

# Strategy & Planning Committee (SPC)

ANNUAL REVIEW REPORT

2025/2026

## 1. Introduction and Chair's summary

In line with Standing Orders the Strategy and Planning Committee (SPC) must submit an Annual Report to the Board through the Chair within six weeks of the end of the reporting year setting out its activities during the year and including the review of its performance and that of any Sub-Committees it has established, setting out how the Committee has met its Terms of Reference (TOR) during the financial year.

The Board uses this Annual Report to inform:

- The ongoing development of its governance arrangements, including its structures and processes:
- Its Board Development Programme, as part of an overall Organisation Development framework.

### Chair's Reflections

This has been the first year for the new Strategy and Planning Committee at Hywel Dda University Health Board (HDdUHB). It is a privilege to chair this Committee, which touches on every aspect of the work of the Health Board. The year has gone quickly, as there is much activity on-going.

My highlights as Chair have been the refresh of the Health Board Strategy, whilst recognising there is more work to be done.

- Community by Design Strategic Plan
- Co-ordination of Finance, Planning, Digital and Population Health strategies
- Achieving a balanced Integrated Medium-Term Plan which takes account of the demands, opportunities and aspirations of the Health Board

We noted and welcomed the refresh of the A Healthier Mid and West Wales Strategy, recognising that it retains the core direction of travel while more clearly articulating how care will increasingly be delivered through a strengthened social model for health and wellbeing. Members were particularly encouraged by the improved alignment with the Population Health (20four7) approach and the clearer integration with the emerging Community by Design Strategic Plan, reinforcing prevention, early intervention and care closer to home.

We also reviewed the Clinical Services Plan, acknowledging the scale and complexity of the work undertaken following public consultation and conscientious consideration. Members recognised the opportunity the Plan presents to address known fragilities across a number of clinical services, particularly where workforce sustainability and reliance on temporary staffing pose ongoing risks. We noted that extensive engagement has taken place on these proposals and that a range of emerging solutions are being developed to address longstanding challenges and stabilise services in the medium term, pending delivery of the wider Programme Business Case.

We raised to the Board's attention the estates backlog maintenance and an ever increasing need to maintain very old buildings and equipment across the Health Board. The Committee noted the work being undertaken in respect of the climate adaptation plan, which relates very much to the Wellbeing of Future Generations.

I would like to take the opportunity to highlight the unique contributions of Independent Members on this Committee, as well as the valuable support provided by the Governance team and Executive Leads.

## **2. Terms of Reference and Workplan**

The Terms of Reference (TOR) for the Strategy and Planning Committee are reviewed on an annual basis or following any significant changes. The TOR were last reviewed on 31 January 2026.

Latest [Strategy and Planning Committee Terms of Reference 2026](#)

The Strategy and Planning Committee has a workplan to enable forward planning for the forthcoming year. The workplan is produced to incorporate the duties outlined in the Committee's Terms of Reference and any suggested areas of focus identified during the self-assessment process.

The Strategy and Planning Committee workplan covers a range of activities including statutory reporting duties, regular items of business and priority planned pieces of work which support Board and Committee's objectives.

The workplan is regularly updated throughout the year to ensure it remains responsive to emerging issues and risks.

Final SPC [workplan](#).

## **3. Sub-Committee**

The Capital Sub-Committee reports into the Strategy and Planning Committee with its own Terms of Reference and workplan for the year.

The Sub-Committee's Terms of Reference were last reviewed on 18 December 2025.

In line with their Terms of Reference, the Sub-Committee is required to provide a report after each meeting, as well as produce an Annual Report which is scheduled to be presented to the Committee on 28 April 2026, reporting on activity throughout the year.

#### 4. Table of attendance

Membership		24.04.25	01.07.25	28.08.25	30.10.25	18.12.25	16.01.26 (e)	26.02.26
Winston Weir	Independent Member - Committee Chair	✓	✓	✓	✓	✓	✓	✓
Maynard Davies	Independent Member - Committee Vice-Chair	✓	✓	✓	x	✓	✓	✓
Michael Imperato	Independent Member	✓	✓	✓	✓	✓	✓	✓
Chantal Patel	Independent Member	✓	✓	✓	✓	x		
Eleanor Marks	Independent Member (HDdUHB Vice-Chair)							✓
Neil Prior	Independent Member							✓
Sarah Harraway	Independent Member						✓	
<b>In Attendance</b>								
Lee Davies	Executive Director of Strategy and Planning	✓	✓	✓	✓	✓	✓	✓
Huw Thomas	Executive Director of Finance	✓	✓	✓	✓	✓	✓	✓
Andrew Carruthers	Chief Operating Officer	✓	✓	✓	✓	✓	✓	✓
Jill Paterson	Director of Primary Care, Community and Long-Term Care	✓	✓	✓	x			
Dr Ardiana Gjini	Executive Director of Public Health	✓	✓	✓	✓	✓	✓	x
Alwena Hughes Moakes	Communications and Engagement Director	✓	✓	✓	✓	✓	✓	✓
Joanne Wilson	Director of Corporate Governance / Board Secretary	✓	✓	x	✓	✓	✓	✓
Llais Cymru Representative		x	✓	x	x	x	x	x
Meeting quorate		Yes	Yes	Yes	Yes	Yes	Yes	Yes

A quorum shall consist of no less than three of the membership and must include, as a minimum, the Chair or Vice Chair of the Committee and two other Independent Members, together with half of the In Attendance members.

## **5. Committee Activities – alert, advise and assure.**

The Committee is required to report to the Board after each Committee meeting by presenting a report highlighting the key discussion items at the Committee.

**Alerts** (*The following matters were areas where the Committee was unable to take an assurance or had a lack of confidence that the action in place was sufficient to address the issue satisfactorily and/or it was within the scope of the operational team to resolve and were alerting the Board as engagement action or intervention was required*).

The Strategy and Planning Committee had no items of which to **alert** the Board.

**Advise** (*The following matters were areas of concern where assurance had been taken on actions in place but required close monitoring*).

- **Annual Plan**

Throughout 2025/26, the Strategy and Planning Committee received regular updates on the development, delivery, and oversight of the Health Board’s Annual Plan, with a consistent emphasis on financial discipline, risk-based planning, and alignment with Welsh Government requirements, reaffirming its commitment to strengthening financial management. Although the Annual Plan 2025/26 did not meet the statutory duty to break even, achieving a control total of £31.5m was recognised as an important step toward restoring financial stability. Welsh Government subsequently requested the Health Board to deliver a higher level of savings, with a response due by 30 April 2025. The Annual Plan continued to align with the NHS Wales Planning Framework 2025–2028, ensuring that national priorities - including timely access, population health, mental health, and quality - were fully embedded into operational delivery. The three phase diagnostics transformation strategy formed a key part of this, aimed at eliminating urgent suspected cancer imaging backlogs and achieving 80% Single Cancer Pathway (SCP) compliance by March 2026, however SCP performance in March 2026 was approximately 64–67%. Work on the 2026/27 planning cycle continues; however, the plan is less mature than at this stage last year. Further work was required to ensure consistency, ahead of Board approval and submission to WG by 31 March 2026.

- **2025/26 Capital Programme**

The Capital Programme reported that the Board approved split of the Discretionary Capital Allocation included additional expenditure on combined heat and power plants and an increase in the Targeted Estate Fund (TEF). Remedial work

addressing Reinforced Autoclaved Aerated Concrete (RAAC) at Withybush Hospital was completed, with further survey work continuing.

The Discretionary Capital Programme (DCP) increased significantly, although this remained insufficient when set against the substantial backlog across estates, medical devices, and digital infrastructure. Submissions for additional radiology and ultrasound equipment were made to Welsh Government, with further test schemes submitted through fast-track processes. The Board approved the distribution of the capital allocation, including schemes requiring execution under seal, which are updated regularly through the Capital Sub Committee and Strategy and Planning Committee for onward submission to the Board.

Additional capital funding was secured to support radiology replacement equipment at Withybush Hospital, ultrasound equipment at Glangwili Hospital, and improvements within Mental Health and Learning Disabilities estates. Contingency funding for capital programmes was fully utilised; however, additional VAT recovery funds were identified, with a request submitted to Welsh Government to reinvest these funds into estate improving schemes and spend to save initiatives.

Emerging capital risks were highlighted, particularly the constrained availability of capital funding and a growing maintenance backlog across the Health Board's infrastructure and equipment. A key risk related to uncertainty surrounding funding for urgent remedial works to concrete cladding at Withybush Hospital, resulting in overcommitment of the DCP in anticipation of forthcoming allocations. Despite strengthened capital prioritisation processes, challenges persisted due to ageing assets, rising demand, and limited flexibility in national capital allocations. These pressures continued to impact the feasibility of delivering the capital investment plan and increased the risk of deterioration affecting service quality and safety.

Constructive engagement continued with Welsh Government on major infrastructure challenges, particularly at Withybush and Glangwili Hospitals. Assurance was provided regarding end of year capital funding allocations and the submission of an additional proposal for further capital investment. Preparatory work also commenced for 2026-27 discretionary capital allocation, with plans to manage slippage and progress multiyear schemes.

The Discretionary Capital Programme was allocated in line with Board approved priorities, supported by targeted funding for radiology, digital capability, estate resilience and Mental Health services. Planning for the 2026/27 programme recognised that, while these allocations address key risks, the overall level of capital funding remains insufficient to fully mitigate the Health Board's known and emerging capital pressures.

- **Emergency Department at Glangwili Hospital**

The Strategy and Planning Committee Chair's Action meeting held in September 2025 discussed a proposal to consider the business case developed to support an improvement in the performance, quality, safety and experience for patients attending the Emergency Department (ED) at Glangwili Hospital, to enhance Same

Day Emergency Care (SDEC) services. This initiative responded to urgent patient safety concerns and overcrowding identified by the Ministerial Advisory Group (MAG), Getting It Right First Time (GIRFT), and NHS Executive visits. The scheme, which includes net-zero compliance, and has contingency plans for winter operational pressures, aligns with the Health Board's wider integrated Urgent and Emergency Care Strategy and received clinical sign-off. The Same Day Emergency Care (SDEC) facility has undergone a major refurbishment and formally reopened to patients and staff on 30 March 2026. The refurbished unit provides increased clinical capacity through additional consultation rooms, an improved patient reception area and an enhanced care environment, with the explicit aim of reducing pressure on the Emergency Department and improving patient flow and experience.

- **Major Infrastructure Business Continuity - Risks and Patient Impact Report**

The report highlighted the implications for patient care arising from the risks the Health Board continues to carry in relation to its estate. The report provided assurance that the most significant risks will be partially mitigated over the next three to four years; however, it also noted that the anticipated funding is significantly below that set out in the previous Programme Business Case and does not include funding for condition upgrades such as flooring, decoration, painting, ceilings and lighting, which remain significant issues across the estate. The report was developed in conjunction with NHS Wales Shared Services Partnership and submitted to Welsh Government and was included amongst a small number of prioritised and supported projects for the Health Board.

- **Planning Maturity Matrix**

Most areas of the Planning Maturity Matrix remained steady or showed improvement; however, Domain One: Strategy Development was assessed as having regressed, reflecting ongoing uncertainty regarding the longterm strategic plan for the acute hospital sites. The requirement for a robust multiyear financial sustainability plan was acknowledged, alongside the need to strengthen alignment between strategic ambition and operational planning. Concerns were raised regarding the consistency of operational planning and coordination during a period of strategic transition. The Maturity Matrix process highlighted that the current organisational strategy is outdated, reinforcing the need for a Strategic Refresh to update assumptions, time horizons and delivery priorities, while continuing to build on the Health Board's established strategic direction. The Committee emphasised that the success of the Strategic Refresh will depend on stable leadership, clear accountability frameworks, effective programme governance and functional digital infrastructure to support delivery and performance oversight.

- **Targeted Intervention**

During 2025/26, the Committee maintained oversight of Targeted Intervention, receiving regular updates on financial sustainability, governance maturity, and progress against Welsh Government requirements.

The Committee reviewed progress against Targeted Intervention and noted that the Health Board had identified £22.5m in potential savings and introduced a strengthened Quality Impact Assessment framework to ensure patient safety, although operational pressures continued to affect areas such as Stroke and Cancer. The subsequent De-escalation Assessment Report confirmed significant financial risk, with Welsh Government reducing the control total and the Health Board submitting a revised deficit forecast. While the revised Clinical Services Plan (CSP) had not yet been approved, progress was demonstrated across all de-escalation criteria, supported by improved planning maturity and strong engagement with the Plan.

Further progress was reported towards meeting the revised control total, although recurrent financial sustainability challenges remained. By February 2026, the Committee received assurance of continued improvements in governance, strategic planning, and CSP development, while recognising that financial and planning gaps persist. Delivery of the three-year Financial Roadmap, supported by conditional Welsh Government funding, remains essential.

The Committee recognised improved governance maturity and strengthened planning processes. However, given ongoing financial risk and the need for a credible, sustainable financial strategy, continued enhanced oversight remains necessary before any future consideration of de-escalation.

**Assure** (*The following matters were areas where there was confidence that robust actions are in place and are sufficient to address the issues to operate effectively*).

- **A Healthier Mid and West Wales**

The Committee received regular updates on the refresh of the *A Healthier Mid and West Wales* (AHMWW) Strategy, originally published in 2018. During the year, work focused on ensuring that the Strategy remained aligned with population health needs, organisational priorities and evolving models of care.

Extensive engagement was undertaken with key leads to identify which elements of the 2018 Strategy required updating, including opportunities to inform long-term planning assumptions and emerging priority areas. Public engagement activity was broadened across the region and supported by a Board approved Communications Plan. To minimise consultation fatigue following recent Clinical Services Plan-related engagement, feedback was gathered primarily through existing engagement events where possible. Collaborative discussions were also initiated with Swansea Bay

University Health Board and Mid Wales partners to support a shared understanding of regional strategic priorities.

Drawing on this engagement, the Strategy Refresh focused on understanding population priorities for health and wellbeing rather than proposing specific service changes, ensuring alignment with the emerging Clinical Services Plan and reinforcing an approach grounded in evidence, prevention and long-term planning. The refreshed 'A Healthier Mid and West Wales strategy' was approved by the Board at its public meeting on 29 January 2026, establishing a clear and agreed long-term strategic framework to guide organisational priorities and decision-making through to 2040.

The most recent phase of engagement reaffirmed the strength of the evidence base underpinning the AHMWW strategy and highlighted the need to transition from high-level strategic development towards delivery and implementation. The refresh process confirmed the Strategy's critical role in guiding future priorities and supporting a coherent, credible and system aligned approach alongside the Clinical Services Plan and wider transformation agenda.

- **Climate Adaptation Plan**

A comprehensive Climate Adaptation Plan and Climate Change Risk and Opportunity Assessment (CCROA) has been developed, in line with Welsh Government requirements for all health and social care organisations to prepare for climate impacts. The assessment confirmed growing climate-related pressures with risks expected to intensify. The Plan outlined priority themes including estate suitability, service access, population health, clinical and operational resilience, business continuity and supply-chain security, supported by a structured multi-disciplinary governance model to integrate adaptation into planning and capital development.

- **Clinical Services Plan**

The Committee received assurance from the Clinical Services Plan which sets out a medium-term approach to stabilising key clinical services while the longer-term AHMWW Strategy progresses. The CSP addresses significant challenges across critical pathways - including Critical Care, Planned Care, Emergency General Surgery, Stroke, and Diagnostics - arising from service fragility, workforce pressures, and reduced post-COVID activity.

Following a 13.5-week public consultation (May - August 2025), a comprehensive suite of assessments was produced to support the Board's decision-making. These included workforce and finance modelling, capital assessments, equality and Welsh language impact assessments, the draft consultation report, and conscientious consideration documentation. The evidence indicated ongoing risks across multiple service areas, including fragile rotas, workforce gaps, and activity levels below

pre-pandemic baselines. The CSP aimed to mitigate these risks, improve access and quality of care, and support sustainable models of delivery.

At the Extraordinary Public Board meeting held over 18–19 February 2026, the Board considered the independent consultation findings alongside updated evidence on workforce resilience, estate condition, operational pressures, clinical standards and regional working. The Board carefully reviewed a wide range of consultation feedback, including alternative options put forward by stakeholders, and took decisions on the future models of care for the nine services within scope of the CSP. These decisions were intended to mitigate immediate clinical risks, improve access and quality of care, and provide a more sustainable basis for service delivery while longer term strategic and infrastructure solutions continue to be developed.

- **Commissioning Update**

The Strategic Commissioning bi-annual reports outlined national discussions on future immunology and allergy service models and highlighted an increasing trend of commissioned providers issuing formal notices to cease or restrict services due to funding pressures or lack of formal commissioning arrangements. Regional Service Level Agreements were reviewed to ensure funding appropriately reflected the services delivered to Hywel Dda UHB patients.

Progress was reported in key areas, including improved Dual Energy X-ray Absorptiometry (DXA) scan waits and significant developments in oncology and radiotherapy modernisation. This included the operational launch of a second Computerised Tomography Simulator (CTSim), development of multi-phase business cases for additional Linear Accelerator (LINAC) capacity, and early scoping of a potential satellite radiotherapy centre within Hywel Dda University Health Board.

- **Community by Design Strategic Plan (formerly Primary Care and Community Strategic Plan)**

The Community by Design Strategic Plan set out Hywel Dda University Health Board's intention to transform primary and community care as part of the wider A Healthier Mid and West Wales strategy. Rising demand, workforce pressures, rural challenges, and fragmented service models highlighted the need for a fundamental shift toward prevention, early intervention, and community-based care. Engagement with staff, contractors, partners, and patients shaped the development of the draft Plan and surfaced key themes including sustainability, digital innovation, improved access, and better integration. These insights informed six strategic priorities focused on prevention, partnership working, access, digital capability, estates and infrastructure, and workforce sustainability.

The next phase of the Community by Design Strategic Plan will focus on moving from strategy development to delivery. Subject to finalisation and approval through the Health Board's governance processes, the Plan will be translated into a phased

implementation programme with clear priorities, accountabilities and milestones. This will include the development of supporting delivery plans, integration with the Integrated Medium-Term Plan (IMTP), alignment with the Clinical Services Plan and A Healthier Mid and West Wales Strategy, and continued engagement with primary care contractors, partners, staff and communities. Ongoing oversight will emphasise delivery of improved outcomes, workforce sustainability and reduced reliance on hospital-based care, supported by strengthened digital capabilities and estates planning.

- **Director of Public Health (DPH) Annual Report 2023/24: Progress Update**

The update on progress on recommendations outlined in the Director of Public Health (DPH) Annual Report 2023/24: 'Their Health, Our Future: Advancing the Agenda for Children and Young People in Hywel Dda' highlighted strengthened partnership working, early benefits from knowledge-mobilisation, and a range of programmes underway to improve outcomes for children and young people. Planned next steps include increasing capacity, developing a robust evaluation framework, sustaining successful programmes, and moving toward a long-term strategic plan for children and young people.

- **Energy Performance Contract**

The Energy and Carbon programmes aim to improve energy efficiency, reduce emissions, and strengthen estate resilience through Energy Conservation Measures (ECMs) across multiple sites. The programme includes an Investment Grade Proposal, a bid for Invest to Save funding, and projected annual savings of £789k. The new Energy Performance Contract is funded via a repayable loan, with financial outcomes dependent on utility prices and the performance of Energy Conservation Measures. A robust monitoring and verification process is in place to oversee delivery of the guaranteed savings, with regular reporting through established governance arrangements. While the risk of underperformance or operational downtime remains live, no material variances were reported during the year, and ongoing scrutiny is in place to ensure timely identification and management of any emerging issues.

- **Estates Plan**

The Committee received regular updates on the Health Board's Estates Plan, which continues to highlight significant challenges across the estate and the requirement for long-term strategic investment. Early engagement identified substantial concerns regarding the deteriorating condition of the Health Board's estate. Discussions with Welsh Government focused on expectations for future investment and the strategic direction required, noting the complexity of reaching agreement in the current political context. Consideration was given to the condition of the Worthybush and Glangwili Hospital sites, with work undertaken to narrow the range of possible

redevelopment options. Welsh Government acknowledged the scale of need, estimating that approximately £1bn of capital investment will be required across West Wales.

Following the rebasing of the programme, the Estates Plan remained aligned to Planning Objective 8 (PO8), with progress reported as on track. Welsh Government requested that the Health Board explore a phased redevelopment of Worthybush Hospital, ensuring alignment with the organisation's wider strategic direction. In parallel, work commenced to develop an interim Estate Strategic Plan. The Health Board continued to actively manage its top ten estate risks, ensuring these were integrated with broader strategic and operational priorities.

- **Regional Joint Committee**

The report on delivery of the Regional Joint Committee (RJC) Priorities and Delivery Plan for 2025/26 up to 31 January 2026 confirmed progress across key regional workstreams, with most areas on track and some experiencing delays due to operational or capacity pressures. Work was underway to agree the 2026/27 priorities, alongside a formal review of the RJC's strategic intent and governance arrangements to ensure alignment with evolving organisational strategies and regional structures.

- **Monitoring of Welsh Health Circulars and Ministerial Directions**

Monitoring Updates on Welsh Health Circulars (WHCs) and Ministerial Directions (MDs) were reviewed at each Committee meeting, providing regular assurance that actions required by Welsh Government were being appropriately addressed. The reports confirmed that no instances of noncompliance with Ministerial Directions were identified during the year, and that arrangements were in place to track, manage and escalate delivery of actions arising from both WHCs and MDs through established governance and assurance processes.

- **Partnerships and Regional Collaboration**

The Health Board continued to strengthen partnership working across regional and statutory structures, with updates demonstrating sustained progress in public health improvement, statutory partnership governance and the development of integrated models of care.

The Public Services Boards (PSBs) Well Being Assessments provided assurance that the Health Board is working effectively with statutory partners to meet its obligations under the Wellbeing of Future Generations (Wales) Act 2015 and the Social Services and Wellbeing (Wales) Act 2014. The Assessments confirmed that joint working through PSBs, the Regional Partnership Board (RPB) and the Prevention Board continue to support family strength, early intervention and the prevention of child abuse and neglect through coordinated policy development,

education programmes, targeted funding and collaborative delivery. The assessments, last undertaken in 2022 and operating on a minimum three-year cycle, highlighted ongoing work to align and merge common priorities across the region, reducing duplication and moving away from a purely Local Authority based approach. This provides assurance of a more streamlined and regionally coherent approach to improving community wellbeing, despite differing political contexts across partner organisations.

Work through the Dyfed Area Planning Board (APB) reported continued progress in addressing substance misuse, reducing tobacco harm and tackling the wider determinants of health. Smoking prevalence across the region has reduced to 7.7%, with cessation services reporting performance on track to meet Tier 1 targets, demonstrating the impact of sustained partnership led population health interventions. Wider APB led activity continued to support improvements in population health and preventative services across the region.

The Partnership Governance Assurance Report confirmed that governance arrangements for statutory partnerships, including PSBs and the West Wales Regional Partnership Board (WWRPB), remain robust, transparent and aligned to shared regional priorities. These partnerships continue to play a central role in integrating health and social care, supporting wellbeing objectives and coordinating responses to crosscutting challenges such as poverty, sustainability and prevention. PSBs also progressed exploratory work on future collaboration opportunities, including consideration of structural changes such as the proposed Pembrokeshire PSB merger, to further strengthen regional alignment and delivery efficiency.

The WWRPB continued to provide strategic leadership across key regional programmes, including Urgent and Emergency Care and Home First, working collaboratively with Local Authorities and health partners to align regional transformation with national policy direction and Welsh Government expectations. Alongside programme delivery, work progressed to strengthen coordination, communication and delivery oversight across the regional partnership landscape.

In parallel, progress continued on implementation of the Integrated Community Care System (ICCS), the national framework for delivering seamless, preventative and person-centred care. In preparation for the planned withdrawal of Regional Integration Funding (RIF), the Integrated Executive Group (IEG) commenced transition planning, with Gateway One completed and benefits realisation activity underway for priority programmes. Regional partnership bodies are now developing statutory plans to embed ICCS as the long-term model for integrated care delivery across West Wales.

- **Planning Objectives**

The Committee oversaw four Planning Objectives transferred from the former Strategic Development and Operational Delivery Committee (SDODC), with the Clinical Services Plan, Community by Design Strategic Plan and Population Health progressing as planned, and earlier delays in the Estates Plan subsequently brought

back on track. These objectives remained central to delivery of the Health Board's Annual Plan, underpinned by accurate data reporting and a transparent review process that addressed delays in completing the 2024/25 Planning Objectives. This demonstrated the Health Board's commitment to accountability, flexible planning, and maintaining progress despite evolving operational requirements.

Throughout the year, assurance was provided through highlight reports and deep-dives, confirming steady progress across all four planning objectives while recognising capacity pressures and the need to adapt to financial and performance expectations. By early 2026, the Committee was assured that the objectives continued to underpin delivery of the 2025/26 Annual Plan and development of the emerging Integrated Medium-Term Plan, ensuring strong alignment with strategic priorities, Welsh Government requirements, and long-term organisational ambitions.

- **Population Health**

The quarterly Population Health Progress Update provided oversight of key health-improvement priorities, including healthy weight initiatives and efforts to reduce harms associated with tobacco, drugs, and alcohol. It also highlighted work on local health protection system leadership, vaccination and immunisation delivery in partnership with Primary Care, and wider collaborative activity aimed at strengthening the Health Board's position on health equity and the broader determinants of health. This included ongoing development of the Social Model for Health and Wellbeing, supported through joint working with Public Services Boards (PSBs) and Regional Partnership Boards (RPBs).

The Population Health update also reported progress against Planning Objective 10, with a continued focus on advancing the Social Model for Health and Wellbeing (SMfHW). Supported by the 20-four-7 framework, this work is aimed at strengthening prevention and reducing health inequalities. Key developments included the creation of a community of practice and the rollout of tools to support health equity assessments.

- **Property Lease Arrangements**

Progress in delivering the 2023–2026 Property Asset Strategic Plan continued throughout the year, with a broad range of lease related actions supporting service continuity, estate rationalisation and transformation objectives. Key developments included the relocation of medical records services from Unit 4, Stradey Business Park, Llangennech to new accommodation in Heol Cropin, Dafen, enabling the digitisation of records and supporting long term estate efficiency. New lease arrangements were also progressed for Units 2A and 3 at Dafen, with endorsement to terminate the Unit 4 Llangennech lease upon completion, reducing reliance on inefficient estate and supporting service consolidation.

Opportunities were secured to utilise Swansea University space within Pentre Awel through a time limited licence arrangement supported by Local Authority funding, enabling the delivery of services including phlebotomy, research and innovation

activity, and community bookable rooms. Lease variations and extensions were also agreed with Local Authorities to support the expansion and reconfiguration of Therapies and Musculoskeletal (MSK) services within the Rheidol Building in Aberystwyth, improving service integration and workforce sustainability while maintaining a low risk financial profile.

In addition, the Committee received assurance on a number of low-risk lease renewals and extensions, including the continuation of the Omnicell lease with the Welsh Ambulance Services NHS Trust, ensuring ongoing medicines management arrangements. Across the year, lease surrenders, renewals, holding over arrangements and new agreements were actively managed through established governance processes, with a focus on reducing estate risk, enabling service change, and aligning accommodation decisions with the Health Board's longer-term strategic direction.

- **Review of Clinical Pharmacy Services**

The Welsh Government-commissioned Review of Clinical Pharmacy Services identified 60 actions across four themes: optimising pharmacy roles, developing clinical care, strengthening governance, and leveraging digital technology. To date, 35% of actions have been completed, with HDdUHB actively involved in national Delivery Assurance Groups. Key achievements include expanded prescribing roles, Electronic Prescribing and Medicines Administration (EPMA) rollout in Quarter 1 2026, and improved emergency care interventions. Although workforce pressures and service integration challenges remain, alignment with national priorities and ongoing service improvement is well evidenced.

- **Social Model for Health and Wellbeing**

The Well-being of Future Generations Annual Report highlighted progress in setting and publishing the Health Board's well-being goals, including case studies demonstrating alignment with the Social Model for Health and Wellbeing and the 20-four-7 framework, alongside continued collaboration with Public Services Boards and Local Authorities. This was the final report under the current objectives, and the Health Board completed a review of its Well-being Objectives to ensure alignment with the Well-being of Future Generations (Wales) Act 2015 and the refreshed long-term strategy. The review, informed by stakeholder engagement, trade union partnership working, and external advice, confirmed the relevance of existing themes while identifying areas requiring refinement.

- **Starting and Developing Well Team (Public Health) Impact & Learning Report 2024-25**

As part of the Committee's consideration of Deep Dive PO7: Community by Design Strategic Plan update, learning from the Starting and Developing Well Team (Public Health) highlighted ongoing challenges in dentistry and general practice recruitment,

which continue to affect the sustainability of primary care services across the Health Board area. These pressures are compounded by evolving service expectations within community pharmacy and optometry, alongside increased reliance on managed practices where independent provider sustainability has been impacted.

The report reflected an increased emphasis on early intervention, prevention and partnership working, with a series of engagement events involving the clinical workforce and local stakeholders used to explore opportunities and codesign options for future service development. This work has helped to surface systemwide learning relevant to the development of the Community by Design Strategic Plan and its alignment with the refreshed 'A Healthier Mid and West Wales Strategy'.

The Committee noted that the emerging learning and themes from the Impact and Learning Report will be used to inform the next phase of strategic development, with further refinement through established governance arrangements. Key findings and proposed areas of focus are intended to be consolidated and brought forward for Board level consideration, supporting assurance on how early years and primary care prevention priorities are being embedded within the Health Board's long term strategic framework.

- **Value Based Healthcare**

The Value Based Healthcare (VBHC) Programme continues to play a significant role in driving improvements in care quality, patient outcomes, and resource utilisation across the Health Board. The programme remains focused on investing in models of care that deliver greater value and supporting the organisation to cease low value activities. This proactive approach ensures that decision making is driven by evidence and data, with a refreshed VBHC Plan under development.

Progress was reported on service redesign across key pathways including Diabetes, Orthopaedics, Cardiology and Respiratory Disease, supported by demonstrable outcome data. The Health Board also continues to be a national leader in the use of Patient Reported Outcome Measures (PROMs), contributing approximately 60% of all PROMs collected across Wales. Opportunities to further embed patient insight into strategic planning, including the Clinical Services Plan, were explored.

Updates emphasised the need for transformational change, with a particular focus on prevention, population health, and the development of a comprehensive frailty model to support an ageing population. The rapid value programme continues to progress, with plans advancing to embed VBHC principles across organisational priorities through strengthened regional collaboration and improved cases for change.

- **Winter Vaccination Programme**

The delivery plan for the Winter Vaccination programme included actions to improve staff take up including offering vaccinations separately during 2025/26.

## For Approval

Items recommended for approval by the Committee during the year were as follows:

- SDODC Annual Report 2024-25
- Maturity Matrix
- SPC Terms of Reference
- 5<sup>th</sup> Linac (Radiotherapy Treatment machine)/ 6<sup>th</sup> Bunker at Morriston Hospital Business Case
- Withybush Hospital Fire Prevention Scheme Phase 2 Business Justification Case
- Glangwili Hospital Front Door - Opportunities for Improved Patient Flow
- Targeted Estates Fund (TEF) Projects: Provision of Second Generators at Glangwili and Withybush Hospitals
- Clinical Services Plan
- AHMWW Business Case Addendum
- Review of Well-being Objectives
- Capital Sub Committee 2026-27 Workplan
- Glangwili Hospital (GGH) Fire Phase 2 Business Justification Case
- Climate Adaptation Plan

## 6. Committee Effectiveness - Feedback from self-assessment process

As stipulated within Standard Orders, the Board introduced a process of regular and rigorous self-assessment and evaluation of the performance of the Strategy and Planning Committee.

- This involved the completion of a short digital form which requested feedback on the following areas:
  - Strategic Oversight and Alignment
  - Integrated Planning and Integrated Medium Term Plan Development
  - Stakeholder Engagement and Collaboration
  - Performance, Delivery and Impact
  - Capital Planning, Expenditure and Management

The results from which were fed into an action plan, combining information and Auditor/Regulator feedback.

The process was undertaken during the year and reported to the Committee on 28 February 2026.

Strategy and Planning Committee [Outcome](#) report.

Prior to this, the Committee received an update on progress on 28 August 2025.

Strategy and Planning Committee Self-Assessment Outcome report 2025-26 – Progress [Update](#).

Following the six-month progress update on actions from the 2024/25 SDODC Self-Assessment and the full Strategy and Planning Committee Self-Assessment for 2025/26, the Committee noted continued maturation of the Strategy and Planning

Committee's governance role, with stronger challenge, clearer assurance, and improved alignment with organisational strategy and Welsh Government expectations.

Key improvements included strengthened governance and reporting - supported by enhanced report-writing training, refreshed Committee structures, and clearer escalation pathways. Oversight of major strategic programmes (including the AHMWW Strategy Refresh, Clinical Services Plan, Community by Design Strategic Plan and IMTP development) was reinforced, alongside strong assurance on capital planning through the Capital Sub-Committee. Committee dynamics were positive, with constructive challenge from Independent Members and reflective sessions helping embed a culture of continuous improvement.

Self-assessment results confirmed effective performance across core domains, with strong ratings for strategic oversight, planning, and capital management. Areas identified for further improvement included strengthening links between planning assumptions and performance, improving report quality and timeliness, enhancing visibility of stakeholder engagement, and ensuring clearer alignment between capital spend and strategic priorities. Forward actions were agreed to address these points, including earlier sight of key planning documents and improved triangulation of planning, resources, and performance.

Overall, the assessments confirmed the Strategy and Planning Committee's growing governance maturity and its vital role in supporting integrated planning, aligning resources with priorities, and strengthening organisational focus on outcomes. The Committee is well-positioned to continue driving strategic clarity and assurance across the Health Board.

## **7. Conclusion**

The Committee is satisfied that it operated effectively and in line with its Terms of Reference. Issues were escalated to Board as appropriate, and the Committee used feedback from the self-assessment process to evolve and improve.

This Annual Report marks the first year of operation for the Strategy and Planning Committee following the introduction of revised governance arrangements from April 2025. Established as part of the new governance framework, the Committee has focused on embedding its role, refining its remit, and developing effective oversight and assurance mechanisms. This report reflects on the Committee's early work, key priorities, and initial achievements over its inaugural year, providing an overview of progress made and lessons learned as the Committee continues to mature and strengthen its contribution to effective governance and strategic oversight.