

<b>Enw'r Pwyllgor / Name of Committee</b>	Sustainable Resources Committee
<b>Cadeirydd y Pwyllgor/ Chair of Committee:</b>	Mr Winston Weir, Independent Member
<b>Cyfnod Adrodd/ Reporting Period:</b>	Meeting held on 27 June 2023
<b>Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:</b>	
<p>The Sustainable Resources Committee has a role to advise the Board on all aspects of Finance and the revenue implications of investment decisions. In addition, the Sustainable Resources Committee provides assurance on financial performance and delivery against Hywel Dda University Health Board (HDdUHB) financial plans and objectives, and receives assurance on progress against delivery of the Planning Objectives aligned to the Committee. With regard to financial control, the Committee provides early warning of potential financial performance issues and makes recommendations for action to improve the financial position of the organisation.</p> <p>This report summarises the work of the Sustainable Resources Committee at its meeting held on 27 June 2023.</p> <ul style="list-style-type: none"> <li>• <b>Decarbonisation Task Force Group Update Report</b> – the Committee received a presentation of the Decarbonisation programme, including the governance structure and monitoring arrangements. The Committee was advised that substantial funding will be required to reach the Welsh Government (WG) carbon zero target by 2030 and, even if this is achieved, there will be a gap to achieve target. The Committee received an overview of the initiatives within Estates, Facilities and Land Use, including Air Source Heat Pumps (ASHP) at Cardigan Integrated Care Centre (ICC), the development of a 0.45MW solar farm at Hafan Derwen, and low carbon heat grant projects. The Committee was informed of the development of a Sustainable Procurement Policy to be included within all tender exercises with a minimum weighting of 10%, which is increased where appropriate on an event-by-event basis. The Committee was pleased to note that Procurement was the winner of the Green Teams award, with an entry focussed on carbon reduction within the Health Board's supply base. The Committee was advised of the development of an initial draft Transport and Accessibility Strategy to support the A Healthier Mid and West Wales (AHMWW) programme, with decarbonisation a key theme in the strategy. A staff travel survey is currently underway, the results of which will provide information on the current situation in terms of staff travel and provide a baseline for the strategy. In terms of next steps, the Committee also noted the roll-out of the nappy recycling project, the launch of the 'Switch It Off' Campaign, and a Pillow Waste Reduction project.</li> </ul> <p>The Committee received assurance from the comprehensive presentation of Decarbonisation initiatives and noted the recognition which the Health Board is receiving from Welsh Government.</p>	

- **Review of Committee Terms of Reference** – the Committee approved the revised Committee Terms of Reference for onward submission to Board for approval.
- **Revised Annual Report and Self-Assessment Process for 2023/24** – the Committee noted and agreed the refreshed approach to the Annual Report and Self-Assessment process for 2023/24 and was advised that the future Committee Effectiveness Assessment process will link and inform Committee annual reporting in a staggered approach over the year, mindful of the need to comply with Standing Orders.
- **Finance Report** – the Committee received the Finance Report for Month 2, 2023/24, outlining the Health Board’s revised draft Financial Plan is to deliver a deficit of £112.9m, including the achievement of savings of £19.5m. The Committee was advised that there is currently no cash coverage for this resource deficit and a risk that cash may be an issue for the Health Board in Quarter 4 of 2023/24. The committee noted that there appeared to be two fundamental drivers of the deficit; savings that have not yet been identified or not delivering; pressures on nurse agency spending.  
 In terms of Nurse Agency, the Committee was advised that Month 1 and Month 2 figures illustrated that the level of agency spend has not reduced, which has increased the month position by £2m. The Committee was further advised that, since the report was written, the Core Delivery Group has taken a number of decisions that may improve the position regarding the rate of agency spending.  
 The M2 end of year forecast is estimated to be an adverse variance of £20m operational pressures and a £10.8m undelivered savings gap.  
 Referring to the End of Year Savings, the Committee was advised that the forecast currently stands at £8.7m with a risk adjusted forecast of £5.3m. The Committee requested further detail in future reporting of the recovery plans, who is responsible for these plans and by when, to enable trajectories to be presented to each meeting. The Committee was advised that a Core Delivery Group has been established to agree and deliver the recovery plan and ensure that governance is in place in terms of responsibilities, benefits, trajectories and risks and will be reporting to the Executive Team.  
 The Committee was advised that all budgets have been issued to Executive Directors to ensure that they are cascaded within their directorates and with the aim to confirm sign off prior to the Public Board meeting on 27 July 2023.
- **Savings Productivity and Benefits Realisation** – the Committee noted that a refined version would be presented to the Committee at its meeting on 29 August 2023 to reflect the comments from the discussions under the Finance Report agenda item.
- **Finance Targeted Intervention Actions** - the Committee received the Finance Targeted Intervention (TI) Actions report, highlighting the key finance function specific items associated with an assessment of the Financial Management Principles. The report set out the key updates pertinent to the finance functions actions and includes the work that has been submitted to

WG in June 2023 and clarifies the remaining Finance actions. The Committee was advised that, as part of the 17 March 2023 WG TI Quarterly Meeting, the KPMG recommendations were signed-off and amalgamated into one clear outstanding action for delivery by the Health Board under the TI umbrella. The report has also been shared with the NHS Executive Financial Planning and Delivery team and WG, as part of the 21 June 2023 Quarterly TI meeting. An overview of the Opportunities Framework process and Investment Case process was presented to the Committee. The Committee received assurance that the Financial Delivery Unit has assessed the Health Board against best practice guidance and a positive response has been received. The Committee was advised that there is still work ongoing in terms of a wider organisational response, including the Programme Management rhythm and Delivery Framework.

The Committee noted whilst principles and processes have been embedded within the Finance function that there is still further work to be done to get the wider organisation to buy into the Financial Planning, Budget Setting and Savings Monitoring principles.

- **Outcome of Arcus Consultancy Work** – the Committee noted the Outcome of Arcus Consultancy Work report, highlighting the key finance function specific items associated with an assessment undertaken by Arcus into the effectiveness of finance business partnering within the organisation. This was commissioned by the NHS Wales Finance Academy on behalf of all NHS Wales Directors of Finance and has covered all organisations in NHS Wales who have finance business partnering teams. Arcus undertook a review into the effectiveness of the finance business partnering model within the Health Board, which has provided a concise set of recommendations. The Committee was advised that operational groups will be required to accept the insight and drive from Business Partners. Acknowledging that the intelligence and analysis is in place, the Committee was assured that a task and finish group has been established within the Health Board to take these recommendations forward.
- **Planning Objectives Update Report** – the Committee received the Planning Objectives Update report, demonstrating where progress has been made in delivering the revised set of Planning Objectives aligned to SRC for 2023/24. For 2023/24, 10 Planning Objectives have been aligned to the Committee. As in previous years, it is the expectation that SRC will receive an update on the progress made in the development (delivery) of the Planning Objectives for onward assurance to the Board through the Board Assurance Framework. The current status for the Planning Objectives is that all are on-track. All Planning Objectives are expected to develop a Plan on a Page that are intended to ensure a clear delivery/development process for the year, linking them to clear SMART (specific; measurable; achievable; realistic; timely) outcomes with clear trajectories/milestones using a standardised template that has been developed. The Committee also noted the scheduled programme of 'deep-dives' on the POs aligned to the Committee.
- **Deep Dive: PO6H Supply Chain Analysis (Legacy PO from 2022/23)** – the Committee received a deep dive presentation on PO6H Supply Chain Analysis, providing an overview of data from the previous two years,

illustrating the percentage of spend within Hywel Dda, within Wales, and outside of Wales. The Committee was advised that the percentage of spend has increased with local suppliers, which can be attributed to some residual COVID-19 spend and two large construction contracts over this period. The Committee received assurance that a Procurement strategy will be developed to improve the service that the team provides to the Health Board to provide improved value for money.

- **Finance Operational Risk Report** – the Committee received the Finance Operational Risks report, providing detail on the 18 risks that meet the criteria for submission to the Committee; 15 risks scored against the *Finance*, including *Claims* 'impact' domain, 1 risk against the *Quality/Complaints/Audit* domain, 1 risk against the *Service/Business interruption/disruption* domain and 1 risk against the *Statutory duty/inspection* domain. The Committee noted that three new risks have been added to Datix since the previous report, one risk has been reassigned from the Capital Sub Committee to the Sustainable Resources Committee and one risk is now meeting the Committee reporting threshold.

The Committee was concerned that some risks were out of date. It was advised that risks are awaiting update by Executive Leads and that accountability sits with the risk owners and relevant Executive Leads. Therefore, the Committee received limited assurance that all relevant controls and mitigating actions are in place.

- **Finance Corporate Risk Report** – the Committee received the Finance Corporate Risks report, providing detail on the following three risks assigned to the Committee:
  - 1642 - Risk of the Health Board not being able to meet the statutory requirement of breaking even 2023/24: Current Risk Score 20/Target Risk Score 12.
  - 1352 Risk of business disruption and delays in patient care due to a cyber-attack: No change to Risk Score.
  - 1335 Risk of being unable to access patient records, at the correct time and place in order to make the right clinical decisions: No change to Risk Score.

Referring to Risk 1642, the Committee was advised that clarity is needed on the actions required to be taken and how these transpire into the body of the Finance Report submitted to the Committee. Regarding discussion of the Target Risk Scores, the Committee was advised that there is a Board-approved process to be undertaken to score risks, which includes reporting via the Executive Risk Group for review following approval and review from the relevant Executive Director.

The Committee received limited assurance that all planned actions will be implemented within stated timescales and will reduce the risk further and/ or mitigate the impact if the risk materialises.

- **Information Governance Sub-Committee Update Report** – the Committee received the received the Information Governance Sub-Committee (IGSC) Update Report from the meeting held on 8 June 2023. The Committee received assurance that an update on the clinical coding position for the Health Board has achieved the 95% target since October 2021, with latest

performance for March 2023 provisionally at 96.1%. The Committee was advised of discussions at the IGSC regarding the raising of a new risk in relation to the additional resource required to undertake the work within the six Health Board Managed Practices to ensure compliance with the WG IG Toolkit. The Committee was advised that there are discussions being held with Digital Health and Care Wales (DHCW) surrounding previous support to ensure compliance with the toolkit.

The Committee approved the following policies:

- 191 Health Records Management Strategy
- 192 Health Records Management Policy
- 1088 Information Rights Procedure
- 773 Unauthorised Access to Patient Records - Reporting And Escalation Procedure

- **Information Governance Sub-Committee Annual Report 2022/23** – the Committee received the Information Governance Sub-Committee Annual Report 2022/23, providing assurance in respect of the work that has been undertaken by the Sub-Committee during 2022/23 and outlines the main achievements that have contributed to robust integrated information governance across the Health Board.
- **Integrated Performance Assurance Report (IPAR)** – the Committee considered the measures from the Integrated Performance Assurance Report (IPAR), relating to Month 2, 2023/24.
- **Ministerial Directions** – the Committee received the Ministerial Directions report, providing assurance that all Ministerial Directions issued by WG between 1 February 2023 and 31 May 2023 have been implemented/adopted by the Health Board or are in the process of being implemented.
- **NWWSP Quarter 4 Performance Report** – the Committee received assurance from the NWWSP Quarter 4 Performance Report. The Committee was advised that NWSPP has an action plan for the development of new measures and noted the relative position of Hywel Dda compared to the rest of Wales in performing well against national benchmarks, with the exception of the ‘audits reported to the agreed audit committee’ measure. The Committee received assurance that this is scrutinised and reviewed as part of the Assurance and Risk Assurance Committee’s review of the Internal Audit plan.
- **Financial Procedures** – the Committee approved the Value Added Tax (VAT) Financial Procedure (FP 069), which has been updated to be in line with the latest Financial Procedure format and to clearly define roles and responsibilities.
- **Developing the Road Map** – the Committee noted the Developing the Road Map report for information, summarising the material considerations included in the proposed method of developing the Health Board’s medium to long term financial strategy. The Committee noted that the report was presented to Board Seminar on 22 June 2023, from which two actions arose to review the timetable and team needed to undertake the work and the wraparound

governance arrangements. The Committee was advised that the roadmap would be presented to the Public Board at its meeting on 28 September 2023.

- **Healthcare Contracting, Commissioning and Outsourcing Update** – the Committee received the Healthcare Contracting, Commissioning and Outsourcing Update report for information. The Committee was advised that that the risk sharing arrangement has changed and therefore the Health Board may see more benefit if there is slippage in delivery across other organisations
- **Update on All-Wales Capital Programme: 2022/23 Capital Resource Limit and Capital Financial Management** - the Committee received the Update on All-Wales Capital Programme 2023/24 Capital Resource Limit and Capital Financial Management report, providing details of the Health Board's Capital Expenditure Plan and Expenditure Profile Forecast for 2023/24, the Capital Resource Limit for 2023/24 and an update regarding capital projects and financial risks. The Committee noted that Capital is considerably constrained this year, which poses a challenge to manage the financial position.
- **All Wales Independent Member Digital Network Highlight Report 19 April 2023** – the Committee received the All Wales Independent Member Digital Network Highlight Report 19 April 2023, for information.

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

- **ENDORSEMENT** of the Sustainable Resources Committee Annual Report 2022/23.
- **APPROVAL** of the revised Sustainable Resources Committee Terms of Reference, attached at Appendix 1.

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

- Positive assurance received from Decarbonisation presentation.
- Financial position in the year to date remains a significant challenge, particularly due to Nurse Agency spending and progress on Savings Delivery
- Insufficient assurance at this stage regarding delivery of the Annual Plan.
- Recognition of the required engagement across the Health Board with the processes from the TI and Arcus reviews.
- Concern raised regarding the number of Operational Risks not being actively updated and managed.
- Concern raised regarding the level of assurance received surrounding Corporate Risk 1642 - *Risk of the Health Board not being able to meet the statutory requirement of breaking even 2023/24* – in terms of the process for delivery at this stage.
- Ensure that short term actions are a baseline, in terms of grip and control, to provide assurance over delivery of long term actions as part of the roadmap.

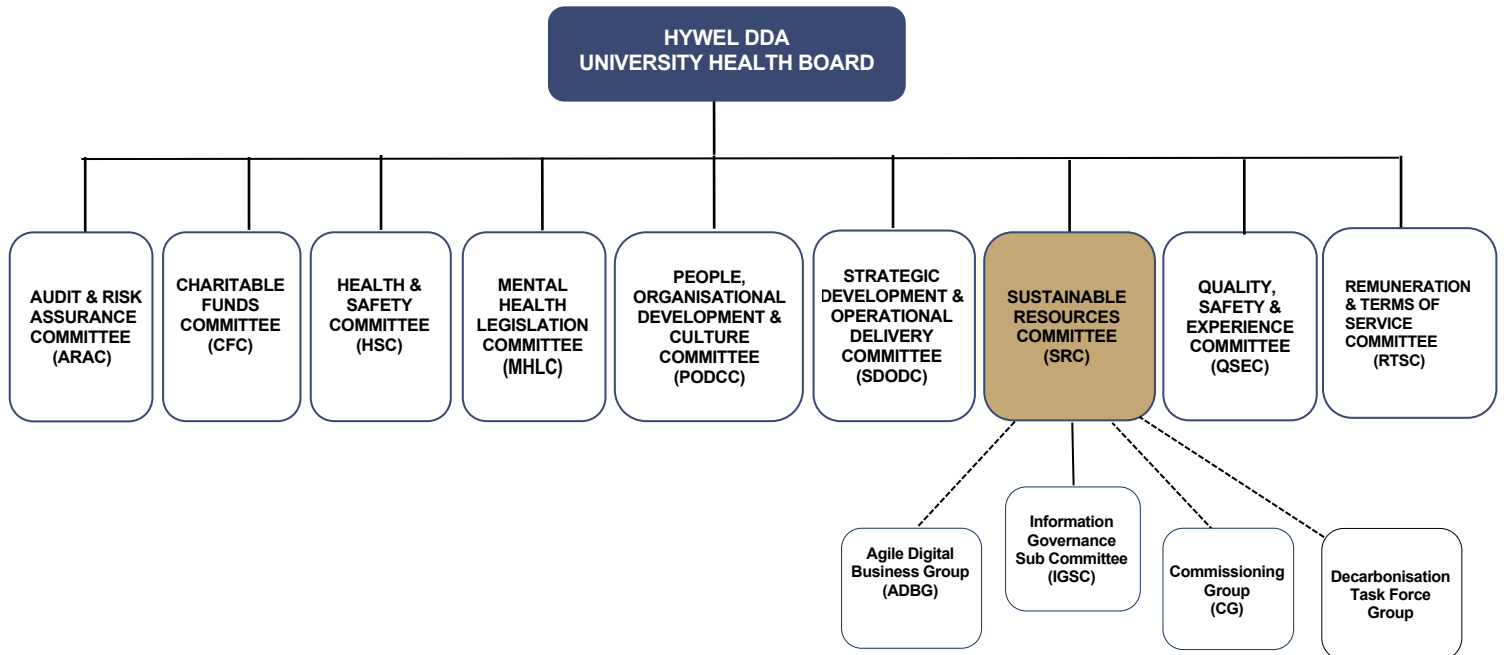
**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /  
Planned Committee Business for the Next Reporting Period:**

**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:**

29 August 2023



**SUSTAINABLE RESOURCES COMMITTEE**

**TERMS OF REFERENCE**

Version	Issued To	Date	Comments
V1	Hywel Dda University Health Board	29.07.2021	Approved
V2	Sustainable Resources Committee	28.06.2022	Approved
V2	Hywel Dda University Health Board	28.07.2022	Approved
V3	Sustainable Resources Committee	27.06.2023	Approved
V3	Hywel Dda University Health Board	28.07.2022	For Approval



## SUSTAINABLE RESOURCES COMMITTEE

### 1. Constitution

- 1.1 The Sustainable Resources Committee (the Committee) has been established as a Committee of the Hywel Dda University Health Board (HDdUHB) and constituted from 1 August 2021.

### 2. Purpose

The purpose of the Sustainable Resources Committee is:

- 2.1 Provide assurance on financial performance and delivery against Health Board financial plans and objectives and, on financial control, give early warning of potential performance issues, making recommendations for action to continuously improve the financial position of the organisation, focusing in detail on specific issues where financial performance is showing deterioration or there are areas of concern.
- 2.2 To receive an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objective 6 Sustainable Use of Resources (See Appendix 1), in accordance with the Board approved timescales, as set out in the Health Board's Annual Plan.
- 2.3 To scrutinise and provide oversight of financial and revenue consequences of capital investment planning and significant business cases (both short term and in relation to longer term sustainability).
- 2.4 Review financial performance, review any areas of financial concern, and report to the Board.
- 2.5 Conduct detailed scrutiny of all aspects of financial performance, the financial implications of significant revenue (all those over £1million requiring Board approval), business cases, projects, and proposed investment decisions on behalf of the Board.
- 2.6 Regularly review contractual performance with significant commissioning partners (requiring Board approval as stated in the Scheme of Delegation).
- 2.7 Seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) 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.
- 2.8 Recommend acceptance of risks that cannot be brought within the Health Board's risk appetite/tolerance to the Board through the Committee Update Report.
- 2.9 Receive assurance through Sub-Committee Update Reports and other management/task & finish group reports that risks relating to their areas are being

effectively managed across the whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).

### 3. Key Responsibilities

The Sustainable Resources Committee shall:

- 3.1 Undertake detailed scrutiny of the organisation's overall:
  - Monthly, quarterly and year-to-date financial performance;
  - Performance against the Savings Delivery and the Cost Improvement Programme providing assurance on performance against the Capital Resource Limit and cash flow forecasts.
- 3.2 Seek assurance on delivery against all Planning Objectives aligned to the Committee, considering and scrutinising the plans, including the medium term financial plans, savings plans and decarbonisation plans, that are developed and implemented, supporting and endorsing these as appropriate (see Appendix 1).
- 3.3 Receive assurances in respect of Directorate performance against annual budgets, capital plans and the Cost Improvement Programme and innovation and productivity plans.
- 3.4 Maintain oversight of, and obtaining assurances on, the robustness of key income sources and contractual safeguards.
- 3.5 Review major procurements and tenders, such as outsourcing, in relation to achieving Referral to Treatment targets.
- 3.6 Commission regular reviews of key contracts, suppliers and partners to ensure they continue to deliver value for money.
- 3.7 Provide assurance to the Board that arrangements for information governance are robust.
- 3.8 Receive reports relating to the Health Board's Digital Programme to ensure benefits realisation from the investment made.
- 3.9 Review any investment/ disinvestment strategy, including Procurement and Contracting Strategy, maintaining oversight of the investments and disinvestments, ensuring compliance with policies by:
  - Establishing the overall methodology, processes and controls which govern investments and disinvestments, including the prioritisation of decisions;
  - Ensuring that robust processes are followed; and
  - Evaluating, scrutinising and monitoring subsequent investments/ disinvestments.
- 3.10 Oversee the development and implementation of a financial management improvement agenda across the organisation.

- 3.11 Subject to the Board's direction and approval, develop and regularly review the financial performance management framework and reporting approach, ensuring that it includes meaningful, appropriate, integrated and timely performance data and clear commentary relating to the totality of the services for which the Board is responsible.
- 3.12 Seek assurances on the requirements arising from the Health Board's regulators, Welsh Government and professional bodies.
- 3.13 Review and approve financial procedures on behalf of the Health Board.
- 3.14 Review and approve the annual work plans for any Sub-Committee which has delegated responsibility from the Sustainable Resources Committee and oversee delivery.
- 3.15 Approve policies within the scope of the Committee.
- 3.16 Agree issues to be escalated to the Board with recommendations for action.

**4. Membership**

4.1 Formal membership of the Committee shall comprise of the following:

<b>Member</b>
Independent Member (Chair)
Independent Member (Vice Chair)
3 x Independent Members

4.2 The following should attend Committee meetings:

<b>In Attendance</b>
Director of Finance
Director of Operations
Director of Primary Care, Community & Long Term Care
Other Lead Executives to be invited to attend for relevant Planning Objectives aligned to the Committee or relevant agenda items.

4.3 Membership of the Committee will be reviewed on an annual basis.

**5. Quorum and Attendance**

- 5.1 A quorum shall consist of no less than three of the membership and must include as a minimum the Chair or Vice Chair of the Committee, and two other Independent Member(s), together with a third of the In Attendance members.
- 5.2 The membership of the Committee shall be determined by the Board, based on the recommendation of the Health Board 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.

- 5.3 Any senior officer of the Health Board 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.
- 5.4 The Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.
- 5.5 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.
- 5.6 The Chair of the Health Board reserves the right to attend any of the Committee's meetings as an ex officio member.
- 5.7 The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Sustainable Resources Committee.
- 5.8 The Committee can arrange to meet with Internal Audit and External Audit (and, as appropriate, nominated representatives of Healthcare Inspectorate Wales), without the presence of officers, as required.
- 5.9 The Chair of the Sustainable Resources Committee shall have reasonable access to Executive Directors and other relevant senior staff.
- 5.10 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.

## 6. Agenda and Papers

- 6.1 The Committee Secretary is to hold an agenda setting meeting with the Chair and/or Vice Chair and the Lead Director (Director of Finance), at least **six** weeks before the meeting date.
- 6.2 The agenda will be based around the Committee work plan, identified risks, matters arising from previous meetings, 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.
- 6.3 All papers must be approved by the Lead/relevant Director.
- 6.4 The agenda and papers 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 members within ten days to check the accuracy, prior to sending to Members (including the Committee Chair) to review within the next seven days.**
- 6.6 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.

## **7. In Committee**

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

## **8. Frequency of Meetings**

- 8.1 The Committee will meet bi-monthly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair of the Committee in discussion with the Lead Executive.
- 8.2 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.

## **9. Accountability, Responsibility and Authority**

- 9.1 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.
- 9.2 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 9.3 The Committee shall embed the Health Board's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 9.4 The requirements for the conduct of business as set out in the Health Board's Standing Orders are equally applicable to the operation of the Committee.

## **10. Reporting**

- 10.1 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 Board through the:
- 10.1.1 joint planning and co-ordination of Board and Committee business;
  - 10.1.2 sharing of information.
- 10.2 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.
- 10.3 The Committee may establish sub-committees or working/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 working/task and finish group meeting detailing the business undertaken on its behalf. The Sub-Committee reporting to this Committee is the:
- 10.3.1 Information Governance Sub-Committee

Management/task & finish groups feeding into this Committee are the:

10.3.2 Agile Digital Business Group

10.3.3 Commissioning Group

10.3.4 Decarbonisation Task Force Group

10.4 The Committee Chair, supported by the Committee Secretary, shall:

10.4.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes the submission of a Committee update report, as well as the presentation of an annual report within six weeks of the end of the financial year.

10.4.2 Bring to the Board's specific attention any significant matters under consideration by the Committee.

10.4.3 Ensure appropriate escalation arrangements are in place to alert the Health Board 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 Health Board.

10.5 The **Director of Corporate Governance**/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.

## 11. Secretarial Support

11.1 The Committee Secretary shall be determined by the **Director of Corporate Governance**/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 Committee for approval by the Board.

## Appendix 1 Sustainable Resources Committee Planning Objectives 2023/24

Strategic Objective	Domain	Strategic Goal	Planning Objective	Executive Lead
6	Our Future:  Building a better health care system for future generations	5: World class infrastructure  We are building the infrastructure needed to provide high quality care	5c Digital Agenda - Lead the digital enablement for Hywel Dda University Health Board, supporting the agreed outcomes of the transformational programme. Will ensure further support engagement across the wider region to ensure key stakeholders are appropriately connected, ambitions are aligned, resources allocated, and financial investment and outcomes are agreed. The emerging plan will command the support of Welsh Government and the Board; and will be procured to ensure that transformation activities can commence by October 2023 with an agreed commercial partner.	Director of Finance
6		6: Sustainable services  Designing and implementing more sustainable services	6b Pathways and VBHC - To implement the pathway interface programme that will transform and streamline clinical care pathways across Hywel Dda University Health Board within the next 3 years. Empowering GPs and patient facing health professionals to support patients effectively and efficiently through a digital pathways interface that improves the balance between hospital-based care and gives emphasis to a social model for health and wellbeing and Value Based Health Care.	Medical Director
6	Our Communities: Our population is healthy, and we have a positive impact on the determinants of health	8: Positive impact beyond health As an organisation we have a positive impact beyond health	8a Decarbonisation and Sustainability - Implement the Board-approved plan for Decarbonisation and support initiatives which promote environmental sustainability and One Health, with the ambition of making Hywel Dda a leading organisation in this area. This work will incorporate both large-scale schemes with a significant benefit to the environment and the development of a 'green' culture which encourages teams and individuals to make changes within	Director of Strategy and Planning

			their services in support of this ambition	
6			8b Local Economic and Social Impact - We will: <ul style="list-style-type: none"> <li>• Direct our expenditure to local benefit</li> <li>• Collaborate with partners to maximise our impact</li> <li>• Ensure that we remain focused on the long term impact we can have</li> <li>• Position ourselves to make the most of tactical opportunities to maximise local funding arrangements for local benefit, for example through the Levelling-up fund.</li> </ul>	Director of Finance
6			8c To develop a Board and Welsh Government-approved financial roadmap to return the Health Board to a £25m deficit position. This will <ul style="list-style-type: none"> <li>• Provide clear trajectories, including actions and delivery requirements for the organisation</li> <li>• Form the basis of a robust three-year financial plan as part of a broader IMTP</li> <li>• Be based on recurrent solutions derived from a live and ongoing opportunity framework which is regularly updated to ensure that the Health Board's underlying deficit is reduced in a sustainable manner.</li> </ul>	Director of Finance