



## CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	28 July 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Committee Update Reports
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Joanne Wilson, Board Secretary
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Clare Moorcroft, Committee Services Officer

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

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

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The purpose of this report is to provide the Board with a level of assurance in respect of recent Board level Committee meetings that have been held since the previous Board report and are not reported separately on the Board agenda, as follows:

- Charitable Funds Committee held on 6<sup>th</sup> June 2022;
- Mental Health Legislation Committee held on 13<sup>th</sup> June 2022.

Additionally, in respect of the In-Committee Board meeting held on 26<sup>th</sup> May 2022.

This report also provides an update to the Board in respect of recent Advisory Group meetings, as follows:

- Staff Partnership Forum held during June 2022;
- Healthcare Professionals Forum held on 6<sup>th</sup> and 30<sup>th</sup> June 2022.

#### Cefndir / Background

The Hywel Dda University Health Board (UHB) Standing Orders, approved in line with Welsh Government guidance, require that a number of Board Committees are established. In line with this guidance, the following Committees have been established:

- Audit and Risk Assurance Committee
- Charitable Funds Committee
- Mental Health Legislation Committee
- Quality, Safety and Experience Committee
- Remuneration and Terms of Service Committee

The Board has established the following additional Committees:

- Sustainable Resources Committee
- Health and Safety Committee

- People, Organisational Development and Culture Committee
- Strategic Development and Operational Delivery Committee

Attached to this report are individual summaries of the key decisions and matters considered by each of the Committees held since the previous Board report, where these are not separately reported to the Board.

Approved minutes from each of the Committees' meetings are available on the UHB's website via the link below:

<https://hduhb.nhs.wales/about-us/governance-arrangements/board-committees/>

The UHB has approved Standing Orders, in line with Welsh Government guidance, in relation to the establishment of Advisory Groups. In line with this guidance, the following statutory Advisory Groups have been established:

- Stakeholder Reference Group
- Staff Partnership Forum
- Healthcare Professionals Forum

## Asesiad / Assessment

### **Matters Requiring Board Level Consideration or Approval:**

The Charitable Funds Committee requested that the following items be raised at Board level:

- To approve the revised Charitable Funds Committee Terms of Reference, appended.
- Board ratification, in its role as Corporate Trustee, of the Committee's decision to approve an additional governance and support costs budget of £34,224 for the 2022/23 financial year (*to be considered during Corporate Trustee session*).

The Staff Partnership Forum requested that the following items be raised at Board level:

- To approve the revised Staff Partnership Forum Terms of Reference, appended.

The Healthcare Professionals Forum requested that the following items be raised at Board level:

- To approve the Healthcare Professionals Forum Terms of Reference, appended.

There were no matters raised by the Mental Health Legislation Committee or In-Committee Board which require Board level consideration or approval.

### **Key Risks and Issues/Matters of Concern:**

The Charitable Funds Committee raised the following key risks and issues/matters of concern:

- **Charitable Funds Committee Risk Register:** Risk 1373: *Risk that the charity will not sustain its income levels or meet its income generation target of +10% annually*, which is associated with the delivery of the Hywel Dda Health Charities Planning Objective 2E for 2021/22. Assurance was received that the identified mitigating actions are being put in place to minimise or reduce the likelihood of significant impact occurring, with the recommendation that a deep dive on the fundraising and targeting of guaranteed and cyclical funds be presented to the September 2022 Committee meeting.

- **Update on Expenditure – Staff Welfare and Wellbeing: Rest Areas:** Progress in using charitable funds to create rest areas for staff with assurance received that a further update regarding how the funds are allocated will be presented to the Committee at its September 2022 meeting, following the convening of the three County Partnership Forums.

There were no key risks and issues or matters of concern raised by the Mental Health Legislation Committee, In-Committee Board, Staff Partnership Forum or Healthcare Professionals Forum.

### Argymhelliad / Recommendation

The Board is asked to:

- **ENDORSE** the updates, recognising any matters requiring Board level consideration or approval and the key risks and issues/matters of concern identified, in respect of work undertaken on behalf of the Board at recent Committee meetings, noting that a Corporate Trustee session will be held directly after the Public Board meeting to consider the charitable funds budget and expenditure outlined above;
- **RECEIVE** the update report in respect of the In-Committee Board meeting;
- **RECEIVE** the update reports in respect of recent Advisory Group meetings;
- **APPROVE** the revised Terms of Reference for:
  - Charitable Funds Committee
  - Staff Partnership Forum
  - Healthcare Professionals Forum
  - Stakeholder Reference Group (reported to previous Board meeting).

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
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 2018-2019</a>	9. All HDdUHB Well-being Objectives apply

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Standing Orders External Governance Review
Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Committee and Advisory Group Chairs

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Explicit within the individual Update Reports where appropriate.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Explicit within the individual Update Reports where appropriate.
<b>Gweithlu: Workforce:</b>	Not Applicable
<b>Risg: Risk:</b>	Not Applicable
<b>Cyfreithiol: Legal:</b>	The Board has approved Standing Orders in relation to the establishment of Board level Committees. In line with its model Standing Orders, the Health Board has established Board level Committees, the activities of which require reporting to the Board. In line with its model Standing Orders, the Health Board has established a Stakeholder Reference Group, a Healthcare Professionals Forum and a Partnership Forum, the activities of which require reporting to the Board.
<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	Not Applicable

<b>Enw'r Pwyllgor / Name of Committee</b>	Charitable Funds Committee
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Delyth Raynsford, Independent Member
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held on 6 <sup>th</sup> June 2022
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<ul style="list-style-type: none"> <li>• <b>Charitable Funds – Making a Difference: Specialist Bereavement Support and Training for Staff</b> – the Committee received a presentation provided by Ms Julie Brennan, Bereavement Support Manager providing an overview of the project's educational in-reaching sessions to clinical areas and teams where staff are managing the process of death and dying and supporting newly bereaved people. Ms Brennan advised the Committee of the aim, by the end of the pilot, to submit a business plan to provide this training to all members of staff, regardless of their role. The Committee acknowledged that the project demonstrated significant improvements to the patient and staff experience.</li> <li>• <b>Annual Review of Committee Terms of Reference</b> – the Committee approved the revised Committee Terms of Reference, for onward submission to the Board at its meeting on 28<sup>th</sup> July 2022.</li> <li>• <b>Self-Assessment of Committee Effectiveness 2021/22: Review of Questions</b> – the Committee supported the use of the self-assessment questionnaire template for the self-assessment of Committee effectiveness process for 2021/22.</li> <li>• <b>Charitable Funds Sub-Committee (CFSC) Update Report</b> – the Committee received the CFSC update report providing a summary of the CFSC's activity between 10<sup>th</sup> January and 3<sup>rd</sup> May 2022. The Committee was informed that the Head of Capital Planning, Capital Programme Manager and Head of Hywel Dda Health Charities met to discuss capital priorities that could potentially be supported from charitable funds during 2022/23. It was agreed that details of current unfunded capital bids are to be mapped against available charitable funds for discussion with the relevant fund managers. It was acknowledged that these conversations would continue during 2022/23 with capital and operations colleagues and that any relevant updates would be provided to the Sub-Committee if appropriate. The Committee was advised that a process will be established within the Finance Business Partnering team to highlight and capture any revenue consequences to HDdUHB at the time a charitable funds purchase is made. In relation to feedback received regarding seating arrangements in A&amp;E departments in GGH and WGH, it was agreed that the Director of Nursing and Patient Experience would liaise with general managers at both sites and the Arts in Health team and Head of Manual Handling regarding a review of seating arrangements and environmental improvements. The Committee approved the revised CFSC Terms of Reference.</li> <li>• <b>Update on the Establishment of the Investment Advisor Sub-Committee</b> – the Committee received a verbal update on the establishment of the Investment</li> </ul>	

Advisor Sub-Committee, advising that the new Sub-Committee had not yet convened its initial meeting, and received assurance that an update report and the Sub-Committee's Terms of Reference would be presented to the September 2022 Committee meeting.

- **Charitable Funds Committee Risk Register** – the Committee received the CFC Risk Register report, noting the new risk (Risk 1373) relating to sustaining and increasing the charity's income levels. The Committee was advised that the risk score remains at 12 due to the fact that it is too early into the financial year to determine whether the risk actions are having a positive impact on the charity's financial position. The risk is being reviewed on a bi-monthly basis and the Committee will receive a further update at the September 2022 meeting. The Committee was reminded that one of the key actions of the Committee's Planning Objective is to develop the charity's longer term strategy, which will include a focus on fundraising, and that it is anticipated that this can be achieved with a development grant from NHS Charities Together for external support/ advice. Assurance was received that the identified mitigating actions are being put in place to minimise or reduce the likelihood of significant impact occurring, with the recommendation that a deep dive on the fundraising and targeting of guaranteed and cyclical funds be presented to the September 2022 Committee meeting.
- **Assurance on Planning Objectives Aligned to CFC** – the Committee received the Assurance on Planning Objectives Aligned to CFC report, providing assurance on the current position in regard to the progress of Planning Objective 2E, in order to provide onward assurance to the Board that progress is on track to achieve against its key deliverables. The Committee also received an update on the outstanding actions relating to the 2021/22 Planning Objective, carried over to 2022/23, and the key deliverables associated with its delivery.
- **Update Report from the Administrative Committee Annual Meeting (Hydrotherapy Pool: JC Williams (Elizabeth Williams Endowment) Trust Fund)** – the Committee received the Update Report from the Administrative Committee Annual Meeting (Hydrotherapy Pool: JC Williams (Elizabeth Williams Endowment) Trust Fund) report, providing assurance to the Charitable Funds Committee regarding the current position relating to the release of the legacy funds standing at \$1.744m as of 10<sup>th</sup> December 2021, which is held by the Pittsburgh National Corporation Bank (PNC), acting as Trustee under deed of Trust of the JC Williams Charitable Trust (Elizabeth Williams Endowment). The funds are required to supply the capital costs for construction of a Hydrotherapy Pool at the Pentre Awel Village, Llanelli. The Committee was informed that PNC were unable to provide timelines for when the Trust's accounting would take place due to the significant delays within the US court system as a result of the pandemic. The Committee was advised that regular updates and a clear timeline have been requested to be submitted in writing, outlining the stages of their approval process. However, this information has not been received despite regular requests for progress updates to be provided. The Committee received assurance that, as the Pentre Awel Village is not yet at the stage in the capital build to draw down the money, the risk to the development is marginal.

- **Integrated Hywel Dda Health Charities Performance Report** – the Committee received the Integrated Hywel Dda Health Charities Performance Report, providing an update on the charity's performance and position as at 31<sup>st</sup> March 2022. The Committee noted that the net assets of the charity have decreased by £874,994 for the period and that the charity's overall income from donations, grants and legacies has decreased by 60.8% in comparison to income received for the same period in the previous financial year. The Committee was advised that, due to an incorrect figure having been presented at the March 2022 Committee meeting, the Committee recommended for ratification by the corporate trustee an additional budget of £34,224 to support the projected governance and support costs for the 2022/23 financial year. Furthermore, in March 2022, the Committee was asked to consider and approve carrying forward the fixed term funding of £37,500 to fund the Communications Assistant. Within the final months of 2021/22, £5,434 of this budget was used to fund this post. The Committee approved the carrying forward of the £32,066 marketing and communications pay budget approved in March 2021 to the 2022/23 financial year to fund the costs of a fixed-term Communications Assistant.
- **Introduction to the New Investment Advisor** – the Committee received an introduction to the new investment advisor, CCLA. In relation to the transfer of assets from the previous investment advisor, Sarasin & Partners LLP, the Committee was advised that the process has begun with an anticipated completion date prior to the September 2022 Committee meeting.
- **Policies and Procedures Relating to Charitable Funds** – the Committee received the Policies and Procedures Relating to Charitable Funds report, and approved the proposed additions to the Charitable Funds Financial Administration and Governance Procedure. The Committee was advised that Health Charities must provide justification when rejecting charitable donations and therefore, the procedure will ensure that any decision is well documented. The Committee was informed that, following CFC discussion and consideration, the Procedure's equality impact assessment will be reviewed with the support of the HDdUHB Senior Diversity and Inclusion Officer. The Procedure will then be submitted to the HDdUHB Policy Co-Ordination Officer for the consultation stage where HDdUHB staff will be invited to comment on the proposed additions to the report. Mrs Nicola Llewelyn advised that, following the consultation stage, there will then be a requirement for the Chair of the CFC, via Chair's Action, to approve the final version of the Procedure and equality impact assessment.
- **Update on Expenditure – Staff Welfare and Wellbeing: Rest Areas** – the Committee received the Staff Welfare and Wellbeing: Rest Areas report, providing assurance that the delay in spending charitable funds identified for the development of staff rest areas is being reviewed. Whilst recognising the challenge associated with the engagement with staff, and variation across services, the Committee noted disappointment that the funds had not yet been spent. Due to such variation between the needs of staff in different services and localities, the proposal is that £50,000 is provided to the Executive Director for Workforce and Organisational Development to support the implementation of the medical fatigue and facilities charter; the remainder of the funding (£162,295) to be allocated to each county partnership forum, according to headcount and;



decision and responsibility to support rest and recovery will be determined by local county partnerships. The Committee was reminded that the NHS Charities Together funding is specifically for rest areas and that any changes to these criteria would require reporting to the NHS Charities Together for approval. The Committee received assurance that Workforce has been very clear with the County Partnership Forums on the requirement for the funds to be spent on physical rest areas. The Committee was reminded that the deadline for the full expenditure of NHS Charities Together funds is 31<sup>st</sup> March 2023 and any monies unspent after this date would be returned to NHS Charities Together. The Committee received assurance that the Head of Hywel Dda Health Charities is working closely with Workforce colleagues and that a further update regarding how the funds are allocated will be presented to the Committee at its September 2022 meeting, following the convening of the three County Partnership Forums. The Committee approved the apportionment and allocation of funding, as outlined above, subject to engagement with the County Partnership Forums.

**Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd ar eu cyfer /Matters Requiring Board Level Consideration or Approval:**

- The revised Charitable Funds Committee Terms of Reference, appended.
- Board ratification, in its role as Corporate Trustee, of the Committee's decision to approve an additional governance and support costs budget of £34,224 for the 2022/23 financial year.

**Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:**

- **Charitable Funds Committee Risk Register:** Risk 1373: *Risk that the charity will not sustain its income levels or meet its income generation target of +10% annually*, which is associated with the delivery of the Hywel Dda Health Charities Planning Objective 2E for 2021/22. Assurance was received that the identified mitigating actions are being put in place to minimise or reduce the likelihood of significant impact occurring, with the recommendation that a deep dive on the fundraising and targeting of guaranteed and cyclical funds be presented to the September 2022 Committee meeting.
- **Update on Expenditure – Staff Welfare and Wellbeing: Rest Areas:** Progress in using charitable funds to create rest areas for staff with assurance received that a further update regarding how the funds are allocated will be presented to the Committee at its September 2022 meeting, following the convening of the three County Partnership Forums.

**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:**

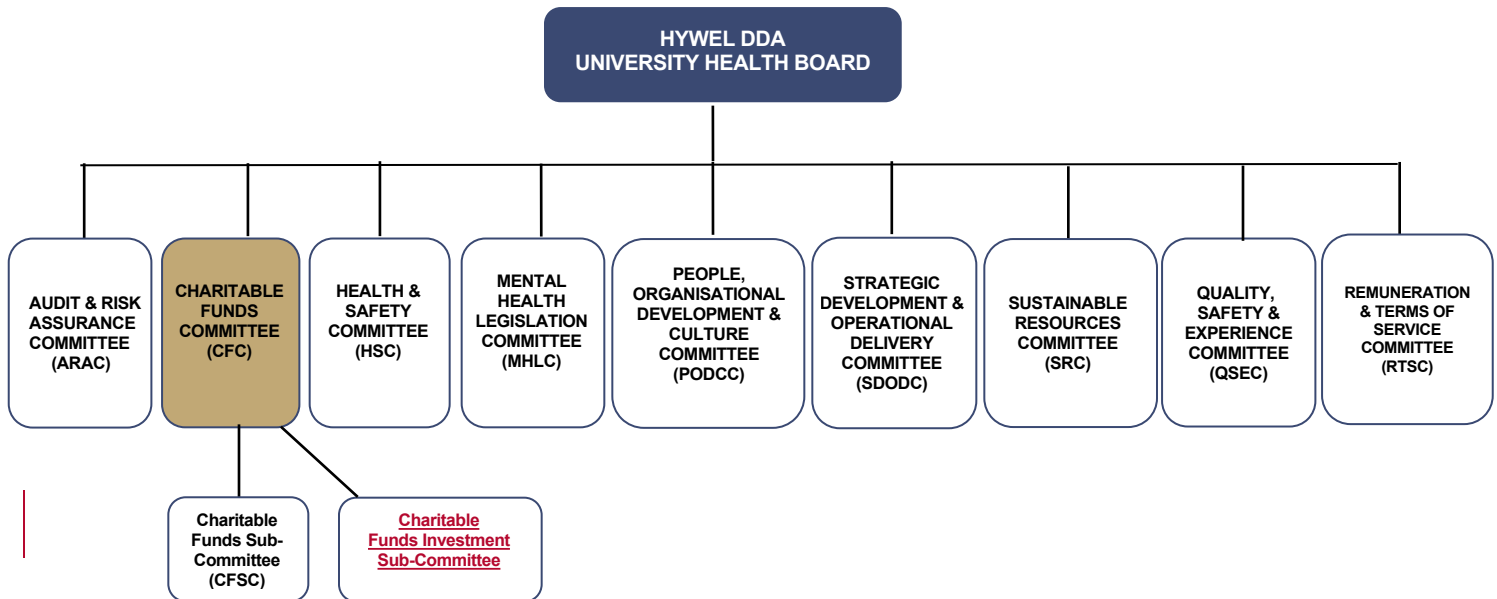
**Adrodd yn y Dyfodol / Future Reporting:**

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified at the previous Committee meeting will be undertaken.

**Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:**

26<sup>th</sup> September 2022





## CHARITABLE FUNDS COMMITTEE

## TERMS OF REFERENCE

Version	Issued To	Date	Comments
V0.1	Charitable Funds Committee	11.06.2012	Approved
V0.2	Hywel Dda Health Board (SO's)	27.09.2012	Approved
V0.3	Charitable Funds Committee	18.06.2013	Approved
V0.4	Charitable Funds Committee	03.09.2013	Approved
V0.5	Charitable Funds Committee	12.12.2013	Approved
V0.6	Charitable Funds Committee	09.10.2013	Approved
V0.7	Charitable Funds Committee	16.12.2014	Approved
V0.8	Charitable Funds Committee	10.03.2015	Approved
	Hywel Dda University Health Board	26.03.2015	Approved
V0.9	Charitable Funds Committee	29.06.2015	Approved
V0.10	Hywel Dda University Health Board	26.11.2015	Approved
V0.11	Charitable Funds Committee	29.11.2016	Approved
V0.12	Hywel Dda University Health Board	26.01.2017	Approved
V0.13	Charitable Funds Committee	15.06.2017	Approved

V0.14	Charitable Funds Committee	15.03.2018	Approved
V0.15	Hywel Dda University Health Board	29.03.2018	Approved
V0.16	Charitable Funds Committee	14.03.2019	Approved
V0.16	Hywel Dda University Health Board	30.05.2019	Approved
V0.17	Charitable Funds Committee	17.03.2020	Approved
V0.18	Hywel Dda University Health Board	26.03.2020	Approved
V0.19	Charitable Funds Committee	30.11.2020	Approved
V0.20	Hywel Dda University Health Board	28.01.2021	Approved
V0.21	Hywel Dda University Health Board	29.07.2021	Approved
V0.22	Charitable Funds Committee	06.06.2022	Approved
V0.22	Hywel Dda University Health Board	28.07.2022	For Approval

## CHARITABLE FUNDS COMMITTEE

### 1. Introduction

- 1.1 The Hywel Dda University Local Health Board's standing orders provide that *"The Board may and, where directed by the Welsh Government must, appoint Committees of the UHB either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees"*.
- 1.2 In accordance with the Standing Orders (and the UHB's Scheme of Delegation), the Board has nominated a Committee to be known as the Charitable Funds Committee (the Committee). The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are set out below.

### 2. Constitution

- 2.1 Hywel Dda University Local Health Board was appointed as corporate trustee of the charitable funds by virtue of Statutory Instrument 2009 No. 778 (W.66) and that its Board serves as its agent in the administration of the charitable funds held by the UHB.
- 2.2 The Committee has been established as a Committee of the Hywel Dda University Local Health Board (HDdUHB) and constituted from 22<sup>nd</sup> July 2010.

### 3. Purpose

The purpose of the Charitable Funds Committee is:

- 3.1 To make and monitor arrangements for the control and management of the Board's Charitable Funds, within the budget, priorities and spending criteria determined by the Board and consistent with the legislative framework.
- 3.2 To provide assurance to the Board in its role as corporate trustees of the charitable funds held and administered by the Health Board.
- 3.3 To receive an assurance on delivery against relevant Planning Objectives aligned to the Committee (see Appendix 1), in accordance with Board approved timescales, as set out in HDdUHB's Annual Plan.
- 3.4 To agree issues to be escalated to the Board with recommendations for action.

### 4. Key Responsibilities

The Charitable Funds Committee shall:

- 4.1 Within the budget, priorities and spending criteria determined by the UHB as **Corporate** trustee, and consistent with the requirements of the Charities Act 2011 (or any modification of these acts), to apply the charitable funds in accordance with its respective governing documents.
- 4.2 To devise, implement and approve appropriate procedures and policies to ensure that fundraising and accounting systems are robust, donations are received and coded as instructed and that all expenditure is reasonable, clinically and ethically appropriate.
- 4.3 To ensure that the UHB policies and procedures for charitable funds investments are followed.
- 4.4 In addition, to make decisions involving the sound investment of charitable funds in a way that both preserves their value and produces a proper return consistent with prudent investment and ensuring compliance with:
  - 4.4.1 Trustee Act 2000
  - 4.4.2 The Charities Act 2011
  - 4.4.3 Terms of the fund's governing documents

- 4.5 To receive at least twice a year reports for ratification from the Executive Director of Finance, and investment decisions and action taken through delegated powers upon the advice of the UHB's investment adviser.
- 4.6 To oversee and monitor the functions performed by the Executive Director of Finance as defined in the UHB's Standing Financial Instructions.
- 4.7 To monitor the progress of ~~Charitable Appeal Funds~~ fundraising appeals where these are in place and considered to be material.
- 4.8 Seek assurance on delivery against Planning Objectives aligned to the Committee, considering and scrutinising the programmes and processes that are developed and implemented, supporting and endorsing these as appropriate (PO 2E).
- 4.9 To monitor and review the UHB's scheme of delegation for Charitable Funds expenditure and to set and reflect in Financial Procedures the approved delegated limits for expenditure from Charitable Funds.
- 4.10 Overseeing the day to day management of the investments of the charitable funds in accordance with the investment strategy set down from time to time by the ~~Corporate Trustees~~, and in accordance with the requirements of the UHB's Standing Financial Instructions.
- 4.11 The appointment of an Investment Manager (where appropriate) to advise it on investment matters and the delegation of day-to-day management of some or all of the investments to that Investment Manager. The Investment Manager, if appointed, must actively manage the charitable fund on behalf of the ~~Corporate Trustees~~. In exercising this power, the Committee must ensure that:
  - 4.11.1 The scope of the power delegated is clearly set out in writing and communicated with the person or persons who will exercise it;
  - 4.11.2 There are in place adequate internal controls and procedures which will ensure that the power is being exercised properly and prudently;
  - 4.11.3 The performance of the person or persons exercising the delegated power is regularly reviewed;
  - 4.11.4 Where an investment manager is appointed, that the person is regulated under the Financial Services Act 1986;
  - 4.11.5 Acquisitions or disposal of a material nature outside the terms of agreement must always have written authority of the Committee or the Chair of the Committee in conjunction with the Executive Director of Finance.
- 4.12 Ensuring that the banking arrangements for the charitable funds should be kept entirely distinct from the UHB's NHS funds.

- 4.13 Ensuring that arrangements are in place to maintain current account balances at minimum operational levels consistent with meeting expenditure obligations, the balance of funds being invested in interest bearing deposit accounts.
- 4.14 The amount to be invested or redeemed from the sale of investments shall have regard to the requirements for immediate and future expenditure commitments.
- 4.15 The operation of an investment pool when this is considered appropriate to the charity in accordance with charity law and the directions and guidance of the Charity Commission. The Committee shall propose the basis to the UHB Board for applying accrued income to individual funds in line with charity law and Charity Commission guidance.
- 4.16 Obtaining appropriate professional advice to support its investment activities.
- 4.17 Regularly reviewing investments to see if other opportunities or investment services offer a better return.
- 4.18 Reviewing alternative sources of funding to donations and legacies which could provide the Committee with additional leverage and access to additional funds.
- 4.19 By giving reasonable notice, require the attendance of any of the officers or employees and auditors of the Board at any meeting.
- 4.20 The following thresholds are approved in the Charitable Funds Procedure:  
*"Expenditure less than £10,000 shall only need approval by the nominated fund manager. All expenditure in excess of £10,000 and up to £50,000 will require the approval of the Charitable Funds Sub-Committee. Expenditure in excess of £50,000 will require the approval of the Charitable Funds Committee. Expenditure over £100,000 will require the approval of the Corporate Trustee".*
- 4.21 ~~In addition, further clarification is provided in the associated guidance to budget holders as follows:~~  
~~"Unusual or novel expenditure requests, and expenditure requests resulting in ongoing charitable fund commitment, or revenue resource commitment, will need prior Charitable Funds Committee approval prior to purchase, regardless of value. If this is deemed to be necessary [by senior finance staff], the authorised signatory will be advised."~~ In addition, the following expenditure types regardless of value require Charitable Funds Committee consideration and approval:
- Research & development expenditure.
  - Pay expenditure.
  - Requests of any nature resulting in ongoing charitable funds commitment.
- 4.22 ~~It also states that the following expenditure types require Committee approval:~~  
~~▪ "Research & development expenditure"~~

- ~~“Pay expenditure”~~
- ~~“Training including conferences/seminars etc. requiring attendance of participants outside the UK”~~. The following expenditure types also require Charitable Funds Sub-Committee consideration and approval:
  - Unusual or novel expenditure requests under £50,000.
  - Overseas training requests including conferences and seminars requiring the attendance of participants outside of the UK.
  - Higher award and academic studies for which significant benefit to the UHB can be quantified through training and development objectives.

4.23 ~~Therefore,~~ Items requiring urgent Chair’s Action will generally be expenditure on equipment greater than £50,000 value, or anything that falls under the criteria above. All expenditure requests made via Chair’s Actions will be considered on a case by case basis, as an exception rather than the rule. The presumption will be that other than equipment (in excess of £50,000) and smaller research projects (up to £25,000), items can be deferred to the next meeting.

4.23 The Chair’s decision on which items can be approved outside of the Committee will be final and all items approved outside of the full Committee will be reported to the next Committee meeting for ratification.

4.24 The Committee will seek assurance on the management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action, etc.

4.25 Recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.

## 5. Membership

5.1 The membership of the Committee, acting as representatives of the Corporate Trustee, shall comprise of the following:

Member
Independent Member (Chair)
Independent Member (Vice-Chair)
3 x Independent Members
Chief Executive
Executive Director of Finance
Director of Nursing, Quality and Patient Experience (Lead Director for Hywel Dda Health Charities)

The following should attend Committee meetings:

<b>In Attendance</b>
Assistant Director of Finance ( <del>Finance e-Systems</del> Financial Planning and Statutory Reporting)
Senior Finance Business Partner (Accounting and Statutory Reporting)
<del>Deputy Director of Operations</del> Chair of the Charitable Funds Sub-Committee
Head of Hywel Dda Health Charities
Staff Side Representative

- 5.2 A standing invitation is extended for a representative of the Hywel Dda Community Health Council to attend in an observer capacity.
- 5.3 Membership of the Committee will be reviewed on an annual basis.

## **6. Quorum and Attendance**

- 6.1 A quorum shall consist of no less than four of the membership and must include as a minimum the Chair or Vice Chair of the Committee, and one other Independent Member, as well as the Executive Director of Finance and the Lead **Director** for Hywel Dda Health Charities (or their suitably briefed deputies).
- 6.2 The membership of the Committee shall be determined by the Board of the Corporate Trustee (HDdUHB), based on the recommendation of the UHB Chair, taking into account the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.
- 6.3 Any senior officer of the UHB or partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting to assist with discussions on a particular matter.
- 6.4 The Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.
- 6.5 The Chair of the UHB reserves the right to attend any of the Committee's meetings as an ex officio member.
- 6.6 Should any officer member be unavailable to attend, they may nominate a deputy with full voting rights to attend in their place, subject to the agreement of the Chair.
- 6.7 The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Charitable Funds Committee.
- 6.8 The Committee will invite External Audit to attend once a year to provide the Committee with assurance on processes and end of year accounts.



- 6.9 The Committee may also extend the membership to include independent members outside of the Board (e.g. a nomination from Stakeholder Reference Group).
- 6.10 The Chair of the Charitable Funds Committee shall have reasonable access to Executive Directors and other relevant senior staff.
- 6.11 The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

## 7. Delegated Powers and Duties of the Director of Finance

- 7.1 The Director of Finance has prime financial responsibility for the UHB's Charitable Funds as defined in the UHB's Standing Financial Instructions. The specific powers, duties and responsibilities delegated to the Director of Finance are:
  - 7.1.1 Administration of all existing charitable funds.
  - 7.1.2 To identify any new charity that may be created (of which the UHB is **Corporate Trustee**) and to deal with any legal steps that may be required to formalise the trusts of any such charity.
  - 7.1.3 To provide guidelines with respect to donations, legacies and bequests, fundraising and trading income.
  - 7.1.4 Responsibility for the management of investment of funds held on trust.
  - 7.1.5 To ensure appropriate banking services are available to the UHB.
  - 7.1.6 To prepare reports to the UHB Board including the Annual Report and Accounts.

## 8. Agenda and Papers

- 8.1 The Committee Secretary is to hold an agenda setting meeting with the Chair and/or Vice-Chair, the Lead Director for Hywel Dda Health Charities and the Executive Director of Finance (or their nominated deputies) at least **six** weeks before the meeting date.
- 8.2 The agenda will be based around the Committee work plan, identified risks, matters arising from previous meeting, issues emerging throughout the year, and requests from Committee members. Following approval, the agenda and timetable for request of papers will be circulated to all Committee members.
- 8.3 All papers must be approved by the Lead/relevant Director.
- 8.4 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting, electronically.
- 8.5 The minutes and action log will be circulated to members within **ten** days **following a meeting** to check their accuracy.

- 8.6 Members must forward amendments to the Committee Secretary within the next **seven** days. The Committee Secretary will then forward the final version to the Committee Chair for approval.

## 9. In Committee

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

## 10. Frequency of Meetings

- 10.1 The Committee will meet no less than quarterly and shall agree an annual schedule of meetings. Additional meetings will be arranged as determined by the Chair of the Committee, in discussion with the Lead Director.
- 10.2 The Chair of the Committee, in discussion with the Committee Secretary, shall determine the time and the place of meetings of the Committee and procedures of such meetings.

## 11. Accountability, Responsibility and Authority

- 11.1 Although, as set out within these terms of reference, the Board has delegated authority to the Committee for the exercise of certain functions, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens, through the effective governance of the organisation.
- 11.2 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 11.3 The Committee shall embed the UHB's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 11.4 The requirements for the conduct of business as set out in the UHB's Standing Orders are equally applicable to the operation of the Committee.

## 12. Reporting

- 12.1 The Committee Chair shall agree arrangements with the UHB's Chair to report to the Board in their capacity as **Corporate Trustees**. This may include, where appropriate, a separate meeting with the Board.
- 12.3 The Committee, through its Chair and members, shall work closely with the Board's other Committees, including joint/sub-committees and groups, to provide advice and assurance to the UHB through the:

- 12.3.1 joint planning and co-ordination of Board and Committee business;
  - 12.3.2 sharing of information.
- 12.4 In doing so, the Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.
- 12.5 The Committee may establish sub-committees or task and finish groups to carry out on its behalf specific aspects of Committee business. The Committee will receive an update following each sub-committee or task and finish group meeting detailing the business undertaken on its behalf.
- The Committee ~~has established shall establish~~ the Charitable Funds ~~Operations~~ Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.
  - The Committee has established the Charitable Funds Investment Sub-Committee to provide advice regarding the appropriate investment strategy for the Charity's Investment Portfolio whilst recognising ultimate accountability remains with the Corporate Trustee.
- 12.7 The Committee Chair, supported by the Committee Secretary, shall:
- 12.7.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities in their capacity as ~~Corporate t~~Trustees. This includes the submission of a written Committee update report as well as the presentation of an annual report and accounts prior to submission to the Charity Commission.
  - 12.7.2 Bring to the Board's specific attention any significant matter under consideration by the Committee.
  - 12.7.3 Ensure appropriate escalation arrangements are in place to alert the UHB Chair, Chief Executive or Chairs of other relevant Committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the UHB.
- 12.8 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation including that of any sub-committees established.

### 13. Secretarial Support

- 13.1 The Committee Secretary shall be determined by the Board Secretary.

### 14. Review Date

- 14.1 These Terms of Reference and operating arrangements shall be reviewed on at least an annual basis by the Committee for approval by the Board.

### Planning Objectives Aligned to Charitable Funds Committee

P.O. Ref	Recovery Plan Section	Planning Objective	Executive Lead
2E	1	<p>From April 2022, continue to deliver the objectives of the charity's three-year plan (2020-2023) to further promote awareness of the Health Board's official charity and the opportunities available to raise and use funds to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board.</p> <p>As part of this, deliver the charity's marketing and communication plan from 1<sup>st</sup> April 2022 and undertake a review of the charity's strategic objectives, structure and resources to ensure effectiveness for Board assurance with the aim of developing the charity's longer-term strategy by February 2023.</p>	Director of Nursing, Quality and Patient Experience

<b>Enw'r Pwyllgor / Name of Committee</b>	Mental Health Legislation Committee (MHLC)
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Mrs Judith Hardisty, UHB Vice-Chair
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held on 13 <sup>th</sup> June 2022
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<p>This report summarises the key points from the meeting of the Mental Health Legislation Committee (MHLC) on 13<sup>th</sup> June 2022:</p> <ul style="list-style-type: none"> <li>• The Mental Health Legislation Annual Report 2021/2022 was presented to the Committee for approval before presentation at the Public Board meeting in July. Details of the Report were agreed by Committee as a true record.</li> <li>• As Deputy Chair of the Mental Health Legislation Scrutiny Group, the Mental Health Legislation Manager provided an update to the Committee on the Scrutiny meeting held on 3<sup>rd</sup> May 2022. As agreed at the previous meeting, a Measure report was provided which prompted considerable discussion in relation to Part Three and Four and the plans going forward to better scrutinise this data. The overarching trend around Quarter 4 was in relation to reduced use of the Mental Health Act. The next meeting will focus on the Terms of Reference for MHLSG as this will be reviewed at their next meeting. The Committee agreed on the approach to updating membership, to include all Heads of Service at MHLSG as opposed to the Committee.</li> <li>• The Power of Discharge Sub-Committee minutes from the meeting held on 5<sup>th</sup> April 2022 were received and it was noted that this was Professor John Gammon's last meeting as Chair. The Committee thanked Professor Gammon for his dedicated work for the group; the new Chair will be appointed by the next meeting in August 2022. The Committee received and approved the Terms of Reference for the Discharge Sub-Committee.</li> <li>• The Director of Mental Health and Learning Disabilities provided a verbal update on the MH &amp; LD Directorate Risk Register; there were no risks identified in respect of mental health legislation. The Director of Mental Health and Learning Disabilities will continue to monitor accordingly and update the Committee.</li> <li>• There was a request to extend the Locked Door Policy; however, a paper was not received within the required timeframe for the meeting. It was agreed that Chair's action would be taken to approve the extension.</li> <li>• The Annual Work Plan 2022-2023 was received by the Committee for information. Policy Dates will be included in the Annual Work Plan 2022-2023; this will notify the committee when Policies will be brought to the meeting.</li> </ul>	
<b>Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:</b>	
None.	
<b>Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:</b>	
None.	

<b>Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:</b>
<b>Adrodd yn y Dyfodol / Future Reporting:</b>
To be confirmed.
<b>Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:</b>
19 <sup>th</sup> September 2022.

<b>Enw'r Pwyllgor / Name of Committee</b>	In-Committee Board
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Miss Maria Battle, UHB Chair
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held on 26 <sup>th</sup> May 2022
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<ul style="list-style-type: none"> <li>• <b>Shortlisting of Land</b> – the In-Committee Board endorsed the process described.</li> <li>• <b>Welsh Ambulance Service NHS Trust (WAST) Escalation Report</b> – the In-Committee Board noted the WAST Escalation Report and agreed next steps.</li> <li>• <b>Suspensions Report</b> – the In-Committee Board received the most recent Suspensions Report, providing an update on all employment suspensions as at 30<sup>th</sup> April 2022.</li> <li>• <b>In-Committee Audit &amp; Risk Assurance Committee (ARAC)</b> – the In-Committee Board received an update report from the In-Committee ARAC meeting held on 19<sup>th</sup> April 2022.</li> <li>• <b>In-Committee Quality, Safety &amp; Experience Committee (QSEC)</b> – the In-Committee Board received an update report from the In-Committee QSEC meeting held on 12<sup>th</sup> April 2022.</li> <li>• <b>In-Committee Welsh Health Specialised Services Committee (WHSSC)</b> – the In-Committee Board received an update report from the In-Committee WHSSC meeting held on 10<sup>th</sup> May 2022.</li> </ul>	
<b>Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd a'u cyfer / Matters Requiring Board Level Consideration or Approval:</b>	
None.	
<b>Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:</b>	
None.	
<b>Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:</b>	
<b>Adrodd yn y Dyfodol / Future Reporting:</b>	
To be confirmed.	
<b>Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:</b>	
28 <sup>th</sup> July 2022.	



<b>Enw'r Pwyllgor / Name of Committee</b>	Staff Partnership Forum
<b>Cadeirydd y Pwyllgor/ Chair of Advisory Group:</b>	Lisa Gostling, Director of Workforce & OD & Anthony Dean, Joint Chair of Staff side Partnership Forum
<b>Cyfnod Adrodd/ Reporting Period:</b>	June 2022
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Advisory Group:</b>	
<p>The following items were discussed:</p> <ul style="list-style-type: none"> <li>• <b>Paediatric Patients in A&amp;E</b> – recording of attendances in A&amp;E was discussed, with the Director of Nursing, Quality &amp; Patient Experience agreeing to speak to the service manager and for them to respond around interpretation.</li> <li>• <b>Crèche Facilities Bronglais</b> – the lack of crèche facilities in Bronglais General Hospital was raised, as it was inconsistent with provision across the Health Board. This was to be considered and feedback provided.</li> <li>• <b>Pregnant Worker guidance</b>– with the changes regarding COVID-19 now in place clarity was sought for pregnant workers and their return to work/remaining in work. It was agreed that further information would be provided.</li> <li>• <b>Staff deployment linked to COVID-19</b> – any staff members redeployed due to risks associated with COVID-19 were now being reviewed on a case by case basis and returning to their normal work place where appropriate and safe.</li> <li>• <b>Mileage costs</b> – concerns continue to be expressed with regards to the cost of fuel particularly for community workers. Ideas were discussed and the Director of Finance agreed to look into what may be possible to support staff during these difficult times.</li> <li>• <b>Workforce Issues</b> – a number of issues were discussed linked to job descriptions and person specifications, which is being considered both locally and on an All Wales basis. Pensions roadshows were requested and it was agreed to establish whether Shared Services could support this.</li> <li>• <b>Clinical Land Appraisal</b> – the Planning team ran a workshop outlining the findings of the clinical land appraisal process. Discussion took place around the detail contained within the presentation and staff views on the content of the presentation.</li> <li>• <b>Policies</b> – the Underpayments and Overpayments Policy, work Life Balance Policy, Retirement and Disclosure and Barring and Referral policy were all supported to proceed to the next stage of the approval process.</li> <li>• <b>Terms of Reference</b> – subject to one minor amendment (deletion of the Policy Review Group in section 12) the terms of reference were approved by the Forum.</li> </ul>	
<b>Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:</b>	
<ul style="list-style-type: none"> <li>• To approve the revised Staff Partnership Forum Terms of Reference.</li> </ul>	
<b>Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:</b>	
None	

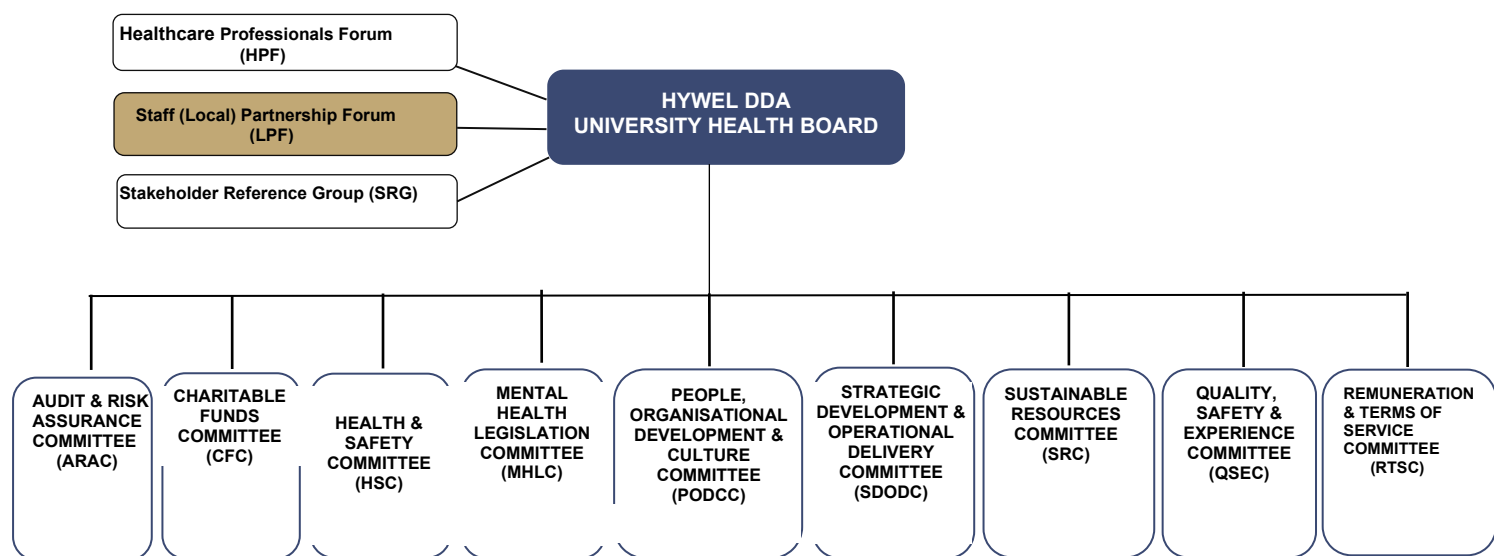
<b>Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:</b>
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<b>Adrodd yn y Dyfodol / Future Reporting:</b>
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Agenda to be agreed end of July in readiness for August meeting.
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<b>Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:</b>
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2 <sup>nd</sup> August 2022
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TERMS OF REFERENCE

HEALTH BOARD PARTNERSHIP FORUM

Version	Issued to:	Date	Comments
V0.1	Board	25/03/10	Approved
V0.1	Board (SO's)	22/07/10	Approved
V0.2	Board (SO's)	29/09/11	Approved
V0.3	LPF	14/10/11	Approved
V0.4	LPF	07/08/13	Approved
V0.4	Board (SO's)	22/11/14	Approved
V0.5	Board (SO's)	26/11/15	Approved
V0.6	LPF	07/12/15	Approved
V0.7	Partnership Forum	22/06/21	Approved
V.07	Hywel Dda University Health Board	29/07/21	Approved
V.08	Partnership Forum	07/07/22	Approved
V.08	Hywel Dda University Health Board	28/07/22	For Approval

## HEALTH BOARD PARTNERSHIP FORUM

### 1. Constitution

- 1.1 The Local Partnership Forum (LPF) has been established as an Advisory Committee of the Hywel Dda University Health Board and constituted from 1<sup>st</sup> October 2009.

### 2. Membership

- 2.1 All members of the LPF are full and equal members and share responsibility for the decisions of the LPF. The Health Board shall agree the overall size and composition of the LPF in consultation with those Trade Unions it recognises for collective bargaining. As a minimum, the membership of the LPF shall comprise:

#### 2.2 Management Representatives

Management will normally consist of the following members of management representatives.

Finance Director  
Director of Operations  
Director of Acute Services  
Director of Nursing, Quality & Patient Experience  
Assistant Director, Operational Nursing & Quality Acute Services  
Director of Therapies & Health Science  
Director of Workforce and OD  
Deputy Director of Workforce and OD  
Head of Workforce  
Director of Strategic Development and Operational Planning  
Assistant Director of OD  
Head of People & Organisational Effectiveness  
Assistant Director of Workforce & OD (Resourcing & Utilisation)  
Strategic Head of Education & Development  
Management Chair of County Partnership Forum (x3)

If members are unable to attend a meeting, a suitable deputy must attend in their place.

Other Directors and others may also be members or may be co-opted dependent upon the agenda.

The Chief Executive will attend periodically linked to specific agenda items

#### 2.3 Staff Representatives

The Board recognises those Trade Unions listed in Appendix 1 for the representation of members who are employed by the organisation.

Staff representatives must be employed by the organisation and accredited by their respective organisations for the purposes of bargaining. If a representative ceases to be employed by the Health Board, or ceases to be a member of a nominating organisation then he/she will automatically cease to be a member of the LPF. Full time officers of the Trade Unions may attend meetings subject to prior notification and agreement.

Members of the Partnership Forum who are unable to attend a meeting may send a deputy, providing such deputies are eligible for appointment to the Forum.

Each Union will be allocated seats at Partnership Forum linked to known union membership; where this has not been disclosed, assumptions have been made based on payroll deduction numbers where available. Should any particular Trade Union feel they have not been appropriately allocated seats, this will be reviewed on submission of membership information. See Appendix 2 for seats to be applied in 2021/2022.

It is intended to review membership every three years, alongside the annual review of the Terms of Reference. The Chair, Vice Chair and Secretary members shall be included in the overall Trade Union allocated seats.

## **2.4 Member Appointments**

The Trade Union Chair, Vice Chair and Secretary will be elected from the Local Health Board Trade Union representatives at Partnership Forum bi-annually. Each agreed Trade Union Partnership Forum member will receive one vote to elect to these roles. Best practice requires these three officers to come from different Trade Unions. All appointments will be for a period of 2 years.

## **2.5 Chairs**

The Management Chair and Trade Union Chair will jointly chair the LPF. This will be undertaken on a rotational basis. In the absence of the Chair(s), the Vice Chair(s) will act as Chair. The Chairs shall work in partnership with each other and, as appropriate, with the Chairs of the Board's other advisory groups. Supported by the Board Secretary, Chairs shall ensure that key and appropriate issues are discussed by the Forum in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.

# **3. Quorum and Attendance**

- 3.1 Every effort will be made by all parties to maintain a stable membership. There should be 50% attendance of both parties for the meeting to be quorate.
- 3.2 If the meeting is not quorate, no decisions can be made, but information may be exchanged. Where Joint Chairs agree, an extraordinary meeting may be scheduled within 7 calendar days notice.
- 3.3 Consistent attendance and commitment to participate in discussions is essential.

Where a Trade Union member of the LPF does not attend on 3 consecutive occasions, the Trade Union Secretary will write to the member and bring the response to the next meeting for further consideration and possible removal. In the case of management representatives not attending, the Director of Workforce & OD will contact the individual.

#### **4. Principal Duties**

- 4.1 The LPF is the formal mechanism where NHS Wales' employers and Trade Unions, professional bodies (hereafter referred to as Trade Unions) work together to improve health services for the people of Wales. It is the forum where key stakeholders will engage with each other to inform, debate and seek to agree local priorities on workforce and health service issues.
- 4.2 At the earliest opportunity, the Board will engage with Trade Unions in the key discussions at the HDdUHB Board, LPF and County Partnership Forums (CPF).
- 4.3 The LPF will provide the formal mechanism for consultation, negotiation and communication between the Trade Unions and management. The TUC principles of partnership will apply. These principles are attached at Appendix 3.

#### **5. Operational Responsibilities**

- 5.1 The purpose of the LPF will be to:
  - 5.1.1 Establish a regular and formal dialogue between the Board's Executive and the Trade Unions on matters relating to workforce and health service issues.
  - 5.1.2 Enable employers and Trade Unions to put forward Health Board wide issues affecting the workforce or local matters which remain unresolved at County level.
  - 5.1.3 Provide opportunities for Trade Unions and managers to input into organisation service development plans at an early stage.
  - 5.1.4 Contribute to the development of the Health Board's Strategy implementation plan and be actively involved in the development of local service strategies.
  - 5.1.5 Consider the implications on staff of service reviews and identify and seek to agree new ways of working.
  - 5.1.6 Consider the implications for staff of NHS reorganisations at a national or local level, and to work in partnership to achieve mutually successful implementation.
  - 5.1.7 Appraise and discuss in partnership the financial performance of the organisation on a regular basis.

- 5.1.8 Appraise and discuss in partnership the Board services and activity and its implications.
- 5.1.9 Provide opportunities to identify and seek to agree quality issues, including clinical governance, particularly where such issues have implications for staff.
- 5.1.10 Communicate to the partners the key decisions taken by the Board and senior management.
- 5.1.11 Contribute to the design and delivery of the Health Board workforce and OD strategy and specifically co-produce redesigned processes and ways of working and engaging with staff.
- 5.1.12 Consider national developments in NHS Wales Workforce & Organisational Strategy and the implications for the Board including matters of service re-profiling.
- 5.1.13 Negotiate on matters subject to local determination.
- 5.1.14 Ensure Trade Union representatives are afforded reasonable paid time off to undertake trade union duties.
- 5.1.15 To develop in partnership appropriate facilities arrangements using A4C Facilities Agreement as a minimum standard.
- 5.1.16 Endorse all Health Board Workforce policies and receive and ratify all Wales agreements for use in the Health Board and ensure compliance with All Wales agreements.
- 5.2 In addition the LPF will establish Local Partnership Forum sub groups to establish ongoing dialogue, communication and consultation on service and operational management issues specific to Directorates/Service areas. Where these sub groups are developed they must report to the LPF.

## **6. Agenda and Papers**

- 6.1 The Forum Secretary is to hold an agenda setting meeting with the Management and Trade Union Chairs and the Management Secretary (Committee Services Officer) at least one month before the meeting date.
- 6.2 The agenda will be based around the Forum's work plan, matters arising and requests from Forum members. Items for the agenda and supporting papers should be notified to the Management Secretary as early as possible, and in the event at least two weeks in advance of the meeting. Following approval, the agenda and timetable for papers will be circulated to all Forum members.
- 6.3 All papers must be approved by the Lead Director.
- 6.4 The agenda and papers for meetings will be distributed seven days in advance



of the meeting, whenever possible electronically. One hard copy will be maintained by the Secretary of the Forum.

- 6.5 The minutes and action log will be circulated to members within ten days to check the accuracy. The minutes must be an accurate record of the meeting which captures the discussions that take place.
- 6.6 Members must forward amendments to the Forum secretary within the next seven days. The Management Secretary will then forward the final version to the Management and Trade Union Chairs for approval.

## **7. Management of Meetings**

- 7.1 The Forum will meet bi-monthly however this may be changed to reflect the need of either Trade Unions or management. An annual schedule of meetings shall be agreed in advance, consistent with the HDdUHB's annual plan of Board business. Additional meetings will be arranged as determined by the Management and Trade Union Chairs of the Committee in discussion with the Management Secretary.
- 7.2 The business of the meeting shall be restricted to matters pertaining to Board-wide strategic issues. Local operational issues should be raised at the County Partnership Forums and will not be considered unless it is agreed that such issues have Health Board wide implication or if satisfactory resolution has not occurred.
- 7.3 The LPF has the capacity to co-opt others onto the forum or its sub groups as deemed necessary by agreement.
- 7.4 The Health Board may specifically request advice and feedback from the Forum on any aspect of its business, and the Forum may also offer advice and feedback even if not specifically requested by the Health Board.

## **8. Authority**

- 8.1 The Forum may provide advice to the Board:
  - 8.1.1 at Board meetings, through the Independent Member (Trade Union).
  - 8.1.2 in written advice; and
  - 8.1.3 in any other form specified by the Board.

## **9. Reporting and Assurance Arrangements**

- 9.1 The Chairs shall be jointly responsible for the effective operation of the LPF:
  - 9.1.1 chairing meetings, rotated equally between the Staff Representative and Management Representative Chairs;
  - 9.1.2 establishing and ensuring adherence to the standards of good governance set for the NHS in Wales, ensuring that all business is conducted in accordance with its agreed operating framework; and
  - 9.1.3 developing positive and professional relationships amongst the Forum's membership and between the Forum and the HDdUHB's Board.

- 9.2 The Chairs shall work in partnership with each other and, as appropriate, with the Chairs of the UHB's other advisory groups. Supported by the Board Secretary, Chairs shall ensure that key and appropriate issues are discussed by the Forum in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.
- 9.3 The Chairs are accountable to the HDdUHB Board for the conduct of business in accordance with the governance and operating framework set by the UHB.
- 9.4 The Forum Chair shall:
  - 9.4.1 report formally, regularly and on a timely basis to the Board on the Forum's activities. This includes written updates on activity following each meeting and the presentation of an annual report reviewing the Forum's activity and effectiveness against its Terms of Reference within 6 weeks of the end of the financial year;
  - 9.4.2 bring to the Board's specific attention any significant matters under consideration by the Forum;
- 9.5 The requirements for the conduct of business as set out in the HDdUHB's Standing Orders are equally applicable to the operation of the LPF.

## **10. Relationships and Accountabilities with Others**

- 10.1 The LPF's main link with the Board is through the Executive members of the LPF and the Independent Member (Trade Union).
- 10.2 The Board may determine that designated Board members or HDdUHB staff shall be in attendance at LPF meetings. The LPF's Chair may also request the attendance of Board members or UHB staff, subject to the agreement of the HDdUHB Chair.
- 10.3 The Board shall determine the arrangements for any joint meetings between the HDdUHB Board and the LPF's staff representative members.
- 10.4 The Board's Chair shall put in place arrangements to meet with the LPF's Joint Chairs on a regular basis to discuss the LPF's activities and operation.
- 10.5 The LPF shall ensure effective links and relationships with other groups/fora at a local and, where appropriate, national level.

## **11. General Principles of Partnership between Trade Unions and Management**

- 11.1 The Partnership Forum accepts that partnerships help the workforce and management work through challenges and to grow and strengthen their organisations. Relationships are built on trust and confidence and demonstrate a real commitment to work together.
- 11.2 The principles of true partnership working between Trade Unions and Management are as follows:

- 11.2.1 TU's and management show joint commitment to the success of the organisation with a positive and constructive approach
- 11.2.2 They recognise the legitimacy of other partners and their interests and treat all parties with trust and mutual respect
- 11.2.3 They demonstrate commitment to employment security for workers and flexible ways of working
- 11.2.4 They share success – rewards must be felt to be fair
- 11.2.5 They practice open and transparent communication – sharing information widely with openness, honesty and transparency
- 11.2.6 They must bring effective representation of the views and interests of the workforce
- 11.2.7 They must demonstrate a commitment to work with and learn from each other

### 11.3 All members must:

- 11.3.1 be prepared to engage with and contribute fully to the Forum's activities and in a manner that upholds the standards of good governance set for the NHS in Wales;
- 11.3.2 comply with their terms and conditions of appointment;
- 11.3.3 equip themselves to fulfill the breadth of their responsibilities by participating in appropriate personal and organisational development programmes; and
- 11.3.4 promote the work of the LPF within the professional discipline he/she represents.

### 11.4 A Code of Conduct is attached as Appendix 4.

## 12. Sub Committees

- 12.1 When it is considered appropriate, the Forum can decide to appoint sub-committees, to hold detailed discussion on a particular issue(s). Nominated representatives to sub-committees will communicate and report regularly to the LPF.
- 12.2 Sub committees already in place are as follows:
  - Organisational Change Group
  - Ceredigion Partnership Forum
  - Carmarthenshire Partnership Forum
  - Pembrokeshire Partnership Forum
  - ~~Policy Review Group~~
- 12.3 Each sub-committee will report bi-monthly to the LPF.

## 13. Secretarial Support

- 13.1 The LPF's work shall be supported by two designated Secretaries, one of whom shall support the staff representative members and one shall support the management representative members.
- 13.2 The Director of Workforce and OD will act as Management Representative Secretary and will be responsible for the maintenance of the constitution of the

membership, the circulation of agenda and minutes and notification of meetings.

- 13.3 The Staff Representative Secretary shall be elected from within the staff representative membership of the LPF, by staff representative members, in a manner determined by the staff representatives. The Staff Representative Secretary's term of office shall be for two (2) years.
- 13.4 Both Secretaries shall work closely with the HDdUHB's Board Secretary who is responsible for the overall planning and co-ordination of the HDdUHB's programme of Board business, including that of its Committees and Advisory Groups.
- 13.5 The Committee Secretary shall be determined by the Director of Workforce and Organisational Development.

#### **14. Review Date**

- 14.1 These Terms of Reference and operating arrangements shall be reviewed on at least an annual basis by the LPF for approval by the Board.

## **Appendix 1**

### **List of Recognised Trade Unions**

- British Medical Association (BMA)
- Royal College of Nursing (RCN)
- Royal College of Midwives (RCM)
- UNISON
- UNITE
- GMB
- British Orthoptic Society
- Society of Radiographers
- British Dental Association
- Society of Chiropodists and Podiatrists
- Federation of Clinical Scientists
- Chartered Society of Physiotherapy (CSP)
- British Dietetic Association

# Appendix 2

Members	Seats
<ul style="list-style-type: none"><li>• Royal College of Nursing (RCN)</li></ul>	6
<ul style="list-style-type: none"><li>• Royal College of Midwives (RCM)</li></ul>	1
<ul style="list-style-type: none"><li>• UNISON</li></ul>	7
<ul style="list-style-type: none"><li>• UNITE</li></ul>	3
<ul style="list-style-type: none"><li>• GMB</li></ul>	1
<ul style="list-style-type: none"><li>• British Orthoptic Society</li></ul>	1
<ul style="list-style-type: none"><li>• Society of Radiographers</li></ul>	1
<ul style="list-style-type: none"><li>• British Dental Association</li></ul>	1
<ul style="list-style-type: none"><li>• Society of Chiropodists and Podiatrists</li></ul>	1
<ul style="list-style-type: none"><li>• Federation of Clinical Scientists</li></ul>	1
<ul style="list-style-type: none"><li>• Chartered Society of Physiotherapy (CSP)</li></ul>	1
<ul style="list-style-type: none"><li>• British Dietetic Association</li></ul>	1

## **Appendix 3**

### **Six Principles of Partnership Working**

- a shared commitment to the success of the organisation
- a focus on the quality of working life
- recognition of the legitimate roles of the employer and the trade union
- a commitment by the employer to employment security
- openness on both sides and a willingness by the employer to share information and discuss the future plans for the organisation
- adding value – a shared understanding that the partnership is delivering measurable improvements for the employer, the union and employees



## **Appendix 4**

### **Code of Conduct**

**A code of conduct for meetings sets ground rules for all participants: -**

- Respect the meeting start time and arrive punctually
- Attend the meeting well-prepared, willing to contribute and with a positive attitude
- Listen actively. Allow others to explain or clarify when necessary
- Observe the requirement that only one person speaks at a time
- Avoid 'put downs' of views or points made by colleagues
- Respect a colleague's point of view
- Avoid using negative behaviours e.g. sarcasm, point-scoring, personalisation
- Try not to react negatively to criticism or take as a personal slight
- Put forward criticism in a positive way
- Be mindful that decisions have to be made and it is not possible to accommodate all individual views
- No 'side-meetings' to take place
- Respect the Chair
- Adhere to UHBs values
- Failure to adhere to the Code of Conduct may result in the suspension or removal of the member. (Please note before this is enacted the Director of Workforce & OD will engage with the individual and the relevant full time officer).

<b>Enw'r Pwyllgor / Name of Committee</b>	Healthcare Professionals Forum
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Dr Mo Nazemi
<b>Cyfnod Adrodd/ Reporting Period:</b>	Extraordinary Meeting held on 6 <sup>th</sup> June 2022 Regular Meeting held on 30 <sup>th</sup> June 2022
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<p>The Healthcare Professionals Forum (HPF) met twice in June 2022. An extraordinary meeting was arranged on 6<sup>th</sup> of June 2022:</p> <ul style="list-style-type: none"> <li>Yvette Pellegrotti, Project Manager, Land Appraisal Team presented on the review of possible impact of each potential new hospital location on Obstetrics, Neonatal Services and Paediatrics, as well as reviewing the impact on Stroke services.</li> </ul> <p>Members were given an opportunity to ask questions and comment on the review.</p> <p>The HPF next met for their scheduled meeting on 30<sup>th</sup> June 2022:</p> <ul style="list-style-type: none"> <li>The Forum considered and agreed (with no amendments) its Terms of Reference.</li> <li>Lisa Wise, WG HSSG Climate Change Team, gave a brief presentation outlining WG decarbonisation targets stemming from the Well-being of Future Generations (Wales) Act 2015. An outline of the national picture and Milestones was presented to members. It was explained that delivery is via the National Decarbonisation strategy delivery plan. All HBs are asked to develop their own plans with regard to how they will achieve the necessary reductions.</li> </ul> <p>Lee Davies, Executive Director of Strategic Development, and Paul Williams, Head of Property Performance, presented on The Decarbonisation Agenda – The Hywel Dda response to NHS Wales Decarbonisation Strategy 2021 and Welsh Government Carbon Neutral Welsh Public Sector (ambition) 2030.</p> <p>The Health Board planning objective 6G, which picks up on each of the key themes of carbon management, buildings, transport, procurement, estates planning and land use promoting clinical sustainability, was outlined.</p> <p>It was understood that there had been some programme activity with the HB moving forward on several projects, into delivery stage. The membership was advised on the current activity streams and plans as they are.</p> <p>Infrastructure projects, Carbon literacy programs, as well as funding requirements, were discussed.</p> <p>The Forum welcomed the presentations.</p>	

**Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u  
cyfer /**

**Matters Requiring Board Level Consideration or Approval:**

- To approve the Healthcare Professionals Forum Terms of Reference.

**Risgiau Allweddol a Materion Pryder /**

**Key Risks and Issues/ Matters of Concern:**

- None

**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /**

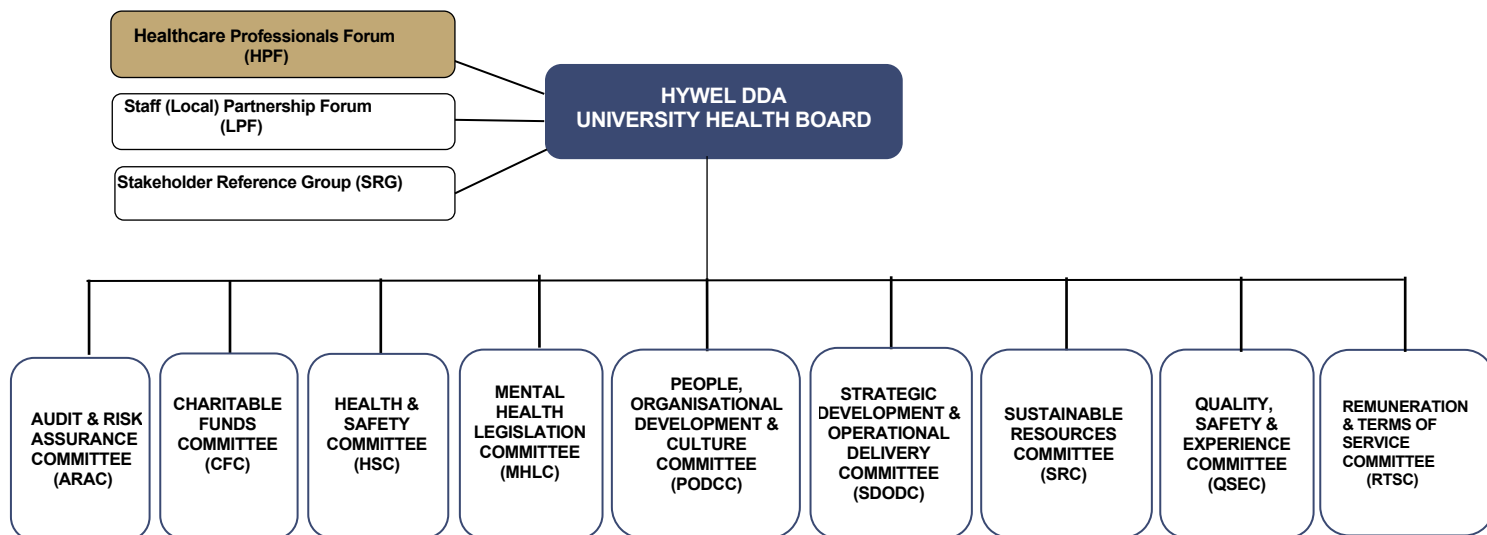
**Planned Committee Business for the Next Reporting Period:**

**Adrodd yn y Dyfodol / Future Reporting:**

To be confirmed

**Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:**

25<sup>th</sup> July 2022



## TERMS OF REFERENCE

### HEALTHCARE PROFESSIONALS FORUM

Version	Issued to:	Date	Comments
V0.1	Board	25/03/10	Approved
V0.1	Board (SO's)	22/07/10	Approved
V0.2	HPF	23/12/10	Approved
V0.3	HPF	11/03/11	Approved
V0.4	HPF	31/10/11	Approved
V0.5	HPF	24/01/11	Approved
V0.6	HPF	05/03/12	Approved
V0.6	LHB Board	27/09/12	Approved
V0.7	HPF	20/08/13	Approved
V0.8	Board (SO's)	22/05/14	Approved
V0.9	Board (SO's)	26/11/15	Approved
V0.10	HPF	19/06/17	Approved
V0.10	HPF	08/03/18	Approved

V0.10	<b>Hywel Dda University Health Board</b>	29/03/18	Approved
V0.11	<b>HPF</b>	09/04/2019	Approved
V0.11	<b>Hywel Dda University Health Board</b>	30/05/2019	Approved
V0.12	<b>Hywel Dda University Health Board</b>	29/07/2021	Approved
V0.13	<b>HPF</b>	30/06/2022	Approved
V0.13	Hywel Dda University Health Board	28/07/2022	For Approval

## HEALTHCARE PROFESSIONALS FORUM

### 1. Constitution

- 1.1 The Healthcare Professionals Forum (HPF) has been established as an Advisory Group of the Hywel Dda University Local Health Board (the Health Board) and was constituted from December 2010.

### 2. Membership

- 2.1 The membership of the Forum shall comprise:

**Chair** nominated from within the membership of the Forum by its members and approved by the Minister

**Vice Chair** nominated from within the membership of the Forum by its members and approved by the Board.

**Members** the membership of the Forum reflects the structure of the seven health Statutory Professional Advisory Committees set up in accordance with Section 190 of the NHS (Wales) Act 2006. Membership of the forum shall therefore comprise the following eleven (11) members:

#### Welsh Medical Committee

1. Primary and Community Care Medical representative
2. Mental Health Medical representative
3. Specialist and Tertiary Care Medical representative

#### Welsh Nursing and Midwifery Committee

4. Community Nursing and Midwifery representative
5. Hospital Nursing and Midwifery representative

#### Welsh Therapies Advisory Committee

6. Therapies representative

#### Welsh Scientific Advisory Committee

7. Scientific representative

Welsh Optometric Committee  
8. Optometry representative

Welsh Dental Committee  
9. Dental representative

Welsh Pharmaceutical Committee  
10. Hospital Pharmacists representative  
11. Community Pharmacists representative

## 2.2 In attendance

- 2.2.1 The Medical Director/Director of Clinical Strategy will be the Executive Lead and sponsor for the HPF. A minimum of one Director will attend all formal meetings.
- 2.2.2 The University Health Board (UHB) may nominate designated Board members or UHB staff be in attendance at Forum meetings. The Forum's Chair may also request the attendance of Board members or UHB staff, subject to the agreement of the UHB Chair. The following has been designated as an In Attendance member:
- Advanced Paramedic Practitioner representative
- 2.2.3 The University Health Board Chair and Chief Executive reserve the right to attend formal meetings.

## 2.3 Member Appointments

- 2.3.1 Appointments to the Forum shall be made by the Board, based upon nominations received from the relevant professional group, and in accordance with any specific requirements or directions made by the Welsh Government.
- 2.3.2 Members shall be appointed for a period of between 3 to 4 years in any one term. Those members can be reappointed but may not serve a total period of more than 8 years consecutively.
- 2.3.3 The *Chair* will be nominated from within the membership of the Forum, by its members, in a manner determined by the Board, subject to any specific requirements or directions made by the Welsh Government. The nomination will be subject to consideration by the HB, who must submit a recommendation on the nomination to the Minister for Health and Social Services. Their appointment as Chair will be made by the Minister, but it will not be a formal public appointment. The Constitution Regulations provide that the Welsh Ministers may appoint an Associate Member of the Board, and the appointment of the Chair to this role is on the basis of the conditions of appointment for Associate Members set out in the Regulations.
- 2.3.4 The Chair's term of office will be for a period of up to two (2) years, with the

ability to stand as Chair for an additional one (1) year, in line with that individual's term of office as a member of the Forum. That individual may remain in office for the remainder of their term as a member of the Forum after their term of appointment as Chair has ended.

2.3.5 The *Vice Chair* shall be nominated from within the membership of the Forum, by its members by the same process as that adopted for the Chair, subject to the condition that they be appointed from a different clinical discipline from that of the Chair.

2.3.6 The Vice Chair's term of office will be as described for the Chair.

2.3.7 A member's tenure of appointment will cease in the event that they no longer meet any of the eligibility requirements determined for the position. A member must inform the Forum Chair as soon as is reasonably practicable to do so in respect of any issue which may impact on their eligibility to hold office. The Forum Chair will advise the Board in writing of any such cases immediately. The UHB will require Forum members to confirm in writing their continued eligibility on an annual basis.

2.3.8 If a member fails to attend any meeting of the HPF for a period of six months or more, the Board may remove that person from office unless they are satisfied that:

2.3.8.1 the absence was due to a reasonable cause; and

2.3.8.2 the member will be able to attend such meetings within such a period as the Board considers reasonable.

### **3. Quorum and Attendance**

3.1 A quorum shall consist of at least half of the membership and must include the Chair or Vice Chair of the Committee.

### **4. Principal Duties**

4.1 As an Advisory Group to Hywel Dda University Health Board, the purpose of the Healthcare Professionals Forum (hereafter referred to as "the Forum"), is to provide advice to the Board on all professional and clinical issues it considers appropriate. Its role does not include consideration of professional terms and conditions of service.

### **5. Operational Responsibilities**

5.1 As an Advisory Group to the Board, the Forum's role is to:

5.1.1 provide a balanced, multi-disciplinary view of professional issues to advise the Board on local strategy and delivery;

5.1.2 facilitate engagement and debate amongst the wide range of clinical interests within the Health Board's area of activity, with the aim of reaching and presenting

- a cohesive and balanced professional perspective to inform the Health Board's decision making; and
- 5.1.3 link in with existing internal clinical engagement structures.

## **6. Agenda and Papers**

- 6.1 The Forum Secretary is to hold an agenda setting meeting with the Chair, Vice Chair and the Lead Executive (the Medical Director/Director of Clinical Strategy) at least one month before the meeting date.
- 6.2 The agenda will be based around the Forum's work plan, matters arising and requests from Forum members. Following approval, the agenda and timetable for papers will be circulated to all Forum members.
- 6.3 All papers must be approved by the Chair.
- 6.4 The agenda and papers for meetings will be distributed eight days in advance of the meeting, whenever possible electronically. One hard copy will be maintained by the Secretary of the Forum.
- 6.5 The minutes and action log will be circulated to members within seven days to check the accuracy. The minutes must be an accurate record of the meeting which capture the discussions that take place.
- 6.6 Members must forward amendments to the Forum secretary within the next seven days. The Forum secretary will then forward the final version to the Forum Chair for approval.

## **7. Management of Meetings**

- 7.1 The Forum will meet quarterly and shall agree a schedule of meetings at least 12 months in advance, consistent with the University Health Board's annual plan of Board Business. Additional meetings will be arranged as determined by the Chair of the Forum in discussion with the Lead Executive.
- 7.2 The Chair of the Forum, in discussion with the Forum Secretary shall determine the time and the place of meetings of the Forum and procedures of such meetings.
- 7.3 The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out by others to advise it in the conduct of its business.
- 7.4 Should it be necessary, components of the meeting will be held in private or on an informal basis



## **8. Authority**

- 8.1 The Health Board may specifically request advice and feedback from the Forum on any aspect of its business, and the Forum may also offer advice and feedback even if not specifically requested by the Health Board.
- 8.2 The Forum may provide advice to the Board:
  - 8.2.1 at Board meetings, through the Forum Chair's participation as Associate Member;
  - 8.2.2 in written advice; and
  - 8.2.3 in any other form specified by the Board.

## **9. Reporting and Assurance Arrangements**

- 9.1 The Chair is responsible for the effective operation of the Forum:
  - 9.1.1 chairing meetings;
  - 9.1.2 establishing and ensuring adherence to the standards of good governance set for the NHS in Wales, ensuring that all business is conducted in accordance with its agreed operating arrangements; and
  - 9.1.3 developing positive and professional relationships amongst the Forum's membership and between the Forum and Hywel Dda University Health Board, and in particular it's Chair, Chief Executive and Directors.
- 9.2 The Chair shall work in close harmony with the Chairs of Hywel Dda Health Board's other Advisory Groups, and, supported by the Board Secretary, shall ensure that key and appropriate issues are discussed by the Forum in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.
- 9.3 The Chair of the HPF will be appointed as an Associate Member of the Health Board on an ex officio basis. The Chair is accountable for the conduct of their role as Associate Member on the Hywel Dda University Health Board to the Minister, through the Health Board Chair. They are also accountable to Hywel Dda University Health Board for the conduct of business in accordance with the governance and operating framework set by the Health Board.
- 9.4 The Forum Chair shall:
  - 9.4.1 report formally, regularly and on a timely basis to the Board on the Forum's activities. This includes written updates on activity after each meeting and the presentation of an annual report reviewing the Forum's activity and effectiveness against the ToRs within 6 weeks of the end of the financial year;
  - 9.4.2 bring to the Board's specific attention any significant matters under consideration by the Forum;
- 9.5 All Forum members must:
  - 9.5.1 be prepared to engage with and contribute fully to the HPF's activities and in a manner that upholds the standards of good governance – including the values and

- standards of behaviour – set for the NHS in Wales;
  - 9.5.2 comply with their terms and conditions of appointment;
  - 9.5.3 equip themselves to fulfil the breadth of their responsibilities by participating in appropriate personal and organisational development programmes; and
  - 9.5.4 promote the work of the HPF within the healthcare professional discipline they represent.
- 9.6 Forum members are accountable through the HPF Chair to the UHB Board for their performance as Forum members, and to their nominating body or grouping for the way in which they represent the views of their body or grouping at the HPF.
- 9.7 The requirements for the conduct of business as set out in the UHB's Standing Orders are equally applicable to the operation of the Forum.

## **10. Relationship Accountabilities with the Board and Other Committees of the Board**

- 10.1 The Forum's main link with the Board is through the Forum Chair's membership of the Board as an Associate Member.
- 10.2 The Board should determine the arrangements for any joint meetings between the UHB Board and the Forum.
- 10.3 The Health Board's Chair should put in place arrangements to meet with the Forum Chair on a regular basis to discuss the Forum's activities and operation.
- 10.4 The Health Board Chair, on the advice of the Chief Executive and/or Board Secretary, may recommend that the Board afford direct right of access to any professional group, in the following, exceptional circumstances:
- 10.4.1 where the Forum recommends that a matter should be presented to the Board by a particular professional grouping, e.g. due to the specialist nature of the issues concerned; or
  - 10.4.2 where a professional group has demonstrated that the Forum has not afforded it due consideration in the determination of its advice to the Board on a particular issue, or
  - 10.4.3 the Board may itself determine that it wishes to seek the views of a particular professional grouping on a specific matter.
- 10.5 The Medical Director/Director of Clinical Strategy, on behalf of the Chair, will ensure that the Forum is properly equipped to carry out its role by:
- 10.5.1 ensuring the provision of governance advice and support to the HPF Chair on the conduct of its business and its relationship with the UHB and others;
  - 10.5.2 ensuring that the HPF receives the information it needs on a timely basis;
  - 10.5.3 ensuring strong links to communities / groups;
  - 10.5.4 facilitating effective reporting to the Board; and
  - 10.5.5 enabling the Board to gain assurance that the conduct of business within the HPF accords with the governance and operating framework it has set.

## **11. Relationship with the National Joint Professional Advisory Committee**

- 11.1 The Forum Chair will be a member of the National Joint Professional Advisory Committee.

## **12. Secretarial Support**

- 12.1 The Forum Secretary shall be determined by the Medical Director/Director of Clinical Strategy.

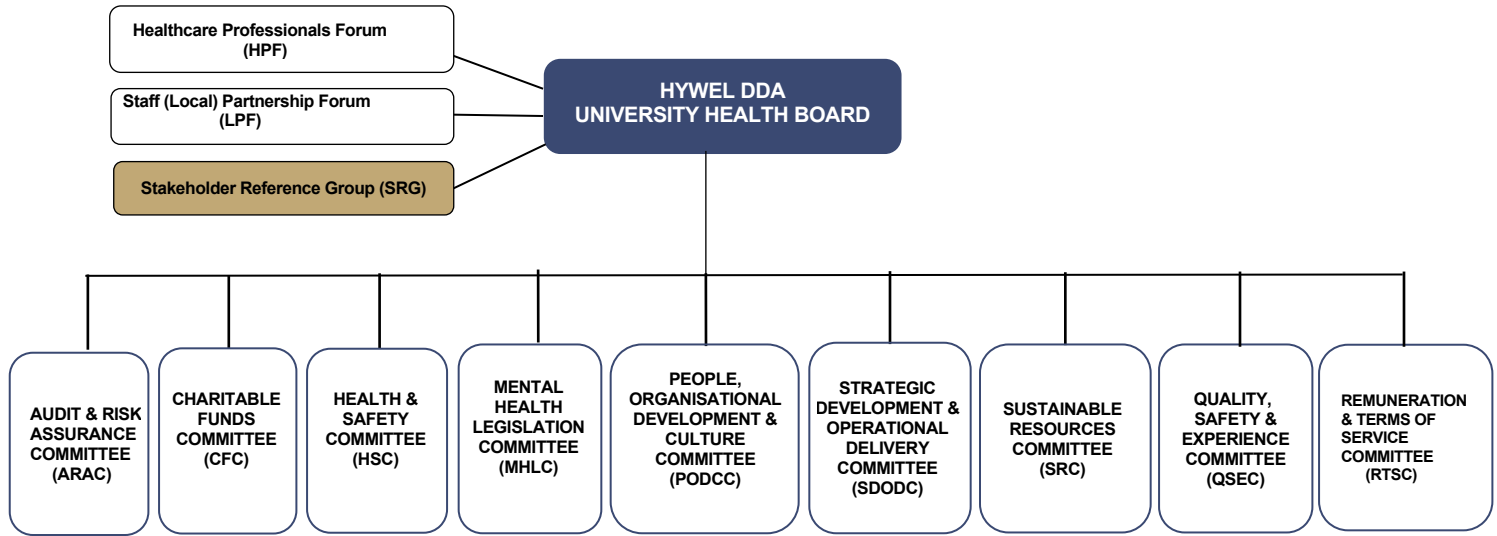
## **13. Review Date**

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



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board



## STAKEHOLDER REFERENCE GROUP

## TERMS OF REFERENCE

Version	Issued to:	Date	Comments
V0.1	Hywel Dda University Health Board	25.03.2010	Approved
V0.2	SRG	08.06.2010	Approved
V0.2	Board (Standing Orders)	22.07.2010	Approved
V0.3	SRG	14.01.2011	Approved
V0.3	SRG	29.03.2011	Approved
V0.4	SRG	20.09.2011	Approved
V0.5	SRG	17.07.2012	Approved
V0.5	Board (Standing Orders)	27.09.2012	Approved
V0.6	SRG	22.01.2013	Approved
V0.6	Board (Standing Orders)	26.09.2013	Approved
V0.7	SRG	27.01.2014	Approved
V.08	SRG	15.10.2015	Approved
V.09	SRG	12.01.2017	Approved
V.09	Hywel Dda University Health Board	26.01.2017	Approved
V10	SRG	05.02.2018	Approved
V.10	Hywel Dda University Health Board	28.03.2019	Approved
V.11	Hywel Dda University Health Board	26.09.2019	Approved

V.12	<b>SRG</b>	16.04.2021	Approved
V.12	<b>Hywel Dda University Health Board</b>	27.05.2021	Approved
V.13	<b>Hywel Dda University Health Board</b>	29.07.2021	Approved
V.14	<b>SRG</b>	06.05.2022	Approved
V.14	<b>Hywel Dda University Health Board</b>	26.05.2022	

## STAKEHOLDER REFERENCE GROUP

### 1. Constitution

- 1.1 The Stakeholder Reference Group (SRG) has been established as an Advisory Group of the Hywel Dda University Health Board (HDdUHB) and was constituted from 1<sup>st</sup> June 2010.

### 2. Principal Duties

- 2.1 The purpose of the SRG is to provide:
- 2.1.1 Early engagement and involvement in the determination of the UHB's overall strategic direction;
  - 2.1.2 Advice to the UHB on specific service improvement proposals prior to formal consultation; as well as
  - 2.1.3 Feedback to the UHB on the impact of the UHB's operations on the communities it serves.
  - 2.1.4 The SRG has responsibilities under the Equalities Act 2010.

### 3. Operational Responsibilities

- 3.1 The SRG will, in respect of its provision of advice to the Board:
- 3.1.1 Provide a forum to facilitate full engagement and activate debate amongst stakeholders from across the communities served by the UHB, with the aim of reaching and presenting, wherever possible, a cohesive and balanced stakeholder perspective to inform the UHB's decision-making. NB. Even when the SRG is unable to reach a consensus, it has an important role as a forum through which to draw the UHB's attention to the full range of views.
  - 3.1.2 The SRG shall represent those stakeholders who have an interest in, and whose own roles and activities may be impacted by the decisions of the UHB and vice-versa. The SRG's role is distinctive from that of

CHCs, who have a statutory role in representing the interests of patients and the public within their geographic areas.

#### 4. Membership

4.1 The membership of the Group shall comprise:

**Chair** Nominated from within the membership of the SRG by its members and approved by the Board

**Vice Chair** Nominated from within the membership of the SRG by its members and approved by the Board.

**Members** The membership is drawn from within the area served by the University Health Board (UHB), and ensures involvement from a range of bodies and groups operating within the communities serviced by the UHB. It is the role of SRG members to represent fairly and fully the interests and views of those bodies and groups.

There shall be no minimum or maximum requirement in terms of membership size. In determining the number of members, the Board shall take account of the need to ensure the SRG's size is optimal to ensure focused and inclusive activity.

The membership of the SRG will also serve as the membership of the Reference Group to advise the West Wales Regional Partnership Board (RPB), especially on matters of integration and seamless health and social care.

The membership of the SRG is made up of representatives from the following sectors with the number of representatives in brackets ():

##### **Sector/ Organisation**

- Armed Forces Covenant Representative (1)
- Carer representation (3)
- Citizens Advice (1)
- Fire & Rescue Service (1)
- Hywel Dda Community Health Council (CHC) (1)
- HDdUHB Independent Board Member (1)
- HDdUHB Director representation (1)
- HDdUHB Public Health representation (1)
- Housing Associations (1)
- Independent Sector (1)
- Mental Health representation (1)
- Natural Resources Wales representation (1)

- Patient representation (3)
- Public Service Boards representation (3)
- Siarad Iechyd/ Talking Health Member (3)
- Third Sector (CAVO, CAVS & PAVS) (1)
- Town and Community Councils (3)
- West Wales Care Partnership/ Regional Partnership Board (1)
- Welsh Ambulance Services NHS Trust (WAST) (1)

**Total (29)**

Additional organisational representation may be co-opted as appropriate and will include:

- Office of the Police and Crime Commissioner
- Strategic Partnerships, Diversity and Inclusion
- Local Health Board County Directors
- Mental Health
- Planning
- Engagement
- Patient Experience
- Youth Forums
- Transformation
- Those from an ethnic community/Those with protected characteristics

This membership will be reviewed by the Chair and Lead Director on an annual basis.

**In attendance** The UHB may determine that designated Board members or UHB staff should be in attendance at SRG meetings. The SRG's Chair may also request the attendance of Board members or UHB staff, subject to the agreement of the UHB Chair.

**By invitation** The SRG shall make arrangements to ensure designated CHC members receive the SRG's papers and are invited to attend SRG meetings. This linkage is key, and needs to be formalised through the Hywel Dda CHC Executive Committee.

## 4.2 Member Appointments

Appointments to the SRG shall be made by the Board, based upon nominations received from stakeholder bodies/ groups. The Board may seek independent expressions of interest to represent a key stakeholder group where it has determined that formal bodies or groups are not already established, or are operating within the area and may represent the interests of these stakeholders on the SRG.

The nomination and appointment process shall be open and transparent, and in accordance with any specific requirements or directions made by Welsh Government. The appointments process shall be designed in a manner that meets the communication and involvement needs of all stakeholders eligible for appointment.

Members shall be appointed for a period specified by the Board, but for no longer than three (3) years in any one term. Those members can be reappointed but may not serve a total period of more than five (5) years consecutively. The Board may, where it considers it appropriate, co-opt members to the SRG on an interim or short-term basis to fulfil a particular purpose or need.

The **Chair** shall be nominated from within the membership of the SRG, by its members, in a manner determined by the Board, subject to any specific requirements or directions made by Welsh Government. The nomination shall be subject to consideration by the UHB, who must submit a recommendation on the nomination to the Minister for Health and Social Services. The appointment as Chair shall be made by the Minister, but it shall not be a formal public appointment. The Constitution Regulations provide that the Welsh Ministers may appoint an Associate Member of the Board, and the appointment of the Chair to this role is on the basis of the conditions of appointment for Associate Members set out in the Regulations.

The Chair's term of office shall be for a period of up to two (2) years, with the ability to stand as Chair for an additional one (1) year, in line with that individual's term of office as a member of the SRG. That individual may remain in office for the remainder of their term as a member of the SRG after their term of appointment as Chair has ended.

The **Vice Chair** shall be nominated from within the membership of the SRG, by its members, following the same process as that adopted for the Chair, subject to the condition that they be appointed from a different sector/ organisation from that of the Chair. In the SRG Chair's absence, the Vice Chair shall also perform the role of Associate Member on the LHB Board.

The Vice Chair's term of office will be as described for the Chair.

- 4.3 A member's tenure of appointment will cease in the event that they no longer meet any of the eligibility requirements determined for the position. A member must inform the SRG Chair as soon as is reasonably practicable in respect of any issue which may impact on their eligibility to hold office. The SRG Chair will advise the Board in writing of any such cases immediately.
- 4.4 The UHB will require SRG members to confirm in writing their continued eligibility on an annual basis.



- 4.5 The membership of the Group shall be determined by the Board, based on the recommendation of the UHB Chair, and subject to any specific requirements or directions made by Welsh Government.

## 5. Quorum and Attendance

- 5.1 A quorum shall consist of no less than one third of the membership and must include the Chair or Vice Chair of the Group. If a meeting is not quorate, any decisions made must be ratified at the next quorate meeting of the SRG.

## 6. Agenda and Papers

- 6.1 The Group's secretary is to hold an agenda-setting meeting with the Chair and the Lead Director at least **six weeks** before the meeting date.
- 6.2 The agenda will be based around the Group's work plan, matters arising and requests from SRG members. Following approval, the agenda and timetable for papers will be circulated to all Group members.
- 6.3 All papers must be approved by the relevant Director.
- 6.4 The agenda and papers for meetings will be distributed **seven days** in advance of the meeting.
- 6.5 The minutes and action log will be circulated to members within **seven days** to check the accuracy. The minutes must be an accurate record of the meeting which capture the discussions that take place.
- 6.6 Members must forward amendments to the Group's secretary within the next **ten days**. The Group's secretary will then forward the final version to the SRG Chair for approval.

## 7. Management of Meetings

- 7.1 The Group will meet quarterly and will agree an annual schedule of meetings consistent with the UHB's annual plan of Board business. Additional meetings will be arranged as determined by the Chair of the SRG in discussion with the Lead Director.
- 7.2 The Chair of the Group, in discussion with the Group's secretary, shall determine the time and the place of meetings of the Group and procedures of such meetings.

- 7.3 The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out by others to advise it in the conduct of its business.

## **8. Authority**

- 8.1 The SRG may offer advice to the UHB through the following mechanisms:
- 8.1.1 at Board meetings, through the SRG Chair's participation as an Associate Member;
  - 8.1.2 in written advice; and
  - 8.1.3 in any other form specified by the Board.

## **9. Reporting and Assurance Arrangements**

- 9.1 The SRG Chair is responsible for the effective operation of the SRG:
- 9.1.1 Chairing Group meetings;
  - 9.1.2 Establishing and ensuring adherence to the standards of good governance set for the NHS in Wales, ensuring that all Group business is conducted in accordance with its agreed operating arrangements; and
  - 9.1.3 Developing positive and professional relationships amongst the Group's membership and between the Group and the UHB's Board and its Chair and Chief Executive.
- 9.2 The Chair shall work in close harmony with the Chairs of the UHB's other advisory groups, and, supported by the Board Secretary, shall ensure that key and appropriate issues are discussed by the Group in a timely manner with all the necessary information and advice being made available to members to inform the debate and ultimate resolutions.
- 9.3 The Chair of the SRG will be appointed as an Associate Member of the UHB Board. The Chair is accountable for the conduct of their role as Associate Member on the Hywel Dda University Health Board to the Minister, through the UHB Chair. They are also accountable to the Hywel Dda University Health Board for the conduct of business in accordance with the governance and operating framework set by the UHB.
- 9.4 The Group's Chair shall:
- 9.4.1 Report formally, regularly and on a timely basis to the Board on the Group's activities. This includes written updates on activity after each meeting and the presentation of an annual report reviewing the Group's activity and

effectiveness against the ToRs within 6 weeks of the end of the financial year;

9.4.2 Bring to the Board's specific attention any significant matters under consideration by the Group.

9.5 The requirements for the conduct of business as set out in the UHB's Standing Orders are equally applicable to the operation of the Group.

## **10. Relationship Accountabilities with the Board and Other Committees of the Board**

10.1 The SRG's main link with the Board is through the SRG Chair's membership of the Board as an Associate Member.

10.2 The Board should determine the arrangements for any joint meetings between the UHB and the SRG.

10.3 The Board's Chair should put in place arrangements to meet with the SRG Chair on a regular basis to discuss the SRG's activities and operation.

## **11. Secretarial Support**

11.1 The Board Secretary will ensure that the SRG is properly equipped to carry out its role by:

11.1.1 Ensuring the provision of governance advice and support to the SRG Chair on the conduct of its business and its relationship with the UHB and others;

11.1.2 Ensuring that the SRG receives the information it needs on a timely basis;

11.1.3 Ensuring strong links to communities/ groups;

11.1.4 Facilitating effective reporting to the Board;

11.1.5 Enabling the Board to gain assurance that the conduct of business within the SRG accords with the governance and operating framework it has set.

11.2 The Group's secretary shall be determined by the Board Secretary.

## **12. Review Date**

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