



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 May 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Chief Executive's Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Steve Moore, Chief Executive
SWYDDOG ADRODD: REPORTING OFFICER:	Sian-Marie James, Assistant Director of Corporate Legal Services & Public Affairs

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to update the Board on relevant matters undertaken as Chief Executive of Hywel Dda University Health Board since the Board meeting held on 30 March 2023.

Cefndir / Background

This report provides the opportunity to present items to the Board to demonstrate areas of work that are being progressed and achievements that are being made, which may not be subject to prior consideration by a Committee of the Board, or may not be directly reported to the Board through Board reports.

Asesiad / Assessment

Register of Sealings

The Health Board's Common Seal has been applied to legal documents and a record of the sealing of these documents has been entered into the Register kept for this purpose. The entries at **Appendix A** have been signed by the Chair and Chief Executive or the Deputy Chief Executive (in the absence of the Chief Executive) on behalf of the Board (Section 8 of the Health Board's Standing Orders refers).

Consultations

The Health Board receives consultation documents from a number of external organisations. It is important that the Health Board considers the impact of the proposals contained within these consultations against its own strategic plans, and ensures that an appropriate corporate response is provided to highlight any issues that could potentially impact upon the organisation. A status report for Consultation Documents received and responded to is detailed at **Appendix B**, should any Board Member wish to contribute.

Strategic and Operational Issues: Local and Regional

Annual Plan Submission 2023-24

The Annual Plan 2023/24 was submitted to Welsh Government (WG) following the approval with significant caveats at the Board in March 2023. WG responded on 21 April 2023 stating that the plan was not supportable or acceptable, and that the plan fell short on delivery of the reduced number of focussed Ministerial priorities that were set, and whilst understanding the challenging outlook, the level of financial deficit in the plan was not an acceptable or supportable position.

WG held an urgent meeting for urgent scrutiny of and discussion about the plan on 3 May 2023. The Health Board agreed to undertake the following:

- De-risk the Annual Plan
- Provide supplementary information to be provided to WG by 31 May 2023 (see separate Board paper)
- Re-submit the ministerial priority templates
- Increased demonstration of alignment of the plan with ministerial priorities, including further detail of actions underway and milestones to achieve these, particularly relating to the Urgent and Emergency Care 6 Goals and Primary Care.

Whilst WG do not require a re-submission of Minimum Data Sets, the Health Board was requested to provide details of any significant adjustments and descriptions relating to choices and opportunities, with provision of any further information being subject to the Board's discretion. The Health Board also agreed to continue to work with WG via the Targeted Intervention process.

Escalation Status

A Targeted Intervention (TI) Meeting was held on 17 March 2023 where the Health Board provided WG with progress against the key deliverables of TI and Enhanced Monitoring. The outcome of this meeting was reported to the Audit and Risk Assurance Committee on 18 April 2023. WG confirmed that the draft findings from the independent Peer Review of Integrated Planning would be shared with the Health Board, and that the final report, together with the Health Board's response, would be presented at the next TI meeting on 21 June 2023. This will be taken through the Health Board's own governance structure following discussion at this meeting.

The Health Board continues to operate its own internal governance arrangements which were previously approved by the Board, with the Chair and Audit Chair being 'In Attendance' Members of the Escalation Steering Group and the Chief Executive being required to attend each ARAC meeting.

Ethics Panel Terms of Reference

The Ethics Panel was originally established during the COVID-19 pandemic, reporting to the Strategic/Gold Command Group, to provide ethics input into Health Board policy and guidelines, support health professionals with ethical issues arising within patient care and facilitate ethics education for health professionals and other Health Board staff.

A review of the Ethics Panel Terms of Reference has been undertaken to ensure the Board is provided with guidance on ethical issues, inform decision-making, support the development and implementation of policies and guidance, respond to external consultations, provide guidance on ethical dilemmas, and education and training to professionals in the Health Board on the importance of ethical issues in healthcare.

The Terms of Reference (**Appendix C**) have been reviewed and the Panel will now report directly to Board. The Panel will provide advice to the Board, which will be consultative rather than having an assurance role. The Terms of Reference have been discussed at Formal Executive Team and are presented to the Board for approval.

Submission of Draft Annual Report and Accounts

In line with guidance in the NHS Wales Manual for Accounts 2022/23, all NHS bodies are required to publish, as a single document, the Annual Report and Accounts following strict guidance set out by Welsh Government in the NHS Wales Manual for Accounts 2022/23. On 5 May 2023, the draft annual accounts were submitted to WG and Audit Wales, with the draft Performance Report Overview, draft Accountability Report (including the Governance Statement), and Draft Remuneration Report were submitted on 12 May 2023. These will be audited with the Final Annual Report and Accounts being signed off by Board on 27 July 2023, prior to submission by Audit Wales to WG by 31 July 2023, as a single unified PDF document.

Director of Public Health

Interviews were held on 13 April 2023 and I am delighted to inform the Board that Dr Ardiana Gjini will join the Health Board in August 2023.

Argymhelliad / Recommendation

The Board is invited to:

- **Endorse** the Register of Sealings (**Appendix A**) since the previous report on 30 March 2023;
- **Note** the status report for Consultation Documents (**Appendix B**) received/responded to; and
- **Approve** the Ethics Panel Terms of Reference (**Appendix C**).

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):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Chief Executive's meetings (internal, external and NHS Wales wide), diary and correspondence
Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Any issues are identified in the report
Ansawdd / Gofal Claf: Quality / Patient Care:	Any issues are identified in the report
Gweithlu: Workforce:	Any issues are identified in the report
Risg: Risk:	<p>This report provides evidence of current key issues at both a local and national level, which reflect national and local objectives and development of the partnership agenda at national, regional and local levels.</p> <p>Ensuing that the Board is sighted on key areas of its business, and on national strategic priorities and issues, is essential to assurance processes and related risks.</p>
Cyfreithiol: Legal:	Any issues are identified in the report
Enw Da: Reputational:	Any issues are identified in the report
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	<ul style="list-style-type: none"> • Has EqIA screening been undertaken? Not on the Report • Has a full EqIA been undertaken? Not on the Report

Appendix A - Register of Sealings from 7 March 2023 – 10 May 2023

Entry Number	Details	Date of Sealing
407	Contract for the Sale of Freehold Land with Vacant Possession Conditional on Planning Permission at Land at Crosshands, Carmarthenshire between Carmarthenshire County Council and Hywel Dda University Local Health Board	30.03.2023
408	Call Off Contract for the Appointment of the Regional Project Manager, Fire Precaution Upgrade Works at Glangwili General Hospital, Carmarthen, Phase 2 between Hywel Dda University Local Health Board and Mace Limited	30.03.2023
409	Lease relating to part of ground floor at Canolfan Rheidol, Rhodfa Padarn, Llanbadarn Fawr, Aberystwyth, Ceredigion, SY23 3UE between Cyngor Sir Ceredigion County Council and Hywel Dda University Health Board	20.04.2023

Appendix B: Consultations Update Status Report up to 10 May 2023

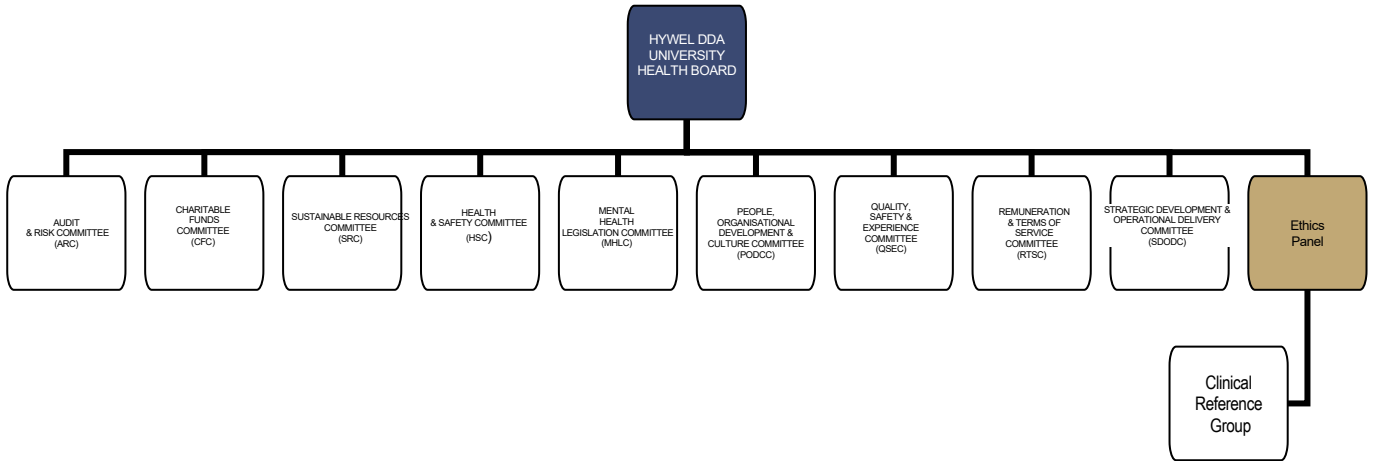
Ref No	Name of Consultation (hyperlink included for online consultations)	Consulting Organisation	Consultation Executive Lead	Received On	CLOSING DATE	Response Sent
530	Development of the Outdoor Education (Wales) Bill	Welsh Parliament	Deputy Director of Public Health	06.02.2023	17.03.2023	14.03.2023
531	CP37 Pre-implantation Genetic Testing-Monogenic Disorders and CP38 Specialist Fertility Services: Assisted Reproductive Medicine, (Commissioning Policies)	Welsh Health Specialised Services Committee	Medical Director/Deputy CEO	28.11.2022	27.02.2023	27.02.2023
532	Priorities for Llais in 2023-2024	Hywel Dda Community Health Council/ Llais	Director of Strategy and Planning	10.02.2023	28.02.2023	28.02.2023
533	CP259 Revision Surgery for Severe and Complex Obesity (Adults)	Welsh Health Specialised Service Committee	Medical Director/Deputy CEO	16.02.2023	29.03.2023	28.03.2023
534	Single Unified Safeguarding Review (SUSR) draft statutory guidance	Welsh Government	Director of Nursing, Quality and Patient Experience	07.03.2023	09.06.2023	
535	CP97 Specialised Fetal Medicine	Welsh Health Specialised Service Committee	Medical Director/Deputy CEO	20.02.2023	29.03.2023	29.03.2023

Appendix B: Consultations Update Status Report up to 10 May 2023

Ref No	Name of Consultation (hyperlink included for online consultations)	Consulting Organisation	Consultation Executive Lead	Received On	CLOSING DATE	Response Sent
536	2nd Deposit Revised Carmarthenshire Local Development Plan 2018 - 2033	Carmarthenshire County Council	Director of Strategy and Planning	20.02.2023	14.04.2023	14.04.2023
537	CP254 Bevacizumab (Avastin®) for the treatment of vestibular schwannoma in Neurofibromatosis Type 2 (all ages), Commissioning Policy	Welsh Health Specialised Service Committee	Medical Director/Deputy CEO	15.03.2023	26.04.2023	No response required
538	AOS Service Specification	Wales Cancer Network	Director of Operations	20.03.2023	21.04.2023	21.04.2023
539	Children, Young People and Education Committee – Education Reforms consultation	Welsh Parliament	Deputy Director of Public Health	17.03.2023	24.04.2023	No response required
540	Strike action	Welsh Government	Director of Operations	22.03.2023	09.05.2023	No response required
541	WASPI Code of Conduct Consultation	WASPI	Director of Finance	13.04.2023	28.04.2023	28.04.2023

Appendix B: Consultations Update Status Report up to 10 May 2023

Ref No	Name of Consultation (hyperlink included for online consultations)	Consulting Organisation	Consultation Executive Lead	Received On	CLOSING DATE	Response Sent
542	Supporting people with chronic conditions	Welsh Parliament	Director of Primary Care, Community and Long term Care	28.04.2023	25.05.2023	
543	Proposals to reform the ophthalmic services delivered in primary care in Wales	Welsh Government	Director of Primary Care, Community and Long term Care/ Director of Operations	02.05.2023	19.06.2023	



TERMS OF REFERENCE

Version	Issued To	Date	Comments
V0.1	Gold Strategic Group	30.03.2020	Approved in principle
V0.2	Board	16.04.2020	Approved
V0.3	Board	25.05.2023	For Approval

ETHICS PANEL

1. Constitution

- 1.1 The Ethics Panel was initially established in response to COVID-19, as a Panel of the Gold Strategic Group and constituted from 1st April 2020.
- 1.2 Following a review of the Terms of Reference, the Ethics Panel was established formally within the Health Board's governance structure.

2. Principal Duties

- 2.1 The purpose of the Ethics Panel (EP) is to provide advice to the Board on ethical matters.
- 2.2 The EP will:
 - 2.2.1 **Guidance** to professionals in the Health Board, in respect of specific ethical dilemmas by:
 - Providing analysis of ethically complex issues
 - Identifying courses of action that are ethically problematic
 - Offering reassurance where courses of action are ethically robust
 - Facilitating exploration of possible solutions in discussion with the referring team (the panel will reinforce the good practice of informing the patient that their case is being considered by the Ethics panel)
 - 2.2.2 **Support** for the Health Board's Policies & Guidelines by:
 - Enabling individual members to participate constructively in developing and implementing them by providing continuing professional development in medical/clinical ethics
 - Critically evaluating them where there are important ethical aspects to consider, during development and consultation phases
 - 2.1.2 **Response** to consultation documents from outside bodies such as the Welsh Government and General Medical Council, that have important ethical dimensions and affect professionals in the Health Board
 - 2.1.3 **Education and training**
 - In respect of *professionals in the Health Board* (increased awareness of nature and importance of ethical issues in healthcare, facilitate acquisition of basic competencies)
- 2.3 The EP will not:
 - provide legal advice, this will be provided by the Legal Services Team,
 - advise on research ethics, this will be provided by the Research & Innovation Team
- 2.4 The aim of the advice provided by the EP is to be consultative rather than prescriptive.

3. Operational Responsibilities

- 3.1 Through its advice, the EP will:

- 3.1.1 Advise Health Board employees (individually or as teams) faced with difficult ethical decisions as to what courses of action are ethically permissible, those that are problematic, and those that should certainly not be pursued.
- 3.1.2 Advise Health Board employees (individually or as teams) where legal advice should be sought¹.
- 3.1.3 Advise on the recognition and articulation of careful ethical arguments in Health Board policies and guidance through:
 - 3.1.3.1 Advice and support during the development process by fielding members with training in ethics to support Board working groups
 - 3.1.3.2 Critical analysis of early drafts by the EP
 - 3.1.3.3 Involvement of individual members in groups tasked with implementing Health Board policies and guidance
- 3.1.4 Advise individual professionals in the Health Board of the need for competence in recognising and addressing ethical quandaries through:
 - 3.1.4.1 Using Health Board IT infrastructure to:
 - Raise awareness of the EP and its activities
 - Appropriately disseminate deliberations that illustrate important general principles
 - Signpost and facilitate access to existing educational modules, particularly on-line resources such as the Institute of Medical Ethics
 - 3.1.4.2 Participating in existing Health Board educational programmes such as Grand Rounds.
- 3.1.5 Maintain an acceptable standard of competence in healthcare ethics among its members:
 - 3.1.5.1 A condition of the appointment to the panel will be that candidates possess or are willing to acquire, a set of minimum competencies in line with national publications (Core competencies for clinical ethics committees. Larcher V, Slowther A-M, Watson A. Clinical Medicine 2010;10(1):30-33)
 - 3.1.5.2 To support development of those competencies among members, the Chair shall be responsible for coordinating and arranging a rolling programme of education for EP corporately during regular meetings, to include occasional invited experts and dissemination of skills and competencies held by EP members themselves².
 - 3.1.5.3 The Chair shall attend to maintaining competencies of the EP corporately, both through those educational programmes and through discriminating recruitment to and dismissal from the Panel. Surveys of competencies held by EP members individually and corporately ('skills audits') will occasionally be carried out at the discretion of the Chair.
 - 3.1.5.4 These arrangements for maintaining competencies will be reviewed annually by the Chair in discussion with the Panel.
- 3.1.6 Support the Board with regard to its responsibilities for ethically robust planning and practice by reviewing:

¹ This is the full extent of the EP's responsibility in respect of legal advice. Although members of the EP will likely have legal training, this expertise is only the background to their contribution as individual members of the EP. The EP should not be in any way seen as a source of formal legal advice to the Board or its employees.

² Reasonable costs to be approved by the Medical Directorate without the need for tender.

- 3.1.6.1 Reviewing the **ethical basis** of, and **ethical arguments** set out in, policy and guidance documents by those tasked with their development
- 3.1.6.2 Reviewing the **ethical implementation** of those policies and guidance in practice
- 3.1.6.3 Feeding back to the Board
 - Through the Chair
 - By publishing minutes of EP meetings, including anonymised summaries of any responses, on the Health Board website
 - Inviting referrers to provide an update and feedback on cases after a suitable period has elapsed

4. Membership

4.1 The membership of the Panel shall comprise of:

Member	
Chair	Independent Member
Vice Chair	Medical Director & Deputy CEO
Medical Representative	
Primary Care	Deputy Medical Director for Primary Care & Community Services Clinical Director/ Deputy Associate Medical Director Primary Care
Secondary Care	Paediatric Palliative Care Consultant Consultant Psychiatrist Consultant Anaesthetist Consultant Gastroenterologist
Nursing Representative	Head of Safeguarding Nurse
Allied Healthcare Representative	Assistant Director of Therapies and Health Sciences
Patient Support Services Representative	Head of Legal Services
Mental Capacity Act Representative	
Equality, Diversity & Inclusion Representative	Strategic Partnership & Inclusion Manager
Workforce & OD Representative	Head of Strategic Workforce Planning & Transformation
Faith & Spirituality Representative	Senior Chaplain
Philosopher	Senior Lecturer in Philosophy, UWTSD
Medical Education Representative	Head of Medical Education & Professional Standards

Member Appointments

- 4.2 The Chair will be an Independent Member of the Board. The term will be three years, automatically renewable for a further three. Appointment for any further terms will be at the discretion of the Board on advice from the Panel.
- 4.3 The Vice-Chair will be the Executive Medical Director. The main role of the Vice-Chair is to chair meetings in the absence of the Chair, or when there is a conflict of interest in respect of a specific case requiring the Chair to step down for the duration of that discussion.

- 4.4 The membership of the Panel shall be determined by the Chair of the Panel in discussion with current members of the Panel. Appointments to, and dismissals from the Panel will take into account:
- any specific requirements or directions made by the Welsh Assembly Government, to which those determinations are subject
 - expressed preferences of individual candidates or members
 - the number of current members
 - the balance of skills and expertise necessary to deliver the Panel's remit
 - possession of, or willingness to acquire, the necessary competencies in ethics
- 4.5 The Chair of the Panel reserves the right to adapt the membership to suit the needs of the organisation and the circumstance.
- 4.6 The membership of EP should:
- reflect a range of individuals with diverse cultural and ethical lifestyles and world views
 - include representatives of those who are users of healthcare as well as those who are providers of it
 - include some individuals with formal training in certain key knowledge and/or skills that are essential to the functioning of the Panel:
 - Medical
 - Nursing
 - Allied Healthcare
 - Patient Support Services/Legal
 - Mental Health Act
 - Equality & Diversity
 - Workforce & Organisational Development
 - Faith & Spirituality
 - Moral philosophy or theology
- 4.7 Joining
- The membership of the EP should not exceed 25 in number. Members will be invited to join the Panel on the basis of a short biography and statement of interest after discussion with existing members. New members will have observer status for their first three meetings, however may participate in discussions at the invitation of the Chair.
 - There is no remuneration for members, However the Health Board expects individual Directorates to make members of the Panel available for meetings and to reimburse reasonable travel and study expenses.
 - Where there are high numbers of willing and knowledgeable individuals, a Clinical Reference Group comprising individuals from one or more of the above specialty areas will be established to contribute to panel discussions.
- 4.8 Leaving
- The usual term of membership will be three years. Members who wish to remain for a second term may do so without re-applying by arrangement with the Chair. Members wishing to remain for a third or subsequent term should re-apply as new members.
 - Members can stand down from the Panel at any time by informing the Chair.
 - Members would usually be expected to attend at least 50% of meetings each year, though individual members might make prior arrangements with the Chair to remain on the Panel during a long absence (for example sickness or sabbatical).
 - Three consecutive missed meetings with apologies will prompt an enquiry from the Chair as to whether the individual wishes to continue as a member.

- Five consecutive missed meetings without prior arrangement will usually constitute resignation.

Attendees

- 4.9 On behalf of the Panel and the Board, the Chair may invite:
- Any employee of the Health Board seeking advice from the Panel to attend all or part of a specific meeting to assist with discussions on any particular matter or to join the Panel as a co-opted member.
 - Members of the Hywel Dda Stakeholder Reference Group, or another stakeholder group, where it is felt that specialist stakeholder advice is required, to contribute to Panel discussions on the specific topic in question.
 - Any individual (within or outside the Health Board) able to provide education and training to members of the Panel that enables the Panel more effectively to fulfil its function in the Board.

5. Quorum, Attendance and Voting

- 5.1 A quorum shall consist of no less than a third and must include as a minimum the Chair or Vice Chair of the Panel.
- 5.2 EP decisions will normally be reached by general agreement of the members present, as determined by the Chair. Where a vote is deemed necessary, it shall rest upon a simple majority of those present and will normally be conducted by a show of hands. In the event of a tie, the Chair shall have an additional casting vote. The vote shall be recorded in the minutes.
- 5.3 Any senior officer of the Hywel Dda University Health Board (HDdUHB) or from a 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.
- 5.4 The Panel may also co-opt additional independent external 'experts' from outside the organisation to provide specialist knowledge.
- 5.5 The Chairman of the University Health Board reserves the right to attend any of the Committee's meetings as an ex officio member.
- 5.6 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.
- 5.7 The Panel 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.

6. Agenda and Papers

- 6.1 The Panel's Secretary is to hold an agenda setting meeting with the Chair and the Panel Lead at least six weeks/three weeks before the meeting date.
- 6.2 The agenda will be based around the Panel work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year and requests from Panel members. Following approval, the agenda and timetable for receipt of papers will be circulated to all Panel members.
- 6.3 All papers should have relevant sign off before being submitted to the Panel Secretary.

- 6.4 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting.
- 6.5 A draft Table of Actions will be issued within two days of the meeting. The minutes and Table of Actions will be circulated to the Lead Director within seven days to check the accuracy, prior to sending to Members (including the Committee Chair).
- 6.6 Members must forward amendments to the Panel Secretary within the next **seven** days. The Group Secretary will then forward the final version to the Panel Chair.

7. Frequency of Meetings

- 7.1 The Panel will meet bi-monthly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair.
- 7.2 The Chair of the Panel, in discussion with the Secretary, shall determine the time and the date of meetings of the Panel and procedures of such meetings.
- 7.3 The topic of ethical consideration will be shared with the Clinical Reference Group (Appendix 1) members via email and contributions towards core panel discussions will need to:
 - 7.3.1 Incorporate a detailed rationale for any advice or opinions provided
 - 7.3.2 Be submitted directly to the panel secretary within 24 hours of the request for advice
 - 7.3.3 Any contributions received outside of this timeframe are unlikely to be considered by the EP.
- 7.4 The contributions submitted by the Clinical Reference Group will be collated by the Panel Secretary and be shared with the EP members.
- 7.5 The EP will consider and discuss the contributions of the Clinical Reference Group Members during the next scheduled meeting.
- 7.6 In the event that urgent advice is required before the next scheduled meeting, a sub panel can be convened by the Chair or Vice-Chair to represent the EP and must report to full EP at the next scheduled meeting.

8. Accountability, Responsibility and Authority

- 8.1 The Panel will be accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 8.2 Although the Board has delegated authority to the Panel for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare in its purview. The Panel, via the Chair, is directly accountable to the Medical Director for its performance in exercising the functions set out in these Terms of Reference.
- 8.3 The Panel shall embed the HDdUHB's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 8.4 The requirements for the conduct of business as set out in HDdUHB's Standing Orders are equally applicable to the operation of the Panel.

9. Reporting

- 9.1 The Panel, 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 Board through the:
 - 9.1.1 joint planning and co-ordination of Board and Committee business; and the
 - 9.1.2 sharing of information.
- 9.2 In doing so, the Panel 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.
- 9.3 The Panel may establish sub-groups or task and finish groups to carry out on its behalf specific aspects of Panel business. The Panel will receive an update following each sub-groups meetings detailing the business undertaken on its behalf. The Sub-Group reporting to this Panel is:
 - 9.3.1 Clinical Reference Group
- 9.4 The Panel's Chair, supported by the Panel Secretary, shall:
 - 9.4.1 Report formally, regularly and on a timely basis to the Board on the Panel's activities.
 - 9.4.2 Bring to the Board's specific attention any significant matters under consideration by the Panel.

10. Secretarial Support

- 10.1 The Panel Secretary shall be determined by the Executive Lead.

11. Review Date

- 11.1 These terms of reference shall be reviewed on at least an annual basis by the Panel for approval by the Board.

Operation of Hywel Dda Ethics Panel

