



Agenda Item

5.4.4

CTM Health Board

Highlight Report from the (Operational Delivery Committee)

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| Dyddiad y Cyfarfod / Date of Meeting | 27/11/2025 |
| Statws Cyhoeddi / Publication Status | Open/ Public Not Applicable |
| Awdur yr Adroddiad / Report Author | Cally Hamblyn, Assistant Director of Governance & Risk |
| Cyflwynydd yr Adroddiad / Report Presenter | Rachel Rowlands, Independent Member, (Chair of Operational Delivery Committee) |
| Noddwr Gweithredol yr Adroddiad / Report Executive Sponsor | Gareth Watts, Director of Corporate Governance / Board Secretary |

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| Pwrpas yr Adroddiad / Report Purpose | For Noting |
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| Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group) | | |
|---|-------------|----------------|
| Committee / Group / Individuals | Date | Outcome |
| Not applicable. | | |

| Acronyms / Glossary of Terms | |
|-------------------------------------|--|
| CTM | Cwm Taf Morgannwg |
| CT | Computed Tomography |
| EDI | Equality, Diversity & Inclusion |
| ePMA | Electronic Prescribing and Medicine Administration |
| LIMS | Laboratory Information Management System |

1. Introduction

- 1.1 This report had been prepared to provide the Board with details of the key issues considered by the Operational Delivery Committee at its meeting on 28 October 2025.
- 1.2 Key highlights from the meeting are reported in section 3.

2. Purpose of this Meeting

- 2.1 The purpose of the Committee is to provide assurance to the Board on the effectiveness of arrangements in place for securing the achievement of the Board's aims and objectives, in accordance with the standards of good governance determined for the NHS in Wales. In doing so, the Committee will seek assurance that there is ongoing development of an improving performance culture which continuously strives for excellence and focuses on improvement in all aspects of service delivery.
- 2.2 The Committee ensures that evidence based, and timely interventions are implemented to drive forward improved performance thereby allowing the Health Board to achieve the requirements and standards determined for the NHS in Wales, and as outlined within CTMUHB's Integrated Medium Term Plan.

3. Highlight Report

Alert / Escalate

System Implementations - Key Digital Programmes

In response to the update on Digital and Data activity the Committee agreed to alert the Board to the risk regarding the congestion of multiple major digital system deployments (radiology, pathology, OpenEyes, maternity) all scheduled for completion by March 2026, with significant concerns regarding any potential delays, cost overruns, and the impact on staff welfare and operational delivery if deadlines are missed or if resources are insufficient. It was noted that in mitigating the risk, the Director for Digital and the relevant teams will continue to review capacity of services to deliver programmes within current timescales.

Financial Health

The Committee noted that whilst the financial position at month 6 had improved, with a reduced deficit and a break-even forecast, that this is contingent on mitigating a substantial savings shortfall and resolving outstanding pay-related funding issues. The main risks brought to the attention of the Committee related to the unconfirmed future pay award funding, a large potential liability from the Welsh Risk Pool, unresolved national



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| | <p>pay disputes, and other cost pressures not yet reflected in the forecast. The Committee were informed that whilst there are some opportunities, they are not expected to fully offset these risks, and these are challenges which are shared across all Welsh health boards, with ongoing uncertainty about national funding allocations. One of the mitigating factors noted by the Committee specifically, was the need for a three-year "base case" scenario to be communicated with agreed mitigations as it is anticipated that the future direction will be investment free plans.</p> <p>Positive Alerts:</p> <p>Princess of Wales Hospital – Roof and Compliance Programme</p> <p>The Committee were delighted to note that the programme of work had concluded within the expected timelines and key services had resumed delivery on the site where required. It was also noted that the final account on the main roof programme has been agreed with the contractor and is in line with the forecast position. The other expenditure items are being finalised; however, the outturn position is expected to remain within the revised allocation.</p> <p>The Committee recognised the significant achievement in delivering this programme of work at pace, acknowledging that the business case was only submitted the previous year. The Committee expressed thanks to all those involved in the programme.</p> <p>Ambulance Handover Performance</p> <p>The Committee commended the teams for the positive improvements highlighted in relation to Ambulance handover, acknowledging that CTMUHB is the top performing health board in Wales for October, with >93% handovers within target at all sites.</p> |
| <p>Advise</p> | <p>Staff Survey update and Care Group Action Plans</p> <p>The current response rate of 17.5% (as at 28 October 2025) was reported and the Committee noted that this represented over 900 more responses than the same period last year and the highest among Welsh health boards; the all-Wales average is 12.3%. It was recognised that there is significant variation in response rates across directorates, and the Committee were apprised of the ongoing activity to increase the response rates.</p> <p>Digital & Data Activity</p> <p>The update on this item reiterated to the Committee how complex and multi-faceted the Digital & Data Delivery Programme is to deliver. The update focussed in detail on the following specific matters for consideration:</p> |



- Digital System deployments
- Digital Delivery
- Digital Transformation
- Data & Compliance

In concluding the update, and as highlighted in the alert section of this report, the Committee recognised the challenges and that due to delays in some programmes, and therefore re-planning of dates, system implementations of key programmes are landing in March 2026, which will be a capacity issue CTM will need to manage and collectively prioritise, especially for critical systems.

Month 6 Finance Report

The Committee noted that the financial position at month 6 has improved, with a reduced deficit and a break-even forecast, but this is contingent on mitigating a substantial savings shortfall and resolving outstanding pay-related funding issues. The risk of financial sustainability was agreed as an alert item in this highlight report to Board.

Month 6 Financial Performance Report

It was highlighted to the Committee that the CTM's savings delivery plans are behind target, with a significant gap between planned and forecast savings, especially in centrally led transformation schemes. It was noted that this shortfall is contributing to a growing underlying deficit for the next financial year. Key risks were as captured in the Month 6 Finance Report update and as reflected in the alert section of this report.

The Committee discussed the importance of communicating a clear and unified message which highlights the need to shift from a focus on investments to a focus on value and delivery.

Capital Delivery Monitoring Report

An overview of the capital delivery monitoring report highlighted the scale and complexity of the current programme, the challenges of prioritising equipment replacement, and updates on disposals and major capital schemes. The report reflected a significant workload managed by a small team, with ongoing coordination needed across care groups and services to ensure safe delivery.

The Committee noted that equipment allocation and prioritisation remain challenging, with risks sometimes emerging mid-year due to breakdowns or shifting priorities.

The disposal of Pontypridd Health Centre and Bryncethin Clinic were noted as progressing, with plans for vacating Pontypridd Cottage Hospital under review.



The update on 'Major Capital Schemes' drew the Committees attention to the following ongoing activity:

- Prince Charles Hospital Ground and First Floor Phase 2 and Phase 3
- Bridgend Health and Wellbeing Centre
- Princess of Wales Hospital Roof and Compliance Programme
- Maesteg Health and Wellbeing Centre.

Savings Delivery Programme Update Presentation

The update on the Savings Delivery Programme provided the Committee with an update which outlined the programme governance structure, data improvements across the savings programme, targeted audits and detail on the deep dives underway in areas where there is under performance against the plans. Attention was drawn to the key risks which included workforce capacity, digital readiness, and the challenge of embedding sustainable, systematic savings. The assurance provided to the Committee is that there are immediate actions to focus on accurate data, policy adherence, and sharing best practices, however, ongoing vigilance is needed to address delivery gaps and operational risks.

Integrated Medium Term Plan 2025-2028 – Quarter 2 Review

The update to the Committee reflected that quarter 2 shows mixed progress across the ministerial requirements, with some areas, such as ambulance handovers demonstrating significant improvement, while others are not yet fully delivered. The finance, capital, and people plan updates were captured within the update, with the financial position and some performance indicators highlighted as escalation areas.

IMTP in Year Performance Against Delivery for Care Groups – as at quarter 2:

• Children & Family Care Group

The focus of the Children and Family Care Group was in relation to Gynaecology, Paediatrics, Maternity and Neonatal reflecting on the ongoing challenges and next steps.

Further clarity was sought on the challenges surrounding the Special School Nursing Provision and whether the situation was unique to CTM. The Committee were advised that the challenges were mainly specific to CTM due to having an increased number of special schools. The risk is being mitigated by support from community nursing where possible, however, it was noted that discussions are required with Welsh Government colleagues to seek clarity on the way forward prior to discussions with other stakeholders. Due to the significant risk that Special School



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| | <p>Nursing Provision presents it was agreed that a more detailed briefing note would be shared with Members of the Committee.</p> <ul style="list-style-type: none"> • Unscheduled Care (USC)- Care Group The update from USC reported notable improvements especially in ambulance handover performance, recruitment for key clinical roles, and service transformation. Ongoing concerns were highlighted in terms of the risks related to 12-hour waits, stroke pathway performance, and workforce sustainability. • Mental Health & Learning Disabilities (MHL) Care Group The update from MHL to the Committee highlighted progress in service redesign, digital transformation, and partnership working. Ongoing risks and concerns were recognised in relation to workforce fragility, regional service dependencies, and statutory performance in psychological therapies. • Diagnostics, Therapies, Pharmacy and Specialties (DTPS) Care Group The DTPS update highlighted progress to the Committee arising from positive Health Inspectorate Wales and Internal Audit inspections in radiology, service harmonisation, and digital rollouts in terms of the EPMA. Ongoing risks and concerns were outlined in terms of CT service capacity, workforce capacity within haematology, digital system dependencies i.e. LIMS implementation, and delays encountered with other providers for some key service areas. |
| Assure | <p>Staff Vaccination Programme Update</p> <p>The Committee were informed that the current focus of vaccination activity is on Staff flu vaccinations, using an integrated approach between Health Protection, Nursing, and Occupational Health Teams. An appraisal of the evidenced based models and approaches being used as drivers was noted with an emphasis on myth-busting and addressing vaccine safety concerns. Assurance was also provided on the accessibility improvements introduced including bookable slots, calendar invites, drop-in clinics, peer vaccination, and combining vaccination with staff survey roadshows.</p> <p>The Committee acknowledged the ongoing national data issues causing a time lag in real-time uptake reporting, however, noted that to date 34% of staff (4,437 people) have received the flu vaccine, nearly matching last year's total and placing the CTM among the top two organisations in NHS Wales.</p> <p>People Plan 2025-30 – Sickness Absence Analysis and Recommended Action Plans</p> <p>The presentation provided to the Committee highlighted sickness absence as a key priority, with a new Power BI dashboard being</p> |



developed for improved tracking. The Committee were informed that July's sickness absence rate was 6.97%, with stress, anxiety, and depression as the top reasons for the absence.

The presentation also highlighted concerns around data accuracy and ongoing work to improve reporting. Assurance on the actions being taken were noted by the Committee and included reviewing long-term absences, improving occupational health referrals, relaunching wellbeing services, and exploring fast-track options for staff on waiting lists. The internal target is a 1% reduction in sickness absence which was noted by the Committee.

Welsh Language Annual Report 2024-25

The Committee were assured of the significant progress in embedding Welsh language standards at CTM, including the launch of a compliance dashboard, full bilingual recruitment materials, and a record number of staff learning Welsh with measurable increases in workplace use.

It was noted that strategic plans now target key clinical areas, and new recruitment guidance ensures objective assessment of language needs. Staff engagement and leadership development around Welsh language have grown, and an audit methodology is in place. Priorities for the next year focus on strengthening impact assessments, ensuring recruitment compliance, and improving everyday service delivery standards.

Annual Equality Report 2024-25

The presentation of the Annual Equality Report captured how it is a statutory requirement to report progress on EDI activity, the summary outlined the progress across four strategic pillars, with input from diverse teams and networks. Notable achievements included the award-winning Maternity Data Bank Initiative and increased engagement in staff and community networks.

Through the report the Committee noted areas for further improvement, such as improved impact measurement of EDI initiatives, addressing workforce diversity challenges, and narrowing the gender pay gap. The Committee agreed that there needs to be sustained change and continued progress in embedding EDI in decision making.

All Wales Anti-Sexual Harassment Policy

The Committee approved the policy following an update that sought its launch to be coordinated with the Speaking Up Safely initiative. The Committee were assured that the policy responds to new legislative requirements and local needs and that it was developed collaboratively with all Welsh health boards with input



from trade unions and reference to NHS England's approach. It was understood that that policy will sit alongside existing respect, resolution, and raising concerns policies, and will be supported by new training, including an all-Wales e-learning module and manager training sessions. The launch is proposed for November, in parallel with the Speaking Up Safely initiative.

Organisational Risk Register

A brief overview of the Organisational Risk Register was provided to the Committee, highlighting the significant changes in terms of new, closed and updated risks captured in the September iteration. Assurance was taken that the risks are being managed.

Focus was drawn to Datix Risk ID 6052, "Patient hydration risks associated with the replacement of aged Beverage Trolley fleet (ultrakarts)", as assurance was sought and received in terms of the robustness of the maintenance of equipment programmes within CTM.

Integrated Performance Dashboard (IPD)

The update on the IPD highlighted the inclusion of the Cabinet Secretary priorities to ensure alignment with current ministerial priorities. The Committee were assured that key performance areas had already been discussed via the Care Group Updates and separate reports discussed in detail earlier in the meeting.

Workforce Metrics Report

The Committee acknowledged the improvements made to the format of the report following a refresh of the people metrics aligned to the people plan and noted ongoing work to review the Key Performance Indicators. The Committee welcomed the news that the lateral move scheme has been extended and that the scope will be widened.

New Operational Escalation Framework & Associated Cards for 45 Minute Handovers

The new operational escalation framework was presented to the Committee for approval which included the associated escalation cards for 45-minute ambulance handovers. The Committee were assured that the framework aligns with the 2024 Welsh Government urgent and emergency care requirements and that the escalation cards had undergone extensive review and iteration with teams throughout the year.



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| Inform | <p>Consent items</p> <p>The following items were APPROVED under the consent agenda:</p> <ul style="list-style-type: none"> • Unconfirmed minutes of the Committee meeting held on the 29 July 2025. • Unconfirmed minutes of the In-Committee meeting held on the 29 July 2025. • Personal Data Request Procedure • Asbestos Management Plan • CCTV Policy • Social Partnership Duty Annual Report 2024-2025 <p>The following items were NOTED under the consent agenda:</p> <ul style="list-style-type: none"> • Months 4, 5 and 6 Financial Monitoring Returns to Welsh Government. • More Than Just Words – Welsh Government Submission. • Joint Commissioning Committee Planning, Performance & Finance Sub Committee Highlight Report. • Committee Annual Cycle of Business 2025 • CTMUHB Revised Escalation Status. <p>Extra-ordinary Operational Delivery Committee meetings:</p> <p>The Committee supported the requirement to establish two additional extra-ordinary meetings in November and December to consider the following two items respectively:</p> <ul style="list-style-type: none"> • Invest to Save Bid – Funding Application for Decarbonisation Refit Measures • Prince Charles Hospital Ground and First Floor Business Case. <p>Closed In-Committee Session</p> <p>Due to business and commercial sensitivities the following items were considered in closed session:</p> <ul style="list-style-type: none"> • Organisational Risk Register – Business Sensitive Risks • Cyber Resilience & Assurance Update • Capital Delivery Monitoring Report – Commercial Sensitivities relating to Maesteg Health and Wellbeing Centre. |
| Appendices | <ul style="list-style-type: none"> • N/A |

4. Assessment

| Objectives / Strategy | |
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| Dolen i Nod (au) Strategol BIP CTM /Link to CTMUHB Strategic Goal(s) | Improving Care If more than one applies please list below: |
| Dolen i Feysydd Strategol BIP CTM / Link to CTMUHB Strategic Areas | Not Applicable If more than one applies please list below: |



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| Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant /Link to Wellbeing of Future Generations Act – Wellbeing Goals | A Healthier Wales | |
| | If more than one applies please list below: | |
| Dolen i Hwyluswyr Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (Ilyw.cymru)) / Link to Enablers of Quality (Duty of Quality Statutory Guidance (gov.wales)) | Whole-systems Perspective | |
| | If more than one applies please list below: | |
| Dolen i Feysydd Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (Ilyw.cymru)) / Link to Domains of Quality (Duty of Quality Statutory Guidance (gov.wales)) | Choose an item. | |
| | If more than one applies please list below: | |
| Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs) | Choose an item. | |
| | If more than one applies please list below: | |

| Impact Assessment | | |
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| Ansawdd Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality Have you undertaken a Quality Impact Assessment Screening? | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome: | If no, please include rationale below: Highlight report so n/a |
| Cydraddoldeb a'r Gymraeg Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb a'r Gymraeg? / Equality and Welsh Language Have you undertaken an Equality and Welsh Language Impact Assessment Screening? | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome for Equality (delete as appropriate): | If no, please include rationale below: Highlight Report so n/a |
| Cyfreithiol / Legal | There are no specific legal implications related to the activity outlined in this report. | |
| Enw da / Reputational | There is no direct impact on the reputation of the Health Board as a result of the activity outlined in this report. | |
| Effaith Adnoddau (Pobl /Ariannol) / Resource Impact (People / Financial) | There is no direct impact on resources as a result of the activity outlined in this report. | |

5. Recommendation

5.1 The Board is asked to **NOTE** the highlights outlined in section 3 of this report.