



Pwyllgor Strategaeth a Chynllunio/ Strategy and Planning Committee

DYDDIAD Y CYFARFOD: DATE OF MEETING:	20 AUGUST 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mid Wales Joint Committee Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Chief Operating Officer, Hywel Dda University Health Board
SWYDDOG ADRODD: REPORTING OFFICER:	Keith Jones, Director of Operational Planning & Performance, Hywel Dda University Health Board, and Programme Director, Mid Wales Joint Committee

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/ For Information

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report provides an update on progress against the Mid Wales Joint Committee MWJC) Priorities and Delivery Plan 2026/27 up to 31 July 2026. It highlights the achievements made against the Joint Committee's agreed priorities, as well as additional areas of work identified during the year that may benefit the population of Mid Wales.

The report also includes an update on the strategic review of the Mid Wales Joint Committee.

Cefndir / Background

In 2014, the Welsh Government (WG) commissioned a study to review healthcare provision in Mid Wales, recognising the challenges of delivering sustainable, high-quality services in a rural and cross-boundary context. The resulting Mid Wales Healthcare Study made twelve recommendations, including the creation of a joint governance mechanism to support collaborative planning and delivery across the region, with recognition of the integral role of social care.

This led to the establishment of the Mid Wales Healthcare Collaborative in 2015, involving the three Health Boards serving Mid Wales, the Welsh Ambulance Services NHS Trust (WAST), and the three Local Authorities. In 2018, the Collaborative transitioned into the Mid Wales Joint Committee for Health and Social Care (MWJC), with strengthened governance and leadership arrangements to embed collaborative working.

The MWJC operates around a Strategic Intent comprising five overarching aims:

- Improving health and wellbeing;
- Delivering care closer to home;

- Developing a sustainable rural health and care workforce;
- Ensuring accessible hospital-based care; and
- Strengthening communication, involvement and engagement.

These aims are delivered through annually agreed Mid Wales priority workstreams aligned to partner organisations' planning cycles.

Oversight and delivery are supported by the Mid Wales Planning and Delivery Executive Group (MWPDEG), Mid Wales Clinical Advisory Group (MWCAG), Mid Wales Social Care Group, Mid Wales Strategic Commissioning Group and priority specific task and finish groups. Collectively, these arrangements support coordinated regional planning, service development, and implementation to address the current and future health and social care needs of the Mid Wales population.

Asesiad / Assessment

Mid Wales Priorities and Delivery Plan 2026/27

For 2026/27, the priority areas for joint working across Mid Wales will continue to align with WG expectations, as set out in the NHS Wales Planning Framework 2026/27. This framework emphasises the importance of collaboration across health and social care organisations to plan, commission, and deliver regional solutions that operate across organisational boundaries. As in previous years, the focus will remain on a whole-pathway approach, strengthening links between primary, secondary, community, and social care, and ensuring alignment with wider regional and national pathway developments.

A strategic review of the MWJC is currently underway; further details of which are provided later in this report. Given the evolving national context and the ongoing review, a flexible approach to setting priorities for 2026/27 is required. The Mid Wales priorities for 2026/27, along with those priorities and workstreams still in progress from 2025/26, will continue into the new planning cycle. Further new areas of work may be introduced once the Joint Committee review has concluded and organisational health and care annual plans have been approved. As such, the Mid Wales priorities for 2026/27 will remain under continuous review throughout the year.

For 2026/27 the Mid Wales priorities are as follows:

Mid Wales Priorities 2026/27	
Priority	Workstream
Ophthalmology	Powys Teaching Health Board (PTHB) nurse led wet age-related macular degeneration (AMD) service.
	Networking opportunities and joint pathway development
	Mid Wales Clinical Leadership
	Primary care eye care services for the South Gwynedd area
Cancer	Radiotherapy pathway
	Chemotherapy pathway
Dental	Endodontic services
	Paediatric General Anaesthesia (GA) service
Strategic Service Change programmes	Strategic Service Change programmes
Colorectal	Colorectal service development and expansion
Dermatology	Dermatology

Rural Health and Care workforce	Support Worker Development Programme (SWDP)
	Cross-Sector Population Health, Wellbeing and Prevention Capability Development
	Workforce Health, Wellbeing and Psychological Support
	National Management & Leadership Competency Framework

The Strategy and Planning Committee are asked to note the following for the Mid Wales Priorities and Delivery Plan for 2026/27:

- a) **Mid Wales Priorities and Delivery Plan – up to 31 July 2026**
Appendix A details the progress to date against the Mid Wales Priorities and Delivery Plan covering the period up until 31 July 2026.
- b) **Mid Wales Priorities 2026/27 – Progress / Status Overview**
Please see below a summary overview of the progress and current status of the MWJC priorities for 2026/27.

MWJC Priorities 2026/27– Progress / Status Overview						
Priority	Workstreams	Blue (Complete)	Green (On Track)	Amber (Mainly on Track)	Red (Not on Track)	White (Not Started)
Ophthalmology	4		2	2		
Cancer	2		2			
Community Dental Services	2	1	1			
Strategic Service Change Programmes	1		1			
Colorectal	1		1			
Dermatology	1		1			
Rural Health and Care Workforce	4		4			

- c) **Mid Wales Priorities 2026/27 – Blue workstream**
The Endodontics workstream has been successfully completed, with the new pathway going live on 20 July 2026.
- d) **Mid Wales Priorities 2026/27 – Amber workstreams**
For those workstreams whose status is currently Amber (Off Track) please see overleaf the summary exception report highlighting the issues which have impacted on progress and the current actions being progressed, details of which are reflected in the progress update report appended to this paper.

MWJC Priorities 2026/27 – Issues and Actions for Amber workstreams

Priority	Workstream	Issue	Action
Ophthalmology (Amber)	PTHB nurse led wet AMD service.	The target date of 30/06/26 has not been achieved due to a delay in visits to North Road clinic. This is due to a number of factors including delays in completion of honorary contracts process, sickness absence of key members of staff and differing views over whether the visits should be delayed pending review of Intravitreal Therapy (IVT) treatment protocols due to change in drugs used.	MWJC team to arrange meeting of relevant PTHB and Hywel Dda University Health Board (HDdUHB) leads to set and agree timetable for visits to North Road clinic. Target date for completion of workstream now proposed as 30/11/26.
Ophthalmology (Amber)	Networking opportunities and joint pathway development	The target date of 30/06/26 has not been achieved due to a delay in visits to North Road clinic. This is due to a number of factors including delays in completion of honorary contracts process, sickness absence of key members of staff and differing views over whether the visits should be delayed pending review of IVT protocols due to change in drugs used.	MWJC team to arrange meeting of relevant PTHB and HDdUHB leads to set and agree timetable for visits to North Road clinic. Target date for completion of workstream now proposed as 30/11/26.

e) **Ophthalmology Priority – Clinical Leadership Workstream**

At its meeting on 11 May 2026, the MWPDEG agreed that the Mid Wales Ophthalmology Group should revisit the options available for the Mid Wales Ophthalmology Clinical Lead workstream, including consideration of non-medical leadership models, such as an optometrist-led approach.

The Mid Wales Ophthalmology Group met on 5 June 2026 to consider the feedback received from MWPDEG. During discussions, the Group expressed concerns that an optometry-led model would not be appropriate for providing leadership across secondary care ophthalmology pathways. Following consideration of the available options, the Group reached a consensus that:

- The original Mid Wales Clinical Lead workstream is no longer required in its current form.
- The objectives of the workstream have been overtaken by national, regional and local developments, including the Clinical Implementation Network, regional ophthalmology hubs and wider eye care strategies.
- Effective operational collaboration between ophthalmology teams across the Mid Wales Health Boards is now well established.

Consequently, the Mid Wales Ophthalmology Group concluded that the Clinical Lead workstream is no longer relevant and recommended that MWPDEG formally close the workstream.

A proposal report supporting closure of the workstream was developed and reviewed by both the Mid Wales Ophthalmology Group and the MWCAG before being submitted to MWPDEG for consideration on 20 July 2026 who agreed:

- The formal closure of the Mid Wales Ophthalmology Clinical Lead workstream in its current form.
- That a designated Senior Responsible Officer (SRO) should be identified to provide strategic oversight and ownership of the Ophthalmology priority.

Mid Wales Joint Committee Strategic Review and Emerging Preferred Direction

Twelve years after the publication of the Mid Wales Healthcare Study and eight years after the establishment of the MWJC, it has been recognised that a review of the Committee's role, purpose and contribution is required. While many of the original challenges identified within the Mid Wales Healthcare Study remain relevant, the structures, relationships and mechanisms through which organisations collaborate have changed significantly.

The strategic review was commissioned by the Chief Executives of HDdUHB, PTHB and Betsi Cadwaladr University Health Board (BCUHB) in order to:

- Assess the continuing relevance of the Mid Wales Healthcare Study
- Evaluate the contribution of the MWJC
- Identify areas where collaboration continues to add value
- Inform future partnership and governance arrangements

A strategic review workshop was held on 20 April 2026, involving senior leaders from the Health Boards and Local Authorities serving Mid Wales. The workshop considered achievements, ongoing challenges, lessons learned and future opportunities for collaboration. Participants recognised that significant progress has been made since the publication of the Mid Wales Healthcare Study; however, they also concluded that substantial challenges remain, particularly in relation to workforce sustainability, rural health inequalities and partnership complexity.

A consistent theme emerging from the review is a lack of clarity regarding the current purpose of the MWJC. The review found that there is limited support for maintaining the existing arrangements unchanged and equally there is little support for discontinuing Mid Wales collaboration altogether. Six potential options have therefore been identified and considered, with the strongest support being for a model that combines the strengths of a Refocused Strategic Partnership and a Rural Health and Wellbeing Partnership. The review has identified an opportunity to transition from a broad regional planning mechanism to a more focused strategic partnership model centred on leadership, influence and improving outcomes for rural communities.

The findings of the strategic review, together with the proposed preferred option and a proposed high-level operating model, will be presented to the meeting of the MWJC on 1 September 2026 for endorsement prior to engagement with the Welsh Government.

Argymhelliad / Recommendation

The Strategy and Planning Committee is asked to:

- **NOTE** the update report on the Mid Wales Priorities and Delivery Plan 2026/27 up to July 2026 and the update on the ongoing review of the Mid Wales Joint Committee.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cylch Gorchwyl y Pwyllgor: Committee ToR Reference:	3.1.3 That, wherever possible, Health Board plans are aligned with partnership plans developed with Joint Committees, Local Authorities, Universities, Collaboratives, Alliances and other key partners, such as the Transformation Group who form part of A Regional Collaboration for Health (ARCH). 3.1.8 Seek assurance on delivery of plans in relation to the National Networks and Joint Committees. 3.1.23 Seek assurance on the management of risks within the Corporate Risk Register (CRR) and Directorate Risk Registers (including for hosted services and through partnerships and Joint Committees as appropriate) aligned to the Committee and its sub-committees and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action. Where risks cannot be brought within the Health Board's risk appetite/tolerance, recommend acceptance of risks to the Board. 3.1.24 Receive assurance through Sub-Committee Update Reports and other management/task & finish group reports that risks relating to their areas are being effectively managed across the whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).
Cyfeirnod Cofrestr Risg Datix, Teitl a Sgôr Risg Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
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

Nodau Cynllunio 2026/27 Planning Goals 2026/27	All Planning Goals Apply
Hypergyswllt i Amcanion Llesiant HDdUHB 2026 Hyperlink to HDdUHB Well-being Objectives 2026	10. Not Applicable
Model Cymdeithasol ar gyfer Iechyd a Llesiant: (wedi'i gwblhau ar gyfer newid strategol a/neu newidiadau sylweddol i wasanaethau) A Social Model for Health and Wellbeing: (<i>complete for strategic change and/or significant service changes</i>)	Not Applicable
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Agendas and minutes of meetings of the Mid Wales Joint Committee, Mid Wales Planning and Delivery Executive Group and its sub-groups for 2026-27.
Rhestr Termau: Glossary of Terms:	Contained within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y cyfarfod hwn: Parties / Committees consulted prior to this meeting:	Director of Operational Planning and Performance, HDdUHB

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Not Applicable
Tegwch Iechyd: Health Equity:	Not Applicable
Risg: Risk:	Not Applicable
Cyfreithiol: Legal:	Not Applicable

Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Mid Wales Priorities and Delivery Plan 2026/27 – Summary update 31 July 2026

PRIORITY	Ophthalmology (Carried forward from 2025/26)	STRATEGIC OBJECTIVE	Increase capacity and access to ophthalmology services through the development of a regional and whole system pathway approach supported by the establishment of links between Health Boards.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Ophthalmology services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents.			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: MWJC Programme Director Delivery Lead: Head of Planned Care PTHB, Service Delivery Manager Ophthalmology HDdUHB, Eye Care Network Manager BCUHB	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB), Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Ophthalmology Group
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) PTHB nurse led wet age-related macular degeneration (AMD) service.	Progress the proposal for a PTHB nurse led wet AMD service in North Powys with HDdUHB medical oversight / District General Hospital pathway. <u>Target date – 30/06/26</u>	• Increased capacity within national eye care pathways. • Improved Referral to Treatment (RTT) performance. • Increase in number of patients accessing outreach clinics. • Reduction in out of area referrals. • Reduced travel for Mid Wales residents.	• As part of its Eye Care Transformation Programme, PTHB is establishing a nurse led wet AMD service in the north of the county (Llanidloes and Welshpool), with consultant oversight from HDdUHB. This is an extension of the current service in South Powys. • SBAR agreed by PTHB Planned Care Programme Board. • Service will be for PTHB residents who currently travel to the HDdUHB North Road clinic, Aberystwyth, for wet AMD treatment. Service represents repatriation to Powys, not new commissioning. • Implementation plan for establishment of service in place with Standard Operating Procedure (SOP) under development. • Programme of estates work nearing completion. This builds on some recent investment around eye care diagnostics. • Service to be run as a pilot which has been agreed via commissioning/contracting teams. • Target date for completion of workstream and expected service start date now proposed as 30/11/26 due to a delay in visits to North Road clinic (please see networking opportunities and joint pathway development workstream update).	
b) Networking opportunities and joint pathway development.	Develop opportunities for PTHB staff to work at the North Road clinic in order to inform PTHB pathway development and	• Strengthened cross organisational networking. • Improved pathway design and local delivery options	• To support workstream a) PTHB staff will work at North Road clinic, Aberystwyth, as part of an honorary contract arrangement, to help them better understand the pathways and ways of working.	

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	repatriation opportunities with eyecare Multidisciplinary Team (MDT) in Powys. <u>Target date – 30/06/26</u>		• Two members of PTHB staff have been cleared to work at North Road clinic, Aberystwyth following completion of the honorary contract process, including Occupational Health (OH) checks. • The target date of 30/06/26 has not been achieved due to a delay in visits to North Road clinic. This is due to a number of factors including delays in completion of honorary contracts process, sickness absence of key members of staff and differing views over whether the visits should be delayed pending review of Intravitreal Therapy (IVT) treatment protocols due to change in drugs used. • Target date for completion of workstream now proposed as 30/11/26.
c) Mid Wales Clinical Leadership	Develop a proposal for clinical leadership for Mid Wales ophthalmology services. <u>Target date – 30/09/26</u>	• Agreed leadership approach to support Mid Wales eye care services.	• MWPDEG has previously agreed a proposal for a joint Clinical Lead for Eye Care services but recruitment was unsuccessful. • PTHB does not have a clinical leadership structure and as such has established a Special Lead Consultant Ophthalmology post for one session a week to provide medical leadership for eyecare services and the transformation of Ophthalmology services pan Powys. • Opportunity has been shared with Health Boards via commissioning meetings and Clinical Implementation Network for Ophthalmology. One Health Board has shown an interest in working with PTHB. • Mid Wales Ophthalmology Group has proposed that the leadership roles currently in place / being developed by Health Boards could form a joint Mid Wales leadership arrangement. Some links are already in place through the National Eye Care Network. • MWPDEG agreed at its meeting on 11/05/26 to continue exploring all options and revisit opportunities with the Mid Wales Ophthalmology Group, including broadening the leadership approach and considering non-medical leadership options. • Mid Wales Ophthalmology Group met on 05/06/26, considered feedback from MWPDEG and agreed that the Mid Wales Clinical Leadership Workstream is no longer required. The Group recommended the formal closure of the workstream. • Closure proposal report developed, considered by the Mid Wales Ophthalmology Group and MWCAG. Proposal agreed by MWPDEG on 20/07/26 and that there should be a designated Senior Resoonsible Officer (SRO) for the Ophthalmology priority.

d) Primary care eye care services for the South Gwynedd area	Explore options to strengthen primary care eye care provision in the South Gwynedd area. <u>Target date – 31/03/27</u>	• Increase in access to primary care eye services closer to home. • Reduced travel for South Gwynedd residents.	• Terms of reference for 'Primary care eye care services for the South Gwynedd area' workstream developed and agreed by Mid Wales Ophthalmology Group.
ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)			
a) PTHB nurse led wet AMD service and b) Networking opportunities and joint pathway development • MWJC team to arrange meeting of relevant PTHB and HDdUHB leads to set and agree timetable for visits to North Road clinic. c) Primary care eye care services for the South Gwynedd area • Needs Assessment and Service Mapping commenced.			
ANY OTHER COMMENTS			
WGOS4 WGOS4 cross-border and funding issues raised at the Mid Wales Ophthalmology Group meeting on 05/06/26: • The Opera platform has been implemented within HDdUHB as a referral pathway; however, not all referrals have yet transitioned to the system. • Patients on the secondary care waiting list who are suitable for WGOS 4 services (Glaucoma and IVT) and no longer require secondary care follow-up have been discharged to primary care. However, HDdUHB is unclear how to manage BCUHB and PTHB patients. WGOS 4 is not currently available in North Powys, primary care capacity is limited, and the funding model is based on Health Board population. There is currently no clear mechanism for cross-border funding recovery. • HDdUHB is further advanced in implementing the pathway and is therefore experiencing these challenges earlier than other Health Boards. • Some BCUHB and PTHB patients could potentially be managed within primary care services in North Ceredigion; however, capacity is limited. • HDdUHB will retain these patients on the secondary care waiting list and share more detailed information on affected BCUHB and PTHB patients with relevant Health Board colleagues for internal consideration and response. • Referrals submitted via the Opera system are based on GP registration rather than patient residence, creating cross-border referral and pathway management issues. • These challenges are recognised as a national issue and will require an All-Wales solution. • Issue requires further discussion with commissioning colleagues and will therefore be referred to the Mid Wales Strategic Commissioning Group.			

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PRIORITY	Cancer (Carried forward from 2025/26)	STRATEGIC OBJECTIVE	Identify opportunities for increasing provision and improving access to cancer services across Mid Wales.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Radiotherapy and oncology services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents.			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: MWJC Programme Director Delivery Lead: General Manager Planned Care and Cancer Clinical Services Group HDdUHB	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	To be confirmed
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Radiotherapy pathway	Identify opportunities to improve access to radiotherapy services across Mid Wales by minimising unnecessary travel for patients and ensuring that suitable transport and accommodation options are available when treatment closer to home is not possible. <u>Target date – Long term</u>	- Reduction in unnecessary travel for Mid Wales residents. - Improved access to transport. - Improved access to accommodation.	- MWJC is represented on the South West Wales Cancer (SWWC) Radiotherapy Modernisation Working Group to ensure that the challenges faced by the Mid Wales population in accessing cancer services are appropriately considered. - Links between the SWWC group and PTHB, BCUHB, and WAST, are through sharing updates and papers from the two Groups with nominated organisational representatives. - Forecast increased demand for radiotherapy services has shown there is a need for additional radiotherapy machines (5th, 6th and 7th) to serve the wider Mid and South West Wales population. - Work is nearing completion on the agreement of the Business Case for 5th radiotherapy machine to be located on the Singleton Hospital site. - Given planning, capital, and estates timelines, Singleton Hospital has been identified as the only feasible location for the 6th and 7th radiotherapy machines. - The establishment of a satellite radiotherapy centre at a location within HDdUHB is being explored. This work is at a very early stage, is considered a long-term programme, and will be aligned with the radiotherapy machine replacement programme for Singleton Hospital. - The MWJC team has requested that available options be explored to ensure appropriate transport and accommodation arrangements are in place for the forecast increase in patient activity from the Mid Wales area.	

b) Chemotherapy pathway	Identify opportunities to improve access to, and increase provision of, chemotherapy services across Mid Wales. <u>Target date – Long term</u>	• Reduction in referrals to out of area services. • Reduced travel for Mid Wales residents. • Increase in number of patients treated through the Bronglais General Hospital (BGH) service.	• MWJC is represented on the SWWC Oncology Outpatients Modernisation Working Group to ensure that the challenges faced by the Mid Wales population in accessing cancer services are appropriately considered. • Links between the SWWC group and PTHB, BCUHB, and WAST, are through sharing updates and papers from the two Groups with nominated organisational representatives. • Representatives of the SWWC Oncology Outpatients Working Group provided a presentation to the Mid Wales Strategic Commissioning Group (HDdUHB, PTHB, BCUHB) on 17/11/25 on the proposed BGH oncology outpatients long term plan. • Representatives from PTHB and BCUHB asked to take the proposals back internally within their organisations. BCUHB - Feedback received and shared with SWWC team and Mid Wales Strategic Commissioning Group on 26 May 2026. - SWWC team has proposed a clinically focused meeting to discuss further. PTHB - To be taken to Executive Team. - To be taken to Cancer Group. • MWJC Programme Director and Chair of Mid Wales Strategic Commissioning Group provided feedback to SBUHB / HDdUHB Regional Clinical Services Planning Sub-Group meeting in March 2026 on the need for a formal engagement and consultation process for the proposed BGH oncology outpatients long term plan. • Short-term workforce challenges impacting BGH oncology outpatient services are currently being actively managed by the HDdUHB Cancer Services team. • MWPDEG has identified cancer services as a potential area of focus, particularly in relation to the emerging proposals on for BGH Oncology services from the South West Wales Cancer Centre (SWWC) and possible implications for pathways, access, and patient travel. • MWJC Programme Director and MWJC Executive Clinical Lead/Chair of MWCAG met on 22/06/2026. Agreed that the MWJC Executive Clinical Lead would discuss the matter internally within PTHB. Also agreed that data would be obtained on the number of PTHB patients treated by HDdUHB.
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ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)

a) Radiotherapy pathway

- MWJC to continue monitoring the programme through representation on the SWWC Radiotherapy Modernisation Working Group and ongoing reporting to the Mid Wales Clinical Advisory Group and Mid Wales Strategic Commissioning Group.

b) Chemotherapy pathway

- MWJC Executive Clinical Lead to progress internal discussions within PTHB.
- Obtain and analyse activity data on the number of PTHB patients receiving treatment through HDdUHB oncology services.
- Arrange clinically focused meeting between SWWC, BCUHB and PTHB.
- Mid Wales Clinical Advisory Group to review organisational feedback, activity data and clinical discussions to determine implications for Mid Wales populations.
- SWWC to confirm arrangements and timelines for formal stakeholder engagement and consultation regarding the BGH oncology outpatients long-term plan.
- MWJC to continue monitoring the programme through representation on the SWWC Oncology Outpatients Modernisation Working Group and ongoing reporting to the Mid Wales Clinical Advisory Group and Mid Wales Strategic Commissioning Group.

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PRIORITY	Community Dental Services (Carried forward from 2025/26)	STRATEGIC OBJECTIVE	Identify what improvements can be made to general NHS dental services provision across Mid Wales.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Dental services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents.			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: Director of Primary, Community Care and Mental Health PTHB Delivery Lead: Head of Dental Services HDdUHB, Dental Director PTHB, Assistant Clinical Director BCUHB, Assistant Director Primary Care, BCUHB	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Dental Group
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Endodontic services	Develop a pathway enabling HDdUHB Ceredigion patients residing in the Mid Wales catchment area to access endodontic treatment delivered by PTHB at Llandrindod Wells Hospital. <u>Target Date – 30/06/26</u>	• Reduced travel for Mid Wales residents.	• Proposal is for HDdUHB patients from the ‘SY’ postcode area to access endodontic treatment at Llandrindod Wells Hospital, provided by PTHB. Up to a maximum cap of 15 patients per annum. • Situation, Background, Assessment, Recommendation (SBAR) presented to HDdUHB Dental Senior Management Team 10/03/26 and Dental Quality, Health and Safety Group (QHS) on 13/04/26 as part of the Health Boards’s governance process. • Confirmation received that the electronic Referral Management System (eRMS) will allow referrals direct from HDdUHB General Dental Practitioners to PTHB (Llandrindod Wells Hospital). eRMS system update with relevant referral information and instructions. • Arrangements for PTHB recharging of HDdUHB confirmed. • Summary service specification for Endodontics service developed into a Service Level Agreement (SLA). • Additional queries received regarding SLA and SLA updated accordingly. SLA signed by both Health Boards. • HDdUHB has notified eRMS that the pathway is live. • HDdUHB has notified PTHB of the pathway go-live date. • Dental practitioners advised of service available for patients from SY postcode area. • Pathway live as at 20/07/26.	

b) Paediatric General Anaesthesia (GA) service	Explore the feasibility of establishing an integrated Paediatric GA service for Mid Wales. <u>Target Date – Long Term</u>	• Reduction in out of area referrals. • Improved Referral to Treatment (RTT) performance. • Reduced travel for Mid Wales residents.	• HDdUHB Paediatric General Anaesthesia service is currently provided by a private provider, Parkway Clinic at Swansea. • HDdUHB Paediatric Dental pathway task and finish group, to review the Health Board's Paediatric Dental pathway and opportunities to develop NHS based capacity, has been established. • Programme of meetings for HDdUHB Paediatric Dental pathway task and finish group for 2026/27 scheduled. • Programme of work for HDdUHB Paediatric Dental pathway task and finish group includes a workstream to explore the opportunity for a Mid Wales Paediatric GA service. • HDdUHB Paediatric Dental Pathway Task and Finish Group met on 24/06/26 to review and progress the development of the Mid Wales Paediatric Dental General Anaesthetic (GA) service. Meeting included representatives from the Mid Wales Dental Group and relevant stakeholders from HDdUHB, including Bronglais General Hospital (BGH). • Discussion focused on identifying practical solutions to improve access to paediatric dental GA services for children across Mid Wales and reducing current waiting times and travel burdens for families. • Agreed that initial service development should prioritise ASA 2 and ASA 3 patients. • Group also explored the feasibility of establishing ad-hoc paediatric dental GA sessions at Glangwili General Hospital (GGH). • Subject to operational, workforce and theatre capacity considerations, a proposed implementation date of September 2026 was identified for the commencement of pilot/ad-hoc sessions.
ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)			
b) Paediatric GA service • Undertake a feasibility assessment for proposed ad-hoc paediatric dental GA sessions at GGH. • Provide a progress update to the Mid Wales Dental Group on 09/09/26 on feasibility outcomes and next steps.			
ANY OTHER COMMENTS			
c) Paediatric Consultant in Dental Services • HDdUHB Head of Dental and Optometry services attended the MWPDEG meeting on 16/05/25 to provide a more detailed update on the work of the Mid Wales Dental Group. MWPDEG noted that the three Mid Wales Health Boards were planning to recruit their own individual Paediatric Consultant in Dental Services in the near future and asked the Mid Wales Dental Group to look at whether a shared arrangement would be appropriate.			

- Mid Wales Dental Group meeting on 19/06/25 noted that the recruitment process was already in progress for two of the three Health Boards. As such the group agreed that a shared arrangement was not possible at that time but if all Mid Wales Health Boards were successful in recruiting to their respective posts then these postholders could provide peer support to each other.
- Update on recruitment as follows:
 - PTHB has successfully recruited to a part-time post; the postholder has now commenced.
 - BCUHB has successfully recruited to two posts (one full-time and one part-time); both postholders have commenced.
 - HDdUHB has successfully recruited to a part-time post; the postholder has now commenced.
- Mid Wales Dental Group will explore arrangements for peer-to-peer support.

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PRIORITY	Strategic service change programmes (carried forward from 2025/26)	STRATEGIC OBJECTIVE	Identify the impact of pathway changes proposed in organisational strategic service change programmes for the Mid Wales population.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Strategic service change programmes for services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents.			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: MWJC Programme Director Delivery Lead: Dependent on outcome of MWPDEG discussions	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Planning and Delivery Executive Group (MWPDEG) and Mid Wales Clinical Advisory Group (MWCAG)
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Strategic service change programmes	Review pathways impacted by organisational Strategic Service Change programmes and support the development of regional and cross-border solutions. <u>Target: On-going</u>	- Improved understanding of impacts of strategic service changes on the Mid Wales population. - Identification of viable regional and cross border solutions.	a) Stroke services - In 2025/26, MWPDEG agreed that the MWCAG-established principle of a stroke group should continue, with: - A review of nominated attendees; and - Members asked to step up engagement as specific questions or issues arise, rather than relying solely on standing meetings. - HDdUHB Phase 2 Consultation for Stroke Services to run for eight weeks, from 28/05/26 to 26/07/27. - Request received from HDdUHB Transformation Team to engage with MWPDEG and MWCAG on HDdUHB Phase 2 Consultation for stroke services. - Chair of MWCAG, advised that it would be appropriate for the HDdUHB Transformation Team to engage directly with the Mid Wales Stroke Service Change Group. - Mid Wales Stroke Service Change Group met on 10/07/26 to receive a presentation on the HDdUHB Phase 2 consultation for stroke services. This was followed by a group discussion and feedback session, the outcomes of which have been collated to inform a collective response. The group's response has been approved by the Chair of the Mid Wales Clinical Advisory Group, on behalf of the Group, and subsequently been submitted to HDdUHB. - MWPDEG meeting on 20/07/26 received a presentation on the proposed options for Phase 2 consultation, followed by a group discussion and feedback session. The outcomes of the group discussion and feedback session has been collated into a collective response and subsequently submitted to HDdUHB.	

			b) Bronglais General Hospital (BGH) Oncology services (Links to Cancer priority – Chemotherapy workstream) • MWPDEG has identified cancer services as a potential area of focus, particularly in relation to the emerging proposals on for BGH Oncology services from the South West Wales Cancer Centre (SWWC) and possible implications for pathways, access, and patient travel. • MWJC Programme Director and MWJC Executive Clinical Lead/Chair of MWCAG met on 22/06/2026. Agreed that the MWJC Executive Clinical Lead would discuss the matter internally within PTHB. Also agreed that data would be obtained on the number of PTHB patients treated by HDdUHB.
ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)			
b) BGH Oncology services • Please refer to actions detailed within the Cancer workstream plan on a page.			

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PRIORITY	Colorectal (Carried forward from 2025/26)	STRATEGIC OBJECTIVE	Establish a sustainable Colorectal services pathway for Mid Wales, which ensures a Mid Wales focus on service delivery and creates opportunities for the provision of outreach services across the Care Hubs in Mid Wales.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Colorectal services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: MWJC Programme Director Delivery Lead: Consultant Surgeon HDdUHB, Service Delivery Manager - General Surgery HDdUHB, Head of Planned Care PTHB	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Colorectal Services Task & Finish Group
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Colorectal service development and expansion	Explore the opportunities for expanding the HDdUHB colorectal service to include patients from other areas of PTHB and BCUHB. <u>Target date – Long term</u>	• Reduction in out of area secondary care referrals. • Improved Referral to Treatment (RTT) performance. • Reduced travel for Mid Wales residents. • Increased utilisation of Bronglais General Hospital (BGH) services. • Increase in the number of outreach services across the Care Hubs in Mid Wales. • Increase in the commissioning numbers for BGH Colorectal services from neighbouring Health Boards (HB).	• Newtown Colorectal clinics evaluation report included high level demand and capacity modelling work outlining the potential opportunities for expanding the HDdUHB service to include patients from other areas of PTHB and BCUHB. • Following a request from MWPDEG, MWJC Programme Director met with Mid Wales HB planning and operational leads on 21/10/25 to seek their feedback on whether Mid Wales HBs continue to be signed up to the direction of travel being proposed. Agreed that: ○ HBs continue to be signed up to the direction of travel proposed and further work be undertaken to explore the potential opportunities for expansion of colorectal services across Mid Wales. ○ Work should be led by the Mid Wales Colorectal task and finish group, with a revised membership. • MWPDEG agreed the proposed approach on 24/11/25. • Terms of reference and membership for the refreshed Mid Wales Colorectal Task and Finish Group have been developed with appropriate representation from all Health Boards confirmed. • Demand for monthly Newtown Colorectal clinics has reduced with April, May and June 2026 clinics not held. Feedback from HDdUHB Scheduled Care team is that the numbers have not consistently been sufficient, but previous clinics have been maintained due to the backlog, which has now reduced. Another potential contributory factor may potentially be the change in pathway introduced at the	

			end of November 2025, including i) FIT testing; and ii) Straight to Test pathway. • Issue of reduced demand for Newtown colorectal clinics considered by Mid Wales Strategic Commissioning Group on 26 May 2026. Members agreed there is a need to better understand what issues are contributing to the reduced demand and that the PTHB Assistant Director of Community Services should lead on this work. • Data obtained from the Hywel Dda UHB Informatics Team on Powys residents who have accessed HDdUHB colorectal services. Data shared with the PTHB Assistant Director of Community Services. • Meeting of Mid Wales Colorectal Task and Finish Group arranged for 11/09/26.
ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)			
a) Colorectal service development and expansion • Analysis undertaken of patient demand and referral patterns, and Powys patient flows to BGH compared to outreach clinics, to help inform consideration of future service model arrangements. • Mid Wales Colorectal Task and Finish Group meeting held on 11/09/26 to commence work on exploring the opportunities for expanding the HDdUHB colorectal service to include patients from other areas of PTHB and BCUHB.			

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PRIORITY	Dermatology (carried forward from 2025/26)	STRATEGIC OBJECTIVE	Identify opportunities for increasing provision and improving access to Dermatology services across Mid Wales.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Dermatology services provided to North Ceredigion, North and Mid Powys and South Gwynedd residents			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	Executive Lead: MWJC Programme Director Delivery Lead: Service Delivery Manager Dermatology HDdUHB, Service Manager Dermatology HDdUHB, Head of Planned Care PTHB, Directorate Deputy General Manager Medicine BCUHB (for central), Directorate General Manager – Community (for East) Community Services Operations Manager (for West)	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Dermatology task and finish group
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Dermatology	Review the current Dermatology service provision across Mid Wales and identify opportunities to increase capacity and improve access. <u>Target Date – 31/03/27</u>	- Improved Referral to Treatment (RTT) performance. - Reduced travel for Mid Wales residents. - Increased provision of primary care led Dermatology services.	- Mid Wales Dermatology Group established with representatives from BCUHB, HDdUHB and PTHB. First meeting held on 03/09/25. Initial work undertaken on reviewing current provision for Dermatology services across Mid Wales and identifying opportunities for joint working to increase provision and improve access. - Mid Wales Strategic Commissioning Group noted the update from the first meeting and requested that the MWJC Programme Director meet with the Mid Wales Dermatology Group to provide guidance on what is expected and what is required. - Mid Wales Dermatology Group met on 10/07/26 to discuss required workstream actions.	
ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)				
- Dermatology position paper revised to reflect current service arrangements, challenges, and opportunities including summary of i) Referral pathways, ii) Primary care service delivery models, iii) Tele dermatology, remote triage and clinical photography, iv) Quality and oversight arrangements and v) Current governance arrangements for primary care dermatology services. - Mid Wales Dermatology Group meeting held on 29/09/26 to consider the revised Dermatology position paper and identify opportunities for regional collaboration and service development.				

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PRIORITY	Rural Health and Care Workforce	STRATEGIC OBJECTIVE	Develop solutions to strengthen cross-border workforce arrangements across health and social care in Mid Wales.	
REPORTING PERIOD	1 April to 31 July 2026			
SCOPE	Health and social care workforce for North Ceredigion, North and Mid Powys and South Gwynedd.			
OUTCOMES	• Increase in number of substantive appointments across Mid Wales. • Increase in number of new roles created. • Integrated approach to workforce provision across Mid Wales. • Workforce job satisfaction. • Increased public satisfaction with the services provided across Mid Wales.			
GOVERNANCE	Responsible Officers	Priority oversight through	Governance through	Delivery through
	<i>Executive Lead:</i> Director of Workforce & Organisational Development (OD) HDdUHB <i>Delivery Lead:</i> People Priorities Strategic Lead Mid Wales Partnership, PTHB, AD People, Culture, OD & Wellbeing PTHB	Mid Wales Planning and Delivery Executive Group (MWPDEG)	Betsi Cadwaladr University Health Board (BCUHB), Hywel Dda University Health Board (HDdUHB) and Powys Teaching Health Board (PTHB) via the Mid Wales Joint Committee (MWJC)	Mid Wales Workforce Group
WORKSTREAM	AIM	EXPECTED OUTCOMES	PROGRESS	
a) Regional Integration & Cross-Sector Expansion of the Support Worker Development Programme (SWDP)	Expand the Mid Wales SWDP beyond the initial Health Board (HB) partnership, enabling full regional integration and cross-sector participation. To include establishing shared development pathways and coordinated access to training for Local Authorities, social care providers, emergency services, third-sector organisations, volunteers and unpaid carers. <u>Target date – 31/03/27</u>	• Regionally integrated SWDP. • Broader cross sector participation. • Consistent development pathways and coordinated access to education and training opportunities. • Strengthened collective workforce capability. • Improved alignment and collaboration across agencies. • Stronger partnerships with education and skills providers. • Improved workforce sustainability.	• Health Boards have identified some capacity to support this workstream. • Stakeholder analysis is underway and contact made with some Local Authorities and third sector organisations. • Training opportunities are shared across Mid Wales Health Boards through a unified booking system, enabling streamlined access and improved ease of use and timetables being planned and Brochure and timetables being finalise for Quarter 2 • A structured stakeholder analysis is underway to identify key organisations, partners and system influencers who can support the development and expansion of the SWDP. This includes early identification and engagement with Ceredigion County Council and some third sector colleagues. • The SWDP action plan is being strengthened to better reflect and align with wider capacity across partner organisations.	

b) Cross-Sector Population Health, Wellbeing and Prevention Capability Development	Establish a baseline position across Mid Wales of workforce capabilities in prevention, population health and community-based wellbeing support, to identify opportunities for collaboration. <u>Target date – 31/03/27</u>	• Clear baseline understanding of prevention and population health workforce capability. • Stronger cross-sector collaboration and partnership working. • More consistent, community-centred approach to prevention and wellbeing • Improved workforce capability to support early intervention, prevention and the reduction of health inequalities. • Improved alignment with Welsh Government prevention and population health frameworks • Foundations established for coordinated workforce planning and targeted investment in prevention and wellbeing.	• Work has commenced on identifying key organisational stakeholders across Health Boards, Local Authorities, Public Health Wales, Primary Care, education providers and third sector partners. • A meeting with Public Health (Powys) has supported the identification of stakeholders and initiate discussions on population health training.
c) Developing a Regional Approach to Workforce Health, Wellbeing and Psychological Support	Establish a regional baseline position of workforce health, wellbeing and psychological support needs across Mid Wales Health Boards (HB), enabling improved access, reduced duplication and strengthened resilience for staff. <u>Target date – 31/03/27</u>	• Shared regional baseline understanding of workforce health, wellbeing, and psychological support needs. • Improved visibility of existing provision. • Improved opportunities to coordinate and streamline wellbeing and psychological support. • More consistent access to wellbeing and psychological support • Sustainable regional approach to workforce wellbeing • Improved workforce resilience and staff experience	• Early scoping work has begun to identify key stakeholders and develop an engagement approach, with further detail to be progressed.

		• Stronger collaboration and shared leadership across organisations • Foundations established for ongoing regional planning, monitoring, and improvement of workforce wellbeing support.	
d) Mid Wales Contribution to the National Management & Leadership Competency Framework	Support early development activity related to the national Management & Leadership Competency Framework in partnership with Health Education and Improvement Wales (HEIW), ensuring that emerging proposals are aligned across Mid Wales and duplication is avoided between the three Mid Wales HBs. <u>Target date – 31/03/27</u>	• Early Mid Wales input into the development of the national Management & Leadership Competency Framework. • Alignment of emerging leadership and management proposals. • Reduced duplication of leadership development activity. • Coherent and consistent regional approach to management and leadership development. • Improved clarity and shared understanding of management and leadership competency expectations. • Stronger collaboration with national partners. • Sustainable and coordinated leadership pipeline. • Increased consistency and equity in leadership development opportunities. • Shared regional ownership of leadership development.	• Mid Wales is an early adopter for the HEIW leadership management framework. • Health Boards have been sent the HEIW mapping work and are working with HEIW on mapping the current leadership and management provision. • Mid Wales is also going to be the early adopter for some of the tools being piloted by HEIW including self-assessment, which has now commenced. • Meetings have been undertaken with CMI, HEIW and all Mid Wales Health Boards, and the mapping of existing programmes against the management and leadership framework has commenced. This is enabling constructive dialogue, identification of improvement opportunities, and initial testing of the framework.

ACTIONS PLANNED FOR NEXT PERIOD (AUGUST TO SEPTEMBER 2026)

a) Regional Integration & Cross-Sector Expansion of the SWDP

- Undertake a structured stakeholder analysis to identify key organisations, partners and system influencers who can support the development and expansion of the SWDP across Mid Wales. To include identifying partners across Health Boards, Local Authorities, Public Health, Primary Care, education providers and third sector organisations
- Develop a stakeholder engagement plan to support cross-sector participation in the SWDP and the development of a Joint Rural Workforce Model for Health and Care.

b) Cross-Sector Population Health, Wellbeing and Prevention Capability Development

- Commence work on identifying key organisational stakeholders across Health Boards, Local Authorities, Public Health Wales, Primary Care, education providers and third sector partners. To be completed end of quarter 2.

c) Developing a Regional Approach to Workforce Health, Wellbeing and Psychological Support

- Identify key stakeholders.
- Establish an engagement approach that supports the development of a shared understanding of regional workforce wellbeing needs and existing support mechanisms.

d) Mid Wales Contribution to the National Management & Leadership Competency Framework

- Undertake a joint mapping exercise of existing leadership pathways, development offers and gaps across Mid Wales to inform regional alignment and identify opportunities for streamlining and shared provision. To be completed end of quarter 2.

BRAG (Blue, Red, Amber & Green) status definition

<u>BRAG Status definition</u>			
Status		Definition 2026/27	Definition 2025/26
	White	Not started	<i>*New definition for 2026/27</i>
	Red	Not on track with major issues	Late
	Amber	Mainly on track with some minor issues	Off track
	Green	On track	On track
	Blue	Complete	Completed