

**PWYLLGOR ADNODDAU CYNALIADWY  
SUSTAINABLE RESOURCES COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	25 June 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Savings Report
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Huw Thomas, Director of Finance
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Sian Jenkins, Deputy Director of Finance

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

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA  
SBAR REPORT**

Sefyllfa / Situation

Status report on the savings position. The report included as **Appendix 1** provides an overview of the savings position as at M2, the overarching position with some detailed breakdowns and updates in respect of opportunities.

Cefndir / Background

Hywel Dda University Health Board's (HDdUHB) Annual Plan to deliver a year-end deficit of £64m requires delivery of savings totalling £32.4m. Welsh Government (WG) have framed a Target Control total of £44.8m deficit for 2024/25.

Given the scale of the challenge to bridge to a Target Control Total or Break-Even position, significant savings delivery is required.

In January 2024, HDdUHB was placed into further escalation, with the whole organisation being in Targeted Intervention. Significant change is required to meet the expectations clearly set out by WG.

With a failure to deliver against our Annual Plan in recent years (summarised below), WG are expecting a step change in our ability to deliver against the Annual Plan going forward.

Asesiad / Assessment

As part of developing the 2024/25 Annual Plan and subsequent accountability process in April and May 2024, aspirational recurrent savings targets have been framed across Directorates which equate to a 5% saving based on recurrent budget, or a 50% reduction in the waste drivers pertaining to the relevant Directorate, whichever is the highest of the two values.

This creates a £62.6m challenge based on the opening figures for 2024/25.

As at M2 2024-25 HDdUHB's year-end financial risk represents a potential year-end deficit position of £76.9m, based on a bottom-up assessment of Directorate level estimates. Despite this, our formal forecast remains at £64m in recognition that we have not exhausted our opportunities to recover the position.

There remains a significant challenge to achieve the £64m Annual Plan position necessitating improved savings delivery, plus a further step up to go beyond this by 31 March 2025.

Key points to note:

- To M2 Green and Amber saving schemes for 2024/25 total £13.5m, forecast delivery totals £12.4m.
- In respect of 2024/25 Red and Black saving opportunities total £7.3m.
- Recurrent Green and Amber saving schemes total £22.6m.
- There is a considerable way to go in order to deliver the £64m Annual Plan, and further still to go beyond this.

### Argymhelliad / Recommendation

The Sustainable Resources Committee is asked to: -

- **NOTE** the savings report.
- **CONSIDER** the actions taken to date, and the further actions laid out for future months.
- **RECOGNISE** the issues highlighted within the report in terms of progress in converting opportunities to savings delivery.
- **CONSIDER** further assurances which are required in order to secure the delivery of the £64m deficit for the current financial year, and to go further towards the target control total into the next financial year.

### Amcanion: (rhaid cwblhau)

#### Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1	Provide assurance on financial performance and delivery against Health Board financial plans and objectives and, on financial control, give early warning of potential performance issues, making recommendations for action to continuously improve the financial position of the organisation, focusing in detail on specific issues where financial performance is showing deterioration or there are areas of concern.
	3.1	Undertake detailed scrutiny of the organisation's overall: <ul style="list-style-type: none"> <li>• Monthly, quarterly and year-to-date financial performance;</li> <li>• Performance against the Savings Delivery and the Cost Improvement Programme providing assurance on performance against</li> </ul>

	the Capital Resource Limit and cash flow forecasts.
	3.3 Receive assurances in respect of performance against annual budgets, capital plans and the Cost Improvement Programme and innovation and productivity plans.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	9. All HDdUHB Well-being Objectives apply

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Monitoring returns to Welsh Government based on HDdUHB's financial reporting system.
Rhestr Termiau: Glossary of Terms:	BGH – Bronglais General Hospital CHC – Continuing Healthcare FDU – Finance Delivery Unit FNC – Funded Nursing Care FYE – Full Year Effect GGH – Glangwili General Hospital GMS – General Medical Services MHLD – Mental Health & Learning Disabilities NICE – National Institute for Health and Care Excellence OCP – Organisational Change Policy/Process OOH – Out of Hours PPH – Prince Philip Hospital

	<p>TTP – Test, Trace, Protect  WG – Welsh Government  WGH – Worthybush General Hospital  WRP – Welsh Risk Pool  WHSSC – Welsh Health Specialised Services Committee  YTD – Year to date</p>
<p>Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Adnoddau Cynaliadwy:  Parties / Committees consulted prior to Sustainable Resources Committee:</p>	<p>Finance Team  Management Team  Executive Team</p>

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Financial implications are inherent within the report.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	The impact on patient care is assessed within the savings schemes.
<b>Gweithlu: Workforce:</b>	The report considers the financial implications of our workforce.
<b>Risg: Risk:</b>	Financial risks are detailed in the report.
<b>Cyfreithiol: Legal:</b>	HDdUHB has a legal duty to deliver a breakeven financial position over a rolling three-year basis and an administrative requirement to operate within its budget within any given financial year.
<b>Enw Da: Reputational:</b>	Adverse variance against HDdUHB's financial plan will affect its reputation with Welsh Government, Audit Wales, and with external stakeholders.

<b>Gyfrinachedd: Privacy:</b>	Not applicable.
<b>Cydraddoldeb: Equality:</b>	Not applicable.



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# Sustainable Resources Committee Financial Savings Report June 2024

25 June 2024

# 2024/25: Savings Identification Summary M02



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Saving Identification Green and Amber Schemes	£'m	Comments
Savings Target	32.4	
In month underspends converted to savings	0.9	
Newly Identified Schemes	3.6	
Red and Black conversions	0.6	Converted to Green or Amber
New Identified Savings	5.1	
Previously Identified Schemes	8.4	Carried forward from M1
Total Savings Plans Identified	13.5	
Unidentified Savings	18.9	



Annual Plan Requirement

£32.4m



In-Year Delivery

£13.5m



In-Year Shortfall

£18.9m



Improvement on last month

£5.1m

# Directorate Split Green and Amber Schemes



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Delegated Officer/ Directorate (£'000)	Annual Savings Aspiration	In-Year Plans Identified	In-Year Forecast Delivery	Recurrent Plans Identified
<b>CHIEF EXECUTIVE</b>	<b>324</b>	<b>329</b>	<b>329</b>	<b>186</b>
<b>DIRECTOR OF FINANCE</b>	<b>1,161</b>	<b>895</b>	<b>895</b>	<b>1,119</b>
<b>DIRECTOR OF NURSING, QUALITY AND PATIENT EXPERIENCE</b>	<b>484</b>	<b>522</b>	<b>522</b>	<b>429</b>
<b>DIRECTOR OF OPERATIONS</b>	<b>40,903</b>	<b>8,092</b>	<b>6,973</b>	<b>6,384</b>
ASST DIR OPS QUALITY AND NURSING FACILITIES	51	27	27	
MENTAL HEALTH AND LEARNING DISABILITY	2,468	621	621	261
ONCOLOGY AND CANCER SERVICES	5,170	2,349	2,236	
PATHOLOGY	1,509	0	0	
PLANNED CARE	1,423	0	9	0
RADIOLOGY	6,169	1,065	867	814
UNSCHEDULED CARE BRONGLAIS HOSPITAL (BGH)	1,164	93	93	
UNSCHEDULED CARE GLANGWILI HOSPITAL (GGH)	4,825	925	925	1,172
UNSCHEDULED CARE PRINCE PHILIP HOSPITAL (PPH)	8,020	294	294	504
UNSCHEDULED CARE WITHYBUSH HOSPITAL (WGH)	3,735	262	262	340
WOMEN AND CHILDREN	2,929	2,053	1,236	3,211
OPERATIONS DIRECTORATE MANAGEMENT	2,803	0	0	
<b>DIRECTOR OF PRIMARY CARE, COMMUNITY &amp; LONG TERM CARE</b>	<b>12,211</b>	<b>583</b>	<b>603</b>	<b>120</b>
CARMARTHENSHIRE COUNTY	637	404	404	82
CEREDIGION COUNTY	4,304	333	353	
MEDICINES MANAGEMENT	855	175	175	120
PEMBROKESHIRE COUNTY	4,790	75	75	
PRIMARY CARE	1,700	0	0	
PRIMARY CARE MANAGEMENT	200	0	0	
<b>DIRECTOR OF PUBLIC HEALTH</b>	<b>329</b>	<b>453</b>	<b>453</b>	<b>329</b>
<b>DIRECTOR OF STRATEGY AND PLANNING</b>	<b>3,030</b>	<b>213</b>	<b>213</b>	<b>86</b>
LONG TERM ARRANGEMENTS WITH OTHER NHS PROVIDERS	2,844	0	0	
STRATEGIC PLANNING	186	213	213	86
<b>DIRECTOR OF THERAPIES AND HEALTH SCIENCES</b>	<b>1,414</b>	<b>1,468</b>	<b>1,468</b>	<b>0</b>
<b>DIRECTOR OF WORKFORCE &amp; ORGANISATIONAL DEVELOPMENT</b>	<b>758</b>	<b>720</b>	<b>720</b>	<b>187</b>
<b>MEDICAL DIRECTOR</b>	<b>202</b>	<b>256</b>	<b>256</b>	<b>40</b>
<b>HEALTH BOARD WIDE</b>	<b>1,814</b>	<b>0</b>	<b>0</b>	
<b>Grand Total</b>	<b>62,629</b>	<b>13,531</b>	<b>12,433</b>	<b>8,879</b>

Recurrent savings aspiration target framed as part of 2024/25 accountability process £62.6m (savings gap in respect of the Annual Plan £32.4m)

## Green and Amber schemes

- Identified to date £13.5m
- Forecast delivery £12.4m
- Recurrent plans £8.9m

**Both savings plans and delivery estimates are some way from covering the savings gap to achieve £64m. Further still from the Welsh Government Target Control Target of £44.8m.**

- £20m further savings delivery required to meet £64m
- £39.2m further savings delivery required to meet £44.8m

**This is therefore significant risk in delivering the Financial Plan for the Health Board in 2024/25 and recurrently.**

# Saving Scheme Categories



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## Assessment of 2024/25 in year savings schemes across categories

- Pay efficiency figure is heavily driven by the non-recurrent benefit of savings, £6,828k currently, of which £979k is driven by in month pay underspends M1 and M2.
- The forecast variance demonstrates non-delivery largely in respect of Red and Black schemes, which is to be expected, but also in respect of Urgent Emergency Care transformation and Medicines Management. Detail on Green and Amber are noted below.

Saving Scheme Category (£'000)	Saving Scheme Values					Forecast variance against plan				
	Black	Red	Amber	Green	Total	Black	Red	Amber	Green	Total
Commissioning	247	721		153	1,121	247	721		0	968
Continuing Health Care	0			180	180	0			(21)	(21)
Income Generation				20	20				0	0
Medical Stabilisation	0	480	600	541	1,621	0	480	0	0	480
Medicines Management	0				0	0				0
Non-Pay Efficiency	1,030	309	1,565	984	3,888	970	175	(9)	4	1,140
Nurse Stabilisation	150			417	567	150			0	150
Pay Efficiency	287	1,378	339	5,822	7,826	287	1,378	0	108	1,774
Prescribing and Medicines	730	2,110	198	139	3,177	730	2,050	198	0	2,978
Service Change Configuration	0	20		400	420	0	20		0	20
Service Configuration	0				0	0				0
Transforming UEC	15		437	1,736	2,188	15		236	581	832
<b>Total</b>	<b>2,459</b>	<b>5,019</b>	<b>3,139</b>	<b>10,392</b>	<b>21,008</b>	<b>2,399</b>	<b>4,825</b>	<b>425</b>	<b>673</b>	<b>8,321</b>

## Reasons for deviation on highlighted Green and Amber schemes:

- Transforming UEC:
  - WGH 25 bed reduction delayed due to surge on wards 4 & 12 and delay in implementing RN shift changes in A&E
  - WGH Stroke bed reduction delivery impact due to requirement of an additional 1wte HCSW 24/7 staffing requirement
  - Non-delivery of Medical Staffing reduced Same Day Emergency Care (SDEC) hours savings scheme due to pay protection
- Prescribing and Medicines - Supplier of drug has withdrawn provision from Wales compromising delivery of Rheumatology drug switches
- Pay Efficiency - MHLD staffing underspends undelivered in month 1

# Savings Scheme Identification Progress In Year and Recurrent



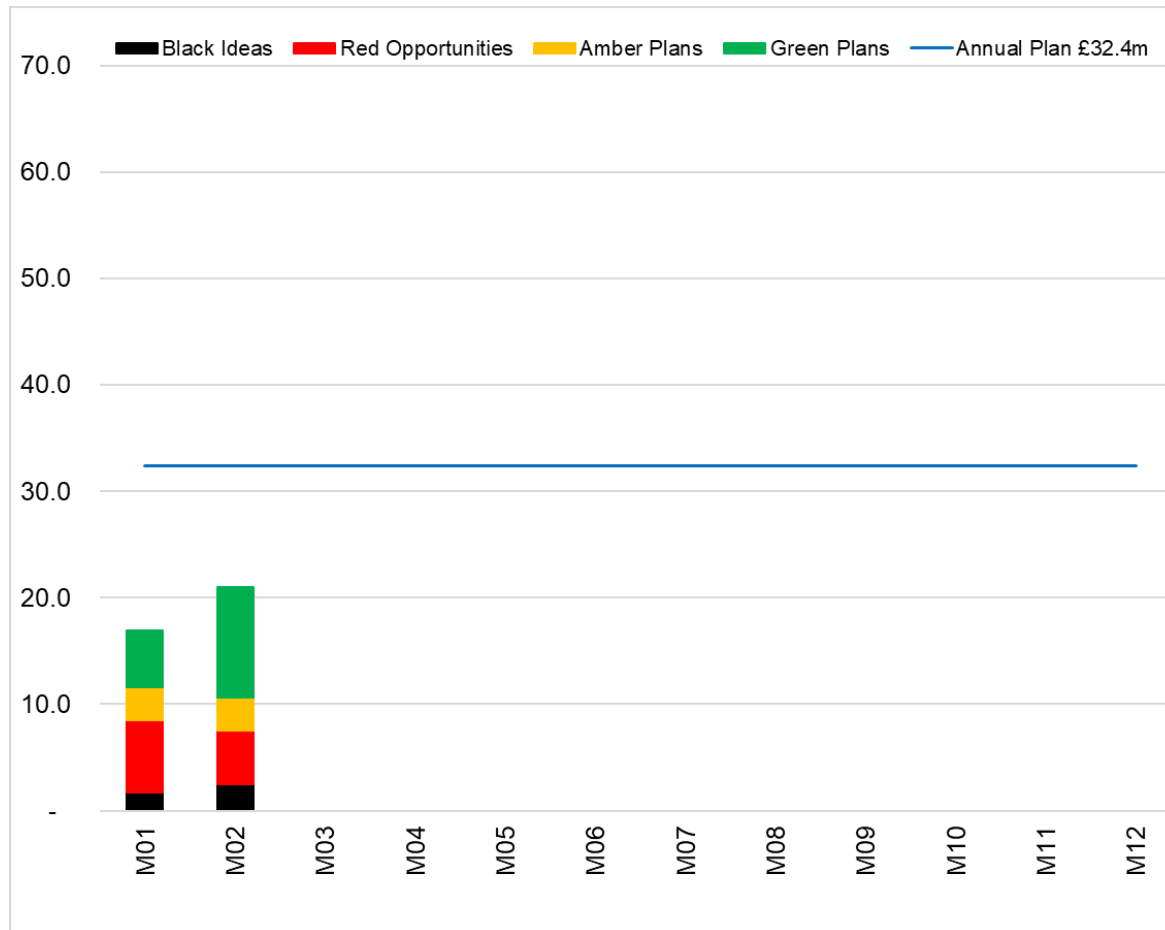
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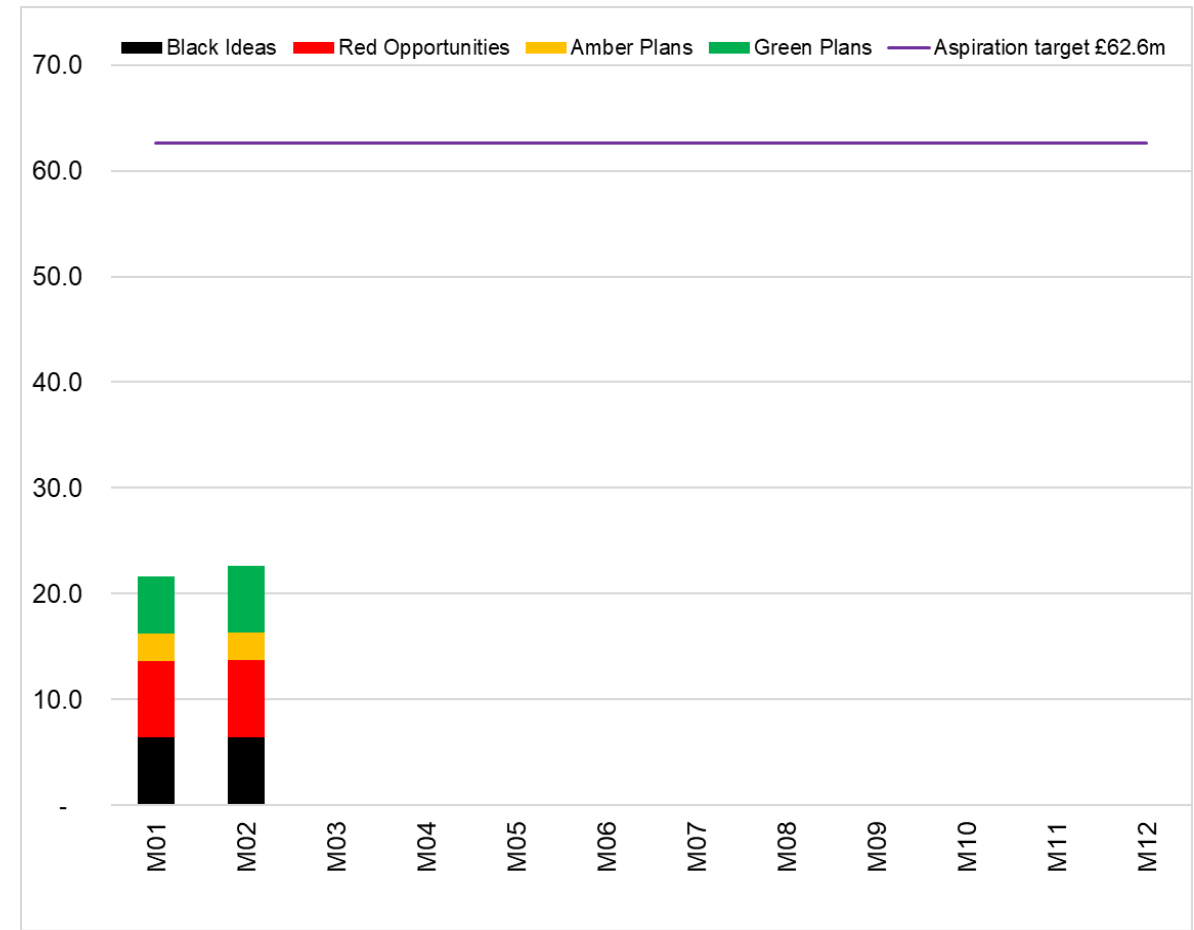
Tracking to different targets between years; in year gap to achieve £64m Annual Plan £32.4m, recurrent savings aspiration target issued through 2024/25 accountability process £62.6m. Recurrent position demonstrates marginal increase on in year assessment, the full year effect of opportunities counter acting non-recurrent schemes in 2024/25, with a deteriorating BRAG rating.

Progress for in year savings identification is largely being driven by non-recurrent opportunities.

Monthly Trend of End of Year Opportunity Pipeline Plans (£'m)



Monthly Trend of End of Recurrent Opportunity Pipeline Plans (£'m)



# Opportunities: Black and Red Schemes Overview (1/2)



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## Summary:

	2024/25	Full Year
Total Value	£7,327k	£13,744k
No. of schemes	43	48
Average value	£170k	£286k
Schemes £500k+	2	6
Unquantified	32	25

Saving Scheme Category (£'000)	2024/25	Full Year
Commissioning	968	2,965
Continuing Health Care	0	300
Income Generation	0	0
Medical Stabilisation	480	1,875
Medicines Management	0	0
Non-Pay Efficiency	1,339	1,091
Nurse Stabilisation	150	300
Pay Efficiency	1,665	405
Prescribing and Medicines	2,840	4,530
Service Change Configuration	20	2,263
Service Configuration	0	0
Transforming UEC	15	15
<b>Total</b>	<b>7,477</b>	<b>13,744</b>

## Recurrent schemes £500k or above:

Directorate	Scheme	BRAG	Full Year Estimate
Medicines Management	Loss of Exclusivity for DOACs (apixaban and rivaroxaban) with generic products reducing the Drug Tariff price	Red	£3,000k
LTAs with Other NHS Providers	Regional Orthopaedics, removal of contract from Swansea Bay LTA	Black	£2,000k
Women and Children	Maternity and Obstetrics and Gynaecology at BGH, redesign of service model	Black	£1,500k
Medicines Management	Prescribing Decision Support software to generate cost effective switches and formulary compliance	Red	£1,130k
Planned Care	Removal of Emergency Surgery at WGH, removal of senior and middle grade out of hours cover*	Red	£549k
LTAs with Other NHS Providers	Velindre patient pathway, LTA redirection of cancer flows from Velindre to Swansea	Red	£500k
<b>Total</b>			<b>£8,679k</b>

\*Outcome and timescales to be informed by AHMWW Clinical Service Programme

# Opportunities: Black & Red Schemes Overview (2/2)



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Example of Black & Red schemes in the pipeline: Unquantified recurrent Black & Red schemes

Directorate	Scheme	RAG
FACILITIES	Laundry centralisation efficiency: -estimation at this point	Black
FACILITIES	Clinical waste contract review: Local Supplier has agreed to provide a cost for providing Clinical Waste collection & disposal. Expectation is that costs will be higher than the all Wales Contract rates.	Black
FACILITIES	Heat Efficiency network schemes : A review of saving opportunities to be undertaken upon receipt of PPH Optimisation study in March 24	Black
FACILITIES	Reduction in staff cost - Postal digitisation Project: Postage efficiency-	Black
FACILITIES	ED vending	Black
FACILITIES	Withybush - Catering staff : consequential impact from clinical modelling:	Black
MEDICINES MANAGEMENT	LOE Rivaroxaban: Loss of Exclusivity for rivaroxaban with generic products reducing the Drug Tariff price.	Black
MEDICINES MANAGEMENT	Stoma	Black
MEDICINES MANAGEMENT	Housekeeping: Clinical and product switches to the most cost-effective medicine.	Red
MEDICINES MANAGEMENT	Low Value for Prescribing: Review and minimise use of medicines identified on the Low Value for Prescribing papers by AWTTTC.	Red
MEDICINES MANAGEMENT	Cost-effective inhalers: Optimisation of inhaler choice to the most cost-effective brand.	Red
MEDICINES MANAGEMENT	Diabetes Medication: Switch of products (needles and lancets) to the most cost effective option.	Red
MEDICINES MANAGEMENT	Dietetics - milkshake project: Reduce inappropriate prescribing of oral nutritional supplements within care homes	Red
MEDICINES MANAGEMENT	Dietetics - CMPA Project: Reduce inappropriate prescribing of supplements for cow's milk protein allergy.	Red
MEDICINES MANAGEMENT	National Prescribing Indicators: Reduction in prescribing to support national prescribing indicators within antimicrobial stewardship, analgesia (including opioid burden and gabapentinoids) and hypnotics and anxiolytics	Red
ONCOLOGY & CANCER SERVICES	External commissioning of Cancer Services: Outsource Cancer service provision	Black
ONCOLOGY & CANCER SERVICES	Consolidate SACT Units: Rationalise units within Carmarthenshire, moving from 2 units to 1 central Carmarthenshire provision	Black
ONCOLOGY & CANCER SERVICES	Convert all patients from SC to IV treatments: Convert all patients from SC to IV drug treatments	Black
ONCOLOGY & CANCER SERVICES	Aseptic Outsourcing Review: Review balance of inhouse and outsourced drug preparation within current capacity	Black
PATHOLOGY	Cremation form cost review: Review of income process from funeral directors for form completion	Black
PATHOLOGY	Maximise Homecare Drug provision: Convert all suitable patients to homecare drugs provision where appropriate	Red
PATHOLOGY	Reusable tourniquet use: Converting tourniquet to reusable from disposable	Red
STRATEGIC PLANNING	Stategic Planning Non Pay Savings Recurrent 188: Building Contracts - Capital Planning	Black
UNSCHEDULED CARE GLANGWILI	Align establishment to existing substantive staff: Recruit in CCU and CDU to reduce agency and overtime spend	Red
WOMEN & CHILDREN	SBU LTA Maternity Services reduction: SBU Part repatriation of Maternity Services	Red

# Opportunities: In Month Reporting



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Year to date underspends of £0.9m transacted as savings in M02

- Action with Directorates to consider underspend drivers and feasibility of framing saving schemes:

Top 5 Year to Date Underspends Converted to Savings	
PLANNED CARE	£251,437
WORKFORCE AND ORGANISATIONAL DEVELOPMENT	£249,449
PUBLIC HEALTH	£124,000
FINANCE	£94,450
MEDICINES MANAGEMENT	£75,000

In month reporting opportunities, translating to saving scheme entries

- M02 reporting highlighted a number of opportunities to progress with Directorates either as a forecast improvement or saving, including:
  - LTA Welsh Health Shared Services Committee (WHSSC) risk share underperformance
  - Primary Care Dental contract underperformance
  - Ceredigion, reduced usage of interim care beds

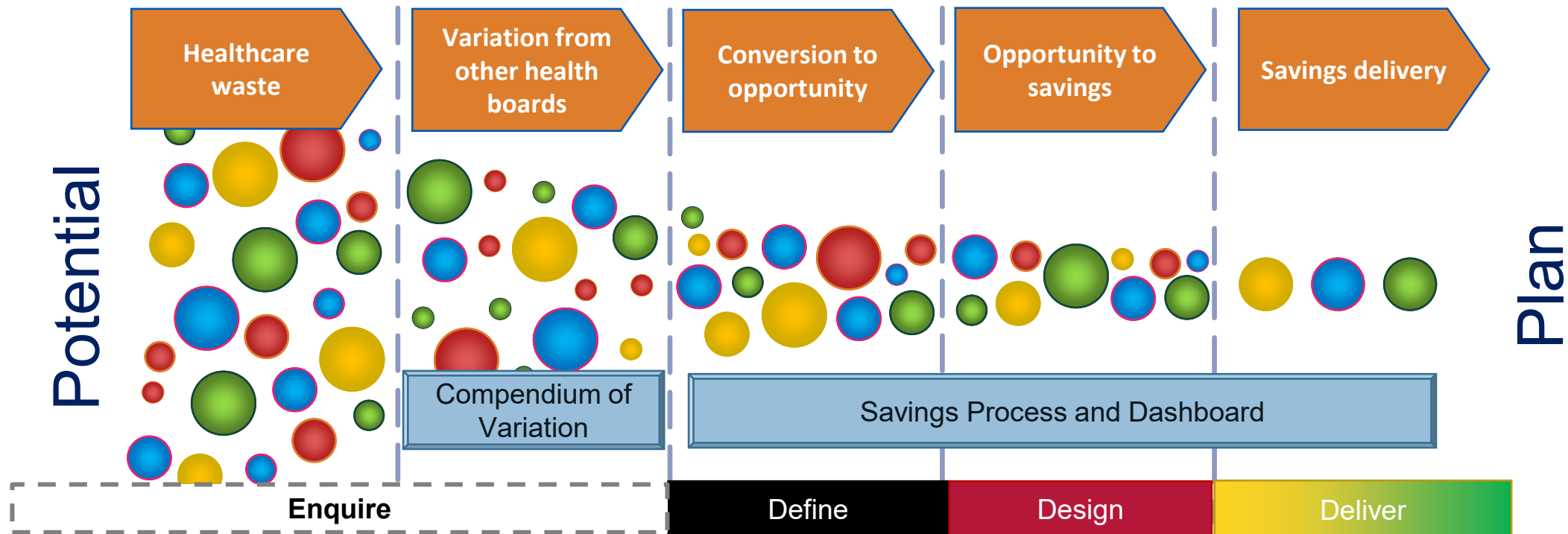
# Opportunities: Realising Variation Opportunities



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- Initial introduction via Operational Performance, Governance and Planning (OPGP) forum which initiated a number of Directorate level engagement sessions
- Active work within a number of Directorates including Carmarthenshire system, Mental Health and Planned Care
- Efforts remain in the 'Enquire' stage, not yet generating black schemes on the savings tracker
- Example: Planned Care, Urology data being reviewed, opportunities highlighted:
  - Follow up to New Outpatient ratio, 4.5:1 compared to average of peers 2:1
  - Healthcare Resource Group analysis, 2022/23 data indicates £1.6m average cost in excess of peers, diagnostic flexible cystoscopy being a stand out procedure within this data

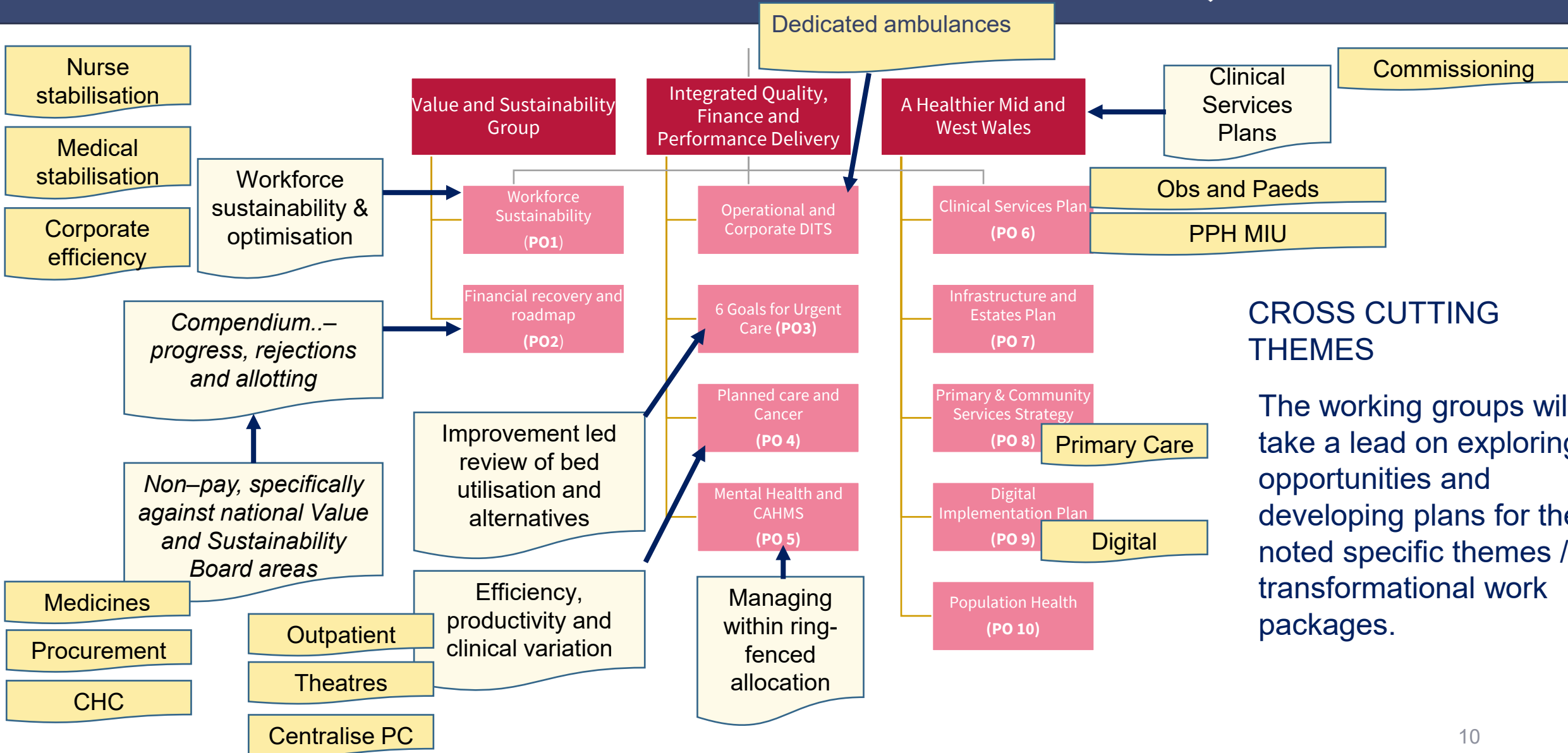


# Recovery Themes, Cross-Cutting Saving Plans



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## CROSS CUTTING THEMES

The working groups will take a lead on exploring opportunities and developing plans for the noted specific themes / transformational work packages.



## Level 1

- Reasonable assurance that there are no significant concerns within the directorate.

## Level 2

- Limited assurance that the directorate will:
  - Operate within budget or deliver a recovery plan which will return to budget in year.
  - Identify and delivery recurrent savings to the level required.
  - Has a triangulated plan to operate services effectively for the year.

## Level 3

- No assurance that the directorate will:
  - Operate within budget or deliver a recovery plan which will return to budget in year.
  - Identify and delivery recurrent savings to the level required.
  - Has a triangulated plan to operate services effectively for the year.

## Performance Review Arrangements

- **All:** Twice yearly Directorate Improving Together (DIT) meeting.
- **Level 2:** At least quarterly escalation review meeting, may be more frequent.
- **Level 3:** At least monthly, escalation review meeting, may be more frequent.
- High challenge and high support in respect of savings delivery will be a core part of discussions.

The escalation framework covers six domains.

# Conclusions



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- The Health Board has an active multifaceted approach in pursuit of financial recovery, ranging from identification of bottom-up opportunities within Directorates, through to transformation programmes linked to the recovery plan themes.
- Delivery is tracked at a Directorate level via DITs or Escalation meetings, as appropriate. Progress against Recovery themes will be assessed via Integrated Quality, Finance and Performance Delivery (IQFPD) Group, Value and Sustainability Group or A Healthier Mid and West Wales (AHMWW) Groups as relevant.
- Challenge and support to target realisation of Black saving ideas and Red opportunities into Amber and Green plans is a priority, alongside identification of new saving plans, to de-risk the current financial plan in pursuit of £64m.
- The translation of variation opportunities into savings has achieved limited traction to date following initial sharing of the intelligence through the former OPGP Group. There has been more recent positive engagement and explorative work is underway, but this isn't consistent across Directorates. The identification of new savings schemes needs to be an area of focus.



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