

**PWYLLGOR STRATEGAETH A CHYNLLUNIO
STRATEGY AND PLANNING COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	16 January 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Strategy Refresh
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Executive Director of Strategy and Planning
SWYDDOG ADRODD: REPORTING OFFICER:	Paul Williams, Assistant Director of Strategic Planning

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 purpose of this report is to provide the Strategy and Planning Committee (SPC) with the analysis of the engagement to date and present the content of the draft strategy refresh ahead of sharing with Board.

Cefndir / Background

In November 2024, work was initiated to refresh the existing *A Healthier Mid and West Wales* (AHMWW) strategy. Since then, work has been carried out to understand which elements of the strategy are still valid and can remain as they are, which elements are still valid but need revising to reflect, for example, demographic changes and which elements need refreshing because they are fundamentally different to how they were envisioned when AHMWW was ratified in 2018.

Engagement has been an integral part of the strategy refresh process, which has been split into two distinct phases:

Phase 1 engagement started in July 2025. It took place alongside other consultation events and engagement activity, by asking people the broad question, "What is important for you to live a healthy life?". A thematic analysis of the responses was carried out and the results were presented to the SPC Committee in October 2025.

Phase 2 engagement started at the end of September 2025. It lasted for 9 weeks and finished at the end of November 2025. Phase 2 engagement activity sought to gather feedback from our communities on 11 questions across 4 broad categories, focusing on the Social Model for Health and Wellbeing, digital healthcare support, balancing hospital care and community support and clinical services and hospital redevelopment.

Asesiad / Assessment

As noted in the earlier stages of the work to refresh the strategy, the key principles and the broad direction remain unchanged.

The work since November 2024 has focused on realigning our vision, mission and values with the strategic objectives that we will need to deliver if we want to move away from a treatment model.

Where the 2018 strategy envisaged care closer to home, the strategy refresh explores care from the home with the use of virtual and digital healthcare alongside community services in community centres to help people remain well and healthy.

We still want to develop a social model for health and wellbeing, and the strategy looks at not only developing this further as a key objective, but how we can use a 20Four7 approach to population health to support community wellness.

To do this we will need to reprioritise where we deliver the majority of our care, while making sure that when people do need hospital services they are treated in modern, fit for purpose facilities in a safe, timely way with staff delivering a high-quality service.

Throughout the strategy, and included as appendices, we have woven in what we have heard throughout the engagement from our public, staff and partner organisations. We have listened to where they have said we have done well, where they think we could make improvements, and what changes we can make to create a more accessible and equitable health care service for all.

The strategy itself is not intended to be an exhaustive document instead sets out the direction of travel we seek to take. Within the strategy we describe how the goals outline our ambitions, strategic delivery plans will oversee key pieces of work, and our three-year planning process will track the annual delivery of these key pieces of work.

As well as the strategy and engagement feedback, we have also updated the Equality and Health Impact Assessment, which is being shared as a draft ahead of the Board meeting on 29 January 2026, with additional feedback shared during the engagement, as well as completing a Quality Impact Assessment, both support the refreshing of our strategy and our overall mission, while providing ways that we can support patients to overcome barriers to accessing health care services.

It should be noted that while the strategy has been developed by Hywel Dda University Health Board, its delivery is dependent on working in partnership with our public, staff and partners. The intention is that once the content of the strategy has been approved, we will work to create a more public friendly document which will support us to share our refreshed strategy with others who will be essential to help us deliver the changes we wish to seek.

Argymhelliad / Recommendation

The Committee is asked to:

- **DISCUSS** the content of the draft strategy and consider whether it meets the long-term aims of the organisation.
- **Take ASSURANCE** from the draft report and attachments that the strategy has been refreshed, considering the views of public, staff and partner organisations.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.1.11. Seek assurance on the development of the Estates Strategy and Infrastructure Investment Enabling Plan aligned to the A Healthier Mid and West Wales Strategy, and review documents prior to Board approval.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 1196 - Insufficient investment in facilities/ equipment/digital infrastructure (risk score 16)
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Strategaeth a Chynllunio Parties / Committees consulted prior to Strategy and Planning Committee:	Board Seminar Clinical Reference Group
Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The Programme Business Case (PBC) and Strategic Outline Case (SOC) sets out both the revenue and capital funding assumptions for the programme.
Ansawdd / Gofal Claf: Quality / Patient Care:	Implicit within the PBC and SOC. This is an integral part of the PBC and SOC case for change.
Gweithlu: Workforce:	Implicit within the PBC and SOC. This is an integral part of the PBC and SOC case for change.
Risg: Risk:	Risk 1196 Insufficient investment in facilities/ equipment/ digital infrastructure.
Cyfreithiol: Legal:	Implicit within the PBC.
Enw Da:	Implicit within the PBC.

Reputational:	
Gyfrinachedd: Privacy:	Implicit within the PBC.
Cydraddoldeb: Equality:	There is an Equality and Health Impact Assessment which will remain 'live' through the duration of the programme.