REPORT	KG confirmed that the launch of the triage system depended on approval of the business case under development currently. JW asked KG to provide Board members with a briefing on the triage service outside the meeting.	Action	Executive Director of Nursing and Patient Experience(LR)	Kathy Greaves, Director of Midwifery		Open
23/10/2025	Special Public Board	188/25	3.1 ANY OTHER BUSINESS	LR advised that the nursing cohort was nearing the end of training; SBUHB currently had no Band 5 adult branch vacancies, but work was in hand to identify opportunities, both in SBUHB, and in neighbouring health boards. She was working closely with Health Education and Improvement Wales (HEIW) and the Universities to explore all possible options. JW confirmed with KL that Swansea University would be offering support and he agreed to action this with University colleagues.	Action	University IM (Keith Lloyd)			Open