

# Regional Joint Committee

Thu 16 April 2026, 09:30 - 12:30

The Beacon Centre of Enterprise, Dafen, Llanelli SA14 8LQ

## Agenda

09:30 - 09:30 1.  
0 min

### 1.1. Welcome and Apologies

09:30 - 09:30 2. TO RECEIVE SUB GROUP ASSURANCE REPORTS  
0 min

### 2.1. Regional Clinical Services Planning Subgroup

Marie Davies

- 2.1a Clinical Services Planning Subgroup (AAA) Update Report.pdf (3 pages)
- 2.1b Clinical Services Planning Subgroup SBAR Update Report .pdf (3 pages)
- 2.1c Cellular Pathology Programme Update.pdf (5 pages)

### 2.2. Regional Health Economy Subgroup Update

- 2.2 Regional Health Economy Subgroup (AAA) Work Programme Update Report Revised.pdf (3 pages)

### 2.3. Data and Digital Subgroup Update

- 2.3 Data and Digital Subgroup SBAR Update Report Revised.pdf (8 pages)

### 2.4. Research, Innovation and Excellence Subgroup Update

- 2.4a RJC Sub Group (AAA) Work Programme Update April 2026.pdf (2 pages)
- 2.4b App 1 Regional Research and Innovation Oversight Group ToR Reviewed April 2026 AG.pdf (2 pages)
- 2.4c App 2 REI Regional Operating Model v2.pdf (7 pages)
- 2.4d Research Excellence and Innovation Subgroup Work Programme Summary.pdf (5 pages)

### 2.5. Workforce and OD Subgroup Update

- 2.5a Workforce and OD Sub Group (AAA) Work Programme Update Report.pdf (1 pages)
- 2.5b Workforce and OD Subgroup Progress presentation.pdf (13 pages)

09:30 - 09:30 3. GOVERNANCE  
0 min

### 3.1. RJC 2026/2027 Work Programme

- 3.1 RJC 2026-2027 Work Programme.pdf (3 pages)

### 3.2. Outcome of Committee Annual Self-Assessment Exercise

- 3.2 RJC SBAR Self Assessment Outcome.pdf (7 pages)

### 3.3. Draft RJC Terms of Reference

- 3.3 DRAFT TORS JCCSBHDv.1 17.01.2025 Boards Approved 290525 Revised for RJC Comment 160426 v1.pdf (9 pages)

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09:30 - 09:30  
0 min

## **4. MINUTES AND ACTIONS, CLOSING REMARKS AND DATES OF RJC NEXT MEETINGS**

### **4.1. Minutes of Previous RJC Meeting held on 22 January 2026, and Extraordinary RJC Meeting held on 16 February 2026**

 4.1 DRAFT Minutes Swansea Bay and Hywel Dda University Health Boards Regional Joint Committee Meeting 22012026.pdf (14 pages)

 4.1a Minutes Main Extraordinary RJC Meeting 160226.pdf (6 pages)

### **4.2. Table of Actions**

 4.2 Regional Joint Committee Table of Actions 16.04.26.pdf (7 pages)

### **4.3. RJC Committee Annual Work Plan (for information only)**

 4.3 RJC Work Plan 2025-26 Updated for 160426.pdf (3 pages)

### **4.4. Closing Remarks**

### **4.5. Date of Next RJC Meetings:• 23rd July 2026• 13th October 2026• 7th January 2027**

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## REGIONAL JOINT COMMITTEE

### CLINICAL SERVICES PLANNING SUB-GROUP/ WORK PROGRAMME UPDATE REPORT

**Date of last meeting/reporting period: 17<sup>th</sup> March 2026**

**Quoracy:** Met

**Report by:** Marie Davies, Executive Lead

Lee Davies

Deb Lewis

Andrew Carruthers

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#### KEY DISCUSSION POINTS AND MATTERS TO BE ESCALATED FROM THE DISCUSSION AT THE MEETING:

##### **Alert** (may require discussion)

The Clinical Services Planning Sub-Group wish to **alert** members of the RJC that:

Following a review of resource constraints and deliverability risk members propose to not pursue the Urgent and Emergency Care (UEC) programme for 2026/27.

Diagnostics activity is consolidated under the Pathology programme, which means that regional radiology and endoscopy will not be pursued in-year. This also means that we can focus our limited resources on delivering the remaining programmes.

This position is reflected in the Hywel Dda and Swansea Bay Annual Plans 2026/27.

Decisions about regional programming for UEC and Diagnostics do not affect organisational plans within these service areas. Members agreed to continue monitoring the situation in relation to regional priorities and revive programmes should resource constraints change.

##### **Advise** (to monitor)

The Clinical Services Planning Sub-Group wish to **advise** members of the RJC that:

##### Pathology:

Work to resource the programme for Operational Delivery Network (ODN) transition planning is underway but slightly delayed pending Welsh Government confirmation of funding and discussion with health boards' teams about resource commitment.

This includes backfill for operational teams; data and digital resource; project management resource; and Workforce resource. Once resolved, a 24-month delivery roadmap will be agreed. An update on the Cellular Pathology programme will be provided to the 16th April RJC meeting.

##### South West Wales Cancer Centre:

Oncology outpatient services at Bronglais Hospital remain fragile due to reliance on a single locum oncologist, prompting pathway changes, identification of Acute Oncology Service gaps, and ongoing work toward a sustainable, site-specialist model that will also require future commissioning discussions with neighbouring

Health Boards. Radiotherapy planning indicates that a satellite centre cannot feasibly align with earlier Linac expansion timelines, therefore 6th and 7th Linacs will remain at Singleton Hospital, while wider programme delivery is constrained by the lack of dedicated project support, for which SBUHB and HDdUHB have jointly sought assistance from NHS Wales Performance and Improvement (NHSP&I).

#### South West Wales Vascular Network:

The region has a critical shortfall in Vascular Nurse Specialists, with only 1.8 WTE available against a required 6–8, a situation worsened by long-term sickness that has temporarily left the service without any specialist nurses. A short-term funded solution is providing one senior ward nurse to maintain minimal service provision, and further discussion is needed to determine a sustainable long-term model.

The vascular financial and commissioning framework has been under review to support fair arrangements and implement a single regional waiting list, but progress has stalled due to delays in updating the Long Term Agreement. Following advice from the Clinical Services Planning Sub-Group, an alternative route is now being pursued to deliver a single waiting list in the next financial year.

#### Eye Care:

The advertised MR Consultant post has not been filled and will go back out to advert. The Eye programme team are currently working through the impact of this change on plans.

#### Stroke:

The SLA and funding from the NHSP&I for a regional stroke programme manager post has been extended to 30 June 2026. Further extensions may be agreed but this is uncertain at this time. To make best use of the time and resource available, the next 3 months is dedicated to setting things up for the future (a future with ongoing support and funding from NHSP&I or without). This will include a review of performance against the National Stroke Standards to identify areas where regional collaboration would deliver benefit.

### **Assure (to note)**

The Clinical Services Planning Sub-Group wish to **assure** members of the RJC that:

#### Orthopaedics:

Regional arthroplasty activity has been paused since December 2025 due to resource constraints, and HDdUHB is progressing a locum appointment to support Neath Port Talbot Hospital lists, increase activity where possible, and address kit-related challenges. Across other programmes, the Regional Hand Model continues to treat SBUHB patients, the Ankle Arthritis Network has treated its second regional patient, and development of a prototype regional Patient Tracking List (PTL) /dashboard is underway with work ongoing on required data flows.

#### Eye Care:

The Programme Board met in January 2026 to review progress and confirm next steps, while regional operational meetings continue to drive collaboration, with

HDdUHB advancing initiatives to support intravitreal therapy (IVT) recovery and updated Urgent and Emergency Care Eye Care (URCE) protocol implementation.

The advertised Vitreoretinal (VR) Consultant post has been filled, which enables planning to progress for a centralised VR service.

#### Pathology:

A paper recommending the Bay Campus at Swansea University as the preferred site for the new Regional Cellular Pathology Laboratory was submitted to Welsh Government in February 2026 following approvals by the RJC, SBUHB's Special Board, and HDdUHB's Extraordinary Board. A subsequent resourcing request was submitted in March 2026 to secure funding to progress the Capital Programme to RIBA Stage 4, enabling completion of the Full Business Case.

#### South West Wales Cancer Centre:

A Project Board for the 5th Linac has been established and is developing the Full Business Case, with Health Board approval expected in July 2026 and clinical go-live in May 2027. Scoping and design work is also underway for the 6th bunker at Singleton Hospital.

#### South West Wales Vascular Network:

WG approval has been secured for the Hybrid Theatre at Morriston Hospital, now in delivery with completion expected in September 2026, alongside an agreed Memorandum of Understanding (MOU) and Service Specification for the South West Wales Vascular Network. Work will progress to strengthen Vascular Interventional Radiology (VIR) services to support the hybrid theatre developments and wider VIR service.

#### SBUHB and HDdUHB Annual Plans:

Regional inputs have been incorporated into each Health Board's annual plan for 2026/27. These plans describe the objectives and overall framework of the Regional Joint Committee annual plan, highlighting broad goals and activities for each subgroup, in addition to specific strategies for clinical services.

## **Recommendation**

RJC members are asked to:

**Support** the proposal to pause the Urgent and Emergency Care (UEC) programme for 2026/27; consolidate diagnostics activity under the Pathology programme; and actively monitor the situation in relation to regional priorities and to re-start programmes when resources allow.

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**JOINT HYWEL DDA/SWANSEA BAY UNIVERSITY HEALTH BOARD COMMITTEE**  
**CYD-BWRDD IECHYD PRIFYSGOL HYWEL DDA/BAE ABERTAWE PWYLLGOR**

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|--------------------------------------------------------|---------------------------------------------------------|
| <b>DYDDIAD Y CYFARFOD:</b><br><b>DATE OF MEETING:</b>  | 16 April 2026                                           |
| <b>TEITL YR ADRODDIAD:</b><br><b>TITLE OF REPORT:</b>  | Clinical Services Planning Subgroup SBAR Update Report  |
| <b>CYFARWYDDWR ARWEINIOL:</b><br><b>LEAD DIRECTOR:</b> | Marie Davies, Executive Director of Planning SBUHB      |
| <b>SWYDDOG ADRODD:</b><br><b>REPORTING OFFICER:</b>    | Siôn Charles, Head of Strategy and Service Planning RJC |

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**  
**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA**  
**SBAR REPORT**

**Sefyllfa / Situation**

The Clinical Services Planning Subgroup continues to maintain delivery momentum across a complex portfolio of regional programmes, with a clear focus on those areas where readiness, governance and enabling infrastructure are most advanced. Progress this period demonstrates increasing maturity of regional working, strengthened programme governance, and tangible delivery against agreed priorities.

**Cefndir / Background**

The Subgroup oversees a broad range of regional clinical programmes spanning planned care, Diagnostics (Pathology), South West Wales Cancer Centre, South West Wales Vascular Network, Eye Care and Orthopaedics. Within unscheduled care it spans Stroke services. In recognition of current resource and capacity constraints, the Subgroup has adopted a prioritised and pragmatic approach, consolidating activity where progress can be sustained, while retaining oversight and readiness across paused or emerging programmes.

**Asesiad / Assessment**

**Pathology**

- Continues to make strong progress, with governance arrangements revised to streamline project board and capital team structures and support more efficient delivery. A major strategic milestone has been achieved through regional agreement on the preferred site for the new Cellular Pathology Laboratory, alongside Welsh Government approval of £1.7m to fund the resourcing request submitted to progress to RIBA Stage 4, maintaining momentum towards Full Business Case development and future Operational Delivery Network (ODN) transition.

**Orthopaedics**

- Continues to deliver demonstrable regional benefit, with the Regional Hand Model actively treating patients, continued delivery through the Ankle Arthritis Network, and development of a regional dashboard to support regional demand and capacity planning.

## Eye Care

- Successful recruitment to the Vitreoretinal consultant post marks a significant step forward in strengthening regional clinical capacity. Strong regional collaboration continues to drive service improvement, with Hywel Dda UHB progressing IVT recovery and implementing updated protocols aligned to best practice.

## South West Wales Cancer Centre

- This has established a Project Board for the 5th Linac, with business case development underway and indicative timelines in place, alongside continued strategic planning for future radiotherapy capacity and service sustainability.

## South West Wales Vascular Network

- This has secured Welsh Government approval for the Hybrid Theatre at Morriston Hospital, now in delivery, and has agreed a regional Service Specification and Memorandum of Understanding, providing a strong foundation for consistent network delivery.

## Stroke

- The regional stroke programme was planned to pause following the conclusion of central funding and the absence of a clear national mandate at the end of March 2026; however, a three-month extension of SLA funding has been confirmed, providing short-term continuity and protected time to reset the programme. Progress has continued through completion of the NHS Wales Stroke Service Standards baseline, early shaping of a regional consultant rota, and targeted work to improve time-to-scan and CTP access.

## Diagnostics

- Activity has been consolidated within the Pathology programme.

Collectively, this provides assurance that regional clinical planning continues to mature, with delivery focused on high-impact, achievable priorities.

## Next Steps

### Pathology

- Agree procurement route regionally, and proceed with external appointment to support the detailed design on the Laboratory Site.
- Agree and mobilise a 24-month ODN transition roadmap, including workforce, digital and operational milestones.
- Resource prioritisation - identify how remaining internal resource gaps can be managed within existing Health Board teams to progress at pace alongside the capital project team.
- Develop a communication and engagement strategy to support the programme as it progresses

### Orthopaedics

- Progress recruitment of locum support to re-enable regional arthroplasty activity at Neath Port Talbot Hospital.
- Continue rollout of the Regional Hand Model and expand use of the regional dashboard to support future service planning.

### Eye Care

- Conclude regional consultant recruitment and progress planning for centralised VR services.

- Continue OpenEyes rollout across the region.

#### South West Wales Cancer Centre

- Progress the 5th Linac Full Business Case through Health Board governance, with a view to approval in 2026.
- Continue scoping work for future radiotherapy capacity, including planning assumptions for subsequent Linacs.

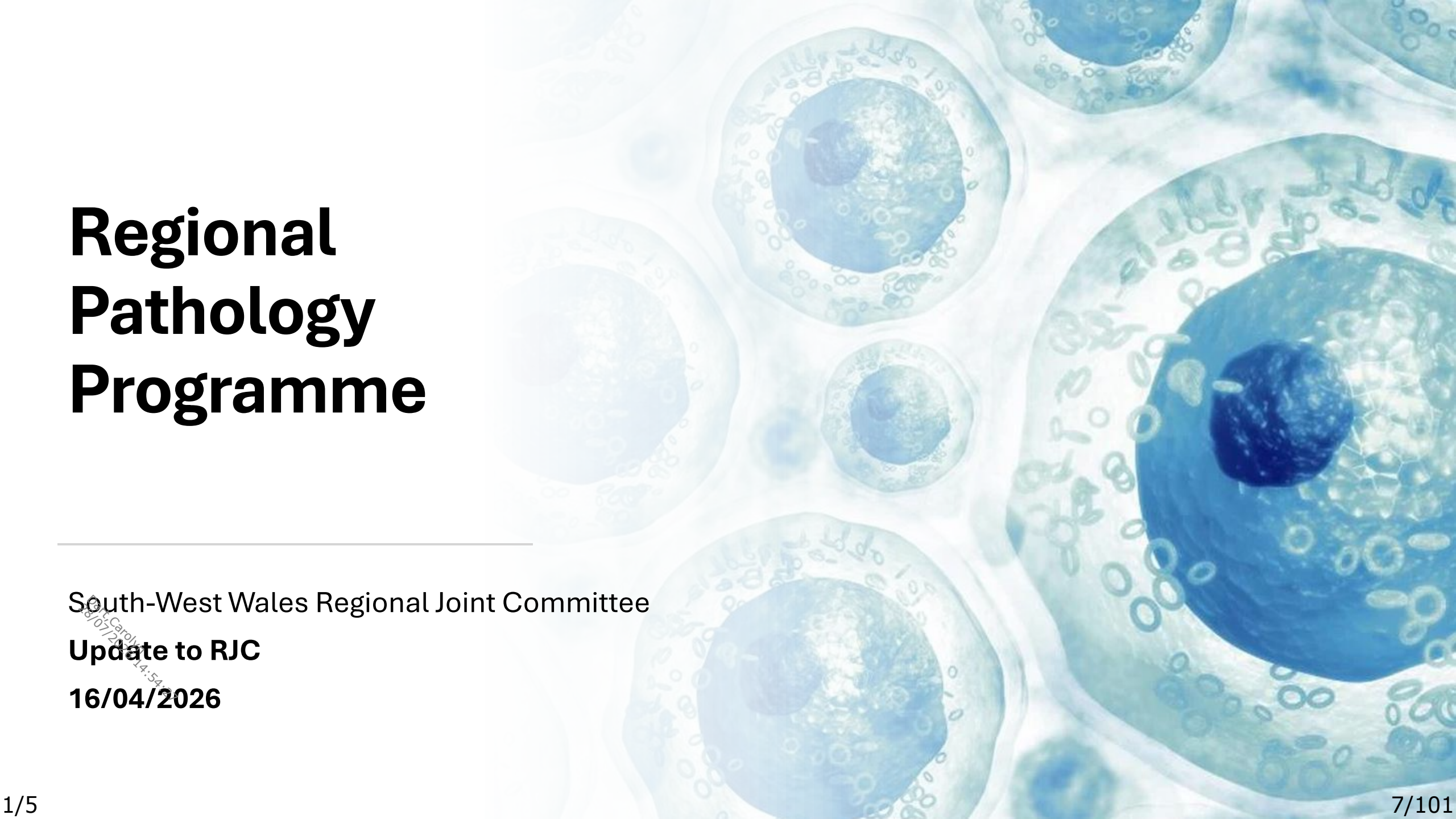
#### South West Wales Vascular Network

- Maintain delivery of the Hybrid Theatre build programme, with completion expected in 2026.
- Progress workforce and commissioning actions required to maximise benefit from the new infrastructure, including VIR capacity.

#### Stroke

- Use the SLA extension period to finalise submission of the Stroke Service Standards baseline and agree the regional priorities arising.
- Clarify programme objectives, outputs and a focused set of deliverables to inform the next phase of activity.

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# Regional Pathology Programme

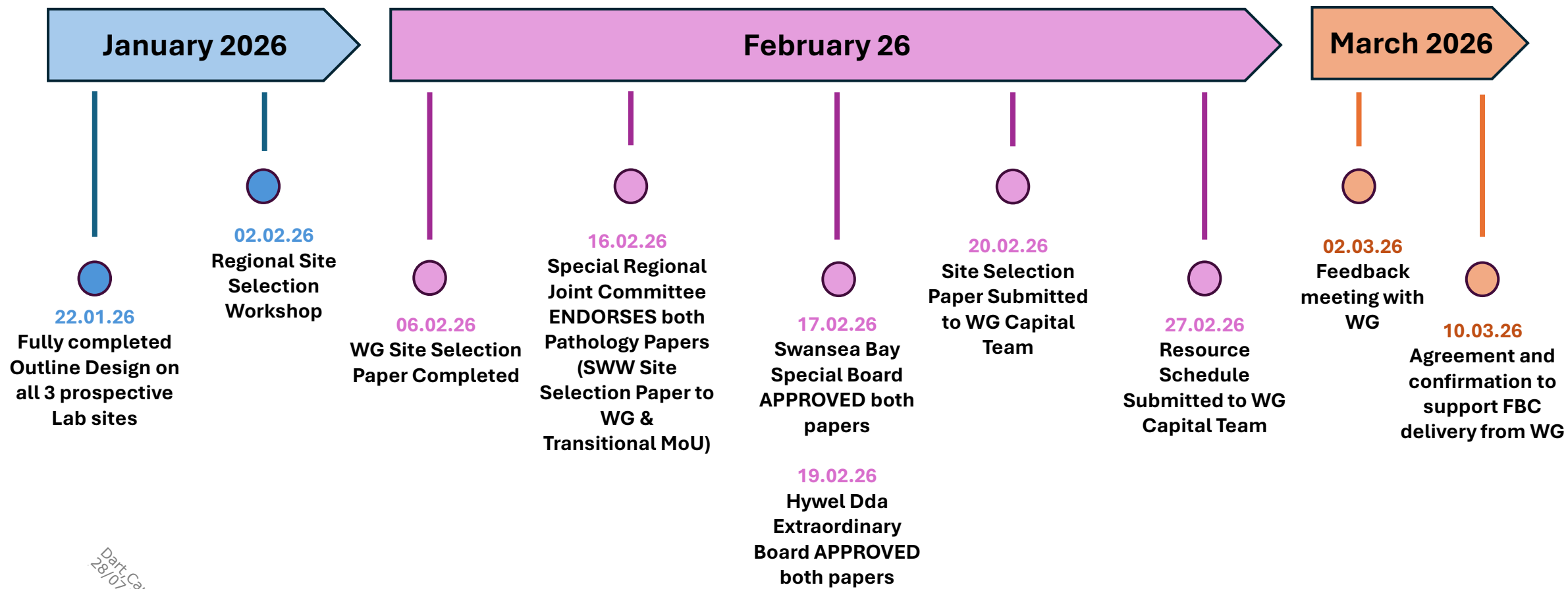
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South-West Wales Regional Joint Committee

**Update to RJC**

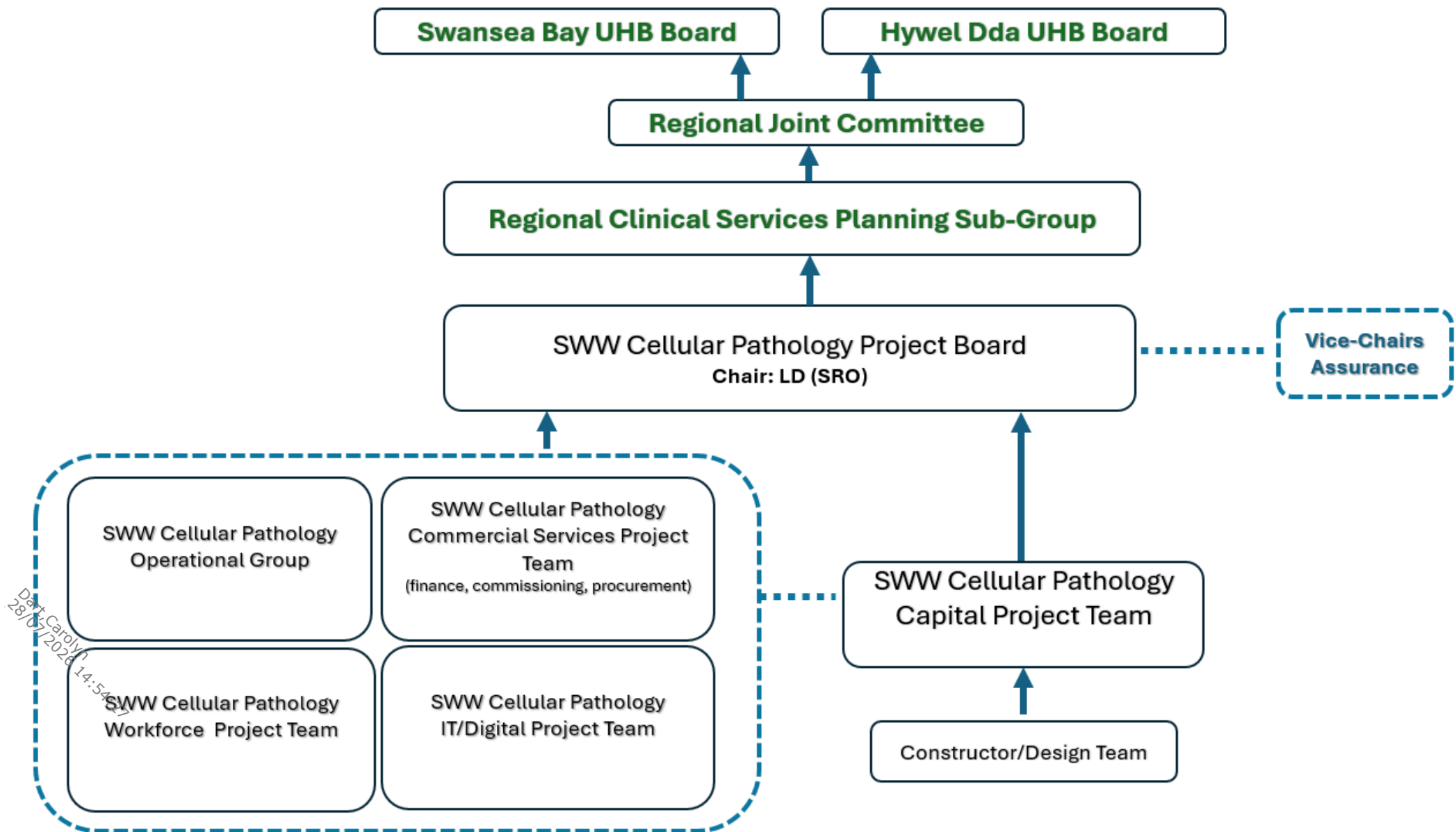
**16/04/2026**

# SWW Cellular Pathology Timeline (Activity in Q4 2025/26)



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# Governance Structure – Revised March 2026



# Strategic Programme Risks

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- Procurement process timeline/complexity is underestimated
- ODN regionalisation does not align with the capital timeline
- Capital affordability estimates are underestimated
- Revenue affordability gaps cannot be mitigated and are not affordable to either/both Health Boards
- Laboratory joint equipment managed services contract procurement programme will not align with the design stage and / or capital development

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# Next Steps (Q1 2026/27)

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## Capital Development

- Agree procurement route regionally
- Proceed through Swansea Bay UHB approvals process (as host organisation)
- Draft Appointment Documentation
- Proceed with External appointments

## Programme Development - ODN

- Agree Resource allocation to the programme from the following regional teams;
  - RJC PMO
  - Operational and Clinical
  - Workforce & OD
  - Digital/IT
  - Finance
- Work with National Programme to secure support for South-West
- Implement the revised Governance Structure
- Draft High Level Service Specification for consultation
- Develop a communication and engagement strategy to support the programme

## REGIONAL JOINT COMMITTEE

### REGIONAL HEALTH ECONOMY SUBGROUP/WORK PROGRAMME UPDATE REPORT

**Date of last meeting/reporting period:** 23 March 2026

**Quoracy:** Met

**Report by:** **Ardiana Gjini, Interim Executive Lead** (following the departure of Gill Richardson, former Executive Lead)

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#### KEY DISCUSSION POINTS AND MATTERS TO BE ESCALATED FROM THE DISCUSSION AT THE MEETING:

##### **Alert** (*may require discussion*)

The Regional Health Economy Subgroup had no items of which to **alert** members of the RJC.

##### **Advise** (*to monitor*)

The Regional Health Economy Subgroup wish to **advise** members of the RJC that:

- Substantial progress continues across multiple workstreams, reflecting strengthened governance, refined workstream structure, and increasing alignment between both Health Boards, Public Health Wales (PHW), Future Generations Commissioners Office, Public Services Boards (PSBs), and wider regional partners.
- Health Inequalities & Health Intelligence:  
PHW has shared early analysis of cardiovascular disease (CVD) and diabetes at Health Board level, with additional data on cancer expected following delays. Work is advancing on modelling deprivation-related impacts on future healthcare demand. This includes assessing the effect of equalising health outcomes across deprivation quintiles and exploring multimorbidity analysis once the World Health Organisation (WHO) publishes the relevant methodology. Engagement between PHW, Health Boards, and partners has helped shape early priorities that will be brought to the Regional Health Economy Subgroup meeting in May 2026 for agreement.
- Whole Systems Approach to Healthy Weight:  
A joint workshop involving three PSBs on 4<sup>th</sup> March 2026 resulted in a unified regional priority around public sector food procurement. This aligns priorities across both Health Boards and all five PSBs, strengthening the region's ability to influence sustainable food systems, supply chains, and healthy food access.
- Welsh Veg in Schools:  
Infrastructure development, workforce recruitment, and early implementation planning are progressing. Engagement with Food Sense Wales and local authorities continues as part of wider action on food security and wellbeing.

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- Warm and Healthy Homes:  
The initiative continues to expand across all five local authority areas. Key activities included the establishment of a monthly West Wales Community of Practice and a Spread & Scale session held in February 2026. Pilot area identification and targeted interventions using health-linked fuel poverty data remain core priorities.
- Development of the Long-Term Regional Health Economy Strategic Plan:  
Strategic analysis of national, regional, and local strategies has now been completed, including a review of A Healthier Wales, the refreshed Hywel Dda UHB A Healthier Mid & West Wales strategy, Swansea Bay UHB's Organisational Strategy 'A Healthier Swansea Bay', the Future Generations Report 2025, and PHW's Long-Term Strategy. The Regional Health Economy Subgroup met on 23 March 2026 to review and agree the proposed overall approach to developing the long-term strategic plan. As part of this next phase, stakeholder engagement workshops will be delivered between March and September 2026, themed around the Four Ps (People, Place, Procurement, Partnerships). These workshops will explore system barriers, opportunities, and shared regional ambitions to inform the strategic plan. Additional engagement will be integrated through existing forums and touchpoints.

### **Assure (to note)**

The Regional Health Economy Subgroup wish to **assure** members of the RJC that:

- The foundations of the Regional Health Economy Subgroup's programme are now firmly established. Governance arrangements are complete, including approval of the Terms of Reference and establishment of the Subgroup, which is meeting bi-monthly.
- Joint senior leadership team meetings between SBUHB and HDdUHB continue on a quarterly basis, strengthening cross-Health Board collaboration.
- Further assurance is given on progress embedding the Social Model for Health and Wellbeing, supported by the Core20PLUS5 and 20-4-7 frameworks.
- Collaborative work across programme areas continues to mature: Whole Systems Approach to Healthy Weight has secured Welsh Government funding to extend current secondments for 2 senior posts until March 2027; Warm and Healthy Homes is looking at securing new sources of funding to replace ECO4 funding to support delivery; and Health Intelligence is supported by PHW Knowledge Directorate input.
- With strategic analysis complete, the subgroup can seek agreement to progress development of the long-term plan, with workshops and discussions planned for 2026.
- Recent tripartite discussions between the Chairs and Chief Executives of SBUHB, HDdUHB and PHW have confirmed shared strategic intent to progress a long-term Regional Health Economy approach focused on improving healthy life expectancy and reducing health inequalities. Assurance

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is given that follow-up discussions between Health Boards and PHW are being arranged to consider actions arising and to align next steps.

### **Recommendation**

That RJC members:

- **NOTE** the continued progress across all programme areas.

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## JOINT HYWEL DDA/SWANSEA BAY UNIVERSITY HEALTH BOARD COMMITTEE CYD-BWRDD IECHYD PRIFYSGOL HYWEL DDA/BAE ABERTAWE PWYLLGOR

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|--------------------------------------------------|--------------------------------------------------------------------|
| <b>DYDDIAD Y CYFARFOD:<br/>DATE OF MEETING:</b>  | 16 April 2026                                                      |
| <b>TEITL YR ADRODDIAD:<br/>TITLE OF REPORT:</b>  | Data and Digital Subgroup Update                                   |
| <b>CYFARWYDDWR ARWEINIOL:<br/>LEAD DIRECTOR:</b> | Huw Thomas, Executive Director of Finance                          |
| <b>SWYDDOG ADRODD:<br/>REPORTING OFFICER:</b>    | Anthony Tracey, Digital Director<br>Matt John, Director of Digital |

**Pwrpas yr Adroddiad** (dewiswch fel yn addas)

**Purpose of the Report** (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This paper provides an updated position following the discussion at the previous Regional Joint Committee, where members requested a more focused and practical outline of near-term regional digital priorities. It summarises progress made since the previous report, highlights areas where work has accelerated through joint activity between Swansea Bay and Hywel Dda UHBs and reflects the growing alignment with external partners. The paper also responds directly to the Committee's request for clearer sequencing, prioritisation, and a defined two-year delivery plan that moves from high-level ambition to coordinated, system-level action across the region.

#### Cefndir / Background

At the January 2026 meeting, the Regional Joint Committee received a detailed paper outlining the wider demographic, technological and environmental shifts shaping the future of digital health and care across West Wales. That paper set out the strategic context, highlighted the complexity of the system transitions ahead, and introduced the need for a more adaptive and collaborative regional model.

A Regional Digital Vision was proposed:

**“Harnessing digital innovation to empower healthier lives, connect communities, and deliver proactive, equitable care, anytime, anywhere.”**

Members were clear, however, that the next phase should focus less on conceptual framing and more on the practical steps required to accelerate delivery over the next two years.

Since that discussion, further joint work between Swansea Bay and Hywel Dda UHBs has reinforced the urgency of moving from insight to implementation. The scale of the digital deficit across the region, the continued reliance on legacy platforms, and the operational pressures facing clinical and corporate services all underline the need to gain pace. Both Health Boards have strong pockets of innovation, but these remain constrained by fragmented infrastructure, siloed deployment patterns and limited shared resource. The Committee recognised that

addressing these barriers requires a structured, region-wide approach that prioritises interoperability, shared standards, and coordinated investment.

The previous paper also emphasised the accelerating impact of digital megatrends - AI, automation, data integration, and next-generation connectivity - and the opportunity they present for a more anticipatory, data-enabled health and care system. However, realising these opportunities depends on foundational work that has not yet been delivered at scale. The Committee therefore requested a shift from high-level ambition to a clearer articulation of the near-term actions, governance mechanisms and delivery structures needed to make progress now, not later.

Feedback from Independent Members and Executive leads has further reinforced the need to energise the regional programme with a sharper focus on sequencing, prioritisation and visible early wins. There is a shared recognition that the region cannot afford slow or fragmented progress, particularly as national programmes such as LIMS2, RISP, Digital Maternity Cymru and the NHS Wales App reach key delivery milestones. Without aligned regional readiness, the benefits of these national programmes will not fully land across Southwest Wales.

Finally, the previous Committee discussion highlighted the importance of strengthened partnership working - not only between the two Health Boards, but also with external partners. This paper builds directly on the Committee's steer and sets out a focused two-year plan designed to convert strategic intent into coordinated, system-level action at pace.

**Asesiad / Assessment**

Since the previous Committee meeting, the region has continued to make steady and purposeful progress in operationalising the direction set out in the previous paper. Both Health Boards have strengthened their joint working arrangements and are beginning to translate high-level strategic intent into coordinated activity that can be sequenced, governed and delivered consistently across organisational boundaries.

Digital and clinical leads have further discussed regional digital priorities for 2026/27 focussing on the early-win areas with the greatest leverage, including ophthalmology digitisation, community-based predictive analytics, unscheduled and emergency care alignment and the completion of critical national programmes i.e. LIMS2, RISP and Digital Maternity Cymru. These areas have been chosen because they offer immediate operational value, build technical readiness for forthcoming national deployments, and reinforce the foundations required for a more integrated regional digital architecture. Appendix 1 provides a draft programme plan for 2026/27. This programme stabilises the regional digital estate in year one, delivers visible service benefits through targeted system deployments, and positions the region for lower-cost national alignment by year two. Below is an integrated time-line:

Table 1: What Lands When

| Date          | What materially changes                                      |
|---------------|--------------------------------------------------------------|
| June 2026     | Digital baseline, AI governance & national compact agreed    |
| December 2026 | Ophthalmology system live; early analytics benefits realised |
| March 2027    | EPMA optimisation, AI pilots, cyber uplift delivered         |

In addition, further progress has been made in strengthening the enablers that underpin regional digital transformation. Across Wales, Health Boards and Digital Health Care Wales (DHCW) continue to collaborate closely on national digital infrastructure and architecture programmes designed to establish consistent technical standards and remove historic

fragmentation. Work on the Infrastructure maturity model is providing a unified, Wales-wide baseline of digital infrastructure maturity, enabling each organisation to understand operational risks and align investment decisions with an agreed national benchmark. In parallel, the emerging National Target Architecture (NTA) is creating a shared architectural framework for NHS Wales. It defines how systems, platforms and data flows should evolve over the next decade, clarifying the relationships between core services such as the electronic patient record, the applications layer, integration patterns, and cybersecurity requirements. The NTA is being shaped collaboratively by DHCW, industry partners and Health Boards to ensure local modernisation plans remain fully aligned to an all-Wales direction of travel.

Running alongside this, the development of the national digital blueprint is establishing the design principles, patterns and delivery expectations that will guide future digital services across the health and care system. The blueprint supports greater coherence in how solutions are commissioned, deployed and optimised, and is becoming a critical enabler of cross-organisation working. This is tightly integrated with the wider National Data Resource (NDR) programme, which is delivering the national data platform, shared standards, information governance model and target operating model needed to support population health analytics, service improvement and trusted AI use. The NDR is now progressing deeper integration across Health Boards, with federated data environments, FHIR-based interoperability, and a modern cloud-hosted architecture forming the foundation for future digital services. Together, these national programmes are creating the shared infrastructure, architecture, and data environment necessary to accelerate digital transformation consistently across Wales.

Work to align operational standards, particularly in service desk operations, cyber, infrastructure, hosting and network services, is progressing, with options identified for phased alignment of procurements, security standards and incident management processes.

A strengthened regional approach to AI governance and AI-enabled opportunities is also starting to take shape. Both organisations recognise that inconsistent adoption or fragmented oversight poses operational, safety and reputational risks. Work is therefore underway to put in place a shared governance framework grounded in national AI principles and DHCW guardrails. This will define consistent processes for ethical review, clinical safety assessment, data governance, transparency requirements, model validation and ongoing monitoring.

In parallel, the region has started to shape a pipeline of AI opportunities, such as frailty and DNA prediction, unscheduled care forecasting, cancer pathway modelling and automated coding. This reflects both existing modelling strengths and areas where joint development can accelerate benefits. This regional framework will ensure that AI is deployed safely, meaningfully and equitably, and that learning is shared rather than duplicated.

A further requirement identified in the Next Steps discussions was the need to arrange a regional session focused on system benefits, deployment learning and optimisation. Although this session has not yet taken place, preparatory work has begun, including the shaping of a joint agenda and the collation of early learning from recent deployments across both Health Boards. The intention is to create a structured forum where clinical, digital and operational leaders can systematically review what has worked well, where there have been avoidable delays or duplication, and how benefits can be evidenced earlier in programme lifecycles. This session will also inform the development of a consistent benefits framework for the two-year regional plan, ensuring that future deployments are more predictable, repeatable and aligned to shared priorities. The session will be scheduled for late April/early May 2026.

Taken together, these developments indicate that the region is now moving with greater structure, clarity and ambition. The next stage will consolidate this work into a fully articulated two-year regional plan with defined milestones, decision gateways, benefits measures and a clear sequencing of initiatives.

## **Governance**

At the January 2026 meeting, a regional digital governance model was proposed. Since then, the Regional Digital Leadership Group has been established. The Group will function as the central forum for coordinating regional digital activity, aligning priorities, and providing collective oversight across both Health Boards. It brings together senior clinical, digital and operational leads to ensure that decisions affecting regional digital delivery are made consistently, transparently and with a shared understanding of system impact.

The Group provides the mechanism through which joint programmes - such as readiness for national systems, AI governance, operational alignment, and the emerging regional analytics framework - can be governed in a disciplined and repeatable way. It also acts as the primary interface with DHCW, ensuring that regional plans remain anchored to national architectural standards, integration guardrails and programme timelines.

As the two-year plan progresses, the Regional Digital Leadership Group will continue to refine its role, formalise decision rights, and maintain a single regional view of risks, interdependencies and delivery readiness. This will support the Committee's expectation of improved sequencing, clearer prioritisation and a more stable foundation for coordinated regional digital transformation.

## **Financial and Delivery Model**

Delivering a modern, integrated digital ecosystem for the region will require a more deliberate and sustainable financial model than the reactive, year-end funding approach that has historically constrained digital progress. Both Health Boards continue to face significant cost and capacity pressures, and the regional digital deficit assessment has reinforced the need for a planned, multi-year funding framework that prioritises core digital foundations, interoperability and workforce capability.

A blended investment approach is therefore proposed, combining core Health Board allocations for essential infrastructure with targeted use of innovation funding, challenge funds and partnership-based contributions where appropriate. This model will enable the region to invest predictably in the building blocks required for national systems, data platforms, cyber resilience and shared operational services, while also retaining the flexibility needed to test and scale high-value opportunities such as AI-enabled analytics and pathway redesign.

To ensure financial discipline, all regional programmes will move to a clearer benefits-led approach, with deliverables, costs and dependencies tracked through a shared governance framework. This will include early identification of efficiency opportunities—particularly where regional alignment, joint procurement or shared platforms can reduce duplication and deliver better value for money. As the two-year plan matures, financial reporting will be strengthened to provide the Committee with transparent oversight of investment decisions, risk, and the return on value for regional digital transformation.

## Next Steps

### 1. Complete the regional digital deficit and maturity baseline

Deliver the first full iteration of the shared assessment covering system age, interoperability gaps, cyber posture, technical debt and skills. Use this to establish a single, transparent baseline to inform sequencing, investment decisions and risk reduction in the two-year plan.

### 2. Launch the first wave of regional early-win pilots

Mobilise delivery of the agreed early-win areas, including community-based predictive analytics, ophthalmology digitisation and EPMA process alignment. This will include defined scopes, milestone plans, and shared reporting mechanisms across both Health Boards.

### 3. Establish the AI governance framework and begin the first AI opportunity assessments

Implement the regional AI governance model, including review pathways, documentation standards and model monitoring expectations. Begin structured assessment of the first AI use cases (e.g., frailty prediction, DNA modelling, cancer forecasting, automated coding) to determine readiness for exploration or pilot.

### 4. Progress operational alignment across service desk, hosting, cyber and network services

Complete the light-touch operational audit and identify a small number of areas for immediate alignment, such as a shared major incident playbook, harmonised cyber standards, or coordinated procurement cycles, to demonstrate near-term operational benefit.

### 5. Formalise support arrangements with DHCW to accelerate regional delivery

Strengthen the operating relationship with DHCW by agreeing a clear support compact covering integration services, NDR alignment, national architectural guardrails, programme-timeline coordination and a structured escalation route. This will ensure national dependencies are actively managed and that regional delivery can progress at pace without avoidable delays.

## Argymhelliad / Recommendation

The Regional Joint Committee is asked to:

**SUPPORT** the approaches outlined above

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## Appendix 1

### Workstream A – Foundations & Governance (Enabling, Critical Path)

| Milestone                               | Key Deliverables                                                 | Apr-26 | May-26 | Jun-26 | Jul-26 | Aug-26 | Sep-26 | Oct-26 | Nov-26 | Dec-26 | Jan-27 | Feb-27 | Mar-27 | Output                                           |
|-----------------------------------------|------------------------------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------------------------------------------|
| <b>A1. Regional Digital Baseline</b>    | Digital deficit, risk & maturity assessment across Health Boards |        |        |        |        |        |        |        |        |        |        |        |        | Regional digital risk heatmap & top-5 priorities |
| <b>A2. Regional Decision Governance</b> | Decision rights, escalation model, standard reporting            |        |        |        |        |        |        |        |        |        |        |        |        | Agreed governance & named SROs                   |
| <b>A3. AI Governance Framework</b>      | Regional AI assurance & approval framework                       |        |        |        |        |        |        |        |        |        |        |        |        | CEO assurance statement on AI safety             |
| <b>A4. DHCW Support Compact</b>         | Agreed national–regional operating compact                       |        |        |        |        |        |        |        |        |        |        |        |        | Clear national dependency map                    |

### Workstream B – Major System Deployments (Primary Delivery Spine)

| System / Deployment                                  | Scope & Intent                                        | Apr-26 | May-26 | Jun-26 | Jul-26 | Aug-26 | Sep-26 | Oct-26 | Nov-26 | Dec-26 | Jan-27 | Feb-27 | Mar-27 | Line of Sight                                     |
|------------------------------------------------------|-------------------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------------------------------------------------|
| <b>EPR Optimisation (incl. EPMA)</b>                 | Standardisation, safer prescribing, reduced variation |        |        |        |        |        |        |        |        |        |        |        |        | Reduction in prescribing risk, productivity gains |
| <b>Ophthalmology PAS &amp; Workflow Digitisation</b> | Elective recovery, pathway control                    |        |        |        |        |        |        |        |        |        |        |        |        | Reduced waits, improved RTT visibility            |

|                                                                    |                                                 |  |  |  |  |  |  |  |  |  |  |  |  |                                           |
|--------------------------------------------------------------------|-------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|-------------------------------------------|
| <b>Community Systems Enhancement (WCCIS / Community Platforms)</b> | Integrated care, predictive & population health |  |  |  |  |  |  |  |  |  |  |  |  | Improved out-of-hospital flow             |
| <b>Data Platform / Analytics Stack</b>                             | Regional analytics, AI readiness, reporting     |  |  |  |  |  |  |  |  |  |  |  |  | Single source of operational insight      |
| <b>Cyber Security &amp; Infrastructure Hardening</b>               | Resilience, national compliance                 |  |  |  |  |  |  |  |  |  |  |  |  | Reduced cyber risk & outages              |
| <b>National Programme Readiness (NDR, architecture alignment)</b>  | Avoid divergence from national direction        |  |  |  |  |  |  |  |  |  |  |  |  | Lower cost of future national convergence |

Specific system project plans have been developed by each team; the above timelines provide an indication of when the benefits are due to be realised as a region

### Workstream C – Early Value Delivery (Benefits-led)

| Initiative                                        | Benefit Focus                  | Apr-26 | May-26 | Jun-26 | Jul-26 | Aug-26 | Sep-26 | Oct-26 | Nov-26 | Dec-26 | Jan-27 | Feb-27 | Mar-27 | Evidence                              |
|---------------------------------------------------|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------------------------------------|
| <b>Predictive Analytics (Community / Frailty)</b> | Demand management & prevention |        |        |        |        |        |        |        |        |        |        |        |        | Reduced admissions / better targeting |
| <b>DNA Prediction &amp; Scheduling</b>            | Productivity & patient flow    |        |        |        |        |        |        |        |        |        |        |        |        | Fewer missed appointments             |
| <b>Cancer Pathway Analytics</b>                   | Pathway control & safety       |        |        |        |        |        |        |        |        |        |        |        |        | Improved RTT compliance               |
| <b>Automated Clinical Coding</b>                  | Workforce productivity         |        |        |        |        |        |        |        |        |        |        |        |        | Reduced backlog & faster reporting    |

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Workstream D – Regional Operational Alignment

| Milestone               | Scope                                  | Apr-26 | May-26 | Jun-26 | Jul-26 | Aug-26 | Sep-26 | Oct-26 | Nov-26 | Dec-26 | Jan-27 | Feb-27 | Mar-27 | Metric                       |
|-------------------------|----------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------------------------------|
| Regional Ops Audit      | Service desk, hosting, networks, cyber |        |        |        |        |        |        |        |        |        |        |        |        | Clear duplication identified |
| Major Incident Playbook | Regional response standardisation      |        |        |        |        |        |        |        |        |        |        |        |        | Faster incident recovery     |
| Shared Cyber Standards  | Baseline controls & assurance          |        |        |        |        |        |        |        |        |        |        |        |        | Reduced regulatory exposure  |

Workstream E – Strategic Capability & Partner Delivery

| Milestone                    | Scope                                      | Apr-26 | May-26 | Jun-26 | Jul-26 | Aug-26 | Sep-26 | Oct-26 | Nov-26 | Dec-26 | Jan-27 | Feb-27 | Mar-27 | View                                      |
|------------------------------|--------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------------------------------------------|
| -Supported Delivery (Wave 1) | Capacity injection for priority programmes |        |        |        |        |        |        |        |        |        |        |        |        | Accelerated delivery without local strain |
| Regional Digital Strategy    | Single, investable roadmap                 |        |        |        |        |        |        |        |        |        |        |        |        | One plan replacing multiple lists         |
| AI Pilot Deployment          | Approved pilots into live service          |        |        |        |        |        |        |        |        |        |        |        |        | Controlled, safe innovation               |

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## REGIONAL JOINT COMMITTEE

### RESEARCH, INNOVATION AND EXCELLENCE SUB-GROUP/WORK PROGRAMME UPDATE REPORT

**Date of last meeting/reporting period:** 23<sup>rd</sup> February 2026/approvals by email April 2026

**Quoracy:** Met

**Report by:** Mr Mark Henwood, Executive Medical Director/Co-Chair

#### KEY DISCUSSION POINTS AND MATTERS TO BE ESCALATED FROM THE DISCUSSION AT THE MEETING:

##### **Alert** (*may require discussion*)

The Research, Innovation and Excellence Regional Joint Committee (RJC) Sub-Group/Work Programme wish to **alert** members of the RJC that:

- Following feedback from the RJC, the governance arrangements for the sub-group have been revised. The original proposal to have both a sub-group and a sub-committee have been streamlined into one group, with the membership of the sub-group extended to include portfolios in addition to the Executive Medical Directors. The revised terms of reference are at **Appendix One** for approval. With the exception of Executive Medical Directors and the research and development leads, it is proposed the other members have representation from either organisation, rather than both, to make best use of time.
- The regional operating model has been updated based on the feedback of the RJC in January 2026 to clarify the governance structure and to set out a bolder vision for the programme (**Appendix Two**).

##### **Advise** (*to monitor*)

The Research, Innovation and Excellence RJC Sub-Group/Work Programme wish to **advise** members of the RJC that:

- Planning has commenced for this year's regional symposium, which will take place in early autumn 2026;
- Following the finalisation of the terms of reference for the sub-group, the forum will be relaunched, with a workshop-style for the first meeting for members to discuss the priorities for a regional approach;
- The full scoping report from the task and finish group looking at how to increase oncology trial opportunities to Hywel Dda UHB patients has now been taken through both Health Boards' governance structures. This was endorsed for submission to Health and Care Research Wales (HCRW), who provided funding through VPAG (Voluntary Scheme for Branded Medicines, Pricing, Access and Growth) for the task and finish group to undertake the work. Once feedback has been received from HCRW, applications can be made for further VPAG money to support the next steps.

##### **Assure** (*to note*)

The Research, Innovation and Excellence RJC Sub-Group/Work Programme wish to **assure** members of the RJC that:

- The job description for the Regional Director for Research, Innovation and Excellence has been finalised and is undergoing banding, after which recruitment can be progressed through the appropriate channels. Focus will be given to reviewing the research and innovation functions of both organisations to inform a strategic plan for a regional model which will be reported to the RJC in quarter three of 2026-27.

### Recommendation

The Regional Joint Committee is asked to:

- **APPROVE** the proposed terms of reference for the Regional Research, Innovation and Excellence Delivery and Oversight Group;
- **SUPPORT** the revised regional operating model;
- **BE ASSURED** that the appointment of a Regional Director for Research, Innovation and Excellence is progressing.

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## Regional Research and Innovation Delivery and Oversight Group Terms of Reference

### 1. Purpose

The purpose of the Regional Research and Innovation Delivery and Oversight Group is to drive forward the work needed to establish a regional approach to research, innovation and excellence as part of the Regional Joint Committee workstream.

### 2. Remit

The group will:

- Develop and oversee the implementation of a regional operating model for regional research and innovation;
- Identify specialities to prioritise for regional working and develop focussed plans, monitoring the delivery;
- Receive progress reports and act as an escalation point for issues;
- Consider the risks associated with taking a regional approach to research and innovation and the mitigating actions, as well as the risk to not developing a regional way of working, aiming to balance the positions;
- Determine the role universities can have in this work.

### 3. Membership

The membership of the group comprises:

- Executive Medical Directors;
- Associate Medical Director for Research and Development for Swansea Bay;
- Director of Research, Innovation and Value for Hywel Dda UHB;
- Executive Director of Allied Health Professionals and Health Science\*;
- Executive Director of Nursing\*;
- Finance representative\*;
- Workforce representative\*;
- Digital representative\*;
- Public Health Wales representative\*;
- University representative(s).

Members marked with a \* can be represented by either Swansea Bay or Hywel Dda university health board colleagues, rather than both.

Deputies can be nominated to attend. Other attendees will be invited to attend as required by the chairs.

Membership will be reviewed on an annual basis.

### 4. Meeting Arrangements

A quorum will be achieved by four members, which must include one of the Executive Medical Directors, and a representative of both health boards' research and development teams.

The group shall meet on a bi-monthly basis and agree an annual schedule of meetings.

The agenda and papers for meetings will be distributed five days in advance of the meeting.

An action tracker will be maintained along with brief notes to formalise any decisions. These will be circulated within seven days of the meeting to check their accuracy.

Administrative support to be provided through the chair of each meeting.

### **5. Accountability, Responsibility and Authority**

The group will be directly accountable to the RJC for its performance in exercising the functions set out in these terms of reference.

The requirements for the conduct of business as set out in each university health board's standing orders are equally applicable to the operation of the group.

### **6. Reporting**

The group will report on a regular and timely basis to the Regional Joint Committee as well as consider how it will feed into the two health boards' governance processes, as appropriate.

As part its sub-structure, it will establish workstreams and task and finish groups to scope and take forward specific pieces of work. Regular progress and/or highlight reports will be provided from each task and finish group or workstream to the Regional Research and Innovation Delivery and Oversight Group.

### **7. Escalation**

Escalation in the first instance from the group will be to the Chief Executives via the Executive Medical Directors, with potential to refer to the Regional Joint Committee.

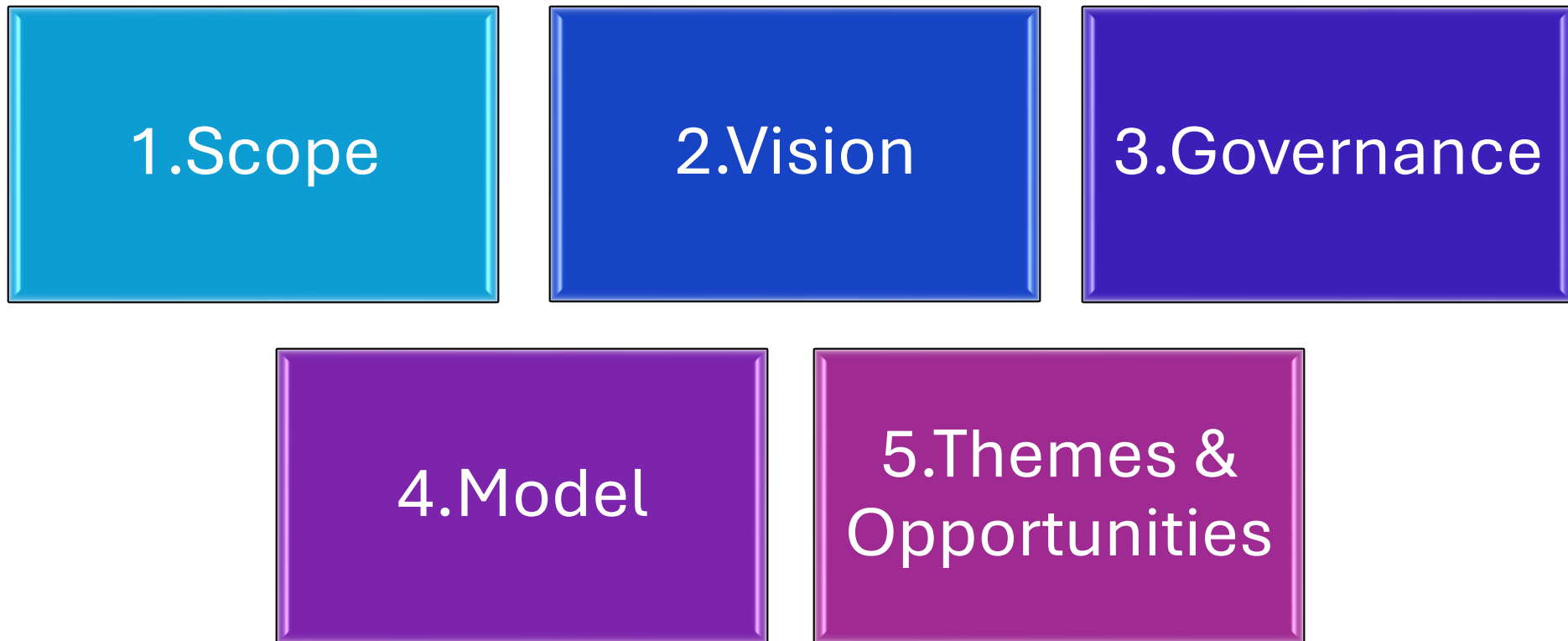
### **8. Review**

These terms of reference and operating arrangements shall be reviewed on at least an annual basis for approval by the RJC.

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# South West Wales Research and Innovation

A region of coast and country, urban and rural communities – the ideal real-world testbed for health research and innovation, built on strong partnerships, clinical and academic excellence, and diverse population needs



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# 1. Scope

- Creation of South West Wales Regional Research and Innovation Partnership;
- Population of around 900,000;
- Workforce of around 28,000;
- Partnerships with Swansea University, Aberystwyth University and University of Trinity St David;
- Mix of urban, rural, and coastal localities, with significant socio-economic variation;
- Acute and community hospitals as well as primary and community services;
- Well-established research and development teams, with Swansea Bay's slightly larger on account of activity levels and its cancer research delivery team while Hywel Dda have a dedicated innovation team;
- Funding is through Health and Care Research Wales, grants and commercial activity, with opportunities to enhance and grow all income streams;
- Both have unique research and innovation institutions which benefit the day-to-day work (JCRF and TriTech);
- Opportunity to work more closely with regional economic development partnership, including work being advance by Mid Wales and South West Wales Corporate Joint Committees.

## 2. Vision

South West Wales will be recognised as a region where research and innovation excellence are integral to everyday health and care. The region will build on established clinical, academic, public and industry partnership strengths to deliver equitable access to clinical research and innovation for all communities, support workforce sustainability, and position the region as a nationally significant centre for rural and mixed-economy health innovation and life scientific growth.

The regional model will deliver:



This will be across the following themes:



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### 3. Governance

## Delivery and Oversight Group



## RJC

#### **Delivery & Oversight Group**

**Co-Chairs:** Executive Medical Directors

**Membership:** Research and innovation leads, clinical executives, finance, digital, workforce, public health, universities

**Purpose:** oversee the operational delivery of a regional research and innovation strategy

#### **Regional Joint Committee**

**Co-Chairs:** Health Board Chairs

**Membership:** Board Members

**Purpose:** development of a strategic approach to regional working

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# 4. Model/Functions

## South-Wales Regional Research and Innovation Partnership:

- Phase II–IV clinical trials, community-based studies, digital health pilots, and translational research to support Welsh Government's health and social care agenda.
- A single point of access to a regional research and innovation workforce spanning across local sites/outreach clinics overseen by the regional director.
- Roles include research nurses/midwives, pharmacists, radiographers, trial facilitators and administration staff.
- Regional governance approach, such as shared policies, procedures and processes, including study feasibility, capacity and capability assessments and approvals.
- Joint funding and grant bids including NIHR, HCRW and European/international schemes.
- Shared digital systems and access, expansion opportunities.
- Regional patient and public involvement approach.
- Ensures maximisation of life science economic development opportunities in partnership with the South West and Mid Wales Wales Corporate Joint Committees.



# 5. Opportunities

- Bigger recruitment pool as larger population and geographical areas;
- Broader patient access to trials, especially for regional or tertiary services, such as cardiac, burns and plastics and oncology;
- More attractive to trial sponsors and innovation funders;
- Build on existing models such as Once for Wales and One Wales approaches to study delivery;
- Regional workforce and workforce plan, including career progression pathways and training opportunities;
- More attractive as employers;
- Optimising use of facilities at local hospital sites and universities and potential to create centres of excellence;
- Operational efficiencies by doing things once for both organisations;
- More multi-site trials could be hosted, including those that require both rural and urban participation;
- Opportunity to benefit from JCRF/TriTech and build upon existing collaborations in relation to areas including cardiovascular disease and oncology;
- Ability to benefit from work on a Social Model for Health and Wellbeing/preventative approaches to securing improved health and wellbeing;
- Early adoption site for digital health solutions;
- Regional testbed for AI in imaging, telemedicine, and population health analytics.
- Research, enterprise and innovation with three strong academic partners (Aberystwyth, Swansea, and Trinity Saint David)

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# Summary

## Scope

Supporting the health, wellbeing and economic development (life science) agenda of South-West Wales  
Providing equitable access to clinical trials  
Regional opportunities for innovation, including with academic partners

## Governance

Delivery and Oversight Group for progress and monitoring reporting into the Regional Joint Committee

## South West Wales Regional Research and Innovation Partnership

## Functions:

Shared governance  
Digital and data  
Public and patient involvement  
University partnerships

## Themes and Opportunities

Themed areas for workstreams  
Wider patient pool  
Optimisation of workforce and facilities  
Industry collaborations

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# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

**Research, Innovation and Excellence**

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|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------|--------------------------------------------------|-------|-------------|-------------|---|
| NAME                                                                                                                                                                                                                                                                    | Research, Innovation and Excellence | RJC OBJECTIVE     | 4                                                | STAGE | In progress | Version     | 1 |
| EXECUTIVE LEADS                                                                                                                                                                                                                                                         | Dr Richard Evans<br>Mr Mark Henwood | MEETING FREQUENCY | Bi-monthly                                       |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     | ToR AGREED        | Yes                                              |       |             |             |   |
| SUB-GROUP AMBITION STATEMENT(S)                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
| To scope and implement a regional approach to research, innovation and excellence.                                                                                                                                                                                      |                                     |                   |                                                  |       |             |             |   |
| SUB-GROUP PROJECTS/PROGRAMMES/INITIATIVES                                                                                                                                                                                                                               |                                     |                   |                                                  |       |             |             |   |
| Oncology                                                                                                                                                                                                                                                                |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
| KEY MILESTONES – TACTICAL SHORT TERM                                                                                                                                                                                                                                    |                                     | COMPLETE BY       | KEY MILESTONES – STRATEGIC LONG TERM             |       |             | COMPLETE BY |   |
| Revised regional operating model                                                                                                                                                                                                                                        |                                     | April 2026        | [INSERT MILESTONE, DELIVERABLE, ACTION COMPLETE] |       |             |             |   |
| Collaborative event to discuss opportunities for regional research                                                                                                                                                                                                      |                                     | June 2026         |                                                  |       |             |             |   |
| Revised governance arrangements in place                                                                                                                                                                                                                                |                                     | July 2026         |                                                  |       |             |             |   |
| Review of both organisations R&D structures                                                                                                                                                                                                                             |                                     | September 2026    |                                                  |       |             |             |   |
| Development of a regional strategy and implementation plan.                                                                                                                                                                                                             |                                     | December 2026     |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
| RESOURCE STATEMENT                                                                                                                                                                                                                                                      |                                     |                   |                                                  |       |             |             |   |
| In order to deliver the objectives of the work programme, a Regional Director for Research and Innovation will be appointed. A job description is in the process of being finalised, after which the appointment process through the appropriate channels can commence. |                                     |                   |                                                  |       |             |             |   |
| RISK (RED RISKS ONLY)                                                                                                                                                                                                                                                   |                                     | IMPACT            | MITIGATING ACTION                                |       |             | OWNER       |   |
| N/A                                                                                                                                                                                                                                                                     |                                     | N/A               | N/A                                              |       |             | N/A         |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
|                                                                                                                                                                                                                                                                         |                                     |                   |                                                  |       |             |             |   |
| DEPENDENCIES                                                                                                                                                                                                                                                            |                                     |                   |                                                  |       |             |             |   |
| N/A                                                                                                                                                                                                                                                                     |                                     |                   |                                                  |       |             |             |   |

# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Oncology



|      |          |               |   |       |             |         |   |
|------|----------|---------------|---|-------|-------------|---------|---|
| NAME | Oncology | RJC OBJECTIVE | 4 | STAGE | In progress | Version | 1 |
|------|----------|---------------|---|-------|-------------|---------|---|

|                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RESOURCE ANALYSIS / ASSUMPTIONS / REQUIREMENTS / IMPACT / GAPS                                                                                                                                                |
| External funding has supported the appointment of a senior pharmacist for clinical trials, consultant sessions for a senior clinician to lead the work and project support resources from both health boards. |

|                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FUNDING ASSUMPTIONS / REQUIREMENTS / IMPACT / GAPS                                                                                                                                                                                                                                                                                                                                                                                          |
| A successful bid was made to the Voluntary Scheme for Branded Medicines, Pricing, Access and Growth (VPAG) (a scheme investing £400m over five years to drive forward UK innovation, sustainability and growth to 'promote innovation and access to cost-effective medicines' in the UK) for project management support. Further bids will be submitted once the task and finish group has been accepted by Health and Care Research Wales. |

| RISK (RED RISKS ONLY) | IMPACT | MITIGATING ACTION | OWNER |
|-----------------------|--------|-------------------|-------|
| N/A                   | N/A    | N/A               | N/A   |
|                       |        |                   |       |
|                       |        |                   |       |
|                       |        |                   |       |
|                       |        |                   |       |
|                       |        |                   |       |

| ISSUES | IMPACT | MITIGATING ACTION | OWNER |
|--------|--------|-------------------|-------|
| N/A    | N/A    | N/A               | N/A   |
|        |        |                   |       |
|        |        |                   |       |
|        |        |                   |       |

|              |
|--------------|
| DEPENDENCIES |
| N/A          |

## REGIONAL JOINT COMMITTEE

### WORKFORCE & OD SUB-GROUP/WORK PROGRAMME UPDATE REPORT

**Date of last meeting/reporting period:** 17<sup>th</sup> February 2026

**Quoracy:** Met

**Report by:** Lisa Gostling & Tina Ricketts, Joint Chairs

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#### KEY DISCUSSION POINTS AND MATTERS TO BE ESCALATED FROM THE DISCUSSION AT THE MEETING:

##### **Alert** (*may require discussion*)

The Workforce & OD Regional Joint Committee (RJC) Sub-Group/Work Programme have no issues to **alert** members of the RJC to.

##### **Advise** (*to monitor*)

The Workforce & OD RJC Sub-Group/Work Programme have no issues to **advise** members of the RJC to.

##### **Assure** (*to note*)

The Workforce & OD RJC Sub-Group/Work Programme wish to **assure** members of the RJC that:

- Plans on a page have now been developed for the following workstreams:
  - Occupational Health Joint Working
  - Strategic Workforce Plan
  - Regional Leadership Development Offer
- The Legislation and Compliance Group has met but due to the timing of the meeting (18<sup>th</sup> March 2026) it was unable to complete the required compliance documents however these will be provided for the next RJC meeting.

#### **Recommendation**

RJC members are asked to:

- **NOTE** the continued progress made.

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# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Workforce & OD Programme

# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Strategic Workforce Plan

| A3 – Plan on a Page                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Owner: Tina Ricketts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| <p><b>Step 1: Problem Statement</b></p> <p>Regional clinical services across Swansea Bay UHB and Hywel Dda UHB face increasing workforce pressures, including shortages in critical specialties, variable service capacity, growing demand, and challenges in sustaining safe, high-quality care across organisational boundaries. Without a coordinated, regional approach, both Health Boards risk duplicating effort, competing for limited workforce supply, and being unable to meet population needs effectively. A jointly developed regional workforce plan is required to align service models, optimise workforce utilisation, address gaps collaboratively, and ensure a sustainable, resilient workforce capable of delivering consistent, high-quality care across the region.</p> | <p><b>Step 3 Vision &amp; Goals</b></p> <p>Our shared vision is to create a sustainable, flexible, and skilled regional workforce capable of delivering consistent, high-quality services across Swansea Bay UHB and Hywel Dda UHB. Through a unified regional workforce plan, both Health Boards aim to align service models, strengthen recruitment and retention, expand opportunities for shared roles and training, and improve the resilience of key regional services. The goal is to optimise collective workforce capacity, reduce duplication, address critical skill gaps, and support a modern, integrated workforce model that meets the needs of our combined population now and in the future.</p>                                                                                       | <p><b>Step 5: Refined Problem Statement</b></p> <p>Despite shared service pressures and increasing interdependencies, Swansea Bay UHB and Hywel Dda UHB lack a consistent, regionally coordinated approach to workforce planning for key clinical services. Current demand, workforce shortages, and variation in service models create fragility that neither organisation can resolve in isolation. Without a unified regional workforce plan, the Health Boards risk continued duplication, fragmented deployment, and limited ability to address critical skills gaps or sustain specialist services. A joint, evidence-based regional approach is therefore essential to ensure the workforce is effectively aligned to future service needs and capable of delivering high-quality, sustainable care across the region</p> | <p><b>Step 7: Action Plan</b></p> <p>The Joint Regional Committee will lead the development of a unified regional workforce plan through a structured, collaborative process involving clinical leaders, workforce teams, and service managers across both Health Boards.</p> <p><b>Year 1:</b> establish shared governance, complete a joint workforce baseline, map regional service models, benchmark and identify priority specialties requiring immediate intervention.</p> <p><b>Year 2:</b> design and implement shared recruitment pipelines, rotational models, and regional training and development approaches, supported by consistent data and aligned planning assumptions.</p> <p><b>Year 3:</b> embed new workforce models, evaluate impact, and refine long-term actions to ensure sustainable, resilient regional services.</p> |
| <p><b>Step 2 Current State</b></p> <p>Both Swansea Bay UHB and Hywel Dda UHB are experiencing increasing workforce fragility across several regional service areas, marked by persistent vacancies, reliance on temporary staffing, difficulties recruiting to rural and specialist roles, and uneven distribution of skills and capacity. Current workforce planning is carried out separately within each organisation. Although there are pockets of effective collaboration, there is no single, unified regional workforce plan to guide future service delivery, address shared risks, or support long-term sustainability of regional services.</p>                                                                                                                                      | <p><b>Step 4: Top Contributor &amp; Causes</b></p> <p>The most significant contributors to current workforce pressures across the region include persistent difficulties in attracting and retaining staff in hard-to-recruit specialties, demographic changes leading to an ageing workforce, and increasing service demand that outpaces available capacity. Variation in service models, limited regional coordination of recruitment and training pipelines, and dependence on temporary staffing further exacerbate fragility. Geographic challenges, inconsistent career development opportunities, and competition for the same limited workforce supply across both Health Boards also contribute to instability and impede the development of a sustainable, resilient regional workforce.</p> | <p><b>Step 6: Opportunities</b></p> <p>There is significant opportunity for Swansea Bay UHB and Hywel Dda UHB to strengthen regional workforce sustainability by aligning service delivery models, developing shared workforce pipelines, and creating joint recruitment and retention initiatives across key specialties. Greater collaboration offers the potential to reduce duplication, make better use of collective expertise, and design flexible roles that support service resilience across organisational boundaries. A unified regional plan also enables the development of shared training pathways, rotational models, and advanced practice roles, helping to attract talent, improve career progression, and build a modern, adaptable workforce that meets the needs of the wider population.</p>             | <p><b>Step 8: Progress &amp; Follow Up</b></p> <p>Progress will be monitored through the Joint Regional Committee, with quarterly reviews to assess delivery against the three-year programme and ensure actions remain aligned to regional service needs. Each milestone—baseline completion, model design, implementation, and evaluation—will be tracked using clear metrics for workforce sustainability, recruitment, retention, and service resilience. Findings will be shared with both Health Boards to maintain transparency, support joint decision-making, and enable rapid escalation of emerging risks. Annual updates to the regional workforce plan will ensure the approach remains responsive, evidence-based, and capable of supporting long-term transformation across the region.</p>                                        |
| <p><b>Step 9: Insights</b>—Early engagement highlights strong appetite for regional collaboration, clear overlap in workforce challenges, and significant opportunities to align service models and maximise shared workforce capacity. Emerging themes indicate that a unified approach will deliver greater resilience, reduce duplication, and provide a more sustainable basis for future service delivery</p>                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

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| Regional Joint Committee– developing a regional workforce plan for SBUHB and HDUHB                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Date Agreed:<br>Programme Lead: Tina Ricketts                                                                                                                                                                                                                                                                                                                                                              |                                              |       |             |        |
| 1. Problem Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2. Scope                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |       |             |        |
| <p><b>Background:</b> Swansea Bay UHB and Hywel Dda UHB face shared workforce pressures across several regional clinical services, including persistent vacancies, challenges in recruiting to specialist and rural roles, and rising demand that exceeds current capacity. While both organisations undertake workforce planning, approaches vary, and collaboration is currently limited to specific service areas rather than guided by a unified regional plan.</p> <p><b>Problem:</b> The absence of a coordinated regional workforce approach creates duplication, variation in service models, and fragmented recruitment and training pipelines. This limits the ability of either Health Board to address critical shortages or sustain fragile regional services independently. Without a jointly developed, evidence-based regional plan, workforce risks will continue to escalate.</p> <p><b>Impact:</b> A joint regional workforce plan would enable more effective use of collective resources, support sustainable staffing models, reduce duplication, and strengthen resilience across key services. Improved coordination would create clearer career pathways, better workforce stability, and a more robust foundation for delivering safe, high-quality care across the combined population.</p> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | In Scope: All staff groups                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                            | Out of Scope: Volunteers and Work experience |       |             |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 3. Programme Goal(s)                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |       |             |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <ul style="list-style-type: none"><li>Create a coordinated, sustainable regional workforce model across both HBs.</li><li>Align service and workforce plans to reduce duplication and strengthen priority specialties.</li><li>Implement shared workforce solutions</li><li>Improve data quality, planning consistency, and collaborative decision-making to support long-term workforce resilience.</li></ul> |                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |       |             |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 4. Key Exit Criteria (what will success look like)                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |       |             |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <ul style="list-style-type: none"><li>An agreed, evidence-based regional workforce plan in place, with early actions implemented and demonstrable improvements in workforce sustainability across priority regional services.</li></ul>                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |       |             |        |
| 5. Short term objectives 2026/27                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 6. Medium term objectives 2027-28                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                | 7. Key Programme Milestones                                                                                                                                                                                                                                                                                                                                                                                |                                              |       |             |        |
| <p><b>Months 1–3:</b> Establish regional governance, agree roles/ responsibilities, shared baseline analysis of workforce data, service models, and priority pressure points. Benchmark and engagement</p> <p><b>Months 4–6:</b> Identify priority specialties, confirm shared planning assumptions, develop early regional workforce options</p> <p><b>Months 7–12:</b> Produce and refine the regional workforce plan, implement early actions in priority areas, establish monitoring arrangements.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <p><b>Medium-Term Objectives (Year 2):</b> implement regional workforce solutions, e.g. joint recruitment pipelines, rotational posts, aligned training and development pathways in priority specialties. Strengthen shared data, standardise planning assumptions, and collaborate with education partners to support a more consistent and coordinated regional approach.</p> <p><b>Long-Term Objectives (Year 3):</b> embed and expand for sustainability</p> |                                                                                                                                                                                                                                                                                                                                                                                                                | Milestones                                                                                                                                                                                                                                                                                                                                                                                                 |                                              | Lead  | By When     | Status |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Establish regional governance & agree roles/ responsibilities                                                                                                                                                                                                                                                                                                                                              |                                              | TR/LG | 30 April 26 |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Identify priority services & models, complete baseline workforce data analysis & benchmark                                                                                                                                                                                                                                                                                                                 |                                              | TR/LG | 30 June 26  |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Benchmark/ identify/ appraise alternative service and workforce models/ solutions                                                                                                                                                                                                                                                                                                                          |                                              | TR/LG | 30 Aug 26   |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Develop plans for joint workforce solutions and implement early actions for priority areas                                                                                                                                                                                                                                                                                                                 |                                              | TR/LG | 31 Mar 27   |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                | Implement joint workforce solutions                                                                                                                                                                                                                                                                                                                                                                        |                                              | TR/LG | 31 Mar 28   |        |
| 8. Key Risks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 9. Driver metrics                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                | 10. Impact: planned benefits relating to Health Board Strategic Objectives                                                                                                                                                                                                                                                                                                                                 |                                              |       |             |        |
| <ol style="list-style-type: none"><li>Failure to align service and workforce priorities across both HBs = continuation of fragmented regional workforce models.</li><li>Insufficient capacity or engagement from clinical and workforce teams = delays</li><li>Financial constraints/ lack of investment = restricts ability to implement new workforce models, joint posts, and regional training pathways at the scale required.</li></ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <ol style="list-style-type: none"><li>Vacancy rate trends across priority regional services.</li><li>Agency and temporary staffing spend as a proportion of total workforce cost.</li><li>Recruitment and retention performance, including time-to-hire and turnover rates.</li><li>Training pipeline strength, such as numbers entering and completing regional training or rotational programmes.</li></ol>                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                | <ul style="list-style-type: none"><li>Improved workforce sustainability and resilience across priority regional services.</li><li>Reduced duplication and more efficient use of shared workforce resources.</li><li>Stronger, more attractive career pathways supporting recruitment and retention.</li><li>More consistent, high-quality care delivered across the combined regional population</li></ul> |                                              |       |             |        |

# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Occupational Health Joint Working

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| <p><b>Joint Health &amp; Wellbeing Programme</b>– to develop regional H&amp;W initiatives/models that improve staff health outcomes, reduces absence and turnover and delivers high quality support across both HBs while maximising efficiency and value for money.</p> | <p>Date Agreed: Programme Lead: Paul Dunning / Heather Hinkin</p> |
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| 1. Problem Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2. Scope                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                     |
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| <p><b>Background:</b> Both health boards provide a range of health and wellbeing services within their HR functions, developed in response to local needs and historical arrangements. Increasing workforce pressures, rising sickness absence, and growing demand for mental and physical health support have highlighted the potential value of greater collaboration. National policy direction and financial constraints further reinforce the need to explore regional approaches that preserve local delivery while improving consistency, efficiency, and impact.</p> <p>As health and wellbeing services for staff are currently designed, commissioned and delivered independently by each Health Board resulting in a variation in service provision, this limits the ability to optimise resources, standardise quality and address common workforce wellbeing challenges collectively.</p> <p><b>Problem:</b> This can lead to duplication of effort, inconsistent offering to staff, variable access to services, inefficient procurement of external providers and difficulty demonstrating any collective impact on sickness absence, retention and morale.</p> <p><b>Impact:</b> There is an opportunity to collaborate regionally to improve quality, consistency, value for money and staff outcomes.</p> | <p><b>In Scope:</b></p> <ul style="list-style-type: none"> <li>Occupational health (OH) interfaces</li> <li>Employee wellbeing services (mental health support, physio, EAP, lifestyle services)</li> <li>Policy alignment (stress, trauma support)</li> <li>Data and reporting</li> <li>Wellbeing programmes</li> <li>Digital wellbeing tools</li> <li>Training and prevention initiatives</li> </ul>                                                                                                                                         | <p><b>Out of Scope:</b></p> <ul style="list-style-type: none"> <li>Clinical patient services</li> <li>Individual case management systems (unless scope for future contract negotiations)</li> </ul> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 3. Programme Goal(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <ul style="list-style-type: none"> <li>To develop a regional Health &amp; Wellbeing model that improves staff health outcomes, reduces absence and turnover, and delivers consistent, high-quality support across both health boards while maximising efficiency and value for money.</li> </ul> <p>This is not about centralisation — it is about doing locally what needs to be local and regionally what benefits from scale. This maintains local compassion, opportunities for regional strength and potential for national leverage.</p> |                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 4. Key Exit Criteria (what will success look like)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <ul style="list-style-type: none"> <li>A jointly agreed regional H&amp;W operating model is live</li> <li>Services are aligned or shared where appropriate</li> <li>Governance and funding model is embedded</li> <li>Common data dashboard in use</li> <li>Measurable improvement in staff wellbeing indicators</li> <li>Local delivery remains responsive and culturally appropriate</li> </ul>                                                                                                                                              |                                                                                                                                                                                                     |

| 5. Short term objectives 2026/27                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 6. Medium term objectives 2027/28                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 7. Key Programme Milestones             |      |         |        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------|------|---------|--------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Milestones                              | Lead | By When | Status |
| <ul style="list-style-type: none"> <li>Map existing H&amp;W services across both health boards</li> <li>Identify duplication and gaps e.g. Fair Work Charter</li> <li>Explore joint approaches to weight management, increasing value of PECs and trauma support.</li> <li>Pilot at least two shared approaches to reducing absence (e.g. within a specific dept – E&amp;F identified as a potential pilot area due to high levels of absence across both HBs) , tailored adjustments, training offered, or for ADHD)</li> <li>Begin policy alignment (stress, mental health) and also explore opportunities to improve stress risk assessment quality</li> </ul> |  | <ul style="list-style-type: none"> <li>Implement regional service model for agreed functions</li> <li>Joint procurement of key wellbeing services</li> <li>Explore/roll out shared digital wellbeing platform</li> <li>Introduce regional prevention programmes (e.g. musculoskeletal health, mental resilience) including population health triangulation</li> <li>Demonstrate reduction in sickness absence</li> <li>Embed workforce wellbeing into organisational planning</li> <li>Standardise training for managers on wellbeing</li> <li>Create shared performance metrics</li> </ul> |  | To complete the baseline                |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | To identify duplication and agree focus |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Launch of pilot(s)                      |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Reginal procurement implemented         |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Digital platform launched               |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Formal evaluation completed             |      |         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Business as usual model agreed          |      |         |        |

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| 8. Key Risks                                                                                                                                                                                                                                                                                                                                                                                                                                    | 9. Driver metrics                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                     | 10. Impact: planned benefits relating to Health Board Strategic Objectives                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div><div><div>1. Capacity within WOD directorate to complete milestones</div><div>2. Cultural resistance – lack of local identity or trust</div><div>3. Different financial or absence pressures, uneven demand across HBs.</div><div>4. Perceived centralisation or change fatigue</div><div>5. Restriction of contractual arrangements on moving to preferred model(s) e.g</div></div></div> <div>Dart Carolyn<br/>28/07/2026 14:54:27</div> | <b>Health metrics</b> <ul style="list-style-type: none"><li>•Sickness absence rate</li><li>•Average days lost</li><li>•Long-term sickness cases</li><li>•Stress-related absence</li><li>•MSK absence</li></ul> <b>Service metrics</b> <ul style="list-style-type: none"><li>•Waiting times</li><li>•Uptake of wellbeing services</li><li>•Completion rates of interventions</li><li>•Manager training completion</li></ul> | <b>Workforce metrics</b> <ul style="list-style-type: none"><li>• Staff turnover</li><li>• Retention rates</li><li>• Exit interview wellbeing themes</li><li>• Staff survey wellbeing scores</li></ul> <b>Financial Metrics</b> <ul style="list-style-type: none"><li>• Cost/employee</li><li>• Cost/referral</li><li>• Procurement savings</li><li>• Return on investment</li></ul> | For staff <ul style="list-style-type: none"><li>• Faster access to support</li><li>• Fairer and more consistent services</li><li>• Better mental and physical health</li><li>• Increased trust in employer</li><li>• Reduced burnout</li></ul> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                     | For organisations <ul style="list-style-type: none"><li>• Reduced sickness absence</li><li>• Improved productivity</li><li>• Cost efficiencies</li><li>• Stronger recruitment and retention</li><li>• Better regulatory assurance</li></ul>    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                     | For the system <ul style="list-style-type: none"><li>• Shared learning</li><li>• Reduced fragmentation</li><li>• Scalable models</li><li>• Foundation for national alignment</li><li>• Evidence-based workforce wellbeing</li></ul>            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                |

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# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Leadership Development

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       |                                                                            |               |         |            |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------|---------|------------|-------------|
| Regional Leadership Development Offer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                   |                                                                                                                                                                                       | Date Agreed:                                                               |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Programme Lead:                                                            |               |         |            |             |
| 1. Problem Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                   | 2. Scope                                                                                                                                                                              |                                                                            |               |         |            |             |
| <p><b>Background:</b> Hywel Dda and Swansea Bay University Health Boards currently lack a coordinated regional leadership development offer that brings senior leaders together in a collaborative way.</p> <p><b>Problem:</b> Without a regional approach, leadership development efforts remain fragmented, limiting opportunities for joint learning, consistent skill development and collective ways of working across the Health Boards.</p> <p><b>Impact:</b> If a regional offer is established and delivered effectively, senior leaders across the Health Boards will be equipped to strengthen collaboration, accelerate progress on regional projects and create more consistent and coordinated approaches to service improvement.</p> |  |                                   | In Scope:                                                                                                                                                                             |                                                                            | Out of Scope: |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   | Senior leaders involved in regional joint-working programmes                                                                                                                          |                                                                            |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   | 3. Programme Goal(s)                                                                                                                                                                  |                                                                            |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   | <ul style="list-style-type: none"><li>To</li><li>To</li></ul>                                                                                                                         |                                                                            |               |         |            |             |
| 4. Key Exit Criteria (what will success look like)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   | Both Health Boards share an agreed regional leadership development direction, underpinned by evidence, joint governance and a validated roadmap that senior leaders are committed to. |                                                                            |               |         |            |             |
| 5. Short term objectives 2026/27                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | 6. Medium term objectives 2026/27 |                                                                                                                                                                                       | 7. Key Programme Milestones                                                |               |         |            |             |
| <ol style="list-style-type: none"><li>1. Clarify needs and scope through discovery, mapping existing provision and defining shared capabilities.</li><li>2. Gather evidence from benchmarking and past programme insights.</li><li>3. Establish joint governance and shared ownership across both Health Boards.</li><li>4. Develop early design options for a regional offer and identify quick wins.</li><li>5. Create an initial roadmap and engage senior leaders to build alignment and momentum.</li></ol>                                                                                                                                                                                                                                    |  |                                   |                                                                                                                                                                                       | Milestones                                                                 | Lead          | By When | Status     |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Discovery and needs assessment completed                                   |               |         | April 2026 | Not Started |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Benchmarking completed                                                     |               |         | April 2026 | Not Started |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Sponsors confirmed and cross-HB governance agreed                          |               |         | May 2026   | Not Started |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Initial design options developed and reviewed                              |               |         | May 2026   | Not Started |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       | Roadmap agreed and shared                                                  |               |         | June 2026  | Not Started |
| 8. Key Risks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 9. Driver Metrics                 |                                                                                                                                                                                       | 10. Impact: planned benefits relating to Health Board Strategic Objectives |               |         |            |             |
| <ol style="list-style-type: none"><li>1. Capacity within WOD teams to complete milestones.</li><li>2. Inadequate funding.</li></ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |                                                                                                                                                                                       |                                                                            |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       |                                                                            |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       |                                                                            |               |         |            |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |                                                                                                                                                                                       |                                                                            |               |         |            |             |
| 10/13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                   |                                                                                                                                                                                       | 49/101                                                                     |               |         |            |             |

# Regional Joint Committee Hywel Dda/Swansea Bay University Health Boards

Cyd-bwyllgor Rhanbarthol  
Byrddau Iechyd Prifysgol Hywel Dda/Bae Abertawe

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## Alignment With Mid Wales Partnership

# Strategic Alignment

Both partnerships address workforce sustainability, but at different system levels. Together they create a coherent architecture for rural workforce planning, recruitment and impact measurement.

## Mid Wales Partnership (BCUHB, SBUHB, HDdUHB, PTHB)

- Cross-sector rural workforce integration
- Support Worker Development Programme expansion
- Flexible, multi-skilled roles for fragile services
- Place-based, prevention-focused workforce model

## RJC Partnership (SBUHB, HDdUHB, PTHB)

**Strategic Alignment**  
Joint Planning  
Methodology  
Shared Recruitment  
Pipelines  
Workforce Impact &  
Benefits Framework  
Collaborative Learning  
Infrastructure

- Joint 3–5 year workforce planning
- Coordinated approach to vulnerable services
- Joint recruitment for hard-to-fill roles
- Workforce impact assessments (left shift, digital, AI)

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# Further Considerations to Align Priorities

Mid Wales Partnership (BCUHB, SBUHB, HDdUHB, PTHB)

RJC Partnership (SBUHB, HDdUHB, PTHB)

- Cross-sector rural workforce integration
- Support Worker Development Programme expansion
- Flexible, multi-skilled roles for fragile services
- Place-based, prevention-focused workforce model

- Leadership & Management Framework
- Integration & Cross-Sector Expansion of the Support Worker Development Programme (include HCSW Band 2-3 Curriculum)
- Cross-Border Workforce Benefits Framework
- Joint rural workforce model for health and care

## Considerations

- MOU/SLA's/joint DPIACPD Requirements and regional alignment
- New ESR
- Creating on-demand learning experiences
- School engagement resources; recognise border boundaries
- HR Professional Development using CIPD Professions Map
- Occupational Health & Wellbeing services

- Medical Staffing – Hard to fill roles
- Grip & Control assessment
- Workforce business intelligence and benchmarking
- Job evaluation
- Bank model - options appraisal
- HR policy education and adoption
- Management of sickness absence
- Staff survey – improving completion rates

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# South West Wales Regional Joint Committee (RJC)

Swansea Bay and Hywel Dda UHB are committed to a stronger more sustainable West Wales Regional Health Economy and we continue to expand and develop our regional portfolio through the RJC.

As a formal Board Committee RJC provides joint leadership for the regional planning, commissioning, and delivery of services for both University Health Boards taking into account the service challenges, financial challenges and population health needs of both organisations and the work previously undertaken through ARCH. The Regional Drive and Delivery Group coordinates joint action. The RJC Programme Management Office coordinates and supports subgroups, planning, delivers programmes, and governance.

SWW Regional Joint Committee

Regional Drive and Delivery Group

Regional Health Economy Subgroup (OB1)

Regional Clinical Services Planning Subgroup (OB2+5)

Regional Workforce and OD Subgroup (OB3)

Regional Data & Digital Subgroup (OB3)

Regional Finance and Contracting Subgroup (OB3)

Regional Research, Innovation & Excellence Subgroup (OB4)

The RJC's Sub-Structure (above) aligns with the 5 agreed objectives within the RJC's current Terms of Reference:

- Objective 1 (OB1): Regional Health Economy Group** – we will drive forward projects that have been identified as priorities for joint working to deliver the Ministerial Priorities. It will consider and prioritise the regional projects included within the RJC's work programme, approve Business Cases pre-sovereign Boards ratification, and identify and agree any further projects for inclusion in the RJC programme to deliver significant in-year progress and pace in delivery within the regional health and care system.
- Objective 2 (OB2): Clinical Services Group** – we will oversee the review of baseline activity undertaken, based on both Health Boards' Clinical Services Plans, focusing on cost efficiencies, quality, and service fragility. Current regional service planning work programme Sub-Groups include Orthopaedics, Ophthalmology, Diagnostics – Cellular Pathology, and Cancer.
- Objective 3 (OB3): Corporate Functions** – we will deliver various themes and enablers that will enable collaboration and achievement of improved service efficiencies and value to deliver the required regional aspirations, including Digital & Data; Workforce & Organisational Development; and Finance & Contracting. These themes and enablers will underpin the RJC to deliver the strategic infrastructure rather than being identified as direct reporting groups.
- Objective 4 (OB4): Regional Research and Innovation Delivery and Oversight Group** – opportunities for research, innovation, excellence, and training opportunities will be driven through this group, working with the three Universities within the region and through partnerships with Universities outside the region where there is benefit to the population. This group will also oversee the required preparatory work to enable the regional health economy to become a designated World Health Organisation sub regional health network, for the RJC to benefit from the shared learning opportunities this will bring.
- Objective 5 (OB5): Regional Capital Programme** – this will and oversee a joint approach to the prioritisation of capital programmes as part of the clinical service plans underpinning the regional health economy approach.

## Subgroup

## Ambitions

## Projects Summary

Regional Clinical Services Planning Subgroup (OB2+5)

- Deliver a more resilient, safer, and equitable services.
- Improve equity of access across the region through a single regional waiting list and standardised pathways.
- Reduce waiting times and backlogs by increasing activity and optimising end-to-end diagnostic capacity.
- Improve patient outcomes through timely diagnostics, targeted pathways and clearer follow-up.
- Strengthen workforce capacity and sustainability
- Standardise protocols to reduce unwarranted variation.

- Orthopaedics
- Eye Care
- Diagnostics – Cellular Pathology
- SWW Cancer Centre Programme
- Vascular Network

# South West Wales Regional Joint Committee (RJC)

## Orthopaedics

| Products/Actions/ Deliverables                                                                                                                        | Quarter | Impact                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------------------------------------------------------------|
| Includes hip, knee, foot and ankle, shoulder and elbow, and hand and wrist—with a current focus on reducing long waits for hip and knee arthroplasty. |         |                                                                   |
| Regional Hand Network within the Day Surgery Unit at Prince Philip Hospital                                                                           | Q1      | Outcome for patients, improved efficiency, regional collaboration |
| Iterative development of the regional Arthroplasty Model complete                                                                                     | Q2      | Outcome for patients, improved efficiency, regional collaboration |
| Integrated regional service, standardised pathways, protocols                                                                                         | Q4      | Outcome for patients, improved efficiency, regional collaboration |

## Vascular & Interventional Radiology

| Products/Actions/ Deliverables                                                                                                                                                                                                                                                                                                                        | Quarter | Impact                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------|
| To develop and deliver a quality vascular service, across the whole pathway and in line with the agreed service specification for the South West Wales Vascular Network, on behalf of its constituent health boards, Swansea Bay UHB (host organisation), Hywel Dda UHB, Cwm Taf Morgannwg UHB (Bridgend area only) and Powys THB (south Powys only). |         |                                                                                |
| Strengthen VIR workforce to support Hybrid and DSA suite – building on the VIR business case submitted to SBUHB BCAG June 2025                                                                                                                                                                                                                        | Q1      | Improved length of stay, intervening earlier, better outcomes                  |
| Submit South West Wales Amputation Reduction Strategy (SWWARS) business case – address Vascular Nurse Specialist (VNS) and Podiatry resourcing                                                                                                                                                                                                        | Q1      | Better outcomes, earlier intervention, reduced amputations, lower waiting list |
| Agreement and sign off SWW Vascular Network (VN) MOU and Service Spec                                                                                                                                                                                                                                                                                 | Q1      | Formally establish SWWVN                                                       |
| Hybrid Theatre delivery – Expected completion September 2026                                                                                                                                                                                                                                                                                          | Q3      | Increased planned care capacity, better outcomes                               |

## Diagnostics – Cellular Pathology

| Products/Actions/ Deliverables                                                                         | Quarter | Impact                                                                                                                                                                                       |
|--------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Develop the case for a new single site and transition to a SWW Regional Pathology ODN                  |         |                                                                                                                                                                                              |
| Submit FBC for a SWW Cellar Pathology Laboratory Site to WG                                            | Q4      | Sets out the case for future investment, Ability to progress to acquisition and implementation of new regional laboratory                                                                    |
| Development of full-service specification for Regional Cellular Pathology Operational Delivery Network | Q4      | Operational functionality of the new regional cellular Pathology team outlined, including function specialist roles like Financial, Workforce and Digital. Underwritten by transitional MoU. |
| Acquisition and development of new Laboratory Site (subject to FBC approval).                          | Q4      | Enabling developments to commence                                                                                                                                                            |
| Development of Regional Cellular Pathology ODN MoU                                                     | Q4      | Outlines the formal agreement for the permanent Regional Cellular Pathology Operational Delivery Network                                                                                     |

## Eye Care

| Products/Actions/ Deliverables                                                                                                               | Quarter | Impact                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------|
| The South West Wales Regional Eye Care Programme is focusing initially on Glaucoma, Cataracts, Medical Retina, and Paediatric Ophthalmology. |         |                                                                      |
| Create a regional dashboard                                                                                                                  | Q1      | Performance and service intel to inform planning and decision making |
| Recruitment two regional consultant posts in Vitreoretinal and Medical Retina                                                                | Q2      | Increase capacity and capability                                     |
| Implement a regional Vitreoretinal service                                                                                                   | Q3      | Improve access to services, patient outcomes, reduced waiting list   |
| Develop and implement a series of targeted service improvements                                                                              | Q4      | Improve access to services, patient outcomes, reduced waiting list   |

## South West Wales Cancer Centre Programme

| Products/Actions/ Deliverables                                                                                                                                                                                                                             | Quarter | Impact                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------|
| Regional radiotherapy and oncology outpatient services modernisation.                                                                                                                                                                                      |         |                                                                                                                           |
| <b>Radiology</b>                                                                                                                                                                                                                                           |         |                                                                                                                           |
| Complete scoping/detailed options appraisal for satellite centre                                                                                                                                                                                           | Q1      | Potential (expansion of Linacs to 7 total in line with D&C) within HDd area or Singleton site.                            |
| Approved business case for additional (5th) Linac                                                                                                                                                                                                          | Q2      | Utilises the current empty bunker at Singleton and includes options to coincide increased 2nd CTSIM capacity as required. |
| Approved business case for additional / spare (6th) Bunker in Singleton to                                                                                                                                                                                 | Q4      | Maintains capacity for next RT Linac replacement due 2028.                                                                |
| <b>Oncology Outpatients</b>                                                                                                                                                                                                                                |         |                                                                                                                           |
| Support HDd in Implementing a sustainable oncology outpatients model for Bronglais                                                                                                                                                                         | Q2      | Improved alignment between outpatient capacity and forecast oncology demand                                               |
| Complete demand modelling and baseline establishment.                                                                                                                                                                                                      | Q2      | Reduced outpatient waits and improved compliance with cancer pathway standards – improved patient experience              |
| Capacity optimisation and pathway redesign – <ul style="list-style-type: none"><li>Agreed regional standards for follow-up, clinic models and workforce utilisation</li><li>Implementation of priority capacity improvements and pathway changes</li></ul> | Q3      | Improved utilisation of specialist workforce                                                                              |
|                                                                                                                                                                                                                                                            | Q4      |                                                                                                                           |

## Regional Delivery Assumptions

- Welsh Government approve funding to produce the Cell Path full business case.
- Programme Manager appointed for Cancer Centre Modernisation.
- Operational Resource availability to support planning and delivery (all programmes).
- Finance, contracting and SLA / LTA models can be agreed – dependency Finance and Contracting Subgroup

# South West Wales Regional Joint Committee (RJC)

## Subgroup

## Ambitions

## Projects / Actions

Regional Health Economy Subgroup (OB1)

- Improve home energy efficiency to reduce health interventions and support independent living.
- Regionally aligned plans amplify activity to drive sustainable systems change and improve health equity.
- Better understand the impact of regional deprivation on current and future healthcare demand.
- Whole Systems Approach addresses healthy weight through regional action on food access and procurement
- Behavioural science approaches are embedded into organisational decision-making, procurement practice and contract design, as well as in public-facing interventions.

- Long-term Regional Health Economy Strategic Approach
- Warm & Healthy Homes
- Healthy Weight – a Regional Whole Systems Approach (WSA)
- Health Intelligence analytics project (with PHW)
- Establish baseline and success metrics

Regional Workforce and OD Subgroup (OB3)

- The right sized and shaped workforce working across organisational and professional boundaries
- Shared expertise enables cross-skilling, knowledge transfer, and faster development of specialist capabilities
- Widening access to programmes (leadership, coaching, mentoring),
- Reduced reliance on temporary staffing and a reduction in variable pay
- Better workforce alignment of population health needs where workforce planning and decisions better match changing demographics, and demand across pathways.

- Regional Leadership Network - virtual collaborative learning, interspersed with physical connectivity sessions
- Joint workforce plans for vulnerable services
- Joint recruitment plans for hard to fill roles/ areas of high variable pay
- A joint workforce impact assessment on the impact of the "left shift", and on the future impact of digital and Artificial Intelligence
- Produce a map of all workforce priorities across both health boards
- Scope Opportunities for Joint Working (x15)

Regional Data & Digital Subgroup (OB3)

- Align around Purpose – Harness digital innovation to empower healthier lives, connect communities, and deliver proactive, equitable care, anytime, anywhere
- Assess the Landscape – HDdUHB and SBUHB with local authority, academic and industry partners.
- Design for Leverage – A codesigned system architecture that strengthens feedback loops between domains, linking population health data to service design, finance, and workforce planning.
- Deliver and Demonstrate – predictive analytics in community care, shared data between health & social care
- Dedicated digital innovation fund –public investment, innovation grants, partnerships, and efficiency gains.

- Develop Agile and Phased Delivery plans and actions to progress priorities
- Regional digital capability and deficit review
- Co-design a system architecture
- Launch a small number of high-leverage pilots at domain interfaces
- Establish a Regional Digital Transformation Board

Regional Finance and Contracting Subgroup (OB3)

- Regional Value through – Building the analytical foundation; Designing from community up, not institution down; Strengthening governance for delivery; Bringing value-based procurement into the regional model.
- Improved capabilities and capacity for resource allocation and value-led activities.
- Improve clinical outcomes and reallocate resource.
- Set the basis for future contracting models and decisions
- Collaborative working across finance functions – learning, finance literacy, training, career development, frameworks/controls, and process alignment

- Contracting redesign
- Set up STAR programme
- Value-based Procurement (Swansea University proposal) delivery
- Diabetes STAR project
- Develop Collaborative working programme

Regional Research, Innovation & Excellence Subgroup (OB4)

- Support the health and social agenda in South-West Wales
- Regional Themes – Mental Health & Learning Disabilities, Population Health & Prevention, Chronic Disease Management, Social Care & Integrated Research, Cancer & Genomics, Rural Health & Digital Innovation
- Regional opportunities for innovation, including with academic partners to be more attractive to trial sponsors
- Optimising use of facilities at local hospital sites and universities and potential to create centres of excellence
- Early adoption site for digital health solutions, regional testbed for AI in imaging, telemedicine, and population health analytics

- Strategic Plan for Regional Model
- Establish Research, Innovation and Excellence Subgroup
- Finalise South-Wales Regional Research and Innovation Partnership Model and Functions

## JOINT HYWEL DDA/SWANSEA BAY UNIVERSITY HEALTH BOARD COMMITTEE CYD-BWRDD IECHYD PRIFYSGOL HYWEL DDA/BAE ABERTAWE PWYLLGOR

|                                                  |                                                                                                                                                 |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DYDDIAD Y CYFARFOD:<br/>DATE OF MEETING:</b>  | 16 April 2026                                                                                                                                   |
| <b>TEITL YR ADRODDIAD:<br/>TITLE OF REPORT:</b>  | Regional Joint Committee Self Assessment Report 2025/2026                                                                                       |
| <b>CYFARWYDDWR ARWEINIOL:<br/>LEAD DIRECTOR:</b> | Joanne Wilson, Director of Corporate Governance/Board Secretary, HDdUHB<br>Hazel Lloyd, Director of Corporate Governance/Board Secretary, SBUHB |
| <b>SWYDDOG ADRODD:<br/>REPORTING OFFICER:</b>    | Alison Gittins, Head of Special Projects, Corporate Governance                                                                                  |

**Pwrpas yr Adroddiad** (dewiswch fel yn addas)

**Purpose of the Report** (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The purpose of the report is to present the outcome of the 2025/26 Committee Self-Assessment process to the Regional Joint Committee.

#### Cefndir / Background

In line with Section 10.2.1 of Standing Orders, the Boards of HDdUHB and SBUHB are required to introduce a process of regular and rigorous self-assessment and evaluation of its own operations and performance and that of its Committees and Advisory Groups.

Given the Regional Joint Committee's status as a Board level Committee, written into its Terms of Reference is the following:

*12.4 The Directors of Corporate Governance, on behalf of the RJC, shall oversee a process of regular and rigorous self-assessment and evaluation of the RJC's performance and operation, including that of any sub-committees established.*

For this first year's self assessment exercise, a short self-assessment form focusing on the following seven core areas of governance and assurance has been issued to all Regional Joint Committee members in order to capture their responses:

#### Committee Oversight

Does the RJC properly consider both Health Boards' service, financial and population health challenges, including the previous work of ARCH?

#### Clinical Service Redesign

Do you feel fully engaged and assured that regional clinical service redesign is clinically led, multidisciplinary, and co-produced?

### Integrated Regional Health Economy

Is the RJC effectively progressing an integrated regional health economy, underpinned by population health needs, equity, and a shared long-term strategy across both Health Boards and partners?

### Governance Arrangements

Do current governance arrangements support your ability to attend meetings, participate constructively, follow up actions, and engage via established communication channels?

### Committee Terms of Reference

Does the agenda and workplan adequately reflect the Committee's Terms of Reference?

### Committee Focus

Does the Committee dedicate the right amount of time to the right areas?

### Improving Committee Effectiveness

Do you have any other suggestions to improve the RJC's effectiveness—for example, member engagement, quality of papers (risk/impact/outcome clarity), or balance of workload between HDdUHB and SBUHB?

## **Asesiad / Assessment**

The self assessment form was circulated to all Regional Joint Committee members to gather feedback on the key areas identified for the Committee.

Respondents were asked to rate their level of agreement to seven statements relating to the key areas of focus for on a scale of 1–5 (1 - strongly disagree up to 5 – strongly agree) and to provide more information to support their rating.

Below are the statements relating to the seven key areas of focus for the Committee and the average ratings based on the number of responses (15 out of 23) i.e. a 65% response rate.

| Area and Statement                                                                                                                                                                                                                                    | Average Rating |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>Committee Oversight</b><br><i>Does the RJC properly consider both Health Boards' service, financial and population health challenges, including the previous work of ARCH?</i>                                                                     | 3.80%          |
| <b>Clinical Service Redesign</b><br><i>Do you feel fully engaged and assured that regional clinical service redesign is clinically led, multidisciplinary, and co-produced?</i>                                                                       | 3.60%          |
| <b>Integrated Regional Health Economy</b><br><i>Is the RJC effectively progressing an integrated regional health economy, underpinned by population health needs, equity, and a shared long-term strategy across both Health Boards and partners?</i> | 3.27%          |
| <b>Governance Arrangements</b><br><i>Do current governance arrangements support your ability to attend meetings, participate constructively, follow up actions, and engage via established communication channels?</i>                                | 4.20%          |
| <b>Committee Terms of Reference</b><br><i>Does the agenda and workplan adequately reflect the Committee's Terms of Reference?</i>                                                                                                                     | 4.13%          |
| <b>Committee Focus</b>                                                                                                                                                                                                                                | 3.87%          |

|                                                                                                                                                                                                                                                           |       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| <i>Does the Committee dedicate the right amount of time to the right areas?</i>                                                                                                                                                                           |       |
| <b>Improving Committee Effectiveness</b><br><i>Do you have any other suggestions to improve the RJC's effectiveness—for example, member engagement, quality of papers (risk/impact/outcome clarity), or balance of workload between HDdUHB and SBUHB?</i> | 3.40% |

The following themes were provided:

#### **What has gone well:**

- Strong foundations and early progress with the RJC making a solid start and achieving more than expected, partly due to building on existing ARCH work.
- Constructive collaborative relationships and improved joint working on clinical service areas; examples such as regional pathology highlighted as demonstrating strong engagement, joint working, and co-production.
- Effective meeting arrangements and governance support i.e. scheduled well in advance with hybrid meeting options available; papers generally timely, helpful for scrutiny and jointly prepared with decision papers aligned for approval across both Boards.
- Commitment to long-term regional working recognising a clear strategic intent to progress an integrated regional health economy and acknowledging the platform now in place to take this forward.
- Constructive, balanced committee focus commensurate with the RJC's current state of development with several respondents highlighting a good balance between future visioning and updates on existing work programmes.

#### **What we want to strengthen going forward:**

- Strengthen strategic and operational understanding of shared service, financial and population health challenges across both Health Boards.
- Accelerate the development of an integrated regional health economy to clarify and articulate a shared long-term regional strategy to improve organisational understanding of the regional approach.
- Create space for strategic thinking and visioning with the potential to hold an RJC Away Day to collectively explore the long-term vision and strategic intent.
- Create more opportunities at both Boards for a reflection on regional working progress with the suggestion this could be through the triple A reporting approach
- Strengthen clinical leadership, visibility and co-production in redesign programmes to demonstrate multidisciplinary involvement, engagement and ownership.
- Ensure a balanced workload and equitable contribution to regional working by keeping the workload between HDdUHB and SBUHB under review, particularly in light of recent SBUHB leadership changes which has led to additional work being taken forward by HDdUHB, and to ensure that regional work becomes core business rather than additional work.
- Strengthen governance clarity and operational capacity by further defining and maturing the regional governance routes particularly as more work moves into delivery, and by addressing capacity constraints from a leadership, operational and PMO perspective to ensure work is taken forward at the right level with actions and risks clearly articulated and followed through.
- Improve project management discipline for joint working to improve assurance and to enable the RJC to monitor progress more robustly through, for example, standardised Project Initiation Documents (PIDs); clear deliverables, timelines and schedules; more consistent monitoring and reporting templates for progress updates on joint schemes.

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- Shift reporting from activity-focused to outcome and impact-focused assurance through a clearer articulation of outcomes and impact, not simply activity.
- Strengthen governance and meeting assurance by introducing Triple-A summaries (Assurance, Action, Achievement) at the end of each RJC agenda item to strengthen assurance to Boards.

## Overall Conclusion

The first year of the Regional Joint Committee is viewed as showing solid early progress, a clear commitment to collaboration, and strong foundations across many areas of its remit.

Feedback highlights that the Committee is functioning well, is positively regarded by members, and has already enabled more structured regional working.

However, the assessment also identifies important areas for improvement to strengthen effectiveness, impact, and shared regional ambition.

| Area for Improvement                                                                                                                                                                                                                              | By Whom                                                    | By When                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------|
| Undertake a more explicit, structured examination of joint service, financial and population-health challenges to strengthen both strategic and operational understanding.                                                                        | Executive Leads for Service, Finance and Population-Health | October 2026             |
| Secure access to specialist and non-specialist population-health expertise for skills in analysis, evaluation, engagement and wider determinants to further the evidence-based work necessary to progress the integrated regional health economy. | Directors of Public Health                                 | August 2026              |
| Consider the benefits of holding an RJC Away Day or dedicated session to discuss the long-term ambition and future direction of the RJC.                                                                                                          | RJC Co-Chairs                                              | October 2026S            |
| Subject to agreement by both Chairs, invite specialty leads to present at RJC meetings where discussions relate to their service areas to strengthen clinical leadership, visibility and co-production.                                           | Medical Directors/RJC PMO                                  | 23 July 2026 RJC Meeting |
| Review the workload balance between HDdUHB and SBUHB to ensure an equitable contribution to regional working.                                                                                                                                     | Chief Executives SBUHB and HDdUHB                          | August 2026              |
| Address capacity constraints from a leadership, operational and RJC PMO perspective to ensure work is taken forward at the right level with actions and risks clearly articulated and followed through.                                           | Chief Executives SBUHB and HDdUHB                          | August 2026              |
| Apply stronger project management discipline for joint work through standardised processes and                                                                                                                                                    | RJC PMO                                                    | 23 July 2026 RJC Meeting |

|                                                                                                                           |                                                           |                             |
|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------|
| consistent reporting templates for progress updates on joint schemes.                                                     |                                                           |                             |
| Further improve clarity in papers on objectives, deliverables, timescales, risk, impact and outcomes not simply activity. | RJC<br>PMO/Directors of<br>Planning                       | 23 July 2026 RJC<br>Meeting |
| Introduce Triple A summaries at the end of each RJC agenda item to strengthen the assurance to Boards.                    | RJC Co-<br>Chairs/Directors of<br>Corporate<br>Governance | 23 July 2026 RJC<br>Meeting |

### Argymhelliad / Recommendation

The Committee is asked to:

- **CONSIDER** the outputs from the Regional Joint Committee Self-Assessment process, and
- **AGREE** to the actions to be taken to improve its effectiveness.

| Amcanion: (rhaid cwblhau)<br>Objectives: (must be completed)                                               |                                                                                                                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Committee ToR Reference:<br>Cyfeirnod Cylch Gorchwyl y Pwyllgor:                                           | 12.4 The Directors of Corporate Governance, on behalf of the RJC, shall oversee a process of regular and rigorous self-assessment and evaluation of the RJC's performance and operation, including that of any sub-committees established. |
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:<br>Datix Risk Register References and Scores:               | Not Applicable                                                                                                                                                                                                                             |
| Parthau Ansawdd:<br>Domains of Quality<br><a href="#">Quality and Engagement Act (sharepoint.com)</a>      | Not Applicable                                                                                                                                                                                                                             |
| Galluogwyr Ansawdd:<br>Enablers of Quality:<br><a href="#">Quality and Engagement Act (sharepoint.com)</a> | Not Applicable                                                                                                                                                                                                                             |
| Amcanion Strategol y BIP:<br>UHBs Strategic Objectives:                                                    | Not Applicable                                                                                                                                                                                                                             |
| Amcanion Cynllunio<br>Planning Objectives                                                                  | Not Applicable                                                                                                                                                                                                                             |

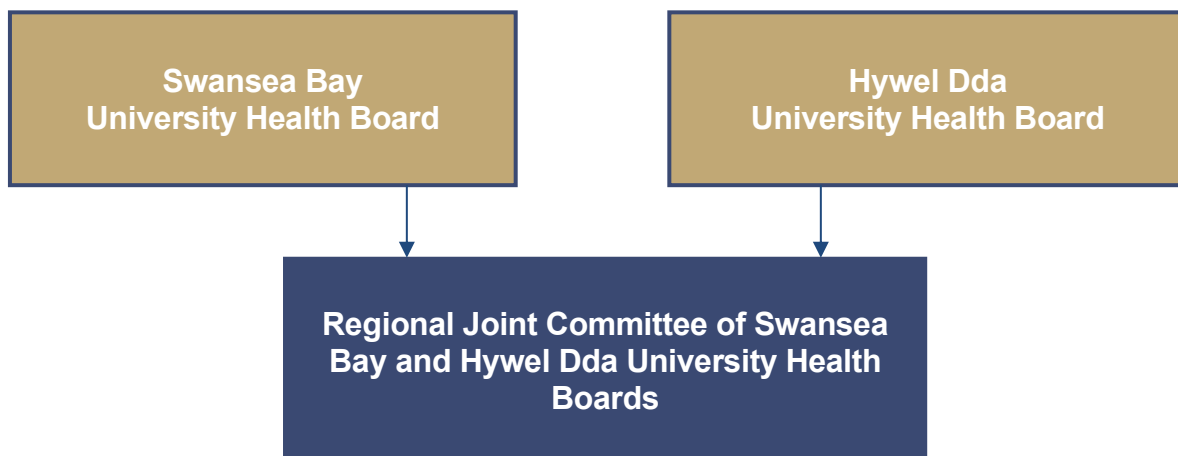
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|                                                                                                                                            |                    |
| Amcanion Llesiant BIP:<br>UHBs Well-being Objectives:<br><a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a> | 10. Not Applicable |

| Gwybodaeth Ychwanegol:<br>Further Information:                                                                                    |                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Ar sail tystiolaeth:<br>Evidence Base:                                                                                            | RJC Terms of Reference<br>RJC Self-Assessment Digital Form Results                               |
| Rhestr Termiau:<br>Glossary of Terms:                                                                                             | Contained within the body of the report                                                          |
| Partïon / Pwyllgorau yr<br>ymgyngorwyd â nhw cyn y<br>Cydbwyllgor:<br>Parties / Committees consulted prior<br>to Joint Committee: | Co-Chairs of the RJC<br>Directors of Corporate Governance/Board Secretaries,<br>HDdUHB and SBUHB |

| Effaith: (rhaid cwblhau)<br>Impact: (must be completed)           |                   |
|-------------------------------------------------------------------|-------------------|
| <b>Ariannol / Gwerth am Arian:</b><br><b>Financial / Service:</b> | No direct impacts |
| <b>Ansawdd / Gofal Claf:</b><br><b>Quality / Patient Care:</b>    | No direct impacts |
| <b>Gweithlu:</b><br><b>Workforce:</b>                             | No direct impacts |
| <b>Risg:</b><br><b>Risk:</b>                                      | No direct impacts |
| <b>Cyfreithiol:</b><br><b>Legal:</b>                              | No direct impacts |

|                                          |                   |
|------------------------------------------|-------------------|
| <b>Enw Da:</b><br><b>Reputational:</b>   | No direct impacts |
| <b>Gyfrinachedd:</b><br><b>Privacy:</b>  | No direct impacts |
| <b>Cydraddoldeb:</b><br><b>Equality:</b> | No direct impacts |

Dart Carolyn  
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## REGIONAL JOINT COMMITTEE OF SWANSEA BAY AND HYWEL DDA UNIVERSITY HEALTH BOARDS

### TERMS OF REFERENCE

| Version | Issued To                                                                                               | Date       | Comments    |
|---------|---------------------------------------------------------------------------------------------------------|------------|-------------|
| V1.0    | Inaugural meeting of the Regional Joint Committee of Swansea Bay and Hywel Dda University Health Boards | 15/01/2025 | For Comment |
| V.1     | The Boards of Swansea Bay and Hywel Dda University Health Boards                                        | 30/01/2025 | Approved    |
| V.2     | The Boards of Swansea Bay and Hywel Dda University Health Boards                                        | 29/05/2025 | Approved    |
| V.3     | Regional Joint Committee of Swansea Bay and Hywel Dda University Health Boards                          | 16/04/2025 | For Comment |

Dart: Carolyn  
28/07/2026 14:54:27

## REGIONAL JOINT COMMITTEE OF SWANSEA BAY AND HYWEL DDA UNIVERSITY HEALTH BOARDS

### 1. Constitution

- 1.1 The Regional Joint Committee (RJC) has been established as a Joint Committee of Swansea Bay and Hywel Dda University Health Boards and constituted from 15 January 2025.

### 2. Purpose

- 2.1 The RJC has been established to:
- 2.1.1 Provide joint leadership for the regional planning, commissioning, and delivery of services for Swansea Bay University Health Board and Hywel Dda University Health Board taking into account the service challenges, financial challenges and population health needs of both organisations and the work previously undertaken through ARCH.
  - 2.1.2 Establish a regional approach to the development of clinical services planning, aligned to regional population health needs assessments, to develop and deliver sustainable services in terms of achieving quality and outcome measures, workforce and financial sustainability.
  - 2.1.3 Prioritise the in-year 2024/2025 efficiencies and identifying priorities for the longer term/2027-28 2025-2028 IMTPs for both organisations, where a regional approach will deliver benefit in the short term.
  - 2.1.4 Explore how the benefits of a regional health economy are harnessed to best serve a population of over 800,000.
    - 2.1.4.1 In the short term focus on intensifying baseline work, supporting the in-year financial position of both Boards, impacting also on cost effectiveness, and waiting list management.
    - 2.1.4.2 In the medium term expand on the short-term gains in the 2025-28 2026/27 annual planning IMTP process, developing the West Wales Regional Health Economy concept, using a 'discovery' approach through use of a broader data set and benchmarking against other UK/International models and becoming a designated WHO Sub regional health network.
    - 2.1.4.3 Within the next three years have an integrated approach to services across the Regional Health Economy, with an embedded population health and needs assessment that centres on health improvement and health inequities reduction. Both Boards, organisations, populations, and partners would be signed up to a Regional Health Economy long term strategy.

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### 3. Objectives

The following objectives are within the scope of the RJC:

#### 3.1 Core Objectives

- 3.1.1 Develop a plans **that are** aligned to Health Board plans to ensure the benefits of a regional health economy for a population of **circa** ~~over~~ 800,000 are realised.
- 3.1.2 Bring together in one place all the projects, which will deliver significant in-year progress and pace in delivery in the health and care system for the region.
- 3.1.3 Drive forward a range of projects that have been identified by partner organisations as priorities for joint working at pace to deliver Ministerial Priorities as part of a suite of integrated **RJC subgroup** programmes that deliver against the strategic aims and objectives agreed by the RJC and ratified by both sovereign Boards.
- 3.1.4 Seek assurance that all the RJC **subgroups and programmes** ~~projects~~ are aligned with respective University Health Board strategic priorities, clinical service plans, the strategic direction of Welsh Government and other partners (**Powys Teaching Health Board, other** University Health Boards, Mid and West Wales **Joint Committee** ~~health and social care committee~~), remaining cognisant of, and responding to the changing requirements within the wider environment of the Health Service in Wales.
- 3.1.5 Maximise the use of digital technology and data to transform the delivery services and improve patient experience.
- 3.1.6 ~~Consider and prioritise the regional projects included~~ **Seek assurance that all RJC subgroup programmes are aligned** within the RJC programme of work, **endorsing** ~~approving~~ Business Cases pre-Sovereign Bodies approval ~~ratification~~, and identifying and agreeing any further projects to be included in the RJC programme.
- 3.1.7 Seek assurance **that RJC subgroups** ~~projects~~ deliver against their outcomes and timescales, and deliver against the quality measures and ~~programme~~ benefits, as identified in **the RJC subgroups portfolios and plans** ~~their PIDs and or Business Cases~~.
- 3.1.8 Manage high-level interdependencies and risks associated with all the RJC **subgroups and** ~~projects~~ and consider in the context of the wider ~~more~~ strategic regional ~~population health~~ plan, ensuring consistency, compatibility, and co-ordination between **RJC subgroups and** ~~programmes~~ of work.
- 3.1.9 ~~Provide a vehicle to~~ **Progress RJC subgroup** work programmes within the remit of the RJC without unnecessary recourse elsewhere to ensure pace.
- 3.1.10 Seek assurance integrated impact assessments are undertaken of all planned service change and embedded in the ways of working.
- 3.1.11 **Seek assurance that all subgroups' plans and resources are prioritised and coordinated to deliver the Clinical Services Planning subgroup's clinical transformation programmes and improved outcomes for patients to ensure the RJC's**

delivery is aligned with expectations set by Senedd Ministers, Welsh Government officials, and the Health Boards' Annual Plans.

### 3.2 Regional Health Economy

- 3.2.1 Seek assurance that a long-term Regional Health Economy Strategic Plan is produced that provides a shared regional direction and enables coordinated, equitable system change.
- 3.2.2 Seek assurance that a shared regional health profile is established which identifies the key drivers of health inequality and future healthcare demand across the region and is routinely used to inform regional planning.
- 3.2.3 Oversee the required preparatory work enabling the regional health economy to become a designated WHO sub regional health network so that the RJC can benefit from the shared learning opportunities afforded by participation in the network.

### 3.3 Clinical Services Planning

- 3.3.1 Seek assurance that regional clinical service programmes and models are developed and delivered, which improve resilience, equity of access and outcomes across South West Wales.
- 3.3.2 Seek assurance that processes and governance are in place where SBUHB and HDdUHB work in partnership to commission and deliver a wide range of services-contracting arrangements via the Long Terms Agreements (LTAs) or Service Level Agreements (SLAs) on a regional basis, including work commissioned by the Joint Commissioning Committee and to explore opportunities for joint commissioning from other providers.
- 3.3.3 Seek assurance that a consistent, intelligence-led approach to regional clinical service planning and investment decisions is in place.
- 3.3.4 Seek assurance that the Health Boards Clinical Services Strategic Plans are aligned in line with Ministerial Priorities in delivering 'A Healthier Wales'.
- 3.3.5 Seek assurance that regional Cellular Pathology and SWW Cancer capital planning programmes are delivered to plan and cost, aligned with and deliver regional priorities, efficiency gains, and positively impact on patient services and outcomes (*replaces the Regional Capital Programme Objective below*).

~~Review baseline activity, based on both clinical services plans, focusing on cost efficiencies, quality, and service fragility. Commencing with regional optimisation in terms of orthopaedics, ophthalmology, stroke services, urology, and upper GI services.~~

### 3.4 ~~Regional Capital Programme~~

- ~~3.4.1 Develop and oversee a joint approach to prioritisation of capital programmes which underpin the regional health economy approach.~~

### 3.5 Research, Innovation and Excellence

- 3.5.1 Drive research, innovation, excellence, and training opportunities across the regional health economy through working with all Universities within the region and consider partnership with other Universities, outside of the region, where there is benefit to our population.
- 3.5.2 Develop a joint research development and innovation strategic plan and bring together joint capability and capacity to deliver the plan. **This should include an equitable approach to trials access across the region and enhanced industry links to benefit research and innovation.**

### 3.6 Workforce & OD

3.6.1

### 3.7 Finance & Contracting

3.7.1

### 3.8 Data & Digital

- 3.8.1 **Seek assurance that digital solutions will be delivered that directly enable service transformation and improve user experience, while systematically identifying and removing sources of digital friction. This will focus on streamlining workflows, improving system usability and access, reducing reliance on manual or paper-based processes, and addressing barriers that frustrate staff and patients or slow the delivery of care.**

### Corporate Functions

- ~~3.3.1 Review baseline activity, based on both corporate services plans enabling collaboration and achieve improved service efficiencies and value.~~

## 4. Engagement

- 4.1 The RJC will take a 'people first' approach – putting patients, our communities and our Health Boards' colleagues at the centre of our work.
- 4.2 The RJC will, in respect of the joint projects, initiatives or developments, consider the patient, public and stakeholder engagement requirements, and provide assurance and advice to the respective Health Boards on engagement and communication activities.
- 4.3 Promote patient and public engagement in the review and redesign of NHS services ensuring that the RJC can evidence where patient experience has influenced change.
- 4.4 The RJC will ensure team colleagues are fully engaged, and our clinical service redesign work is clinically led, with a multi-disciplinary approach, based on co-production and organisational development principles.
- 4.5 Promote understanding of the aims, objectives, and deliverables of the RJC programme.

- 4.6 Ensure continued engagement with Llais in both partner organisations.
- 4.7 Develop a communications plan ensuring stakeholder updates are provided after each RJC meeting.

**5. Governance**

- 5.1 The RJC will operate in accordance with the design principles (agreed set of rules defining purpose through intention and behaviour) which have been agreed by both Boards in November 2024. The benefits of using design principles are as follows:
- They will embed our values in our behaviours and actions;
  - They will provide a compass point when conflict or disagreement occurs;
  - They will ensure we are consistent in what we say and do; and
  - They are universally understood and accepted.

The design principles agreed by both Boards are:

|         |                                                                                                                                              |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Mindset | Trusting each other to do the right thing and to act with courage and conviction.                                                            |
| Process | Driven by data and evidence and embracing opportunities to re-imagine, redesign and innovate Sustainability of the architecture              |
| Outcome | Building sustainable and future proofed services that have the greatest impact and are in the best interests of all communities and patients |

- 5.2 Ensure an effective governance framework is in place to govern the work of the RJC, which facilitates and enables the ambitions and design principles set out by the RJC.
- 5.2 Pro-actively manage the appropriate risks identified within the RJC programme, being accountable to the respective University Health Boards.
- 5.3 Develop a work programme that underpins the work of the RJC.

**6. Membership**

- 6.1 To ensure the RJC undertakes its role effectively, its members are asked to:
- 6.1.1 Attend quarterly meetings.
  - 6.1.2 Adopt an open and constructively challenging approach within meetings.
  - 6.1.3 Promptly follow up on actions and commitments; and
  - 6.1.4 Participate in electronic and virtual channels established to allow a continuous flow of information between committee members.
- 6.2 Membership of the RJC shall comprise:

| Member                          | Organisation                        |
|---------------------------------|-------------------------------------|
| Chair (RJC Joint Chair)         | Swansea Bay University Health Board |
| Chair (RJC Joint Chair)         | Hywel Dda University Health Board   |
| Independent Member (Finance)    | Swansea Bay University Health Board |
| Independent Member (Quality)    | Hywel Dda University Health Board   |
| Independent Member (Governance) | Swansea Bay University Health Board |

|                                                                                                                  |                                                                                  |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Independent Member (Planning/Digital)                                                                            | Hywel Dda University Health Board                                                |
| Independent Member (Digital)                                                                                     | Swansea Bay University Health Board                                              |
| Independent Member (Community)                                                                                   | Hywel Dda University Health Board                                                |
| <b>In Attendance</b>                                                                                             |                                                                                  |
| Vice Chair                                                                                                       | Swansea Bay University Health Board                                              |
| Vice Chair                                                                                                       | Hywel Dda University Health Board                                                |
| Chief Executive Officer                                                                                          | Swansea Bay University Health Board                                              |
| Chief Executive Officer                                                                                          | Hywel Dda University Health Board                                                |
| Chief Operating Officer                                                                                          | Swansea Bay University Health Board                                              |
| Chief Operating Officer                                                                                          | Hywel Dda University Health Board                                                |
| Executive Director of Strategy and Planning                                                                      | Swansea Bay University Health Board                                              |
| Executive Director of Strategy and Planning                                                                      | Hywel Dda University Health Board                                                |
| Executive Director of Finance                                                                                    | Swansea Bay University Health Board                                              |
| Executive Director of Finance                                                                                    | Hywel Dda University Health Board                                                |
| Executive Director of Workforce and OD                                                                           | Swansea Bay University Health Board                                              |
| Executive Director of Workforce and OD                                                                           | Hywel Dda University Health Board                                                |
| Executive Medical Director                                                                                       | Swansea Bay University Health Board                                              |
| Executive Medical Director                                                                                       | Hywel Dda University Health Board                                                |
| <b>Governance Advice</b>                                                                                         |                                                                                  |
| Director of Corporate Governance                                                                                 | Swansea Bay University Health Board or Hywel Dda University Health Board         |
| <b>Associate Member</b>                                                                                          |                                                                                  |
| Chair                                                                                                            | Powys THB                                                                        |
| <b>Observer Members</b>                                                                                          |                                                                                  |
| Director of Operations                                                                                           | Welsh Government's Health, Social Care, and Early Years Executive Directors Team |
| Director of Planning                                                                                             | Welsh Government's Health, Social Care, and Early Years Executive Directors Team |
| <b>Invitation to attend to discuss work programme areas requiring wider collaboration (as and when required)</b> |                                                                                  |
| As and when required                                                                                             |                                                                                  |

- 6.3 The RJC will be jointly chaired by the Chairs from Swansea Bay and Hywel Dda University Health Boards.
- 6.4 Membership of the RJC will be reviewed on an annual basis.
- 6.5 The RJC will be supported by a dedicated Programme Management Office (PMO).

## 7. Quorum and Attendance

- 7.1 A quorum shall consist of a Chair or Independent Member from both partner organisations plus a third of the in-attendance membership.
- 7.2 The membership of the RJC shall be determined by each partner organisation, considering the balance of skills and expertise necessary to deliver the Joint Committee's remit, and subject to any specific requirements or directions made by Welsh Government.
- 7.3 Any senior officer of the UHBs or partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting to assist with discussions on a particular matter.

- 7.4 The RJC may also co-opt additional independent external “experts” from outside the organisation to contribute to specialised areas of discussion.
- 7.5 Should any member be unavailable to attend, they may nominate a deputy to attend in their place, subject to the agreement of both Co-Chairs.
- 7.6 The RJC may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

## 8. Agenda and Papers

- 8.1 The Committee Secretary is to hold an agenda setting meeting with the Chair at least six weeks before the meeting date.
- 8.2 The agenda will be based around the RJC’s work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year, and requests from members.
- 8.3 All papers must be approved by the Lead/ relevant Director.
- 8.4 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting.
- 8.5 ~~A draft Table of Actions will be issued within two days of the meeting.~~ The minutes and action log will be circulated to members within seven days to check the accuracy, prior to sending to Members (including the RJC Chair) to review within the next seven days.
- 8.6 Members must forward amendments to the Committee Secretary within the next seven days. The Committee Secretary will then forward the final version to the RJC Chair for approval.

## 9. In Committee

- 9.1 The RJC can operate with an In Committee function to receive updates on the management of sensitive and/or confidential information.

## 10. Frequency of Meetings

- 10.1 The RJC will meet quarterly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair of the RJC.
- 10.2 The Chair of the RJC, in discussion with the Committee Secretary, shall determine the time and the place of meetings of the RJC and procedures of such meetings.

## 11. Accountability, Responsibility and Authority

- 11.1 Although, as set out within these terms of reference, each University Health Board has delegated authority to the RJC for the exercise of certain functions, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens, through the effective governance of the organisation. ~~It is expected that following a statement on 19 March 2024 by the then Cabinet Secretary, a Ministerial Direction will~~

~~be issued, once received this may require further changes to the governance arrangements.~~

- 11.2 The RJC is directly accountable to the respective University Health Board's for its performance in exercising the functions set out in these terms of reference.
- 11.3 The requirements for the conduct of business as set out in each University Health Board's Standing Orders are equally applicable to the operation of the RJC.
- 11.4 The RJC will operate in accordance with the principles approved by both sovereign bodies.

## **12. Reporting**

- 12.1 The RJC may establish sub-committees, groups or task and finish groups to carry out on its behalf specific aspects of RJC business. The RJC will receive an update following each group's meetings detailing the business undertaken on its behalf.
- 12.2 The RJC will report through the RJC updates to respective Boards, and for HDdUHB align to the work programme of Committee responsible for planning.
- 12.3 Regular joint updates will be provided to respective Llais organisations which will be based upon the committee's work programme and meetings.
- 12.4 The Directors of Corporate Governance, on behalf of the RJC, shall oversee a process of regular and rigorous self-assessment and evaluation of the RJC's performance and operation, including that of any sub-committees established.

## **13. Secretarial Support**

- 13.1 The Committee Secretariat shall be provided by the RJC PMO.

## **14. Review Date**

- 14.1 These terms of reference and operating arrangements shall be reviewed on at least an annual basis by the RJC for approval by the respective University Health Boards.

Dart Carolyn  
28/07/2026 14:54:27

## Hywel Dda University Health Board and Swansea Bay University Health Board

### Regional Joint Committee Meeting

#### DRAFT Minutes

Thursday 22<sup>nd</sup> January 2026 9.30am-12.30pm  
Conference Room, Beacon Centre of Enterprise, Dafen, Llanelli

#### SWANSEA BAY UNIVERSITY HEALTH BOARD

##### **Present:**

|                  |      |                                    |
|------------------|------|------------------------------------|
| Jan Williams     | (JW) | Chair (Joint Chair of the meeting) |
| Jean Church      | (JC) | Independent Member                 |
| Andrew Griffiths | (AG) | Independent Member                 |
| Patricia Price   | (PP) | Independent Member                 |

##### **In Attendance:**

|                    |      |                                                                |
|--------------------|------|----------------------------------------------------------------|
| Abigail Harris     | (AH) | Chief Executive                                                |
| Richard Evans      | (RE) | Executive Medical Director & Deputy Chief Executive            |
| Darren Griffiths   | (DG) | Executive Director of Finance and Performance                  |
| Matt John          | (MJ) | Director of Digital                                            |
| Deb Lewis          | (DL) | Chief Operating Officer                                        |
| Gillian Richardson | (GR) | Interim Executive Director of Public Health                    |
| Tina Ricketts      | (TR) | Executive Director of Workforce and Organisational Development |

##### **Apologies:**

|                   |      |                                                    |
|-------------------|------|----------------------------------------------------|
| Marie Davies      | (MD) | Executive Director of Planning and Partnerships    |
| Christine Morrell | (CM) | Executive Director of Therapies and Health Science |
| Steve Spill       | (SS) | Vice Chair                                         |
| Hazel Lloyd       | (HL) | Director of Corporate Governance                   |

#### HYWEL DDA UNIVERSITY HEALTH BOARD

##### **Present:**

|                |      |                                         |
|----------------|------|-----------------------------------------|
| Eleanor Marks  | (NW) | Vice Chair (Joint Chair of the meeting) |
| Maynard Davies | (MD) | Independent Member                      |
| Chantal Patel  | (CP) | Independent Member                      |
| Sarah Harraway | (SH) | Independent Member                      |

##### **In Attendance:**

|                   |      |                                     |
|-------------------|------|-------------------------------------|
| Philip Kloer      | (PK) | Chief Executive                     |
| Andrew Carruthers | (AC) | Chief Operating Officer             |
| Ardiana Gjini     | (AG) | Executive Director of Public Health |

|                   |       |                                                                                           |
|-------------------|-------|-------------------------------------------------------------------------------------------|
| Lisa Gostling     | (LG)  | Deputy Chief Executive and Executive Director of Workforce and Organisational Development |
| Huw Thomas        | (HT)  | Executive Director of Finance                                                             |
| Lee Davies        | (LD)  | Executive Director of Strategy and Planning                                               |
| Mark Henwood      | (MH)  | Executive Medical Director                                                                |
| Joanne Wilson     | (JWi) | Director of Corporate Governance/Board Secretary                                          |
| Anthony Tracey    | (AT)  | Director of Digital                                                                       |
| <b>Apologies:</b> |       |                                                                                           |
| Neil Wooding      | (NW)  | Chair                                                                                     |

| Other Organisations                |      |                                                                                 |
|------------------------------------|------|---------------------------------------------------------------------------------|
| <b>In Attendance:</b>              |      |                                                                                 |
| Carl Cooper<br>(Associate Member)  | (CP) | Chair, Powys Teaching Health Board                                              |
| Samia Edmonds<br>(Observer Member) | (SE) | Planning Programme Director, Health and Social Services Group, Welsh Government |
| Siôn Charles                       | (SC) | RJC Head of Strategy and Service Planning                                       |
| Carolyn Dart                       | (CD) | RJC Senior Project Support Officer                                              |
| <b>Apologies:</b>                  |      |                                                                                 |
| Jeremy Griffith                    | (JG) | Director of Operations, Health and Social Care Early Years, Welsh Government    |
| Sophie Marr                        | (SM) | RJC Senior Project & Business Manager (Secretariat)                             |

| WORKSHOP SESSION                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>RJC/01</b>                        | <b>Public Health Behaviour Change Unit: Mobilising the System to Promote Health Weight Intelligence in Health Wellbeing</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Dart, Carolyn<br>28/07/2026 14:54:22 | Ardiana Gjini (AG) informed the Committee of the work streams within the Regional Health Economy and the support given by Public Health Wales (PHW) and the Behavioural Science Unit for Wales. Jonathan West (JW) PHW provided an overview of behavioural science, including the COM-B model of behaviour change, the importance of physical and social opportunity, the distinction between reflective and automatic behaviours, and the application of the Nuffield Intervention Ladder. The Committee was advised that behavioural science should be applied systematically to identify the |  |

behaviours required for system change and to select appropriate interventions.

Jonathan Tench (JT) presented findings from the Future Generations Report relating to food systems, highlighting that food and diet are not currently embedded within national well-being goals, despite their central importance to health, environmental sustainability and future food security. Key recommendations included the development of a Welsh national food strategy, expansion of food literacy, improvements in school meals, restrictions on unhealthy food promotion, and strengthening local sustainable procurement.

Gillian Richardson (GR) provided an update on the Healthy Weight: Healthy Wales regional programme. Current data shows that 61–63% of adults and 25.5% of children aged 4–5 are overweight or obese across the region. The Committee was informed that inequalities remain significant, and that progress requires coordinated system-wide action across Public Services Boards (PSBs), local authorities, the health boards and community partners. Work is ongoing on food access, affordability, procurement, and the progression of a regional PSB workshop scheduled for March 2026.

### **SUMMARY**

Members discussed the below questions at individual tables.

1. What are the common challenges and key priority areas to ensure the commitment, buy-in and leadership required to make a whole systems approach a reality across the region?
  - i) What structural barriers currently prevent us from working as a true system, rather than individual organisations?
  - ii) Addressing the issue of healthy weight through the food system is a long-term endeavour – how will we know we are going in the right direction?
  - iii) Are we sufficiently sighted on how the current food system contributes to poor health and health inequalities in our population?
  - iv) Does food currently sit within, or outside the priorities of the committee?
- 2) Procurement is identified as a significant leverage point to achieve the regional vision. How can Health Boards leverage

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| <p>Dart Carolyn<br/>28/07/2026 14:54:27</p> | <p>their procurement practices to foster and demonstrate this commitment?</p> <ul style="list-style-type: none"> <li>i) What small changes, routinely implemented could have a greater system-wide impact?</li> <li>ii) If there was one thing this committee could do in the next 6-12 months to accelerate a whole-system approach, what would it be?</li> </ul> <p>Members produced notes of these discussions that will inform Regional Health Economy plans and next steps.</p> <p><b><u>ACTIONS/AGREEMENTS</u></b></p> <ul style="list-style-type: none"> <li>• Agreed: behaviour change should be considered at the level of individuals, organisations and the wider system. Members highlighted the need to apply behavioural science within organisational decision-making, procurement practice and contract design, as well as in public-facing interventions.</li> <li>• Agreed: that Regional Health Economy Workstreams should embed behavioural science principles, including COM-B and environmental opportunity design, into programme plans.</li> <li>• Agreed: that Healthy Weight Healthy Wales and Regional Health Economy workstreams should align their planned activities with the Future Generations Commissioner's food system recommendations.</li> <li>• Agreed: that Healthy Weight Healthy Wales workstream incorporates behavioural science and Future Generations principles into the March 2026 PSB regional workshop and into revised programme documentation.</li> <li>• <b>ACTION:</b> GR and AG to ensure that Public Health teams from both health boards, in collaboration with Public Health Wales, produce a regional inequalities profile for presentation at a future RJC meeting.</li> <li>• <b>ACTION:</b> GR and AG to liaise with the Future Generations Office to integrate national food-systems guidance into the workshop planned for March 2026.</li> <li>• <b>ACTION:</b> GR and AG to liaise with PSBs to ensure PSBs continue joint work on food access, affordability and sustainable procurement, with progress reported to RJC in April 2026.</li> </ul> | <p>GR/<br/>AG</p> <p>GR/<br/>AG</p> <p>GR/<br/>AG</p> |
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### PART 3: PRELIMINARY MATTERS

|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
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| <b>RJC/02</b> | <b>Welcome and Apologies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
|               | <p>Eleanor Marks (EM) warmly welcomed members, those in attendance, and observers from Swansea Bay University Health Board, Hywel Dda University Health Board, Powys Teaching Health Board, Public Health Wales, and Welsh Government to the fourth Regional Joint Committee Meeting. Apologies received were noted as above.</p> <p>EM reminded members of about the Committee's decision making principles, checked with members that all papers are clear and comprehensive, with nothing omitted from the papers. EM reminded members of the Committee's design principles and the need to provide fair, affordable and sustainable care, whilst being consistent with our strategy.</p> <p>JW advised that updates will be received in the Triple A format and asked presenters to ensure to detail mitigations.</p> |  |

### PART 4: TO RECEIVE SUBGROUP ASSURANCE REPORTS

|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
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| <b>RJC/03</b> | <b>Regional Health Economy Subgroup Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
|               | <p>GR provided an update to the Committee on the progress within the Regional Health Economy subgroup. The group is focusing on People, Place, Procurement and Partnerships – the Four Ps.</p> <p>Milestones have been set for each workstream, with bi-monthly steering group meetings and a stakeholder engagement workshop planned for March 2026.</p> <p>There are some Health Intelligence needs, with and the mitigation in the form of support requested from PHW to consider the inequalities on system need.</p> <p>Key points in the update included:</p> <ul style="list-style-type: none"> <li>• Work is progressing on identifying health intelligence needs, with Public Health Wales supporting analytical work on inequalities and system need.</li> <li>• Joint meetings between Public Health teams of both health boards have taken place and have been viewed positively.</li> </ul> |  |

- Ongoing programmes include Healthy Weight, Welsh Veg in Schools, forthcoming communication campaigns.
- The subgroup's work is aligned to the wider Population Health Strategy, 20-4-7 model, with both health boards emphasising the role of inequalities, social determinants and the shared "Core20PLUS" style model of targeting the most disadvantaged communities.

### Summary of Discussion

Members discussed the need to distinguish clearly between regional and local responsibilities, noting the importance of hyper-local approaches where population needs differ significantly across local authorities.

It was highlighted that the Regional Health Economy work provides opportunities to align public sector actions, attract national partners (e.g., Future Generations Office, Public Health Wales), and secure benefits from working at c.800,000 population footprint.

Members noted that several priorities across PSBs (e.g., food access, procurement, physical activity) align well with regional ambitions. The importance of integrating research evidence (e.g., cardiovascular disease treatment gaps, screening uptake) was emphasised.

Concerns were raised regarding reliance on national analytical and intelligence capacity, given that some key public health functions and data resources remain with Public Health Wales, requiring careful prioritisation and negotiation.

Members welcomed the progress made across PSBs and health boards, recognising that certain elements (e.g., social model of health, community partnerships) are emerging as regional strengths.

Members endorsed the expanded ambitions and direction of the Regional Health Economy work programme. JW congratulated the Regional Health Economy subgroup on the breadth of work and the progress made since August 2025 and the clear next steps for continued progress.

Dart Carolyn  
28/07/2026 14:54:27

|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |
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|               | <ul style="list-style-type: none"> <li>• <b>ACTION:</b> GR and AG to retrieve the original documented agreement for services with PHW, identify gaps vs. current needs, and engage Tracey Cooper (PHW) to update responsibilities, escalation routes, and resource commitments.</li> <li>• <b>ACTION:</b> GR and AG to develop a set of metrics aligned with each Regional Health Economy workstream, including baseline, trend, inequalities breakdown, and expected impact of regional initiatives.</li> <li>• <b>ACTION:</b> Samia Edmonds (SE) to share with the Committee upcoming Welsh Government organisational documentation regarding national organisations who are required to engage with and support regional models, and ensure remit letters explicitly include expectations to support the regional model and participate in regional work.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                  | <p>GR/<br/>AG</p> <p>GR/<br/>AG</p> <p>SE</p> |
| <b>RJC/04</b> | <b>Regional Clinical Services Planning Subgroup</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                               |
|               | <p>LD and AC provided an update to the Committee on key regional Clinical Service Planning programmes as follows:</p> <ul style="list-style-type: none"> <li>• <b>Pathology Programme:</b> Progress continues, with the intention to provide the outstanding Regional Cellular Pathology Programme Transitional Memorandum of Understanding (MoU) and Regional Cellular Pathology preferred Laboratory Site and the preferred site Welsh Government Capital Update, as previously requested by the Committee, to the Extra-ordinary Committee meeting on 16 February 2026 for endorsement. Work remains on track for the required reporting to Welsh Government.</li> <li>• <b>Vascular Services:</b> The Committee was advised of national-level considerations regarding a potential single vascular service model for Wales. This may impact regional timelines, and dependencies must therefore be monitored.</li> <li>• <b>Orthopaedics:</b> The update highlighted the need for a regionalised approach to planning, including joint oversight of Patient Tracking Lists and workforce considerations to support planned care sustainability.</li> <li>• <b>Stroke Programme:</b> Upcoming decisions to authorise national standards are expected in February 2026, and</li> </ul> |                                               |

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|               | <p>members were advised that national developments and clinical fragility issues continue to shape the work.</p> <p><b>Summary of Discussion</b></p> <p>Members discussed the challenges relating to capacity and capability support from NHS Wales Executive (particularly Performance and Improvement). It was acknowledged that dedicated support is unlikely except for specific, well-defined pieces of work.</p> <p>Concerns were raised about progressing regional priorities where national decisions (e.g., vascular service options) may reshape the landscape. Members also discussed the need for comparable data structures and coding to support joint planning.</p> <p>The Committee agreed that the region must plan for a population of c.800,000 while recognising cross-boundary patient flows (e.g., Powys and BCUHB). Members further noted that some specialties require alignment of operational models rather than structural reconfiguration.</p> |           |
|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
|               | <ul style="list-style-type: none"> <li>Members endorsed the direction of travel for the Regional Clinical Services Planning Sub-Group, recognising the progress made to date.</li> <li>Members recognised the timeline and approval process for the Capital Laboratory Site Selection SBAR to Welsh Government.</li> <li><b>ACTION:</b> MD and LD to check the interdependencies and any identified risks where local timelines or decisions may conflict with regional/national work, and where necessary to share these with relevant executives before key decision points.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                  | MD/<br>LD |
| <b>RJC/05</b> | <b>Finance and Contracting Subgroup Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |
|               | <p>DG provided an update to the Committee on the Finance and Contracting Subgroup.</p> <p>Key points in the update included:</p> <ul style="list-style-type: none"> <li>Progress on the regional value-based work and identification of opportunities for joint procurement (including local food supply chain alignment with Castell Howell).</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |

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|               | <ul style="list-style-type: none"> <li>• Updates on orthopaedic contracting redesign using a pan-regional methodology.</li> <li>• Continued collaboration between finance teams across both organisations.</li> <li>• Confirmation that a regional procurement lead has been appointed.</li> <li>• Recognition of Darren Griffiths' (DG) contribution as he prepares to move to a new role.</li> </ul> <p><b>Summary of Discussion</b></p> <p>Members discussed the need to shift the regional financial approach away from historical LTA-based constraints and towards pooled-budget or shared-value mechanisms. It was noted that Powys tHB should be integrated into relevant contracting discussions, and that commissioning arrangements should consider cross-boundary flows.</p> <p>The STAR Diabetes project was highlighted as a potential exemplar for value-based redesign and as an opportunity to reshape resource allocation.</p> |  |
|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
|               | <ul style="list-style-type: none"> <li>• Agreed: Members endorsed the direction of travel for the Regional Finance and Contracting subgroup, recognising the progress made to date.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
| <b>RJC/06</b> | <b>Data and Digital Subgroup Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|               | <p>HT provided an update to the Committee via a strategic paper outlining a joint digital vision which is not a technical roadmap or procurement plan, rather a framework for long-term digital leadership and capability development.</p> <p>Key points in the update included:</p> <ul style="list-style-type: none"> <li>• The accelerating pressures arising from demographics, climate transition and the digital environment.</li> <li>• The need to focus on capabilities (e.g., interoperability, AI, data-sharing) rather than individual products.</li> <li>• The requirement to align deployments of national digital systems across both health boards.</li> <li>• Recognition of the digital deficits across the region and the historic underinvestment.</li> </ul>                                                                                                                                                                |  |

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|               | <ul style="list-style-type: none"> <li>• Early work with CGI and DHCW to support vision development.</li> </ul> <p><b>Summary of Discussion</b></p> <p>Members emphasised the importance of translating the vision into deliverable short-, medium- and long-term actions. The risk of current system decisions constraining future digital capability was highlighted. Members stressed the critical importance of culture, workforce digital literacy, and organisational readiness.</p> <p>Questions were raised regarding procurement governance routes for joint digital work, including use of existing contractual frameworks with it noted concerns have been raised regarding extending the digital partner contract to cover two organisations. The need for clear capability maps and alignment of national programme deployments was agreed.</p> |                  |
|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                  |
|               | <ul style="list-style-type: none"> <li>• Agreed: Members endorsed the approaches outlined within the joint digital vision paper.</li> <li>• <b>ACTION:</b> HT, MJ and AT to work with MD and AG to translate the long-term digital vision into specific 2025–26 and 2026–27 deliverables; a joint deployment plan identifying sequencing, shared dependencies to avoid divergence, risks, and immediate actions required to avoid locking in suboptimal systems.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                  | HT/<br>MJ/<br>AT |
| <b>RJC/07</b> | <b>Regional Research and Innovation Delivery and Oversight Group Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                  |
|               | <p>MH provided an update to the Committee on work to develop a regional research and innovation operating model.</p> <p>Key points in the update included:</p> <ul style="list-style-type: none"> <li>• Completion of early work on oncology research collaboration.</li> <li>• A proposal to establish an RJC sub-committee on Research &amp; Innovation.</li> <li>• Ongoing work to define the role and recruitment approach for a Regional Director of Research and Development.</li> <li>• Opportunities identified for future thematic workstreams, including cardiovascular disease.</li> </ul>                                                                                                                                                                                                                                                        |                  |

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|               | <ul style="list-style-type: none"> <li>Outputs from the October 2025 regional symposium.</li> </ul> <p><b>Summary of Discussion</b></p> <p>The Committee discussed the proposed governance arrangements and noted concerns regarding duplication with existing structures.</p> <p>Consideration was given to how universities should be represented, and whether a standalone sub-committee is required at this stage or whether alternative governance mechanisms may be preferable.</p> <p>Members emphasised the need for a clearly articulated regional research ambition, including commercialisation opportunities, and requested that proposals be strengthened accordingly.</p>            |           |
|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |
|               | <ul style="list-style-type: none"> <li><b>ACTION:</b> RE and MH to revisit the Regional Research and Innovation Governance proposal with support from the Directors of Governance, to clarify ambition, design focus, university involvement, commercialisation potential, and governance architecture; and to present a refined proposal to the Committee in April 2026.</li> </ul>                                                                                                                                                                                                                                                                                                               | RE/<br>MH |
| <b>RJC/08</b> | <b>Workforce and OD Subgroup Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |
|               | <p>LG provided the Committee with an update on Workforce and OD subgroup activities.</p> <p>Key points in the update included:</p> <ul style="list-style-type: none"> <li>Joint planning across both organisations using agreed Triple A methodology.</li> <li>Development of a Regional Leadership Network and alignment with new national management and leadership competency frameworks.</li> <li>Collaborative work on ESR deployment, with HDdUHB (as an early adopter) advising/mentoring SBUHB.</li> <li>Consideration of upcoming legislative changes and impacts on employment practice.</li> <li>Recognition of links with the Mid Wales Joint Committee workforce activity.</li> </ul> |           |

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|                                  | <p><b>Summary of Discussion</b></p> <p>The Committee considered the distinction between coordination across organisations and the potential for joint operating models in selected areas. The need to avoid fragmented governance was noted.</p> <p>Members emphasised that digital transformation, including AI adoption, will significantly impact future workforce requirements and must be factored into planning. Concerns were raised around organisational readiness for change, and the need for explicit OD and cultural-change actions.</p>                        |                                     |
|                                  | <p><b>Actions/Agreements</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                     |
|                                  | <ul style="list-style-type: none"> <li>• <b>ACTION:</b> LG and TR to produce a map of all workforce initiatives across both health boards, highlight duplication or gaps, and propose coordination mechanisms.</li> <li>• <b>ACTION:</b> LG and TR to present a discussion paper to the next Workforce and OD subgroup meeting outlining cultural barriers, OD requirements, behavioural science insights, and recommendations for a shared regional change readiness approach.</li> </ul>                                                                                   | <p>LG/<br/>TR</p> <p>LG/<br/>TR</p> |
| <p><b>PART 5: GOVERNANCE</b></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |
| <b>RJC/09</b>                    | <b>RJC 2025/2026 Work Programme</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     |
|                                  | <p>The RJC PMO provided an overview of progress against the existing RJC work programme and outlined areas where further refinement is needed in light of the discussions held during the meeting.</p> <p><b>Summary of Discussion</b></p> <p>Members noted the need to prioritise regional commitments given organisational resource constraints. Emphasis was placed on ensuring regional priorities are reflected explicitly within both health boards' IMTPs.</p> <p>Members also highlighted the need for alignment across local, regional and national structures.</p> |                                     |

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|                                                                                       | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
|                                                                                       | <ul style="list-style-type: none"> <li>None</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <b>PART 6: MINUTES AND ACTIONS, CLOSING REMARKS, &amp; DATES OF RJC NEXT MEETINGS</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| <b>RJC/10</b>                                                                         | <b>Minutes of Previous Meeting held on 18th August 2025</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
|                                                                                       | Members received and confirmed the draft minutes from the meeting held on 18th August 2025 as a true and accurate record                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <b>RJC/11</b>                                                                         | <b>Table of Actions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
|                                                                                       | It was noted that all actions were complete or closed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <b>RJC/12</b>                                                                         | <b>RJC Committee Annual Work Plan (for information only)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                                                       | Received for information only.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| <b>RJC/13</b>                                                                         | <b>Closing Remarks</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|                                                                                       | <p>EM thanked members for a constructive and wide-ranging discussion. JW noted the progress made to date and the ambition shown across workstreams, despite significant resource pressures. Appreciation was expressed for colleagues managing substantive roles alongside regional commitments. JW conveyed the Committee's good wishes to DG in his new role and looked forward to working with him in the future.</p> <p><b>Summary of Discussion</b><br/>Members reiterated their commitment to regional ways of working beyond the requirements of the Ministerial direction. The Committee noted that the regional approach is maturing and providing increasing value, including future-facing issues such as regional budgets and digital transformation.</p> |  |
| <b>RJC/14</b>                                                                         | <b>Dates of Next RJC Meetings</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |

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|  | <ul style="list-style-type: none"> <li>• <b>16th February 2026 (Extraordinary RJC)</b></li> <li>• <b>16th April 2026</b></li> <li>• <b>23rd July 2026</b></li> <li>• <b>13th October 2026</b></li> <li>• <b>7th January 2027</b></li> </ul> |  |
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*The meeting closed at 12:30*

DRAFT

Dart, Carolyn  
28/07/2026 14:54:27

**Extraordinary**  
**Hywel Dda University Health Board and Swansea Bay University Health Board**  
**Regional Joint Committee Meeting**  
**DRAFT Minutes**

Monday 16<sup>th</sup> February 2026 15.20pm-16.00pm  
Via MS Teams

**SWANSEA BAY UNIVERSITY HEALTH BOARD**

**Present:**

|                  |      |                                    |
|------------------|------|------------------------------------|
| Jan Williams     | (JW) | Chair (Joint Chair of the meeting) |
| Andrew Griffiths | (AG) | Independent Member                 |
| Patricia Price   | (PP) | Independent Member                 |

**In Attendance:**

|                 |      |                                                                |
|-----------------|------|----------------------------------------------------------------|
| Abigail Harris  | (AH) | Chief Executive                                                |
| Raj Krishnan    | (RK) | Deputy Executive Medical Director                              |
| Hazel Lloyd     | (HL) | Director of Corporate Governance                               |
| Tina Ricketts   | (TR) | Executive Director of Workforce and Organisational Development |
| Steve Spill     | (SS) | Vice Chair                                                     |
| Karen Stapleton | (KS) | Deputy Director of Planning and Partnerships                   |

**Apologies:**

|                  |      |                                                     |
|------------------|------|-----------------------------------------------------|
| Jean Church      | (JC) | Independent Member                                  |
| Marie Davies     | (MD) | Executive Director of Planning and Partnerships     |
| Richard Evans    | (RE) | Executive Medical Director & Deputy Chief Executive |
| Darren Griffiths | (DG) | Executive Director of Finance and Performance       |
| Deb Lewis        | (DL) | Chief Operating Officer                             |

**HYWEL DDA UNIVERSITY HEALTH BOARD**

**Present:**

|                |      |                                                                                           |
|----------------|------|-------------------------------------------------------------------------------------------|
| Neil Wooding   | (NW) | Chair (Joint Chair of the meeting)                                                        |
| Maynard Davies | (MD) | Independent Member                                                                        |
| Lisa Gostling  | (LG) | Deputy Chief Executive and Executive Director of Workforce and Organisational Development |
| Sarah Harraway | (SH) | Independent Member                                                                        |

**In Attendance:**

|                   |      |                         |
|-------------------|------|-------------------------|
| Andrew Carruthers | (AC) | Chief Operating Officer |
| Eleanor Marks     | (EM) | Vice Chair              |

|                   |       |                                                  |
|-------------------|-------|--------------------------------------------------|
| Ardiana Gjini     | (AG)  | Executive Director of Public Health              |
| Lee Davies        | (LD)  | Executive Director of Strategy and Planning      |
| Joanne Wilson     | (JWi) | Director of Corporate Governance/Board Secretary |
| <b>Apologies:</b> |       |                                                  |
| Mark Henwood      | (MH)  | Executive Medical Director                       |
| Philip Kloer      | (PK)  | Chief Executive                                  |
| Chantal Patel     | (CP)  | Independent Member                               |
| Huw Thomas        | (HT)  | Executive Director of Finance                    |

| <b>Other Organisations</b>         |      |                                                                                 |
|------------------------------------|------|---------------------------------------------------------------------------------|
| <b>In Attendance:</b>              |      |                                                                                 |
| Siôn Charles                       | (SC) | RJC Head of Strategy and Service Planning                                       |
| Sophie Marr                        | (SM) | RJC Senior Project & Business Manager (Secretariat)                             |
| Rose Turrell                       | (RT) | RJC Service Planning Manager                                                    |
| <b>Apologies:</b>                  |      |                                                                                 |
| Carl Cooper<br>(Associate Member)  | (CP) | Chair, Powys Teaching Health Board                                              |
| Samia Edmonds<br>(Observer Member) | (SE) | Planning Programme Director, Health and Social Services Group, Welsh Government |
| Jeremy Griffith                    | (JG) | Director of Operations, Health and Social Care Early Years, Welsh Government    |

| <b>PART 1: PRELIMINARY MATTERS</b>  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
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| <b>RJC/15</b>                       | <b>Welcome and Apologies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Dart Carolyn<br>28/07/2026 14:54:27 | <p>Neil Wooding (NW) opened the extraordinary meeting of the Regional Joint Committee (RJC), held jointly between Hywel Dda UHB and Swansea Bay UHB, welcoming members and attendees to the session convened to consider the Regional Cellular Pathology Programme items submitted for endorsement. All apologies were confirmed as recorded. The Chair confirmed attendance from Swansea Bay and Hywel Dda UHB teams and welcomed participants.</p> <p>Conflicts of interest were then addressed.</p> <ul style="list-style-type: none"> <li>Maynard Davies (MD) declared an interest (as a member of the SAIL Information Governance Review Board for Swansea University) in agenda item 2.1 Regional Cellular Pathology</li> </ul> |  |
|                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |

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|                                               | <p>Programme — Transitional Memorandum of Understanding (MoU) and agenda item 2.2 Regional Cellular Pathology Programme – Preferred Laboratory Site. This was assessed not to impair decision-making.</p> <ul style="list-style-type: none"> <li>• Darren Griffiths (DG) had absented himself from the meeting due to a material conflict (soon to be employed by Swansea University) with agenda item 2.1 Regional Cellular Pathology Programme — Transitional Memorandum of Understanding (MoU) and agenda item 2.2 Regional Cellular Pathology Programme – Preferred Laboratory Site.</li> <li>• Chantal Patel (CP) declared an interest (as an employee of Swansea University) in agenda item 2.1 Regional Cellular Pathology Programme — Transitional Memorandum of Understanding (MoU) and agenda item 2.2 Regional Cellular Pathology Programme – Preferred Laboratory Site. Following advice from Joanne Wilson (JWi), CP withdrew from the meeting.</li> </ul> |  |
| <b>PART 2: FOR DISCUSSION AND ENDORSEMENT</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| <b>RJC/16</b>                                 | <b>Regional Cellular Pathology Programme — Transitional Memorandum of Understanding (MoU)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
|                                               | <p>Joanne Wilson (JWi) introduced the redrafted Transitional MoU, confirming that:</p> <ul style="list-style-type: none"> <li>• It reflects changes to programme governance, structure, and the overall regional model since the Boards originally approved the MoU in March 2025.</li> <li>• Updates include removal of ARCH references, insertion of refreshed governance arrangements, and an updated termination date of 31 March 2028 or completion of the programme.</li> <li>• The MoU supports sharing of information, joint workforce development, regional leadership arrangements, commissioning alignment, and the establishment of a single regional pathology service hosted by Swansea Bay UHB.</li> </ul> <p><b>Summary of Discussion</b></p>                                                                                                                                                                                                           |  |

Members raised questions relating to workforce vacancies, liability and indemnity, and transitional arrangements.

Key points included:

- Workforce issues will be reviewed jointly, with discussions scheduled between operational and workforce leads to monitor vacancies and explore regional opportunities.
- Recent regional discussions had underlined the importance of continuing joint development of the service irrespective of the capital programmes' timeline. Workforce fragility across clinical and operational areas meant that the region should keep advancing a joint service model as far as possible; regionalising leadership and service delivery would provide benefits regardless of the status of the capital programme.
- Members emphasised the importance of recognising the need for consistent regional governance and clarity of accountability.

During discussion of the MoU, JW referred to a set of queries submitted by Jean Church (JC), not in attendance at the meeting. These had been addressed via formal advice received by Huw Thomas (HT) ahead of the meeting. The following clarifications were read into the record:

- Whether the indemnity and liability clauses in the Transitional Memorandum of Understanding and the ODN Terms of Reference clearly set out:
  - Who is financially responsible if things go wrong, and
  - Whether we can be assured that vicarious liability, financial risk and any potential insurance gaps are adequately are fully considered.
- HT advised that the MoU does not alter the legal status of either Health Board, and:
  - No financial liability is created for the Health Boards and until a formal contract is signed.

|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|               | <ul style="list-style-type: none"> <li>○ Until such a formal contract exists, the Health Boards have no financial liability.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|               | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
|               | <p><b>AGREEMENT:</b> The Committee:</p> <ul style="list-style-type: none"> <li>• <b>Endorsed</b> the redrafted Transitional Memorandum of Understanding for Regional Pathology for approval by the Health Boards at Swansea Bay UHB's Special Public Board meeting on 17 February 2026, and Hywel Dda UHB's Extraordinary Public Board meeting on 19 February 2026.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| <b>RJC/17</b> | <b>Regional Cellular Pathology Programme – Preferred Laboratory Site</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|               | <p>Lee Davies (LD) presented the outcomes of the extensive options appraisal process undertaken between October 2025 and January 2026, highlighting:</p> <ul style="list-style-type: none"> <li>• Three sites were assessed: Pentre Awel, Llanelli; Sandringham, Swansea; Bay Campus, Swansea University.</li> <li>• A full programme of non-technical, technical, architectural, capital and revenue assessments was completed with external specialist input.</li> <li>• A workshop held on 2 February 2026 reached a clear regional consensus that Bay Campus was the preferred site.</li> </ul> <p><b>Summary of Discussion</b><br/>Members noted:</p> <ul style="list-style-type: none"> <li>• Strong support for Bay Campus from a non-technical service perspective, due to workforce, education, research, and future-proofing advantages.</li> <li>• Technical advisors confirmed the site as feasible.</li> <li>• Comments emphasised the importance of viewing this decision as a step toward the development of a Business Case and not financial approval in itself.</li> </ul> |  |

|                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
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|                                                                 | <ul style="list-style-type: none"> <li>Recognition that, while risks remain, the programme has advanced significantly from the position 12 months ago and now presents a rational, deliverable proposal.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                               |  |
|                                                                 | <b>Actions/Agreements</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
|                                                                 | <p><b>AGREEMENT:</b> The Committee:</p> <ul style="list-style-type: none"> <li><b>Recognised</b> the clear consensus reached on the preferred Laboratory site at the Regional Cellular Pathology workshop held on 2 February 2026.</li> <li><b>Endorsed</b> the submission of the South-West Wales Regional Cellular Laboratory paper to the Welsh Government Capital Team, identifying the preferred site, for onward approval by the Health Boards at Swansea Bay UHB's Special Public Board meeting on 17 February 2026 and Hywel Dda UHB's Extraordinary Public Board meeting on 19 February 2026.</li> </ul> |  |
| <b>PART 3: CLOSING REMARKS &amp; DATES OF RJC NEXT MEETINGS</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
| <b>RJC/18</b>                                                   | <b>Closing Remarks</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
|                                                                 | <p>Chairs and members emphasised:</p> <ul style="list-style-type: none"> <li>The importance and significance of the decisions made during the meeting.</li> <li>The maturity of regional collaboration and the positive signals these decisions send ahead of a new Welsh Government term.</li> <li>Appreciation for the extensive work of operational teams, programme support, and contributors across regional groups.</li> </ul>                                                                                                                                                                              |  |
| <b>RJC/19</b>                                                   | <b>Dates of Next RJC Meetings</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|                                                                 | <ul style="list-style-type: none"> <li><b>16th April 2026</b></li> <li><b>23rd July 2026</b></li> <li><b>13th October 2026</b></li> <li><b>7th January 2027</b></li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |

*The meeting closed at 16:00*

## Table of Actions from Hywel Dda University Health Board and Swansea Bay University Health Board Regional Joint Committee Meeting 22 January 2026

| Minute Ref. | Action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Lead               | Timescale                      | Progress                                                                                                                                                                                                                                                                    | RAG |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 26/01       | <b>Public Health Behaviour Change Unit: Mobilising the System to Promote Health Weight Intelligence in Health Wellbeing</b> <ul style="list-style-type: none"> <li>Ensure that Public Health teams from both health boards, in collaboration with Public Health Wales, produce a regional inequalities profile for presentation at a future RJC meeting.</li> <li>Liaise with the Future Generations Office (FGO) to integrate national food systems guidance into the workshop planned for March 2026.</li> </ul> | GR/AG<br><br>GR/AG | October 2026<br><br>March 2026 | <p><b>Open:</b> Added to the RJC Work Plan to present at the October 2026 RJC meeting once completed.</p> <p><b>Closed:</b> The FGO National Food system guidance is being integrated into the development of the long-term strategic plan and any associated workshops</p> |     |

|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                 |                                                                                                                                                                                                                                                                                                                      |  |
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|              | <ul style="list-style-type: none"> <li>Liaise with PSBs to ensure PSBs continue joint work on food access, affordability and sustainable procurement, with progress reported to RJC in April 2026.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                         | <b>GR/AG</b> | <b>23.03.26</b> | <b>Closed:</b> Progress has been made across all 5 PSBs resulting in the engagement of Pembrokeshire PSB in the regional WSA, the development of a 2050 vision for food system improvement, and the agreement to collaborate across PSBs within each UHB area on public sector food procurement as an area of focus. |  |
| <b>26/03</b> | <b>Regional Health Economy Subgroup Update</b> <ul style="list-style-type: none"> <li>Retrieve the original documented agreement for services with PHW, identify gaps vs. current needs, and engage Tracey Cooper (PHW) to update responsibilities, escalation routes, and resource commitments. <i>Note: During the discussion on healthy weight, inequalities and the Future Generations Act, it became clear that the historical agreement governing the transfer of local public health teams to health boards is now outdated. Teams lack access to national analytical capacity,</i></li> </ul> | <b>GR/AG</b> | <b>23.03.26</b> | <b>Closed:</b> Meeting held between SBUHB, HDdUHB and PHW Chairs and CEO's on 18/3/26 to discuss.                                                                                                                                                                                                                    |  |

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|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                   |                                                                                                                                                                                                                                                                |  |
|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|              | <p><i>Note: Members noted challenges securing consistent support from national bodies (e.g., DHCW, PHW, NHSWE) for regional digital, research, and public health priorities. Samia Edmonds supported the need for remit letters to explicitly require national organisations to engage with, and support, regional models.</i></p>                                                                                                                                                                                                                              |                 |                   |                                                                                                                                                                                                                                                                |  |
| <b>26/04</b> | <p><b>Regional Clinical Services Planning Subgroup</b></p> <ul style="list-style-type: none"> <li>Check the interdependencies between Regional Clinical Programmes and any identified risks where local timelines or decisions may conflict with regional/national work, and where necessary to share these with relevant executives before key decision points. <i>Note: Concerns were raised that local decisions (e.g., forthcoming HDdUHB clinical service plan decisions in February) must align with regional and national fragility work.</i></li> </ul> | <b>MD/LD</b>    | <b>March 2026</b> | <p><b>Closed:</b> The Directors of Planning have met and discussed the Hywel Dda Clinical Services Plan in detail, updates continue to be brought to the Regional Clinical Services Subgroup and there is dialogue with national programmes where required</p> |  |
| <b>26/06</b> | <p><b>Data and Digital Subgroup Update</b></p> <ul style="list-style-type: none"> <li>Work with MD and AG to translate the long-term digital vision into specific 2025–26 and 2026–27 deliverables; a joint deployment plan identifying sequencing, shared</li> </ul>                                                                                                                                                                                                                                                                                           | <b>HT/MJ/AT</b> | <b>23.03.26</b>   | <p><b>Closed:</b> Update included in the paper submitted to the April 2026 RJC meeting.</p>                                                                                                                                                                    |  |

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|       | dependencies to avoid divergence, risks, and immediate actions required to avoid locking in suboptimal systems. <i>Note: The digital vision paper was praised but members stressed urgency: immediate tactical decisions (e.g., system procurements, ESR rollout) may undermine long-term ambition if not aligned. Both HBs are starting from different digital baselines; members stressed the need to synchronise deployment of national systems (BAGs, ESR, data architecture).</i>                                                                                                                                       |       |          |                                                                      |  |
| 26/07 | <b>Regional Research and Innovation Delivery and Oversight Group Update</b> <ul style="list-style-type: none"> <li>Revisit the Regional Research and Innovation Governance proposal to clarify ambition, design focus, university involvement, commercialisation potential, and governance architecture; and to present a refined proposal to the Committee in April 2026. <i>Note: Committee members emphasised the need for a bold regional vision (e.g., a regional research unit), clearer governance links, and recognition that research must align with clinical priorities (oncology, cardiovascular,</i></li> </ul> | RE/MH | 23.03.26 | <b>Closed:</b> Included in the update to the April 2026 RJC meeting. |  |

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Key

| Initials | Name            |
|----------|-----------------|
| LD       | Lee Davies      |
| MD       | Marie Davies    |
| SE       | Samia Edmonds   |
| RE       | Richard Evans   |
| AG       | Ardiana Gjini   |
| LG       | Lisa Gostling   |
| MH       | Mark Henwood    |
| MJ       | Matt John       |
| GR       | Gill Richardson |
| TR       | Tina Ricketts   |
| HT       | Huw Thomas      |
| AT       | Anthony Tracey  |

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## REGIONAL JOINT COMMITTEE - DRAFT ANNUAL WORK PLAN 2025/26

| AGENDA ITEM/ISSUE                                                                      | LEAD                   | 15<br>January<br>2025 | 07<br>May<br>2025 | 18<br>August<br>2025 | 16<br>October<br>2025 | 22<br>January<br>2026 | 16<br>April<br>2026 |
|----------------------------------------------------------------------------------------|------------------------|-----------------------|-------------------|----------------------|-----------------------|-----------------------|---------------------|
| <b>INTRODUCTIONS</b>                                                                   |                        |                       |                   |                      |                       |                       |                     |
| Apologies                                                                              | Chair(s)               | ✓                     | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Declaration of Interests                                                               | All                    | ✓                     | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| <b>GOVERNANCE</b>                                                                      |                        |                       |                   |                      |                       |                       |                     |
| Minutes from Previous Meeting                                                          | Chair(s)               |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Matters Arising & Table of Actions                                                     | Chair(s)               |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Matters Arising not on Agenda                                                          | Chair(s)               |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Self-Assessment of RJC's Effectiveness                                                 | Chair(s)/<br>JWi       |                       |                   |                      |                       |                       | ✓                   |
| RJC 2025/2026 Work Programme                                                           | PK/AH                  |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Report from the Joint Programme Office                                                 | SC                     |                       | ✓                 |                      |                       |                       |                     |
| Terms of Reference                                                                     | Chair(s)               | ✓                     |                   |                      |                       |                       |                     |
| Draft Terms of Reference                                                               | Chair(s)               |                       |                   |                      |                       |                       | ✓                   |
| Outcome from RJC Annual Self-Assessment Exercise                                       | JW/HL                  |                       |                   |                      |                       |                       | ✓                   |
| Schedule of support request from WG                                                    | PK/AH                  | ✓                     |                   |                      |                       |                       |                     |
| <b>REGIONAL JOINT COMMITTEE WORK PROGRAMME</b>                                         |                        |                       |                   |                      |                       |                       |                     |
| Urgent and Emergency Care Update Report (Objective 2)                                  | AC/DL                  |                       |                   | ✓                    |                       |                       |                     |
| <b>WORKSHOP SESSIONS</b>                                                               |                        |                       |                   |                      |                       |                       |                     |
| Global Perspective on Artificial Intelligence in Health Wellbeing                      | HT                     |                       |                   | ✓                    |                       |                       |                     |
| Mobilising the System to Promote Healthy Weight                                        | GR                     |                       |                   |                      |                       | ✓                     |                     |
| What Drives Poverty? Implications Across RJC Portfolios?                               | HT                     |                       |                   |                      |                       |                       | ✓                   |
| <b>SUB-GROUP HIGHLIGHT REPORTS</b>                                                     |                        |                       |                   |                      |                       |                       |                     |
| Clinical Services Planning Sub-Group - to include Capital Planning (Objective 2 and 5) | MD/LD/<br>AC/DL/<br>CM |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |

| AGENDA ITEM/ISSUE                                                                                                            | LEAD             | 15<br>January<br>2025 | 07<br>May<br>2025 | 18<br>August<br>2025 | 16<br>October<br>2025 | 22<br>January<br>2026 | 16<br>April<br>2026 |
|------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------|-------------------|----------------------|-----------------------|-----------------------|---------------------|
| Workforce and OD Sub-Group<br>Proposal for Major Learning Event, Summer 2025<br>(changed to Summer 2026 at May 2025 meeting) | LG/JR            | ✓                     | ✓                 |                      | ✓                     | ✓                     | ✓                   |
| Data and Digital Sub-Group                                                                                                   | MJ/AT            |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Finance and Contracting Sub-Group                                                                                            | DG/HT            |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Research, Innovation, and Excellence Sub-Group                                                                               | MH/RE            |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Regional Health Economy Sub-Group                                                                                            | AG/GR            |                       | ✓                 | ✓                    | ✓                     | ✓                     | ✓                   |
| Planned Achievements by March 2025                                                                                           | AC/DL            | ✓                     |                   |                      |                       |                       |                     |
| <b>FOR INFORMATION</b>                                                                                                       |                  |                       |                   |                      |                       |                       |                     |
| RJC Work Programme 2025/26                                                                                                   | CD               |                       |                   | ✓                    | ✓                     | ✓                     | ✓                   |
| <b>REVIEW OF THE MEETING</b>                                                                                                 |                  |                       |                   |                      |                       |                       |                     |
| Matters for Escalation to the Board(s)                                                                                       | Chair(s)/<br>JWi |                       |                   | ✓                    | ✓                     | ✓                     | ✓                   |

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| <b>RJC TASKS</b>                                                                  | <b>Lead</b>                 | <b>15<br/>January<br/>2025</b> | <b>07<br/>May<br/>2025</b> | <b>18<br/>August<br/>2025</b> | <b>16<br/>October<br/>2025</b> | <b>22<br/>January<br/>2026</b> | <b>16<br/>April<br/>2026</b> |
|-----------------------------------------------------------------------------------|-----------------------------|--------------------------------|----------------------------|-------------------------------|--------------------------------|--------------------------------|------------------------------|
| Prepare Schedule of Meeting Dates                                                 | <b>JWi/CD</b>               |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Agenda Setting Meeting with Chair & Exec Lead (at least 6 weeks prior to meeting) | <b>Chair(s)/<br/>JWi/CD</b> |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Disseminate agenda & papers 7 days prior to meeting                               | <b>CD</b>                   |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Minutes and action log to be circulated within 7 days of the meeting              | <b>CD</b>                   |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Produce RJC Update Report for Board(s)                                            | <b>Chair(s)/<br/>JWi/CD</b> |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Monitor agreed actions from previous meetings                                     | <b>CD</b>                   |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Develop & monitor RJC annual work plan                                            | <b>Chair(s)/<br/>JWi</b>    |                                |                            | ✓                             | ✓                              | ✓                              | ✓                            |
| Process for regular and rigorous self-assessment of RJC's effectiveness           | <b>Chair(s)/<br/>JWi</b>    |                                |                            |                               |                                |                                | ✓                            |

### Initials

|                                                                                                                                                                                                |                                                                                                                                                                                                         |                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>PK – Phil Kloer</b><br><b>AH – Abi Harris</b><br><b>JWi – Joanne Wilson</b><br><b>AC – Andrew Carruthers</b><br><b>MD – Marie Davies</b><br><b>LD – Lee Davies</b><br><b>DL – Deb Lewis</b> | <b>CM – Christine Morrell</b><br><b>LG – Lisa Gostling</b><br><b>TR – Tina Rickets</b><br><b>MJ – Matt John</b><br><b>AT – Anthony Tracey</b><br><b>DG – Darren Griffiths</b><br><b>HT – Huw Thomas</b> | <b>MH – Mark Henwood</b><br><b>RE – Richard Evans</b><br><b>GR – Gill Richardson</b><br><b>AG – Ardiana Gjini</b><br><b>SC – Siôn Charles</b><br><b>CD – Carolyn Dart</b> |
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