

MINUTES PUBLIC TRUST BOARD MEETING
VELINDRE UNIVERSITY NHS TRUST
24th July 2025 10:00-13:00

<p>PRESENT</p> <p>Prof. Donna Mead OBE Lindsay Foyster Gareth Jones Prof. Andrew Westwell Stephen Harries Vicky Morris Hilary Jones David Donegan Nicola Williams</p> <p>Lauren Fear Matthew Bunce Dr Jacinta Abraham Sarah Morley</p> <p>ATTENDEES</p> <p>Anne Carey Non Gwilym Carl Taylor Kyle Page</p>	<p>Chair Vice Chair Independent Member Independent Member Interim Independent Member Independent Member Independent Member Chief Executive Officer Executive Director of Nursing, Allied Health Professionals & Health Scientists Interim Director of Transformation Executive Director of Finance Executive Medical Director Executive Director of Organisational Development & Workforce</p> <p>Chief Operating Officer Interim Director of Corporate Governance Chief Digital Officer Business Support Manager (Secretariat)</p>
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1.0.0	PRELIMINARY MATTERS	LEAD
1.1.0	<p>Welcome and Apologies:</p> <p>The Chair welcomed attendees to the meeting, advising that this would be her final Trust Board. The following apologies were noted:</p> <ul style="list-style-type: none"> • Carl James, Executive Director of Strategy & Planning / Interim Deputy CEO 	
1.2.0	<p>In Attendance:</p> <p>The Chair extended a warm welcome to the following additional attendees:</p> <ul style="list-style-type: none"> • Katrina Febry, Audit Lead, Audit Wales (<i>remotely</i>) • David Cogan, Patient and Carer Representative • Peter Richardson, Head of Quality, Safety and Regulatory Compliance / Deputy Director, Welsh Blood Service (for item 4.2.0) • Llinos Madeley, Interim Head of Corporate Governance • Bethan Davis (HEIW) – Simultaneous Welsh Translation 	
1.3.0	<p>Declarations of Interest</p> <p>There were no declarations of interest noted in respect of today's agenda.</p>	
1.4.0	<p>Minutes of the Public Trust Board meeting held on 22nd May 2025 and Extraordinary Trust Board meeting held on 26th June 2025</p>	

	<p>The following amendments were noted:</p> <p>(22nd May minutes page 7) – Unfinished sentence referring to reliance on non-recurrent savings.</p> <p>(26th June minutes attendance) – Hilary Jones' attendance had not been included.</p> <p>Subject to the amendments noted above, the Trust Board was content that the minutes were otherwise accurate reflections of proceedings. It was, however, agreed that Trust Board minutes in general contain too much information. Further discussion regarding a consistent format across all Committees / Board is required.</p>	NG / Board
1.5.0	<p>Action Log</p> <p>The Board reviewed the action log and current status of actions as follows:</p> <ul style="list-style-type: none"> • Action 3 (23.05.2024) – Non Gwilym advised that draft Terms of Reference require further discussion and will be addressed at the September meeting of the Strategic Development Committee. • Action 19 (28.11.2024) – It was agreed that the request at the May meeting of the Trust Board had been actioned and subsequently sighted at the Quality, Safety and Performance Committee. The action was CLOSED. • Action 37 (27.03.2025) – This action was CLOSED. • Action 43 (27.03.2025) – This action was CLOSED. • Action 44 (22.05.2025) – Sarah Morley advised that a combined culture and inclusion paper would be brought to the September Board meeting. • Action 45 (22.05.2025) – While it was noted that a paper would be addressed under matters arising at today's meeting, that the risk requires reopening and rewording appropriately. • Action 46 (22.05.2025) – The action was CLOSED. 	NG SM AC
1.6.0	<p>Matters Arising Professor Donna Mead OBE, Chair</p>	
1.6.1	<p>Paperless Go Live Update Anne Carey, Chief Operating Officer</p> <p>The Paperless Go Live project would not be fully completed until the end of June 2026 and a collaborative effort across Wales would enable other Welsh organisations to use the same interfaces for Radiotherapy systems.</p> <p>Lindsay Foyster noted that a number of lessons learnt would have emerged and wanted to clarify how staff are supported through the transition and how learning would inform future projects. Anne Carey advised that lessons learned would be captured throughout the process and included in the final feedback.</p> <p>While the team was congratulated on this achievement, the Chair emphasised that while digital systems bring many benefits, new risks may also be introduced such as data breaches / loss, which must be managed alongside the elimination of paper-based risks.</p> <p>The Trust Board NOTED the update.</p>	
2.0.0	KEY REPORTS	
2.1.0	Chair's Report	

	<p>Professor Donna Mead OBE, Chair</p> <p>The Chair highlighted the following key items of the Chair's Report:</p> <ul style="list-style-type: none"> • Frequent attendance at a number of blood donor awards, recognising their value and the opportunity to thank donors on behalf of the Trust. • Velindre's strong presence at the Advanced Therapies Wales Symposium, also noting that the Trust had received JACIE accreditation for the stem collection unit. • Ongoing efforts to engage with the Llais organisation, noting a lack of attendance at Board meetings. • Concern regarding the shortage of Independent Members on the Board. • The new Chair, Sara Moseley, will commence on the 1st September and that interviews for Independent Members are expected to take place during August. <p>The Trust Board NOTED the content of the Chair's update Report.</p>	
<p>2.2.0</p>	<p>Chief Executive's Report</p> <p>David Donegan, Chief Executive Officer</p> <p>David Donegan highlighted the following key points of the Chief Executive Report:</p> <ul style="list-style-type: none"> • The annual report had received an unqualified opinion from Audit Wales for the first time in a number of years, marking a positive development. • Positive feedback following the JET meeting with Welsh Government, with the Trust maintaining its escalation level at the lowest (level 1), a status few organisations in Wales have sustained. • Confirmation that the Trust's Integrated Medium Term Plan (IMTP) had been approved for the next three years. • Velindre @ Nevill Hall had received its first patients and will be officially launched later in the year. • The Trust had met all its statutory duties. <p>The Trust Board NOTED the content of the CEO's report and additional update.</p>	
<p>3.0.0</p>	<p>QUALITY, SAFETY & PERFORMANCE</p>	
<p>3.1.0</p>	<p>Performance Management Framework (PMF) (May 2025)</p> <p>Lauren Fear, Director of Transformation (interim), Anne Carey, Chief Operating Officer, Sarah Morley, Director of Organisational Development & Workforce, Carl Taylor, Chief Digital Officer and Matthew Bunce, Executive Director of Finance</p> <p>The Performance Management Framework (PMF) highlighted key issues for the attention of the Trust Board for the month of May 2025.</p> <p>Vicky Morris noted that the Quality, Safety and Performance Committee was unable to scrutinise the PMF as desired due to time constraints.</p> <p>Vicky also queried the planned Linac capacity (78 hours), seeking clarification on whether the comment regarding no increase in activity due to paperless implementation was retrospective or forward-looking. Anne Carey confirmed that the total Linac capacity figure included quality assurance time, advising that more appropriate presentation in an infographic would follow. Benchmarking data from other providers had been requested and comparative reports on Radiotherapy</p>	

	<p>performance across Wales would be shared with the Board. Anne Carey agreed to amend the Linac capacity narrative in the paper post-meeting.</p> <p>Workforce Key Performance Indicators (KPIs)</p> <ul style="list-style-type: none"> • Targets on sickness, PADR (appraisals) and statutory / mandatory training had flatlined, with only the training target being met. • Sickness stood at 5.06% as at 23rd July with local work underway to address known issues. • Wellbeing remains a main focus with a wellbeing review being presented at August's Executive Management Board. • The PADR target is national, therefore allowing for benchmarking with other organisations. The Trust has yet to see improvements in PADR levels, the 85% target may not be reached. The Board emphasised the importance of monitoring progress, understanding differences between high and low performing teams and drilling down into team-level data. The potential for a digital library of consistent, accessible reference material was suggested, or the inclusion of links to such data in Board papers. <p>Digital Key Performance Indicators (KPIs)</p> <ul style="list-style-type: none"> • A reduction in significant incidents related to Digital Services was reported, with approximately a 50/50 split between national and local incidents. • Statutory / mandatory training for Digital remains above target, as does service desk performance. • The Digital infrastructure for the new Velindre @ Nevill Hall has reduced the risk for the nVCC, as the same technologies and partners are being used. • Focus is now on the migration from Windows 10 to Windows 11 across the Trust. <p>Estates</p> <ul style="list-style-type: none"> • As of July, all statutory Health & Safety training standards had been met Trust-wide, which had not been the case for a number of years. <p>Stephen Harries queried whether staff would be equipped to deal with a terrorist attack outside of Fire Safety training capability. Lauren Fear advised that a Standard Operating Procedure (SOP) for terrorist attacks is currently being worked through and that the outcome of this work and any amendments to Trust policies would be reported to Board. WBS had introduced its first (simulation) lockdown exercise this year, which had resulted in significant learning.</p> <p>Gareth Jones requested an update on the two SABRE (Serious Adverse Blood Reactions and Events) incidents, actions taken to address the two issues and the status of any investigations. Peter Richardson advised that the Red Cell Immunohematology (RCI) is an area working under pressure, however, investigations into both incidents had been completed, immediate corrective actions had been implemented and the regulator had closed down the cases. A joint programme with the provider is underway to improve processes and provide longer term resilience.</p> <p>The Trust Board NOTED the Performance Management Framework for assurance and individual assurance levels as stated in the report were agreed by the Board.</p>	AC
<p>3.2.0</p>	<p>Financial Report (May 2025) Matthew Bunce, Executive Director of Finance The Finance report outlined the position and performance for the period to end of May 2025, covering Long Term Agreement Financial Values and Contract Rebase,</p>	

	<p>Integrated Medium Term Plan financial plan and forecast and KPIs (Key Performance Indicators). Matthew Bunce highlighted the following:</p> <ul style="list-style-type: none"> • Two national cost pressures had arisen - (1) Reduced funding for employers' National Insurance contributions (resulting in a £345k shortfall) and (2) increased costs from the Welsh Risk Pool (WRP) due to a rise in claims (adding a further £365k pressure); whilst these will be managed in-year through emergency and non-recurrent reserves, this will impact next year's budget. It was important to note that these cost pressures are in no way related to Trust performance. • All savings schemes are now green (fully implemented). • Challenges of outdated Long Term Agreements continue, and resolution requires Welsh Government leadership and collective agreement across Wales, as organisations cannot solve this individually. <p>It was accepted that the ongoing impact of these pressures is largely recurrent.</p> <p>Nicola Williams added that the introduction of the Duty of Candour had resulted in greater recognition of harm incidents, which are now processed through Duty of Candour arrangements, before proceeding to redress or claims. This may continue to grow, however an upcoming regulatory change could potentially allow more cases to be managed locally under Putting Things Right, should the compensation threshold be raised.</p> <p>The Trust Board NOTED the content of the May 2025 financial report, in particular:</p> <ul style="list-style-type: none"> • The year to date and forecast revenue out turn position and PSPP performance. • The agreed position on LTA income for 2025-56 from our Commissioners. • The position with Commissioners on the contract rebase agreement. • The latest position on the Trust savings schemes. 	
<p>3.3.0</p>	<p>VUNHST Risk Register Led by Non Gwilym, Director of Corporate Governance (interim)</p> <p>Non Gwilym provided an overview of the current Trust Risk Register, focusing on risks scoring 12 and above for Quality / Safety and 15 and above for all other domains, noting regular review of the Register at the Quality, Safety and Performance Committee and the inclusion of relevant dates by which risks will be reduced.</p> <p>It was recognised that work is ongoing to review static risks; it was agreed to consider prioritising the highest scoring risks and those with the largest discrepancy between current and target scores.</p> <p>Non Gwilym also advised that discussions are ongoing with colleagues at other health boards regarding Risk Register systems. A further update would be provided to the September Board.</p> <p>While it was noted that the TrAMs risk continues to reduce following agreement to maintain an aseptic Pharmacy unit at the nVCC, Andrew Westwell expressed concern around closing this completely. Anne Carey advised that the new TrAMs plan would result in new risks for the Register.</p>	

	<p>The Trust Board NOTED the risks in the Quality & Safety domain with a score of 12 and risks in other domains with a score of 15 and above, also NOTING the assurance level of 3.</p>	
3.4.0	<p>Trust Assurance Framework (TAF) Led by Non Gwilym, Director of Corporate Governance (interim)</p> <p>The report provided Board members with the latest updates to the Trust Assurance Framework. Non Gwilym advised the following:</p> <ul style="list-style-type: none"> • The Trust Assurance Framework continues to be updated to better reflect strategic objectives and risks, acknowledging feedback that more explicit links to strategic objectives are required. Vicky Morris added that it is essential for the Board to be sighted on the strategic objectives beneath the goals. • A proposed change of nomenclature from TAF (Trust Assurance Framework) to BAF (Board Assurance Framework), adopting this terminology to align with other NHS organisations. • Further development is anticipated prior to the September meetings of the Quality, Safety and Performance Committee and Trust Board. <p>Lindsay Foyster sought clarity on the purpose of the document, noting that it is important to focus on highlighting gaps in controls and assurance related to strategic objectives.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • NOTED the current status of the Trust Assurance Framework. • NOTED the plan to move forward with the Trust Assurance Framework. • APPROVED the proposal to rename the Trust Assurance Framework (TAF) to Board Assurance Framework (BAF), to align the Trust with all other NHS Wales organisations. • NOTED the Assurance level rating of 2. 	
4.0.0	ANNUAL REPORTS 2024 - 2025	
4.1.0	<p>Social Partnership Duty Annual Report Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>Sarah Morley noted that it had been agreed to remove the level of assurance (included in error) from the report as this is the first instance of the report and there is therefore currently no comparator.</p> <p>The Trust Board APPROVED the report prior to providing to Welsh Government.</p>	
4.2.0	<p>Gender Pay Gap Annual Report Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>No comments were received and the Trust Board APPROVED the report.</p>	
4.3.0	<p>Equality, Diversity & Inclusion Annual Report Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>No comments were received and the Trust Board APPROVED the report.</p>	

<p>4.4.0</p>	<p>Welsh Language Annual Report Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>Hilary Jones raised concerns that the Trust was not meeting the terms of the Welsh Language Act, in relation to the publishing of Board papers in Welsh prior to the meeting. Hilary stated that this is a fundamental issue and that therefore, the level of assurance for the report should be reduced from 4 to 3 due to this non-compliance. It was recognised that achieving full compliance would require significant investment in resources and that the Trust is currently not in a position to do so. It was agreed that translating the agenda into Welsh as a minimum would be a first step toward compliance.</p> <p>David Donegan noted an action to explore realistic options regarding what could be achieved.</p> <p>The Trust Board APPROVED the report, subject to the modification of the level of assurance.</p>	<p>SM</p>
<p>4.5.0</p>	<p>Quality & Safety Annual Report Nicola Williams, Executive Director of Nursing, Allied Health Professionals & Health Scientists</p> <p>Nicola Williams highlighted that the Quality and Safety Annual Report showed a reduction in the 30-day response target for complaints, due to a small number of complex concerns involving multiple organisations and some team absenteeism. The Trust had met the national target, had very few concerns overall, and had not had a Public Services Ombudsman referral since December 2023.</p> <p>The Trust Board APPROVED the report, prior to publication.</p>	
<p>4.6.0</p>	<p>Wellbeing of Future Generations Act (2015) Annual Report Lauren Fear, Director of Transformation (Interim)</p> <p>No comments were received and the Trust Board APPROVED the report.</p>	
<p>4.7.0</p>	<p>Duty of Quality Annual Report Nicola Williams, Executive Director of Nursing, Allied Health Professionals and Health Scientists</p> <p>Nicola Williams re-iterated that the report is a legal requirement. It was noted that the report contained content from all but one of the Trust's hosted bodies (the exception being Shared Services which had produced a separate report, and which had been included as an appendix.</p> <p>The Trust Board APPROVED the report, prior to publication on the Trust's website.</p>	
<p>4.8.0</p>	<p>Professional Registration / Revalidation Annual Report Nicola Williams, Executive Director of Nursing, Allied Health Professionals and Health Scientists</p> <p>Nicola Williams advised that the assurance level of 3 noted in the report had been due to a lapse in registration during the period; it was also noted that while the individual did not work whilst unregistered, this had been a repeat incident.</p>	

	<p>Jacinta Abraham highlighted that medical appraisal compliance is exemplary in Wales at 97.5%, with completion of all required appraisals, and quality of appraisals recognised as very good. Jacinta indicated that she would be attending a quality assurance session with HEIW on revalidation.</p> <p>The Trust Board NOTED the 2024/2025 Professional Regulation / Revalidation Annual Report in respect of professional registration / revalidation compliance across professional groups employed within the core Velindre University NHS Trust whilst governance in respect of hosted services is being worked through.</p>	
4.9.0	<p>Annual Report on Compliance with the Nurse Staffing Levels (Wales) Act 2016</p> <p>Nicola Williams, Executive Director of Nursing, Allied Health Professionals and Health Scientists</p> <p>Nicola Williams confirmed full compliance with the Act, noting no reportable incidents due to staffing levels in the relevant ward area.</p> <p>Lindsay Foyster asked that photographs contained in annual reports to be more representative of staff and population groups.</p> <p>Gareth Jones questioned the staff cost of producing annual reports, highlighting the time required to produce them and importance of making the process as automated as possible to mitigate this. Nicola Williams advised that a move towards more data-driven, automated reporting would be explored over the year, containing less narrative and more succinct information, enabling more efficient production.</p> <p>The Trust Board APPROVED the report, prior to onward submission to Welsh Government.</p>	
5.0.0	COMMITTEE ANNUAL REPORTS	
5.1.0	<p>Audit Committee Annual Report</p> <p>Gareth Jones, Independent Member and Chair of Audit Committee</p> <p>No comments were received and the Trust Board APPROVED the report.</p>	
6.0.0	STRATEGY AND PLANNING	
6.1.0	<p>Strategic Planning Update</p> <p>Led by Lauren Fear, Director of Transformation (Interim)</p> <p>The Trust Board NOTED that the next update would follow at the September meeting of the Trust Board and that the key points had been addressed under item 2.2.0 (CEO report).</p>	
7.0.0	CONSENT ITEMS FOR APPROVAL	
7.1.0	<p>Amendments to Standing Orders – Schedule 3 Annual Review Committee Terms of Reference</p> <p>Non Gwilym, Director of Corporate Governance (interim)</p> <p>The Trust Board APPROVED the revisions to the Terms of Reference and Operating Arrangements in respect of the following Committees / Sub Committees / Advisory Groups:</p>	

	<ul style="list-style-type: none"> Transforming Cancer Services (TCS) Programme Scrutiny Sub-Committee (Appendices 1 and 2). Local Partnership Forum (LPF) (Appendices 3 and 4) 	
7.2.0	<p>Chair's Urgent Actions Report Led by Non Gwilym, Director of Corporate Governance (Interim)</p> <p>There was one (1) urgent item of business for the Trust Board that was considered via Chair's Urgent Action during this period:</p> <ul style="list-style-type: none"> E-Rostering Contract Renewal <p>No objections to approval were received in respect of the items of business considered and the Trust Board RATIFIED the Chair's Urgent Action taken between the 14/05/2025 – 17/07/2025.</p>	
7.3.0	<p>People and OD Policies for Approval Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>The Trust Board APPROVED the following policies:</p> <ul style="list-style-type: none"> Family Friendly Policy Maternity Leave Procedure Maternity Leave Application Form Pregnancy and Maternity Support Guidance 	
8.0.0	CONSENT FOR NOTING	
8.1.0	<p>Public Strategic Development Committee Highlight Report (01/05/2025) Led by Lindsay Foyster, Vice Chair and Chair of the Strategic Development Committee</p> <p>The Trust Board NOTED the content of the report.</p>	
8.2.0	<p>Public nVCC Project Scrutiny Sub-Committee Highlight Reports (20/03/3035, 06/05/2025 & 10/06/2025) Led by Hilary Jones, Independent Member and Chair of the TCS Scrutiny Sub-Committee</p> <p>The Trust Board NOTED the content of the reports.</p>	
8.3.0	<p>Public Audit Committee Highlight Reports (13/05/2025 & 24/06/2025) Led by Gareth Jones, Independent Member and Chair of the Audit Committee</p> <p>The Trust Board NOTED the content of the report.</p>	
8.4.0	<p>Public Quality, Safety & Performance Committee Highlight Report (17/07/2025) Led by Vicky Morris, Independent Member and Chair of the Quality, Safety & Performance Committee</p> <p>The Trust Board NOTED the content of the report.</p>	
8.5.0	<p>Public Charitable Funds Committee Highlight Report (03/06/2025) Led by Donna Mead, Chair and Chair of the Charitable Funds Committee</p>	

	The Trust Board NOTED the content of the report.	
8.6.0	<p>Local Partnership Highlight Report (15/07/2025) Led by Sarah Morley, Executive Director of Organisational Development & Workforce</p> <p>The Trust Board NOTED the content of the report.</p>	
9.0.0	ADDITIONAL	
9.1.0	<p>Statement by the Chair, Professor Donna Mead OBE (oral item)</p> <p>The Chair read a previously prepared legacy statement to members of the Board as a final farewell, summarising key achievements during her tenure at the Trust. Board members were advised that the statement would be appended to the meeting minutes.</p> <p>Thanks and congratulations to the Chair followed from colleagues as noted below:</p> <p>David Donegan – on behalf of staff past and present, for the Chair's compassion and empathy as a nurse, passion and ambition as an academic and as a wife, mother, colleague and friend, continuing to play a role in connecting staff with what the Trust's services mean to patients and carers.</p> <p>Jacinta Abraham – on behalf of medical colleagues, for the personal support received in her role as Medical Director, and for promoting leaders, Consultant appointments and engagement events. For her insight and intuition during the COVID Pandemic, elevating the clinical voice and supporting Research & Development within the organisation.</p> <p>Nicola Williams – on behalf of nursing colleagues, for putting patients and donors at the heart of the services provided by the Trust. For raising the profile of nurses and Allied Health Professionals, implementing support mechanisms for Research and for the Chair's support with navigating the relationship with University of Wales Trinity St David to facilitate the provision of accredited courses at the new Velindre Oncology Academy.</p> <p>Matthew Bunce – on behalf of the Trust's Charity, for the Chair's leadership and commitment to ensuring that money earned by Fundraisers is scrutinised and invested to provide the best outcomes and for encouraging continued engagement with the Charity.</p> <p>Lindsay Foyster – on behalf of Independent Members, past and present, for the Chair's dedicated leadership and commitment to patients, donors and fundraisers. For shared experiences, focused and honest discussions, passion and humanity.</p> <p>Stephen Harries – on behalf of colleagues past and present, for the Chair's years of dedicated service and leadership during the challenges faced during her tenure. It was recognised that the Chair's legacy will bring real and lasting improvement to the services provided by the Trust.</p>	
9.2.0	<p>ANY OTHER BUSINESS Professor Donna Mead OBE, Chair No prior notice of any other business had been received.</p>	
9.3.0	DATE OF NEXT MEETING	

	The next public meeting will take place on Thursday, 25 th September 2025.	
9.0.0	CLOSE	
10.0.0	<p>It was noted that the following items would be addressed at the Private / Part B Session of the Trust Board:</p> <ul style="list-style-type: none"> • Previous Private Trust Board minutes and actions • VCS Restructure • Whitchurch Land – next steps • BECS update • TrAMs update • IP5 Roof Overcladding Business Case • 4-5 Charnwood Lease • National Influenza Immunisation Programme – Operational Arrangements • Regional Planning Update • Private Trust Risk Register • Chair's Urgent Actions • Business Continuity and Emergency Preparedness Annual Report • Private Committee Highlight Reports • Shared Services Committee Report • Shared Services Partnership Audit Committee Highlight Report • Joint Commissioning Committee Highlight Report • South East Wales Pre-Registration Training 	