DHCW SHA Board Meeting – Unconfirmed Public Minutes

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 31 July 2025 as a virtual meeting broadcast live via Zoom.

10:00 – 14:40 | 31 July 2025 | ZOOM

Members Present	Initial	Title	Organisation
Ruth Glazzard	RG	Vice Chair of the Board	DHCW
Ifan Evans	IE	Executive Director of Strategy	DHCW
Andrew Fletcher	AF	Associate Board Member – Trade Union	DHCW
Rowan Gardner	RG	Independent Member	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Alistair Klaas Neill	AKN	Independent Member	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer | Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Director of Corporate Affairs | Board Secretary	DHCW
Samantha Morgan	SM	Director Of People & Organisational Development	DHCW

Observing	Title	Organisation

Ella James	Communications Officer	DHCW
Anwen Williams	Communications Officer	DHCW
Nerys Hurford	Translator	Translation Services
Julie Robinson	Corporate Governance Coordinator (Secretariat)	DHCW
Laura Tolley	Head of Corporate Governance | Deputy Board Secretary	DHCW

Apologies	Title	Organisation
Simon Jones	Chair	DHCW

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	FBC	Full Business Case
IM	Independent Member	IMTP	Integrated Medium-Term Plan
WG	Welsh Government	DG&S	Digital Governance & Safety Committee
A&A	Audit & Assurance Committee	PDC	Programmes Delivery Committee
NDR	National Data Resource	POD	People & Organisational Development
INPS	In Practice Systems	WICIS	Welsh Intensive Care Information System
NTA	National Target Architecture	GP	General Practitioner
RISP	Radiology Informatics System Programme	LIMS	Laboratory Information Management System
MI	Major Incident	Q1, Q2…	Quarter 1, Quarter 2….
BOF	Building Our Future	CAVUHB	Cardiff & Vale University Health Board
SLAs	Service Level Agreements	EHR	Electronic Health Record
DDaT	Digital, Data and Technology	OKRs	Objectives and Key Results
KPIs	Key Performance Indicators	EPS	Electronic Prescription Service
UHB	University Health Board	AI	Artificial Intelligence

GDaD	Government, Digital and Data	RATS	Remuneration & Terms of Service Committee
LPF	Local Partnership Forum	WPOCT	Welsh Point of Care Testing
MoU	Memorandum of Understanding	WIS	Welsh Immunisation System
RADIS	Wales Radiology Information System		

Item No	Item Detail	Outcome	Action
PART 1 – PRELIMINARY MATTERS			
1.1	**Welcome and Apologies** Ruth Glazzard, Vice Chair informed Members that due to the absence of the Chair, Simon Jones, she would be deputising as Chair for today, and welcomed everyone bilingually to the DHCW SHA Board meeting and confirmed the meeting was being broadcast live via Zoom. In addition, the recording would be available via the DHCW website for any persons unable to access the meeting live. The Chair provided some housekeeping notices regarding the technical aspects of live streaming the meeting, the planned breaks, and the use of the consent agenda for items 2.1 to 2.7.	Noted	None to note
1.2	**Apologies for Absence** Apologies were noted for: • Simon Jones, Chair DHCW	N/A	None to note
1.3	**Declarations of Interest** There were no declarations of interest.	N/A	None to note
PART 2 – CONSENT AGENDA			
2.1	**Unconfirmed Minutes of 29 May 2025 Board Meeting** i. Matters Arising The Board meeting can be watched in full below or by following the link in the title.	Approved	None to note

	 The Board resolved to: **APPROVE** the minutes of 29 May 2025 Board Meeting.		
2.2	Action Log (0) There were no public actions on the log. The Board resolved to: **NOTE** the Action Log.	Noted	None to note
2.3	Forward Workplan The Board resolved to: **NOTE** the Forward Plan.	Noted	None to note
2.4	Annual Quality Report The Board resolved to: **APPROVE** the Annual Quality Report.	Approved	None to note
2.5	DHCW Emergency Planning, Resilience & Response Annual Report 2024/25 The Board resolved to: **NOTE** the DHCW Emergency Planning, Resilience & Response Annual Report 2024/25	Noted	None to note
2.6	Senior Information Risk Owner Annual Report The Board resolved to: **APPROVE** the Senior Information Risk Owner Annual Report	Approved	None to note
2.7	DHCW Equality Report The Board resolved to: **APPROVE** the DHCW Equality Report	Approved	None to note
MAIN AGENDA			

FOR DISCUSSION			
3.1	**Shared Listening and Learning Presentation** • **Data Centre Learning Incident** Rhidian Hurle, Executive Medical Director (RH) was accompanied by Sam Lloyd, Executive Director of Operations (SL), who presented a set of slides. RH highlighted the importance of robust, resilient and always available systems, especially as dependency on digital clinical care increases. The incident on 11th June involved a major failure in the Data Centre 1. SL provided a presentation of the incident and DHCW's response and the key lessons learned were outlined as follows: • Resilience measures – all clinical critical services are replicated between the two data centres. Services can fail over between the two with little downtime. • Both cooling systems failed, causing a spike in temperature and subsequent service interruptions. • The response included liaising with the data centre provider, powering off services and failing over to the secondary facility. • By 10pm, all critical services were recovered with some non-critical services still impacted. • The focus then shifted to restoring resilience and cooling the affected data centre. • Regular briefings were issued to stakeholders and by 13th June, full resilience was restored. • Lessons learned – established a standing Major incident management team, improved decision making through the use of 'playbooks', further reduced time to failover services with improved scripting and automation, enhance on call coordination, improve monitoring for faster diagnosis and impact assessment. • Next steps – conclude full major incident review and lessons learned report. Continue to work with DCP to improve the resilience of cooling systems at DCI. The Board expressed appreciation for the transparency shown in testing the incident and successfully restoring critical infrastructure. Additionally, the importance of understanding the real-world impact of incidents and translating technical impacts into practical terms was highlighted. **The Board resolved to:** **RECEIVED** and **DISCUSSED** the Shared Listening and Learning Presentation on the Data Centre Learning Incident	Received & Discussed	None to note
PART 4 – FOR REVIEW			
4.1	**Chair and Vice Chair Report**	Received &	None to note

	In the absence of the Chair, the Vice Chair outlined the following highlights from within the report. • Associate Board Member Trade Union Update Following a formal process to seek nominations for an Associate Board Member – Trade Union, Paul Evans, Head of Quality & Regulatory and UNITE rep had been appointed as the DHCW Associate Board Member – Trade Union for the term 31 July 2025 – 31 July 2029. The VIce Chair welcomed Paul as part of the DHCW Board and paid tribute to the outgoing Associate Board Member – Trade Union, Andrew Fletcher who had held this position for the last four years. • Tour of Data Centre, 12 June 2025 Members of the Board attended a learning session and data centre tour facilitated by the DHCW Infrastructure Team to discuss the future role of the Cloud. The Board were able to hold and see the inner workings of servers, including fibre cables, network switches and load balancers. Good to see in reality of what a data centre looks like in that stores the info. **VICE CHAIR ITEMS** • Vice Chair Peer Group Meeting • Welsh Public Bodies Chairs meeting • Tour of DHCW Data Centre • All Wales Independent Members Digital Network In addition, the Vice Chair noted that the SHA Board meeting scheduled in September 2025 would be Simon Jones, Chair, last as his tenure as DHCW Chair ends on 30.09.2025. The Board resolved to: RECEIVE the contents of the Chair and Vice Chair report.	Discussed.	
4.2	Chief Executive's Report Helen Thomas, Chief Executive Officer (HT), presented the Chief Executive's report and the following highlights were provided: • There had been one Staff Briefing since the last Board meeting, the CEO was joined by Sam Morgan, Director of People & Organisational Development, and key themes and feedback from face-to-face engagement sessions were shared with staff. The engagement sessions were insightful, and the findings will be used to identify and take forward key actions. • DHCW Stakeholder Advisory Group Meeting – a review was undertaken last year, and this is one action that came out of it. HT chaired the meeting where there was good attendance and engagement from senior colleagues across Wales. The joint actions from the meeting were underway. • Joint Executive Team Meeting – a good discussion was had with a look back on 24/25 and look forward. Additionally, the progress being made on escalation was	Received & Discussed	None to note

	discussed. • NHS Wales Oversight and Escalation Arrangements. DHCW were notified that the escalation status remains as it was i.e. at Level 3 – Enhanced Monitoring for Major Programmes within the performance domain. • Staff Conference – 25 June 2025 – this was the highlight of year and good to see a large number of staff of the organisation attending via a hybrid arrangement. • DHCW Staff Recognition Awards – 26 June 2025 – a celebration of the achievements of staff. A further discussion on the Digital Blueprint expanded on the work that had been done over the last six months, involving Chief Executives and Executive Teams from across Wales. These discussions had identified four key themes; the future of hospitals, primary and community care, the workforce and digital. It was noted that digital was front and centre of these discussions, emphasising the importance of the future blueprint of the NHS. **The Board resolved to:** **RECEIVE** the contents of the Chief Executive's report.		
PART 5 – STRATEGIC ITEMS			
5.1	**Primary, Community & Mental Health Update** Sam Hall, Director of Primary, Community & Mental Health presented the report which covered the various initiatives and projects being undertaken by the Directorate and highlighted the following key points. • **GP Systems Migrations and contractual updates** – all contractual documents for the GP supplier transition had been submitted and with the legal team awaiting the completion. 84 GP migrations had been completed, with 109 remaining. Positive feedback had been received from practices. Health Boards had been engaged in planning to increase the migration cadence from 2 to 4 per week. The ability to increase the cadence was currently unfunded and efforts were being made to secure funding from Welsh Government. • **Dental Access Portal** – this had been implemented by all Health Boards with over 77,000 patients registered and 22,000 appointment offers made as of 29 July. There are ongoing dental reforms that may impact on the portal's structure and work was being done to understand and adapt to these changes. • **Electronic Prescription Service (EPS)** The EPS had been implemented in 25% of GP practices and 66% of community pharmacies across Wales, with over 4m items dispensed since November 2023. • **Prison Healthcare System** The prison healthcare system was currently using System One and this needed to be	Noted	None to note

	reprocured. The system was essential for managing medicines and inmate transfers between facilities. The contract will end in March 2026, and work was ongoing to feed into new contract requirements. • **Choose Pharmacy System** the Choose Pharmacy system was being redesigned and modernized with a focus on user research and incremental improvements. A prototype had been developed and a roadmap for continuous improvement in place until 2028. Efforts were being made to move away from Citrix and improve the platform's efficiency by September 2026. • **Welsh Immunisation System (WIS)** the system had released new features and met every target on the roadmap. A move to the cloud was scheduled for September to improve development agility and reduce costs. • **Mental Health and Well-being Strategy** there was collaboration with the strategic programme for mental health to design a digital and data plan which aligned with the Welsh Government strategy. The new Mental Health Bill was due to come into force in 2027 which provides opportunities for digital support (providing patients with a stronger voice). • **Connecting Care,** the business case for was submitted and funding for Qtr. 1 had been confirmed. Discussions were ongoing to secure further funding from Welsh Government. • **User Centre Design (UCD)** a team for UCD was established in March 2025 and was focusing on service design and user research. **The Board resolved to:** **NOTE** the Primary, Community & Mental Health Update		
5.2	**Strategy Assurance Group Report** Ifan Evans, Executive Director of Strategy (IE) presented the Strategy Assurance Group Report and highlighted the following key points: • This was the second report from the Strategy Assurance Group which had made good progress with reports providing greater assurance to Board on the status. Additionally, they promote more openness and transparency regarding the programmes being undertaken. • The group examined the organisation's strategies and established a consistent pattern of work. • There was an ongoing effort to streamline the numerous strategies by combining them. This did not mean a reduction in strategic focus but rather an effort to make the strategies more manageable.	Noted	None to note

	• The paper included an update on quality, management documents and the complex work being done in the National Data Repository (NDR). • The group was looking forward to the work planned for the next six months, which included development and performance measures. A discussion took place on the importance of integrating certain strategies into the performance strategy or another relevant strategy, rather than creating additional documents. IE confirmed that he and the Executive Director of Finance were working on a framework for benefits management which was linked to finance and the Portfolio Management office (PMO). He emphasised that benefits management should be an embedded part of the PMO and suggested that the concept of benefits, closely linked to value, would be included in both the Performance and the Commercial and Social Value Strategy. The Board resolved to: NOTE the Strategy Assurance Group report		
5.3	NHS Staff Survey Results Samantha Morgan, Director of People and Organisational Development (SM) presented the results to the 2024 NHS Staff Survey Results. The report centred on outlining the organisational response, seeking support for continued leadership focus on workforce engagement, leadership development and cultural alignment as key enablers of DHCW's People Strategy and wider strategic ambition. The survey had the second highest response rate across the NHS in Wales, which was seen as a positive indication of staff engagement. However, overall engagement fell slightly from 80% to 76%, which was a trend observed in 10 of the 14 NHS Wales organisations. The report emphasised the importance of acting on the survey results and demonstrating to colleagues that their feedback was being used to improve the organisation. Staff sessions across various sites in Wales were well received, with employees appreciating the opportunity to provide open and honest feedback. The survey results reinforced the feedback received during these sessions. The key strengths identified in the survey included flexible working, compassionate leadership, collaboration and progress in patient safety. There were also positive shifts in engagement levels among underrepresented groups, indicating the impact of work around equality, diversity and inclusion. Challenges remain, particularly around burnout and the need for stronger leadership, visibility and development opportunities. The report outlined the organisation's response to the survey results, including transparent sharing of results, focus group sessions and support for line managers to develop local action plans. The aim is to create ownership of culture and engagement at a local level while continuing to implement interventions at a	Received for Assurance	None to note

	national level. Discussions centred on the issue of staff burnout and the measures taken to address it. There was significant effort being put into supporting staff, including protecting lunch breaks and ensuring regular breaks, with senior managers role modelling this behaviour. **The Board resolved to:** **RECEIVE** the NHS Staff Survey Results for **ASSURANCE**.		
5.4	**People and Culture Report** SM presented the People and Culture Report. The report demonstrated how the new People & OD Operating Model and Big 5 People Priorities aligned with the strategic plan and supports the ambition to put 'People First'. SM provided the key highlights from the report: • Included the work being done around the digital and data profession, with efforts to develop the digital profession on an All-Wales basis. This involved mapping job descriptions to the government framework to ensure consistency and support career planning. The directorate was also focusing on strengthening leadership development, aligning with HIW's competency framework and investing significantly in leadership development to create a positive culture within DHCW. • The feedback from the Staff Survey and sessions run by the Chief Executive Officer and Director of People and OD were being used to create a culture roadmap to further strengthen the culture across DHCW. • The importance of strategic workforce planning and supporting the organization through change was also emphasised with a focus on helping people manage and adapt to change effectively. SM was commended on the approach taken and the importance of the report in providing clarity and oversight for the Board to better understand the organisation and its impact on people. **The Board resolved to:** **NOTE** the People and Culture Report	Received & Discussed	None to note
5.5	**National Target Architecture** The National Target Architecture update was presented by IE. • The work had been commissioned by DHCW on behalf of NHS Wales with the aim to plan architecture across Wales effectively. • The primary focus of the target architecture work was on technology, providing an overview of all systems across NHS Wales and mapping them into a single repository called Ardoq. This ensures uniformity in the use of categories and would involve co-piloting with all Trusts	Noted	None to note

	and Health Boards. • Progress had been made with a Project Board that was functioning effectively, having met twice with representation from Health Boards. • The main stakeholders were being updated through the Digital Directors Leadership Group. • Suppliers - Channel 3 - were working effectively with the project moving quickly from the beginning of June and expected to conclude by the end of September. • The scale of work involves mapping 600 systems into Ardoq, with a priority for ministers to provide an assessment of the status of the work and steps to move forward within the next eight weeks. • Two risks were identified: the scarcity of architectural resources across NHS Wales and the need for a new Standards and Architecture Board to be established by Welsh Government. The status showed that three out of 13 organisations had been mapped. The timeline for the remaining organisations was tight but achievable. IE confirmed that he was confident that the number of organisations mapped would reach 10 by mid-September and everyone was committed to doing all they could over the next eight weeks with all understanding the urgency and the ministerial priority. **The Board resolved to:** **NOTE** the National Target Architecture		
PART 6 - GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE			
6.1	**Finance Report** Claire Osmundsen-Little, Executive Director of Finance (CO-L), presented a set of slides highlighting DHCW's financial position. • The achievement of all financial targets for the year is forecasted, despite a revenue position of £180,000 below target due to cost implications from GP migrations. • Savings target for the year is £4.2 million, with £3.4 million being recurrent. • Confirmation of National Digital Funding in July was a revenue allocation of £25.1 m and a capital allocation of £9m. • The build-up of cash balances driven by expected contract payments in July. • Key financial risks include the need for confirmation of funding for connecting care, GP migrations, eye care, and LIMs reprofiling, as well as managing digital inflation cost pressures. David Selway, Independent Member (DS) raised concerns about the GP funding and LIMs reprofiling, questioning the confidence	Received & Discussed	None to note

	level that the funding will be secured from the Welsh Government. CO-L responded by explaining the detailed exercise undertaken to offset the funding gap with their own resources, including council gains, VAT, and adjustments to the GP rollout pace, with several options shared with Welsh Government for consideration. CO-L expressed reasonable confidence in securing the funding, acknowledging the challenging financial backdrop but highlighting the collective effort to progress the GP acceleration. In relation to the about the LIMs funding. CO-L explained that there are two parts: a revenue ask of around £545,000 and a potential capital ask of £1 million. Discussions with Welsh Government were ongoing, with the capital ask being more likely to be supported, while the revenue ask remains challenging. It was emphasised the need to confirm planning assumptions with Welsh Government and work together with health boards to recover the required amount if the funding is not fully secured. The Board resolved to: RECEIVE the Finance Report.		
6.2	Corporate Risk Register & Board Assurance Framework Report CD presented the Corporate Risk Register report advising that DHCW's Corporate Risk Register currently had 21 risks on the register, 18 of which were detailed within the report and three private risks which were considered at every Digital Governance and Safety Committee. CD highlighted the following key points:- New risks changes: DHCW0349 RADIS the risk related to the scaling back of the RADIS team during 2025/26. The risk score had increased due to a higher likelihood of occurrence over the past month. The consequences of the risk are managed by the Executive Director of Operations, while the cause is attributed to delays in the programme. DHCW0298 Delay in implementation of WLIMS 2.0 (re-escalated) The risk involves delays in the implementation of the WLIMs programme and its implications for DHCW. The compressed timetable for the programme, which is shorter than initially planned, had put significant pressure on the teams involved. The risk is being closely monitored and reviewed by various committees, leadership boards and Welsh Government. DHCW0350 Increased Cadence of GP Migrations The risk pertains to the increased frequency of GP migrations, which poses both risks and opportunities. The financial implications and the need for additional funding to support these transitions are significant concerns. The risk is compounded by the lack of initial funding for the base amount of transitions. Risks with change in score: DHCW0300 – CANISC – the risk is associated with the Colposcopy Programme, which went live in July. The aim is to decommission	Received & Discussed	None to note

	the legacy system while ensuring the stability of the data recorded in the system. The integration challenges and the lessons learned from this process were also highlighted. **DHCW0207 – Document Management System** – this risk was escalated at the last meeting. The mitigation efforts were on track, and it was expected that the risk will be removed from the register by the next Board meeting. **The Board resolved to:** **RECEIVE** the Corporate Risk Register		
6.3	**Performance Report** C-OL presented the Performance Report, highlighting the following items:- • Since the last Board meeting, performance reviews had been conducted, including a Joint Executive Team (JET) meeting and an IQPD meeting. These meetings had gone well, with no additional escalation points received. • The first Stakeholder Advisory Group meeting was held on 24th June and actions related to the Stakeholder Action plan had been progressing well, with 20 actions delivered in Qtr. 1. • Appraisals had fallen slightly behind the target, with work underway to address this. • 35 out of 60 planned milestones were achieved in June, with some milestones re-forecasted to later quarters. • Service availability was slightly below the target of 99.9% at 99.8% due to the data centre incident. However, overall availability for the year had been above target. • Mission achievements: **Mission One**: progress was made in digital visualisation and forecasting capabilities as part of the NDR. **Mission Two:** the successful automated release for the Welsh Immunisation Programme and the migration of 68,000 digital records. **Mission Three:** A workshop on the NHS App development was held. Additional functionality also went live in Qtr. 1. **Mission Four:** development of 86 live data products and dashboards with 22 in development. **Mission Five:** training for 129 staff in quality team improvements. Roadmaps developed. Marian Wyn Jones, Independent Member (MWJ) raised a concern regarding the decline in appraisals for the third consecutive time and referred back to the staff review and the work pressures and burnout. MWJ confirmed that it was encouraging to know this was being addressed, but questioned if there was any correlation between the reduction of PADRs (Performance Appraisal and Development Reviews) and burnout.	Received & Discussed	None to note

	CO-L responded and advised directorates tended to complete appraisals in bulk and not in an evenly spread-out fashion, a trend that DHCW hoped to change. The importance of better planning to avoid appraisals all being undertaken at the same time, especially around the holiday period was highlighted. **The Board resolved to:** **RECEIVE** the Performance Report.		
6.4	**DHCW Escalation Status** CD presented an update on DHCW's Escalation status. Since the last Public Board meeting a number of escalation specific activities have taken place, and these include: • A Board Development session held on 26 June, independently facilitated, to consider how DHCW operate and actions to improve DHCW's approach to system wide delivery of the digital, data and technology agenda for NHS Wales. A follow up Board briefing took place on 10 July to firm up Board level actions. • An extra-ordinary Programmes Delivery Committee meeting took place on 10 July to review progress of delivering against the Enhanced Monitoring Improvement Plan milestones. • The escalation core project team continued to meet on a weekly basis. • The SRO for Escalation (DHCW Director for Corporate Affairs / Board Secretary) has met routinely with the WG Head of Performance, Escalation and Intervention. • Welsh Government review of escalation progress via the Joint Executive Team (JET) meeting held on 27 June and the Integrated Quality, Performance and Delivery (IQPD) meeting held on 16 July. • An update on the milestones was provided the coloscopy was due 30th July delivered 9th July. The Chair inquired if Welsh Government had any concerns or suggestions on how DHCW were approaching Escalation. CD advised that at the JET meeting there was positive feedback received on the approach, particularly around engagement with the Board and interaction with staff. Welsh Government's Head of Performance and Escalation had encouraged openness and transparency in response to the escalation. Additionally, a joint repository had been created which was accessible to both Welsh Government and DHCW and where evidence for each milestone will be stored. This will enable Welsh Government to review and agree if the evidence is sufficient to close the milestone. . **The Board resolved to:** **RECEIVE** and **DISCUSS** the Escalation Update for **ASSURANCE**.	Received for Assured	None to note
6.5	**Digital Governance and Safety Highlight Report**	Received for	Note to note

	Rowan Gardner, Chair of Digital Governance and Safety Committee (RG) provided a verbal update from the meeting held on 22 May 2025. For further information on DHCW's Digital Governance and Safety Committee, follow the link in the title or alternatively by scanning the QR Code. **The Board resolved to:** **RECEIVE** the Digital Governance and Safety Committee Highlight Report for **ASSURANCE**.	Assurance	
6.6	**Audit & Assurance Committee Highlight Report** Marian Wyn Jones, Chair of Audit and Assurance Committee (MWJ) provided a verbal update from the meeting held on 8 July 2025. For further information on DHCW's Audit & Assurance Committee, follow the link in the title or alternatively scan the following QR code. **The Board resolved to:** **RECEIVE** the Audit & Assurance Committee Highlight Report for **ASSURANCE**.	Received for Assurance	Note to note
6.7	**Remuneration & Terms of Service Committee Highlight Report** The Vice Chairprovided a verbal update from the meetings held on 5 June and 17 July 2025. For further information on DHCW's Remuneration & Terms of Service Committee, follow the link in the title or alternatively scan the following QR code. **The Board resolved to:** **RECEIVE** the Remuneration & Terms of Service Committee Highlight Report for **ASSURANCE**.	Received for Assurance	None to note
6.8	**Programme Delivery Committee** David Selway, Chair of Programme Delivery Committee (DS) provided a verbal update from the meeting held on 10 July 2025. For further information on DHCW's Programme Delivery Committee, follow the link in the title or alternatively scan the following QR code.	Received for Assurance	None to note

	The Board resolved to: RECEIVE the Programme Delivery Committee Highlight Report for ASSURANCE		
PART 7 - CLOSING MATTERS			
7.1	**Any Other Urgent Business** There was no other urgent business raised.	Discussed	None to note
7.2	**Date of Next Meetings**: Monday 29th September 2025 The meeting closed at 14:28	Noted	None to note