



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 July 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Committee Update Reports
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Joanne Wilson, Director of Corporate Governance (Board Secretary)
SWYDDOG ADRODD: REPORTING OFFICER:	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:

- Remuneration & Terms of Service Committee held on 18 May 2023
- Charitable Funds Committee held on 23 May 2023
- Mental Health Legislation Committee held on 15 June 2023

Additionally, in respect of the In-Committee Board meeting held on 25 May 2023.

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

- Staff Partnership Forum held during April 2023
- Healthcare Professionals Forum held on 29 June 2023

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 (ARAC)
- Charitable Funds Committee (CFC)
- Mental Health Legislation Committee (MHLC)
- Quality, Safety and Experience Committee (QSEC)
- Remuneration and Terms of Service Committee (RTSC)

The Board has established the following additional Committees:

- Sustainable Resources Committee (SRC)

- Health and Safety Committee (HSC)
- People, Organisational Development and Culture Committee (PODCC)
- Strategic Development and Operational Delivery Committee (SDODC)

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 (SRG)
- Staff Partnership Forum (SPF)
- Healthcare Professionals Forum (HPF)

Asesiad / Assessment

Matters Requiring Board Level Consideration or Approval:

The Remuneration and Terms of Service Committee (RTSC) requested that the following items be raised at Board level:

- Approval of the RTSC Terms of Reference (attached)

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

- Approval of the CFC Terms of Reference (attached), noting the disestablishment of the Investment Advisor Sub Committee, which was approved by Committee Chair's action and will be reported back to the next CFC meeting
- Endorsement of the CFC Annual Report 2022/23

The Mental Health Legislation Committee (MHLC) requested that the following items be raised at Board level:

- Approval of the MHLC Terms of Reference (attached)
- Endorsement of the MHLC Annual Report 2022/23

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

- Approval of the SPF Terms of Reference (attached)

There were no matters raised by the In-Committee Board or Healthcare Professionals Forum 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:

- Recognition of the benefit to Board Members to understand the impact of, and shared learning gleaned from, the expenditure of charitable funds to attend overseas conferences. The opportunity to present to a future Board Seminar meeting will be explored
- Recognition of any potential increasing demand on charitable funds, rather than capital, and assurance sought regarding mechanisms in place to ensure that requests are appropriately considered
- The Committee's decision to not approve the Expenditure Request for an Education and Simulation Training Facility at Glien House report, requesting Committee consideration and approval of £42,883.11 of charitable funding to support the cost of the capital works to refurbish an existing office space on the ground floor at Glien House, until further clarification is received prior to consideration for approval; noting that, should the information be forthcoming prior to the next Committee meeting, consideration would be given to approve the request via Chair's Action

The In-Committee Board raised the following key risks and issues/matters of concern:

- Concerns in relation to security incidents and the protection of Health Board staff and property

There were no key risks and issues or matters of concern raised by the Remuneration and Terms of Service Committee, Mental Health Legislation Committee, 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
 - **RATIFY** the revised RTSC Terms of Reference
 - **RATIFY** the revised CFC Terms of Reference
 - **RATIFY** the revised MHLC Terms of Reference
- **RECEIVE** the update report in respect of the In-Committee Board meeting
- **RECEIVE** the update reports in respect of recent Advisory Group meetings
 - **RATIFY** the revised SPF Terms of Reference

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality:	6. All Apply

Quality and Engagement Act (sharepoint.com)	
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 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Standing Orders External Governance Review
Rhestr Termiau: 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

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Explicit within the individual Update Reports where appropriate.
Ansawdd / Gofal Claf: Quality / Patient Care:	Explicit within the individual Update Reports where appropriate.
Gweithlu: Workforce:	Not Applicable
Risg: Risk:	Not Applicable
Cyfreithiol: Legal:	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.

Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Enw'r Pwyllgor / Name of Committee	Charitable Funds Committee
Cadeirydd y Pwyllgor/ Chair of Committee:	Delyth Raynsford, Independent Member
Cyfnod Adrodd/ Reporting Period:	Meeting held on 23 May 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Ratification of Charitable Funds Committee Decisions by the Corporate Trustee – the Committee noted the Corporate Trustees ratification, at its meeting on 30 March 2023, of the Committee's decision to approve the final Hywel Dda Health Charities Annual Report and Accounts 2022/23 and a funding request of a governance and support costs budget of £524,755 for the 2023/24 financial year. • Annual Review of Committee Terms of Reference - the Committee approved the amendments to the Charitable Funds Committee Terms of Reference, subject to the outcome of further discussion with the Director of Corporate Governance/Board Secretary regarding Committee Membership and status of the Investment Advisor Sub-Committee, prior to onward submission to the Board for approval. • Presentation on Recent Charitable Funds Expenditure: Arts in Health – the Committee received a presentation on the Arts and Health pilot programme for staff wellbeing funded by NHS Charities Together, which aims to improve the well-being of Health Board staff by encouraging colleagues to take part in creative activities. The presentation included an overview of activities such as Shorelines Sand Art, live music in staff settings, Hywel Dda Singing Bursaries, access to cheaper tickets for arts and cultural events, and Cultural Cwtsh, which is an online creative resource for health and social care workers. The Committee noted the positive feedback received from participating colleagues. The Committee was reminded that £18,742 of funding was received from NHS Charities Together to support the pilot. This funding is ending in September 2023 and the Arts in Health team would like to prepare a case for support for charitable funding to bring to the September CFC meeting to continue provision to staff and build on the learning gleaned to date. Emerging themes from the pilot illustrates that staff are interested in relaxation, mindfulness, compassion, and healing activities to offer hope and respite. To promote the positive outcomes of the pilot programme, the Committee felt that this could feature as part of a future Board Seminar. • Evaluation Report: Respiratory Research, Prince Philip Hospital (PPH) - the Committee received a presentation on the evaluation of the positive impact of the Committee's approval of the application for funding to the PPH Respiratory Research & Development (R&D) service in September 2022. The Committee was advised that, since the pandemic, commercial trial research has significantly reduced and that the approved funds have been used to 	

continue the employment of a Research Assistant to support with research patient recruitment, patient identification and administration. The Committee received an overview of the recent work of the R&D service including the recommencement of one major portfolio trial testing new technologies to diagnose lung disease, which in collaboration with Aberystwyth University, has identified biomarkers in urine that can identify lung cancer with an accuracy of 91%. The Committee received assurance that recent gains in research have enabled the team to consolidate projects, effectively recruit into studies and support growth. The Committee received further assurance that the charitable fund has contributed to generate more income to protect at least one salary in the medium term, enhanced the Health Board's reputation nationally and internationally, provided state-of-the-art drugs and devices for respiratory patients, and fostered new relationships with commercial and non-commercial researchers.

- **Bronglais General Hospital Chemotherapy Day Unit Update** – the Committee received a verbal update on the BGH Chemotherapy Day Unit from Mr Peter Skitt, County Director, advising of the progress of the capital development to provide a state of the art unit following significant charitable investment and the recent fundraising appeal. The unit is currently in the detailed design phase with engagement from staff and patients. Temporary facilities are being identified for the construction phase of the programme which is due to commence in November 2023 and complete in December 2024. All non-patient facing services will be relocated to a local authority building in Aberystwyth. The Committee received assurance that the relocation of staff is being led by the General Manager. The Committee was advised of a potential risk to the funding streams, with regard to an anticipated £110,000 donation from the Mid-West Colorectal Fund, and cost escalation prior to going out to tender. The Committee noted a £364,000 discretionary capital contribution from the Health Board. The Committee received assurance that there will be enough funds to avoid any significant shortfall.
- **Revised Annual Report and Self-Assessment Process for 2023/24** – the Committee received assurance from the refreshed approach to the Annual Report and Self-Assessment process for 2023/24, which was fully supported by the Committee Chairs at its meeting held on 18 May 2023. The Committee 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. The tools to support this approach will be developed in early Summer 2023, and piloted through the Quality, Safety and Experience Committee, prior to being rolled out to other Committees in the Autumn.
- **Charitable Funds Sub-Committee (CFSC) Update Report** – the Committee received the CFSC Update Report providing a summary of the CFSC's activity between 7 March and 2 May 2023. The Committee noted that two requests were approved by the Sub-Committee at a combined value of £44,196. A further request for £8,904.36 to attend a world leading patient safety conference in Copenhagen over two days in May 2023, (payment of conference fees for a delegation of six members of the BGH team) was

approved via Chair's Action during this reporting period taking place outside of the cycle of CFSC meetings.

Concerning the requests to attend overseas conferences, the Committee received assurance that work to ensure that the cascading of learning from events of this nature is being led by Ms Lesley Jones, Head of Nursing. Furthermore, the charity's Evaluation Framework will also ensure regular reporting to the CFC on the impact of general charitable expenditure. The Committee agreed that it would be beneficial for Board members to understand the impact of, and shared learning gleaned from, the expenditure of charitable funds, which could be presented at a future Board Seminar meeting. Referring to the pressures on capital expenditure, the CFSC Chair highlighted that there is an increasing demand for applications which would usually be considered as part of the Discretionary Capital Programme (DCP) and undertook to raise the implications of the DCP on charitable funds with the Chair of the Capital, Estates and IM&T Sub-Committee. The Committee approved the CFSC Terms of Reference.

- **Evaluation Report: Transperineal Biopsy Machine, Prince Philip Hospital** – the Committee received a presentation on the evaluation of the positive impact of the Committee's approval of the application for funding for a £50,000 state of the art Transperineal Biopsy machine at its meeting on 9 March 2021, following an additional £30,000 contribution from the West Wales Prostate Cancer Support Group. The purchase of the Transperineal biopsy machine has allowed the Health Board to undertake transperineal biopsies, which is safer and has a lower rate of infection than the standard process of transrectal prostate biopsies. Diagnostic rates have improved in addition to increasing capacity for prostate biopsies. Additionally, transperineal biopsy achieves improved cancer detection rates in cases where prior transrectal prostate biopsies have been undertaken. This is especially important for the surveillance of patients who may require multiple biopsies whilst on a surveillance prostate cancer pathway. The Committee was advised that the machine will enable transperineal biopsy to be performed with Local Anaesthesia and is feasible in an outpatient setting, whereas they currently require a General Anaesthetic with associated bed space and recovery time. Although the transperineal process is increasing capacity somewhat, the next step of establishing its use in an outpatient setting under Local Anaesthetic will truly ramp up capacity. Options are being explored to use Endoscopy rooms in Prince Philip Hospital (PPH) for Local anaesthetic transperineal prostate biopsy (LATP) and transrectal prostate biopsies, and to use the Decision Support Unit (DSU) for diagnostic lists.

The Committee was advised of the longer term plan to establish a dedicated Urology Investigation Unit to overcome the staffing and estates challenges. A recent Cancer Research UK bid has been successful and is aimed at improving the Prostate cancer pathway. This includes a dedicated Magnetic Resonance Imaging (MRI) and same day reporting for patients with a prostate biopsy a few days later, if required. This bid is a prestigious project to overhaul the prostate cancer pathway and, with the industry moving from transrectal to transperineal biopsies, the impact of the charitable funds has enabled the Health Board to maintain the lead in this field. The Committee received assurance that formal

feedback from the Cancer Research UK project will be available in the future, which will consider Patient Reported Experience Measures (PREMs).

- **Expenditure Request for an Education and Simulation Training Facility at Glien House** – the Committee received the Expenditure Request for an Education and Simulation Training Facility at Glien House report, requesting Committee consideration and approval of £42,883.11 of charitable funding to support the cost of the capital works to refurbish an existing office space on the ground floor at Glien House, to provide a multi-functional space for employability skills training, Simulation Based Education (SBE) training and school engagement activities. The Committee did not approve the expenditure request pending further clarification regarding the intention of continuing the lease from Capital colleagues and the Director of Planning and Strategy and consideration of the current Estates Strategy review. The Committee agreed that, should the further information be forthcoming prior to the next Committee meeting, consideration would be given to approve the request via Chair's Action.
- **Update on Expenditure – Staff Welfare and Wellbeing: Rest Areas** – the Committee received a verbal update on progress regarding the allocation of charitable funding approved in November 2021 for the creation and improvement of staff rest areas, providing assurance that 100% of the funds have been committed or spent to date and that 82 rest areas across the Health Board have been supported by the scheme. The evaluation phase has commenced, and the positive impact of the creation and improvement of staff rest areas will be reported to the local Staff Partnership Forums over the Summer months and to the Committee at its meeting on 26 September 2023. The Committee received assurance that engagement has been led by the local Staff Partnership Forums and Staff Side leads to ensure full representation across the Health Board.
- **Investment Advisor Sub-Committee Update Report** – the Committee received a verbal update, noting that no further feedback had been received and an appropriate Independent Member is still being sought to sit on the Sub-Committee. The Committee queried whether the external input of a strategic advisor is still required as the proposed establishment for the Committee has been ongoing for the past 12 months and that the establishment of a Sub-Committee may not be necessary as there is an improved input from CCLA as the new Investment Advisors of the charity. Post meeting note – following a further discussion with the Chair of the Charitable Funds Committee and the Executive Director of Nursing, Quality and Patient Experience, it was agreed to disestablish the Investment Advisor Sub Committee. This was approved by Committee Chair's action and will be reported back to the next CFC meeting under agenda item *Ratification of any Approvals made outside the meeting via Chair's Action*.
- **CFC Risk Register** - No report was provided as there are currently no risks in the domain of charitable funds.
- **Hydrotherapy Pool: JC Williams (Elizabeth Williams Endowment) Trust Fund Update** – the Committee received assurance from the content of the

verbal update on the Hydrotherapy Pool: JC Williams (Elizabeth Williams Endowment) Trust Fund that the monies have been received. The trust fund account has been reviewed by the Pittsburgh National Corporation Bank (PNC) tax team and the £1.2m fund has now been received receipt of funds is expected in April 2023. A formal letter of thanks has been submitted to the Trustees of the fund in America. The Committee Chair conveyed thanks to Finance colleagues and Mrs Llewelyn for the work undertaken to finally bring the process to its conclusion.

- **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 March 2023. The Committee noted that the net incoming resources before transfers of the charity amounted to £2,963,290 for the period and that the charity’s overall income from donations, grants and legacies has increased by £2,688,277 in comparison to income received for the same period in the previous financial year. Expenditure on charitable activities for the period 1 April 2022 to 31 March 2023 was £788,838, which represents a 53% decrease in comparison to expenditure for the previous financial year. The Committee received assurance that the majority of the decrease is due to the fact that, in the previous year, monies in respect of the BGH Chemotherapy Unit Appeal were accounted for and therefore this decrease was no cause for concern.

With regard to whether the Committee could be assured that the monies held by the charity are being invested in as timely a way as possible, due to the value of funds held in the deposit account, the Committee received assurance that discussions will be held with CCLA regarding the appropriateness of investments for the charity. The Committee agreed that the Integrated Hywel Dda Health Charities Performance Report features further up the agenda for the September 2023 meeting to ensure further discussion is afforded to the information provided within the report.

- **CFC Annual Workplan 2023/24** – the Committee received the Charitable Funds Committee Work Programme 2023/24 for information.

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

- Approval of the CFC Terms of Reference (attached), noting the disestablishment of the Investment Advisor Sub Committee, which was approved by Committee Chair’s action and will be reported back to the next CFC meeting.
- Endorsement of the CFC Annual Report 2022/23

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

- Recognition of the benefit to Board Members to understand the impact of, and shared learning gleaned from, the expenditure of charitable funds to attend overseas conferences. The opportunity to present to a future Board Seminar meeting will be explored.
- Recognition of any potential increasing demand on charitable funds, rather than capital, and assurance sought regarding mechanisms in place to ensure that requests are appropriately considered.

- The Committee's decision to not approve the Expenditure Request for an Education and Simulation Training Facility at Glien House report, requesting Committee consideration and approval of £42,883.11 of charitable funding to support the cost of the capital works to refurbish an existing office space on the ground floor at Glien House, until further clarification is received prior to consideration for approval; noting that, should the information be forthcoming prior to the next Committee meeting, consideration would be given to approve the request via Chair's Action.

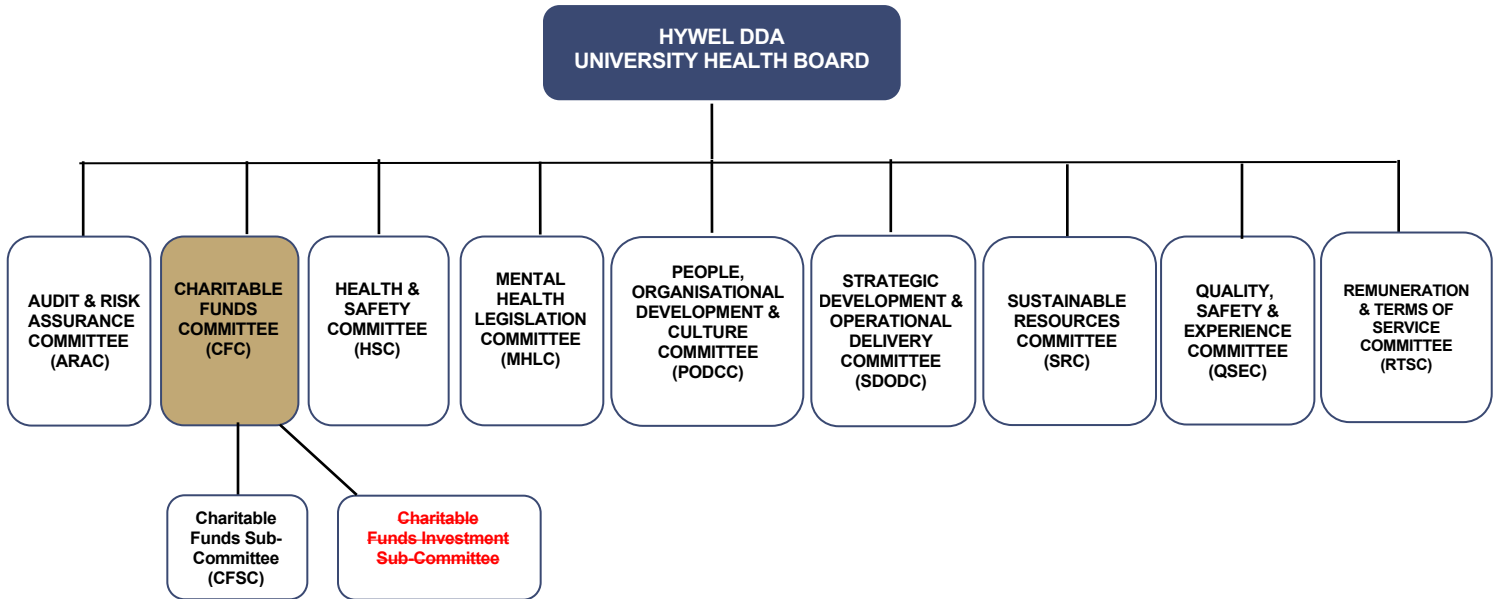
**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /
Planned Committee Business for the Next Reporting Period:**

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 September 2023



CHARITABLE FUNDS COMMITTEE

TERMS OF REFERENCE

Version	Issued To	Date	Comments
V1	Charitable Funds Committee	11.06.2012	Approved
V1	Hywel Dda Health Board (SO's)	27.09.2012	Approved
V3	Charitable Funds Committee	18.06.2013	Approved
V4	Charitable Funds Committee	03.09.2013	Approved
V5	Charitable Funds Committee	12.12.2013	Approved
V6	Charitable Funds Committee	09.10.2013	Approved
V7	Charitable Funds Committee	16.12.2014	Approved
V8	Charitable Funds Committee	10.03.2015	Approved
	Hywel Dda University Health Board	26.03.2015	Approved
V9	Charitable Funds Committee	29.06.2015	Approved
V9	Hywel Dda University Health Board	26.11.2015	Approved
V10	Charitable Funds Committee	29.11.2016	Approved
V10	Hywel Dda University Health Board	26.01.2017	Approved
V11	Charitable Funds Committee	15.06.2017	Approved

V12	Charitable Funds Committee	15.03.2018	Approved
V12	Hywel Dda University Health Board	29.03.2018	Approved
V13	Charitable Funds Committee	14.03.2019	Approved
V13	Hywel Dda University Health Board	30.05.2019	Approved
V14	Charitable Funds Committee	17.03.2020	Approved
V14	Hywel Dda University Health Board	26.03.2020	Approved
V15	Charitable Funds Committee	30.11.2020	Approved
V15	Hywel Dda University Health Board	28.01.2021	Approved
V16	Hywel Dda University Health Board	29.07.2021	Approved
V17	Charitable Funds Committee	06.06.2022	Approved
V17	Hywel Dda University Health Board	28.07.2022	Approved
V18	Charitable Funds Committee	23.05.2023	Approved via Chair's Action 05.07.2023
V18	Hywel Dda University Health Board	27.07.2023	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 Health Board 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 Health Board'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 (the Health Board) is the was ~~appointed as~~ corporate trustee of Hywel Dda Health Charities (the Charity). ~~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 Health Board and constituted from 22 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 Health 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 trustee 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 the Health Board'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 Health Board 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 Health Board 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 ~~The Charities Act 2022~~

4.4.4 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 Health Board's investment adviser.
- 4.6 To oversee and monitor the functions performed by the Executive Director of Finance as defined in the Health Board's Standing Financial Instructions.
- 4.7 To monitor the progress of 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 Health Board'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 Health Board'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 Health Board'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 Health 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, 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 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 Health Board can be quantified through training and development objectives.

- 4.23 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 Health 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 Health Board's 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, or their suitably briefed deputy
Director of Nursing, Quality and Patient Experience (Lead Director for Hywel Dda Health Charities), or their suitably briefed deputy

The following should attend Committee meetings:

In Attendance
Assistant Director of Finance (Financial Planning and Statutory Reporting) or Senior Finance Business Partner (Accounting and Statutory Reporting)
Senior Finance Business Partner (Accounting and Statutory Reporting)
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 Citizens Voice Body/Llais 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, 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.
- 6.3 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.
- 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 Health Board 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 Health Board's Charitable Funds as defined in the Health Board'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 Health Board 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 Health Board.
 - 7.1.6 To prepare reports to the 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 **A draft Table of Actions will be issued within two days of the meeting. The minutes and action log 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) within the next seven days.**
- 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 Health Board'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 Standing Orders are equally applicable to the operation of the Committee.

12. Reporting

- 12.1 The Committee Chair shall agree arrangements with the Health Board's Chair to report to the Board in their capacity as Corporate Trustees. This may include, where appropriate, a separate meeting with the Board.
- 12.2 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 through the:
- 12.2.1 joint planning and co-ordination of Board and Committee business;
 - 12.2.2 sharing of information.

- 12.3 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.
- 12.4 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 the Charitable Funds Sub-Committee to ensure that the Health Board'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.~~
- 12.5 The Committee Chair, supported by the Committee Secretary, shall:
- 12.5.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities in their capacity as Corporate 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.
- 12.5.2 Bring to the Board's specific attention any significant matter under consideration by the Committee.
- 12.5.3 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.
- 12.6 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.

13. Secretarial Support

- 13.1 The Committee Secretary shall be determined by the **Director of Corporate Governance**/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.

Enw'r Pwyllgor / Name of Committee	Mental Health Legislation Committee (MHLC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Judith Hardisty, UHB Vice-Chair
Cyfnod Adrodd/ Reporting Period:	Meeting held on 15 June 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<p>This report summarises the work of the Mental Health Legislation Committee (MHLC) at its meeting held on the 15 June 2023, with the following highlighted:</p> <ul style="list-style-type: none"> • The Mental Health Legislation Committee Terms of Reference were reviewed during the meeting for approval before being presented to Public Board. Discussions took place where revisions mentioned will be incorporated into the Terms of Reference. The Mental Health Legislation Committee requests for approval by Public Board. • The Mental Health Legislation Committee Annual Report 2022-2023 was presented at the meeting for approval and recommendations from Committee were received which has been revised. • The Assistant Director of MH&LD provided an update to Committee on the Scrutiny Meeting that took place on 11 May 2023. The Assistant Director of MH&LD expressed concern that the meeting was not adequately attended by Local Authority Representatives, however each County gave data ahead of the meeting. Carmarthenshire Local Authority representative Mr Mark Evans attended the previous meeting where great discussions took place on training needs however there was no participation from Dyfed-Powys Police to resolve the issues that were raised. The Assistant Director of MH&LD has now liaised further with Sian Bamford from Dyfed-Powys Police on the training needs discussion. • The focus of the meeting was around Carmarthenshire Local Authority now attending the Improved Mental Health Professional Training through the University of South England this was previously attended through Swansea University but due to having previous issues with Swansea University that they will be now comparing both Universities with their courses and will be providing further information on the findings when available to the Scrutiny Group. • Terms of Reference, the Scrutiny Group are still yet to agree on the revised terms of reference and membership of the group. This will be progressed at the next meeting. • The Quarterly Performance Report- Quarter four was provided to Committee under the Mental Health Legislation Scrutiny Group update as this was agreed during the previous Mental Health Legislation Committee Agenda Setting meeting. The data within the report reflected information that was included within 	

the Scrutiny Meeting update with majority of the Mental Health Act data that was used during Quarter four was reported standard.

- Discussions took place under the Quarterly Performance Report- Quarter four in relation to discharge figures not being included within this quarter. The Mental Health Legislation Manager stated that this is the first quarter in which this has not been included due to Tribunal informing the team that they will no longer provide data on a quarterly basis and will only provide them annually. The Mental Health Legislation Manager will share these discussions with peers in other Health Boards to determine whether there is a general concern that should be flagged up to the Vice-Chair individually.
- The Head of Service for Older Adult Mental Health addressed the figures within the Quarterly Performance Report for Quarter Four as a systemic problem, as Older Adult Service patients have Dementia, and the Mental Health Act was not initially meant for this, and many people are imprisoned in areas with biological triggers. It was also noted that this is a common occurrence and that a more alternate atmosphere that is more integrated might have been more beneficial. The impact of the COVID pandemic and the withdrawal of social care services has been enormous throughout all counties, and it is still difficult to respond to day-care face-to-face contact.
- The Mental Health (Wales) Measure 2010 Report was received. The Assistant Director of MH&LD highlighted key areas of the report.
- The Power of Discharge Sub-Committee was held on the 4 April 2023, it was noted to Committee that discussions took place on the data for Section 23 and received a report that looked at any impact within service changes. The Sub-Committee also welcomed the new Ward Manger Richard Jackson to the meeting. The Sub-Committee also requested approval from the Mental Health Legislation Committee on their revised Terms of Reference.
- The Director of Mental Health and Learning Disabilities provided a verbal update to Committee on the Risk Register, but no risk updates requiring raising during this meeting. The Director of Mental Health and Learning Disabilities will continue to undertake a periodical check.
- The Section 5 (4) Nurses Holding Power Policy and The Provision and Access to the Independent Mental Health Advocacy (IMHA Service) Policy was due for a three-year review. Both policies were approved.
- The Schedule of Meetings 2023-2024 and the Annual Work Plan 2023-2024 was shared as information to Committee. These will be a standard agenda item for information.

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

Matters Requiring Board Level Consideration or Approval:

- Mental Health Legislation Committee Terms of Reference
- Mental Health Legislation Committee Annual Report 2022-2023

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

None.

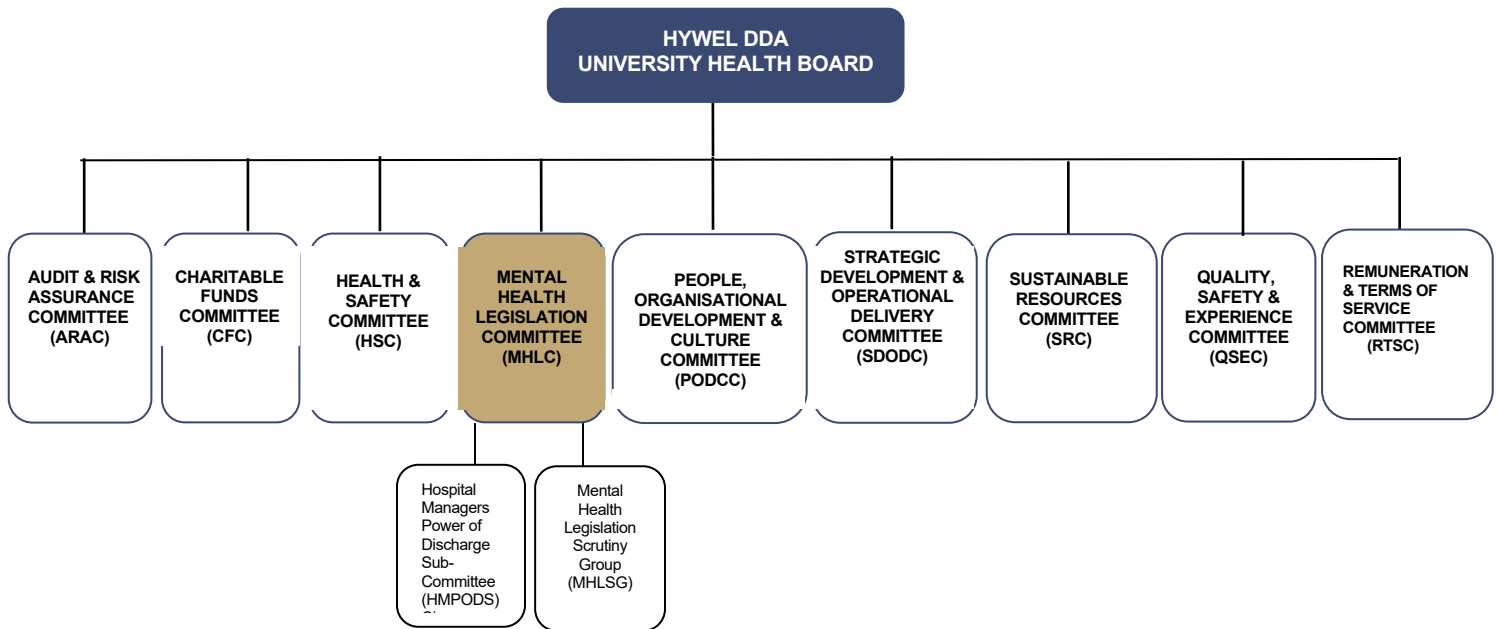
**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /
Planned Committee Business for the Next Reporting Period:**

Adrodd yn y Dyfodol / Future Reporting:

To be confirmed.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

5 September 2023.



MENTAL HEALTH LEGISLATION COMMITTEE

TERMS OF REFERENCE

Version	Issued To	Date	Comments
V0.1	Hywel Dda Health Board	27.09.2012	Approved
V0.2	Mental Health Act Monitoring Committee	27.11.2012	Membership amended
	Hywel Dda University Health Board	22.06.2014	In Standing Orders
V0.3	Mental Health Legislation Assurance Committee	10.09.2014	Approved
	Hywel Dda University Health Board	26.11.2015	Approved
V0.4	Mental Health Legislation Assurance Committee	10.03.2016	Approved
V0.5	Mental Health Legislation Assurance Committee	07.12. 2017	Amendments
V0.6	Mental Health Legislation Assurance Committee	08.03.2018	Amendments
V0.7	Mental Health Legislation Assurance Committee	17.09.2019	Amendments
V0.8	Mental Health Legislation Assurance Committee	01.09.2020	Amendments
V.09	Mental Health Legislation Assurance Committee	02.03.2021	Approved

	Hywel Dda University Health Board	25.03.2021	Approved
V.10	Hywel Dda University Health Board	29.07.2021	Approved
V.11	Mental Health Legislation Assurance Committee	03.10.2022	Approved
V.11	Hywel Dda University Health Board	24.11.2022	Approved
V.12	Mental Health Legislation Committee	15.06.2023	Approved
V.12	Hywel Dda University Health Board	27.07.2023	For Approval

MENTAL HEALTH LEGISLATION COMMITTEE

1. Constitution

- 1.1 The Mental Health Legislation Committee (the Committee) has been established as a Committee of Hywel Dda University Health Board (HDdUHB) and constituted from 1st June 2015 to assure the Board that those functions of the Mental Health Act 1983, as amended, which have been delegated to officers and staff are being carried out correctly; and that the wider operation of the 1983 Act in relation to the UHB's area is operating properly.

2. Purpose

The purpose of the Mental Health Legislation Committee is to assure the Board on the following:

- 2.1 Those functions of the Mental Health Act 1983, as amended, which have been delegated to officers and staff are being carried out correctly; and that the wider operation of the 1983 Act in relation to the UHB's area is operating properly;
- 2.2 The provisions of the Mental Health (Wales) Measure 2010 are implemented and exercised reasonably, fairly and lawfully;
- 2.3 The UHB's responsibilities as Hospital Managers are being discharged effectively and lawfully;
- 2.4 The UHB is compliant with Mental Health Act, 1983 Code of Practice for Wales;
- 2.5 The Committee will also advise the Board of any areas of concern in relation to compliance with mental health legislation and agree issues to be escalated to the Board with recommendations for action.

3. Key Responsibilities

In respect of its provision of advice to the Board, the Mental Health Legislation Committee shall:

- 3.1 Review reports from Healthcare Inspectorate Wales visits, the Delivery Unit and other external scrutiny bodies and approve the action plans for monitoring through its sub-committee structure;
- 3.2 Review the Mental Health & Learning Disabilities Risk Register bi-annually to ensure that risks relating to compliance with mental health legislation are being appropriately managed by Mental Health Legislation Scrutiny Group;
- 3.3 Receive Mental Health Legislation Scrutiny Group Update Report from previous meeting;
- 3.4 Consider issues arising from its Sub-Committee and Group structure;
- ~~3.5 Receive the Hywel Dda Mental Health Partnership Board Annual Report and consider issues in relation to the implementation of the Mental Health Strategy across the Hywel Dda area.~~
- ~~3.6 Receive update reports from the Mental Health Programme Group on improvement programmes for high quality, safe and sustainable mental health services which are consistent with the Board's overall strategic direction.~~
- 3.5 Receive Hospital Manager's Power of Discharge Committee Update Report & Minutes from previous meeting. This report should ensure compliance with the Code of Practice.

In respect of its provision of assurance to the Board, the Mental Health Legislation Committee will seek assurances that:

- 3.6 The operation of mental health legislation is exercised fairly and lawfully and that specific issues related to compliance are managed through its Sub-Committee and Group structure;
- 3.7 The wider operation of the 1983 Act (the Board's delegated functions as Hospital Managers) are being exercised reasonably, fairly and lawfully and that specific issues related to compliance are managed through its Sub-Committee and Group structure;
- 3.8 Identified matters of risk relating to compliance with mental health legislation are being appropriately mitigated;

- 3.9 Arrangements for the delegated authority of approval for Approved Clinicians and Section 12 Doctors in Wales are compliant with the Directions and Guidance from Welsh Government, and are monitored through the Mental Health Legislation Scrutiny Group;
- 3.10 Policies and procedures are developed and approved in line with the organisation's Written Control Document Policy, through the Mental Health Legislation Scrutiny Group;
- 3.11 The training requirements of those staff who exercise the functions of mental health legislation have the requisite skills and competencies to discharge the Board's responsibilities, through the Mental Health Legislation Scrutiny Group;
- 3.12 Ensure that relevant legislation, in particular, the Human Rights Act 1998, the Equality Act 2010, and the Data Protection Act 1998, are adhered to.

4. Membership

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

Member
Independent Member with responsibility for Mental Health (Board Vice-Chair) (Chair)
Independent Member (Vice Chair)
2 X Independent Members

4.2 The following should attend Committee meetings:

In Attendance
Director of Operations (Lead Director)
Director of Mental Health & Learning Disabilities Services (Lead Officer)
Associate Medical Director for Mental Health Services
Head of Assistant Director of Nursing Mental Health & Learning Disabilities
Head of Older Adult Mental Health and Learning Disability Services
Head of Adult Mental Health Inpatient Wards and Learning Disabilities Service
Head of SCAMHS and Psychological Therapies
Mental Health Legislation Manager
Mental Health Act Administration Lead
Chair of Mental Health Legislation Scrutiny Group
Nominated representative from Dyfed/Powys Police
Nominated representative from Welsh Ambulance Services NHS Trust
Nominated representative from Carmarthenshire County Council
Nominated representative from Ceredigion County Council
Nominated representative from Pembrokeshire County Council
Nominated representative from West Wales Action for Mental Health (WWAMH)

2 x Nominated Service Users: patient representative and carer representative
Nominated representative from Primary Care: GP Lead
Nominated representative from Llais (not counted for quoracy purposes)
Nominated representative from Hywel Dda Community Health Council (not counted for quoracy purposes)
Nominated representative from Advocacy Network

- 4.3 The Vice-Chair of the University Health Board (UHB) shall undertake the role of Chair of the Mental Health Legislation Committee given their specific responsibility for overseeing the Board’s performance in relation to mental health services.
- 4.4 Terms and conditions of appointment (including any remuneration and reimbursement) in respect of independent external members and service users will be determined by the Board.
- 4.5 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 two of the membership and must include as a minimum the Chair or Vice Chair of the Committee and one other Independent Member, 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 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.
- 5.3 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.
- 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 UHB 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 Mental Health Legislation 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 Mental Health Legislation 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 Lead Director/Lead Officer 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 Officer.
- 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 action log 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) 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 quarterly 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 the Board has delegated authority to the Committee 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 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 UHB'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 UHB'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 Groups to carry out on its behalf specific aspects of Committee business. The Committee will receive an update following each Sub-Committee or Group meeting detailing the business undertaken on its behalf. The Sub-Committee reporting to this Committee is:
- 10.3.1 Hospital Managers Power of Discharge Sub-Committee
 - 10.3.2 Mental Health Legislation Scrutiny 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 paper, 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 matter under consideration by the Committee.

- 10.4.3 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.
- 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 Lead Director (Director of Operations) and will be supported by the Lead Officer (Director of Mental Health and Learning Disabilities).

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.

Enw'r Pwyllgor / Name of Committee	Remuneration & Terms of Service Committee (RTSC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Miss Maria Battle, UHB Chair
Cyfnod Adrodd/ Reporting Period:	Meeting held on 18 May 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Annual Review of the Committee's Terms of Reference & Membership – the Committee considered the Terms of Reference, noting a suggestion that RTSC might be utilised in a more proactive way as part of Executive Director performance/ appraisals. RTSC may also have a role in terms of determining and approving the Board Development programme. It was agreed that the most appropriate approach would be considered, for discussion at a future meeting. In considering the Terms of Reference, Members noted that the version as proposed already allows for the Committee to undertake the performance monitoring function. Further amendments may be necessary in relation to the Board Development aspect. Subject to these potential amendments, the Committee approved the Remuneration and Terms of Service Committee's Terms of Reference for onward ratification by the Board on 27 July 2023. • Executive Director Update – the Committee noted the update with regard to Executive Director recruitment. • Ratification of Chair's Action – the Committee ratified the Chair's Action taken in respect of amending the title 'Director of Planning' to 'Director of Strategy and Planning'. • Ratification of Chair's Action – the Committee ratified the Honours Nominations previously considered and submitted to Welsh Government. • Pension Alternative Payments - Payment Authorisation – the Committee noted the Employer Pension Contributions – Alternative Payment Policy Report. • Any Other Business – the Committee was advised that the Health Board is considering reinstating an Associate Board Member for Finance. This would be a non-voting, In Attendance Member role as per standing orders. It was noted that this would be subject to Ministerial approval and would be for a period of 12 months. 	
Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd a'u cyfer / Matters Requiring Board Level Consideration or Approval:	
<ul style="list-style-type: none"> • The revised Remuneration & Terms of Service Committee Terms of Reference, appended (changes marked in red text). 	
Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:	
None.	

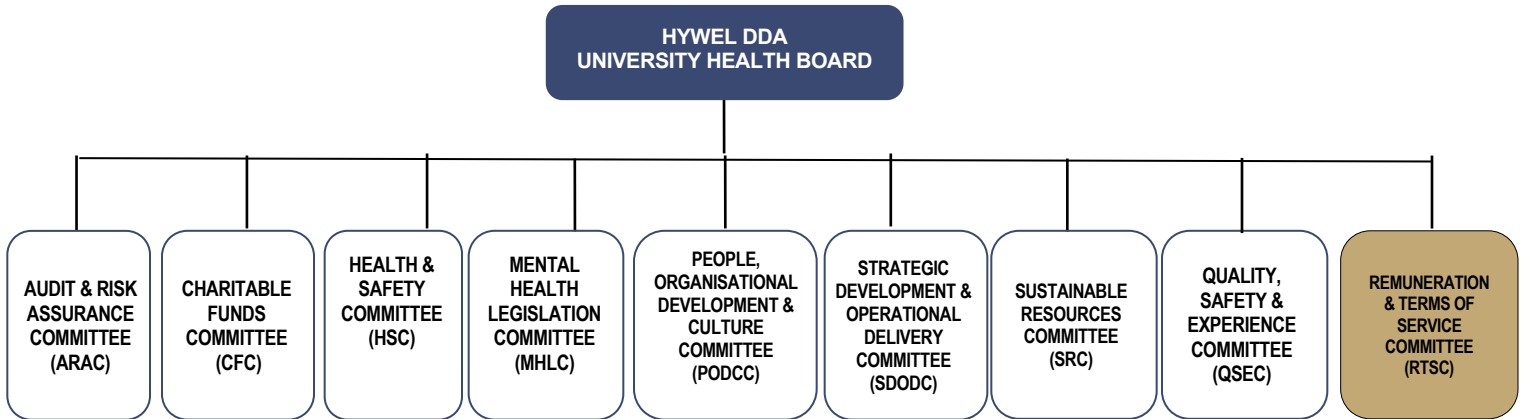
**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /
Planned Committee Business for the Next Reporting Period:**

Adrodd yn y Dyfodol / Future Reporting:

To be confirmed.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

To be confirmed.



REMUNERATION AND TERMS OF SERVICE COMMITTEE

TERMS OF REFERENCE

Version	Issued To	Date	Comments
V.01	Hywel Dda Health Board	29.09.2011	Approved
V.02	Remuneration and Terms of Service Committee	04.09.2012	Approved
	Hywel Dda Health Board (SOs)	27.09.2012	Approved
	Remuneration and Terms of Service Committee	19.09.2013	Approved
	Hywel Dda University Health Board (SOs)	04.06.2014	Approved
V.03	Remuneration and Terms of Service Committee	12.11.2015	Approved (CA)
	Hywel Dda University Health Board (SOs)	26.11.2015	Approved
V.04	Remuneration and Terms of Service Committee	16.01.2017	Approved
	Hywel Dda University Health Board (SOs)	26.01.2017	Approved
V.05	Remuneration and Terms of Service Committee	18.12.2017	Approved
V.05	Hywel Dda University Health Board	29.03.2018	Approved
V.06	Remuneration and Terms of Service Committee	30.05.2018	Approved
V.06	Hywel Dda University Health Board	26.07.2018	Approved
V.07	Remuneration and Terms of Service Committee	27.06.2019	Approved
V.07	Hywel Dda University Health Board	25.07.2019	Approved
V.08	Hywel Dda University Health Board	26.03.2020	Approved
V.09	Remuneration & Terms of Service Committee	31.08.2021	Approved
V.09	Hywel Dda University Health Board	30.09.2021	Approved
V.10	Remuneration & Terms of Service Committee	10.08.2022	Approved
V.10	Hywel Dda University Health Board	29.09.2022	Approved
V.11	Remuneration & Terms of Service Committee	18.05.2023	Approved
V.11	Hywel Dda University Health Board	27.07.2023	For Approval

REMUNERATION AND TERMS OF SERVICE COMMITTEE

1. Constitution

- 1.1 The Remuneration and Terms of Service Committee (the Committee) has been established as a Committee of the Hywel Dda University Health Board (HDdUHB) and constituted from 1st October 2009.

2. Purpose

- 2.1 The purpose of the Remuneration & Terms of Service Committee is to act on behalf of the Board to:
 - 2.1.1 **Approve**, on behalf of the Board, the remuneration and terms of service for the Chief Executive, Executive Directors and other senior staff within the framework set by the Welsh Assembly Government; and
 - 2.1.2 **Provide Assurance** to the Board in relation to the HB's arrangements for the remuneration and terms of service, including contractual arrangements, for all staff, in accordance with the requirements and standards determined for the NHS in Wales
 - 2.1.3 Perform certain, specific functions on behalf of the Board.
- 2.2 The Committee shall have no powers to develop or modify existing pay schemes.

3. Key Responsibilities

With regard to its role in acting on behalf of the Board, and in providing advice and assurance to the Board, the Remuneration and Terms of Service Committee will comment specifically upon:

- 3.1 Remuneration and terms of service for the Chief Executive, Executive Directors, other Very Senior Managers (VSMs) and others not covered by Agenda for Change; ensuring that the policies on remuneration and terms of service as determined from time to time by Welsh Government are applied consistently;
- 3.2 Objectives for Executive Directors and other VSMs and their performance assessment;
- 3.3 Performance management systems in place for those in the positions mentioned above and its application;

- 3.4 Proposals to make additional payments to medical Consultants outside of normal terms and conditions;
- 3.5 Proposals regarding termination arrangements, ensuring the proper calculation and scrutiny of termination payments in accordance with the provision of the Regulations and in accordance with Ministerial instructions;
- 3.6 Consider and approve Voluntary Early Release applications and redundancy/severance payments in respect of Executive Director/Director posts, in line with Standing Orders and extant Welsh Government guidance. The Committee to be advised also of **all** Voluntary Early Release Scheme applications and severance payments;
- 3.7 Approve any Strategic Advisor arrangements, including scope and pay;
- 3.8 To approve the University Health Board's honours submission recommendations.

4. Membership

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

Member
Hywel Dda University Health Board Chair (Chair)
Independent Member (Vice Chair & Chair of Audit and Risk Assurance Committee)
Independent Member (Chair of Strategic Development and Operational Delivery Committee)
Independent Member (Chair of Quality, Safety and Experience Committee)

- 4.2 The following should attend Committee meetings:

In Attendance
Hywel Dda University Health Board Chief Executive
Director of Workforce and Organisational Development (Lead Executive)
Director of Corporate Governance/Board Secretary

- 4.3 The 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 two of the membership and must include as a minimum the Chair or Vice Chair of the Committee and one other Independent Member.

- 5.2 The membership of the Committee shall be determined by the Board, 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 of directions made by the Welsh Government.
- 5.3 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.
- 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 Committee shall have reasonable access to Executive Directors and other relevant senior staff.
- 5.7 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 the Vice Chair and the Lead Director, Director of Workforce & OD, at least **four** weeks before the meeting date.
- 6.2 The agenda will be determined by the organisational requirements relating to remuneration and terms of service business. 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 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 action-log will be circulated to the Lead Director within seven days members within seven 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. Frequency of Meetings

- 7.1 The Chair of the Committee, in agreement with the Committee members, shall determine the timing and frequency of meetings, as deemed necessary. It is expected that the Committee shall meet at least once a year with provision made for a quarterly Committee cycle.
- 7.2 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.

8. Accountability, Responsibility and Authority

- 8.1 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 8.2 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.
- 8.3 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.

9. Reporting

- 9.1 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:
 - 9.1.1 joint planning and co-ordination of Board and Committee business;
 - 9.1.2 sharing of information.
- 9.2 In so doing, 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.
- 9.3 The Committee may establish sub-committees or task and finish groups to carry out on its behalf specific aspects of Committee business.
- 9.4 The Committee Chair, supported by the Committee Secretary, shall:
 - 9.4.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities, to include the submission of a Committee update report;
 - 9.4.2 Bring to the Board's specific attention any significant matter under consideration by the Committee;
 - 9.4.3 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 affect the operation and/or reputation of the UHB.

- 9.5 The Committee shall provide a written, annual report to the Board on its activities. The report will also record the results of any Committee's self-assessment and evaluation.

10. Secretarial Support

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

11. Review Date

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

Enw'r Pwyllgor / Name of Committee	In-Committee Board
Cadeirydd y Pwyllgor/ Chair of Committee:	Miss Maria Battle, UHB Chair
Cyfnod Adrodd/ Reporting Period:	Meeting held on 25 May 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Corporate Risks – the In-Committee Board noted Corporate Risks in relation to security and cyber security. • Property Asset Strategy - Update – the In-Committee Board endorsed the current version of the Property Asset Strategy and noted the ongoing development and targeted outputs to support and align to the Health Board's transformation plans and business operations. It was suggested that the information provided represents a 'strategic intent' rather than a 'strategy'. Members were informed that an update will be provided to the Public Board meeting in July 2023. • Radiology Informatics System Procurement Programme (RISP) Full Business Case – the In-Committee Board received assurance from the report and decided to progress the RISP replacement in HDdUHB, whilst noting the matters brought to the attention of the Board in the public part of the meeting. • Suspensions Report – the In-Committee Board received the most recent Suspensions Report, providing an update on all employment suspensions as at 30 April 2023. • In-Committee Audit & Risk Assurance Committee (ARAC) – the In-Committee Board received an update report from the In-Committee ARAC meeting held on 18 April 2023. • In-Committee Sustainable Resources Committee (SRC) – the In-Committee Board received an update report from the In-Committee SRC meeting held on 25 April 2023. • In-Committee Health & Safety Committee (HSC) – the In-Committee Board received an update report from the In-Committee HSC meeting held on 9 May 2023. • In-Committee Welsh Health Specialised Services Committee (WHSSC) – the In-Committee Board received an update report from the In-Committee WHSSC meeting held on 14 March 2023. 	
Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:	
None.	

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

- Concerns in relation to security incidents and the protection of Health Board staff and property.

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:

27 July 2023.

Enw'r Pwyllgor / Name of Committee	Staff Partnership Forum
Cadeirydd y Pwyllgor/ Chair of Advisory Group:	Lisa Gostling, Director of Workforce & OD and Anthony Dean, Joint Chair of Staff side Partnership Forum
Cyfnod Adrodd/ Reporting Period:	April 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Advisory Group:	
<ul style="list-style-type: none"> • Policy approval – due to the volume of policies being reviewed, it has been agreed that a separate meeting will be arranged to discuss policies, prior to future Partnership Forum meetings. All policies presented to the Forum were deferred to a future date. • Financial Position – the challenging financial position was discussed, together with procurement as occasionally, purchasing via this route could be more expensive than local purchasing. This was to be reviewed. • Service Issues – it was reported that all services continue to be under pressure, although performance and certain indicators have improved since the height of winter. The Clinical Services Plan programme was discussed, along with the emergency general surgery consultant on-call rota at Wthybush General Hospital. A discussion was also had around mass vaccination centres, and it was confirmed that the majority of staff had now been redeployed, although the future support roles were being recruited into. • Training Venues – the lack of suitable training venues was discussed, due to the impact it is having on the Health Board's ability to provide moving and handling training, Intermediate Life Support (ILS) and Basic Life Support (BLS) training. The Forum will be kept updated as discussions take place with estates. • New Hospital Site Consultation – a presentation was received around the consultation for the selection of the site for the new hospital. All staff were encouraged to participate in the consultation exercise, despite it being difficult to visualise this for the future. • Local Partnership Forum Issues – non-payment of the 1.5% non-consolidated back pay to bank workers was discussed and, whilst there was some sympathy around this, it was confirmed that it was part of the national implementation plan and therefore outside of the Health Board's control. • Health & Safety Update – an update was provided, including confirmation that an Oxygen Cylinder Safety Briefing was about to be issued. The Health Board had received correspondence from the Royal College of Midwifery, which was seeking assurance on how the Health Board will ensure compliance with the Entonox or Nitrous Oxide exposure to staff. The review would be undertaken in all areas where this is used and not exclusively within midwifery services. • Terms of Reference – following the issue of the Terms of Reference for the Staff Partnership Forum for Members' comments, it was reported that none had been received and, therefore – subject only to changes in job titles – the Terms of Reference were accepted for onward ratification by the Board. 	

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:

- Staff Partnership Forum Terms of Reference for ratification (attached).

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

None

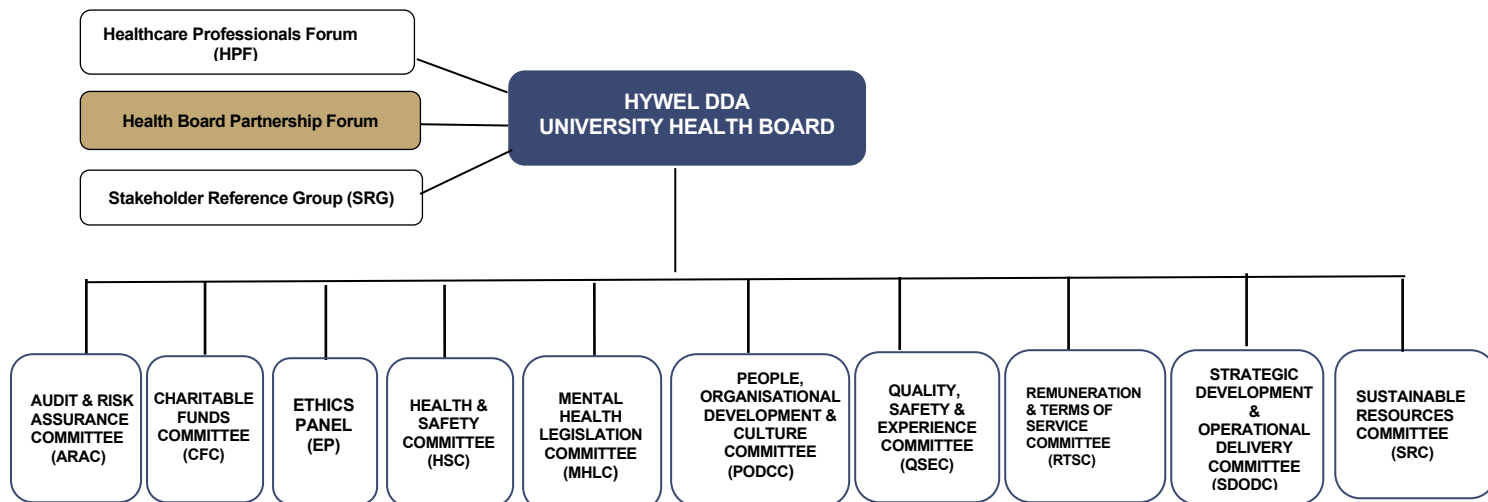
Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol / Future Reporting:

- Accommodation plans

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

1 August 2023



HEALTH BOARD PARTNERSHIP FORUM

TERMS OF REFERENCE

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
V0.8	Partnership Forum	28/02/23	Approved
V0.8	Board	27/07/23	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 was constituted from 1 October 2009.

2. Principal Duties

- 2.1 The LPF is the formal mechanism where NHS Wales's 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.
- 2.2 At the earliest opportunity, the Board will engage with Trade Unions in the key discussions at the UHB Board, LPF and County Partnership Forums (CPF).
- 2.3 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 2.

3. Operational Responsibilities

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

- 3.1.8 Appraise and discuss in partnership the Board services and activity and its implications.
- 3.1.9 Provide opportunities to identify and seek to agree quality issues, including clinical governance, particularly where such issues have implications for staff.
- 3.1.10 Communicate to the partners the key decisions taken by the Board and senior management.
- 3.1.11 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.
- 3.1.12 Consider national developments in NHS Wales Workforce & Organisational Strategy and the implications for the Board including matters of service re-profiling.
- 3.1.13 Negotiate on matters subject to local determination.
- 3.1.14 Ensure Trade Union representatives are afforded reasonable paid time off to undertake trade union duties.
- 3.1.15 To develop in partnership appropriate facilities arrangements using A4C Facilities Agreement as a minimum standard.
- 3.1.16 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.
- 3.1.17 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.

4. Membership

- 4.1 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. **The Trade Union member of the LHB Board will be expected to attend the LPF in an ex-officio capacity.** As a minimum, the membership of the LPF shall comprise:

4.2 Management Representatives

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

Director of Finance
Director of Operations

Director of Acute Services
Director of Nursing, Quality & Patient Experience
Assistant Director Operational Nursing & Quality Acute Services
Director of Therapies & Health Sciences
Director of Workforce and OD
Head of Workforce
Director of Strategic Development & Operational Planning
Assistant Director of OD
Head of Resourcing & Utilisation
Assistant Director of People 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 Executive Directors and others may also be members or may be co-opted dependent upon the agenda.

The Chief Executive will attend periodically linked to agenda items.

4.3 **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 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 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 hasn't 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 4 for seats to be applied in 2021/2022.

It is intended to review membership along with Terms of Reference in 3 yearly intervals. The Chair, Vice Chair and Secretary members shall be included in the overall Trade Union allocated seats.

4.4 **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 1 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.

4.5 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 Director of Corporate Governance/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.

5. Quorum and Attendance

- 5.1 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.
- 5.2 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.
 - 5.2.1 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.

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 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 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. A schedule of meetings shall be agreed at least 12 months in advance, consistent with the UHB'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 UHB 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 UHB'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 Director of

Corporate Governance/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 UHB 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 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 The requirements for the conduct of business as set out in the UHB'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 UHB 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 UHB Chair.

10.3 The Board shall determine the arrangements for any joint meetings between the UHB 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 at Appendix 3.

12. Sub Committees

12.1 When 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.

Sub committees already in place: -

- Organisational Change group
- Ceredigion Partnership Forum
- Carmarthenshire Partnership Forum
- Pembrokeshire Partnership Forum
- Policy Review Group

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 UHB's Director of Corporate Governance/Board Secretary who is responsible for the overall planning and co-ordination of the UHB'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 Chiropractors and Podiatrists
- Federation of Clinical Scientists
- Chartered Society of Physiotherapy (CSP)
- British Dietetic Association

Appendix 2

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 3

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).

Appendix 4

Members	Seats
• Royal College of Nursing (RCN)	6
• Royal College of Midwives (RCM)	1
• UNISON	7
• UNITE	3
• GMB	1
• British Orthoptic Society	1
• Society of Radiographers	1
• British Dental Association	1
• Society of Chiropractors and Podiatrists	1
• Federation of Clinical Scientists	1
• Chartered Society of Physiotherapy (CSP)	1
• British Dietetic Association	1

Enw'r Pwyllgor / Name of Committee	Healthcare Professionals Forum
Cadeirydd y Pwyllgor/ Chair of Committee:	Dr Mo Nazemi
Cyfnod Adrodd/ Reporting Period:	Meeting held on 29 June 2023
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<p>The Healthcare Professionals Forum (HPF) met on 29 June 2023.</p> <ul style="list-style-type: none"> • Future Children's Services Consultation – a presentation on this topic was received. Forum members used the Q&A that followed to better understand the details behind the consultation and feed back on clinical and practical considerations. The Forum welcomed the presentation. • 'A Healthier Mid and West Wales' Programme Business Case and Land Selection – an update on this topic was provided, which allowed the membership to better understand the process which will be followed and some of the challenges to come. Discussions focused on transportation requirements to allow best patient care. The Forum welcomed the presentation and would be very interested in future updates. • Forum Terms of Reference/Membership – the Forum will be undergoing a 'refresh' as several members have now reached their maximum term, including the Chair. A strategy has been agreed and work is underway to recruit new members in time for the next meeting. The Forum Terms of Reference will be reviewed at that point. 	
Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:	
None	
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:	
To be confirmed	