

PARTNERSHIP AND REGENERATION SCRUTINY COMMITTEE

Minutes of the hybrid meeting held on 28 September 2026

- PRESENT:** Councillor Sonia Williams (Chair)
Councillor Gwilym O Jones (Vice-Chair)
- Councillors Non Dafydd, Douglas M Fowlie, John Ifan Jones, Euryr Morris, Pip O'Neill, Derek Owen, Dylan Rees and Margaret Murley Roberts
- IN ATTENDANCE:** Chief Executive,
Director of Social Services,
Head of Adults' Services,
Head of Democratic Services,
Committee Officer (MEH),
Support Assistant – Democratic Services (Webcasting) (CH)
- APOLOGIES:** Councillor Alun Roberts – Portfolio Member for Leisure, Tourism, Maritime and Property.
- Deputy Chief Executive
- ALSO PRESENT:** **Portfolio Members**
- Councillor Neville Evans – Portfolio Member for Adults' Services;;
Councillor Dyfed W Jones – Portfolio Member for Children, Young People and Families;
Councillor Dafydd Roberts – Portfolio Member for Education and the Welsh Language;
Councillor Ieuan Williams – Portfolio Member for Highways, Waste and Climate Change;
Councillor Robin Williams – Deputy Leader and Portfolio Member for Finance, Corporate Business and Customer Experience.
- Mr Dyfed Edwards – Chair of the Chair of the Betsi Cadwaladr University Health Board (in respect of item 3);
Mr Paul Andrew – IC Director of Operations (West) – Betsi Cadwaladr University Health Board (in respect of item 3);
Mr Tom Regan – Mental Health Team – Betsi Cadwaladr University Health Board (in respect of item 3).
- Mr Jim Lee – Chair of the Nifty60's

As noted above.

2 DECLARATION OF INTEREST

None received.

3 SCRUTINY OF STRATEGIC PARTNERSHIP - BETSI CADWALADR UNIVERSITY HEALTH BOARD

The Chair welcomed Mr Dyfed Edwards, Chair of the Betsi Cadwaladr University Health Board and Mr Paul Andrew – IC Director of Operations (West) – Betsi Cadwaladr University Health Board and Mr Tom Regan – Mental Health Team to the meeting.

Mr Paul Andrew and Mr Tom Regan gave a brief presentation to the Committee on the strong partnership between the Health Board and the Authority who has a shared focus on improving health, independence and wellbeing for the residents of Anglesey.

Mr Jim Lee, Chair of Nifty60's who had requested to attend the meeting said that Nifty60's was established in 2019 and to date there are nearly 900 registered members of Nifty60's with a programme of resistance and functional training. The aim of Nifty60's is to reduce the risks of slips, falls in older people and reduce the pressure on GP surgeries and A+E at Ysbyty Gwynedd. He presented an insight to the work undertaken at 13 locations across the Island. Representatives from the Nifty60's met with Ellen Williams, the West Area Cluster Manager of Betsi Cadwaladr University Health Board to discuss Primary Care Prevention with the possibilities of Nifty60's meeting with Anglesey's GP Cluster Hub to give a presentation with the hope of them funding Nifty60's. In September 2025 a presentation was given to the GP Cluster Hub at Benllech at two evenings and the feedback as very positive in support to afford funding for Nifty60's. A figure of £400k was initially discussed and following an additional meeting it was reduced to approximately £200k. This would have resulted in amendment to Nifty60's plan by reducing the number of coaches and manager. Following further meetings with the Health Board there is still no sign of a resolution to the funding of Nifty60's. During those meeting it was suggested by Nifty60's that Health Board could have an SLA Arrangement, where the funds come directly to the Local Authority, then an SLA with Local Authority Nifty60s would have full scrutiny and quarterly reports, to ensure transparency. He further said that an average of some 450 Nifty60's athletes attend the classes each week across the 13 venues with a potential of nearer 1,000 older people training every week across Anglesey. Due to the promise of the funding, Nifty60's are at a point where they must keep telling people, on their waiting list, that there is currently no provision for them due to the lack of funding. The First Minister attended Nifty60's and he was supportive that the Health Board should fund Nifty60's. He considered that Anglesey should be a pilot scheme across Wales. Mr Lee further said that he gave a presentation, at the request of Mr Robert Callow, Engagement Officer of the Health Board at their Strategic Development Event held at the Conwy Business Centre in October 2025 and April

2026. Nifty60s also attend by request from Jenna Gallagher, CMATS Spinal Specialist, BCUHB Community Referral Days at the Anglesey Leisure Centres across the island, where the physiotherapists refer patients to Nifty60s. Mr Lee further said that Sarcopenia is a loss of muscle mass due to little or no exercise and the GPs refer patients to Nifty60's to help to rebuild muscle mass. He further said that the uncertainties as to the funding from the Health Board is frustrating for the Nifty60's to carry on with their programme of helping older people to be able to improve their health and to be able to socialise to improve their mental health.

Mr Lee was afforded the opportunity to ask questions of the representatives of the Health Board as follows:-

- **Partnership Working and Sustainability** - given the financial pressures facing both health and social care services, what further opportunities does the Health Board see for developing long-term service level agreements with local authorities and third-sector organisations to deliver preventative and community-based support? Would the Health Board consider increasing investment in proven community programmes that help prevent ill health, reduce demand on statutory services, and contribute to longer-term sustainability across the health and social care system?
- **Return on Investment** - many community and third-sector programmes are designed to keep people well, independent and connected, thereby reducing demand on GPs, hospitals and social care services. Given the evidence that prevention is often more cost-effective than crisis intervention, why is the Health Board not investing more consistently in long-term preventative programmes through formal partnership agreements with local authorities and community organisations?

Mr Dyfed Edwards, Chair of the Betsi Cadwaladr University Health Board said that Mr Lee has attended the Boards Conferences that do discuss the need to work within the preventative schemes and acknowledge the frustration of attaining assurance of funding toward the Nifty60's scheme. He noted that he will discuss with Mr Paul Andrew (who attended the meeting) a response to Nifty60's as soon as possible and afford copy of the correspondence sent to Mr Lee to the Council. Questions were raised by the Committee whether a timeframe of the response can be afforded to the Nifty60's. Mr Edwards responded that he was unable to commit a timeframe to respond but he assured that once he had any information he would communicate with Mr Jim Lee. The Chief Executive said that Nifty60's has previously received funding from the Shared Prosperity Fund through Medrwn Môn and suggested that a similar source of funding would may be an avenue for resources.

Mr Edwards responded to the second question and noted that there is pressure from the First Minister's Office to fund such schemes, but significant savings would be needed in other areas within the Health Board. He noted there is an agreement that Health and Welfare needs to be viewed differently. He referred that Welsh Government has requested that the Health Board should move 0.5% of the budget from the Acute Services to the Community Section. The Health Board had already discussed this before the instruction from the Government, but whilst people are on a waiting list for treatment it is a difficult decision as there is a need to support people earlier in the system. The policy framework to be used is the Community by Design, to provide services and variety of provision to help support people within their communities. Mr Edwards further said that Nifty60's also affords older people the opportunity to have an activity to attend and will help with loneliness and to socialize.

In considering the report, the following were points of discussion by the Committee:-

- Reference was made that 72 children from Anglesey are currently on the waiting list for Neurodiverse and Autism Services. Questions were raised as to what the Health Board intends to do to bring the waiting list down as 3 years is totally unacceptable and children should be seen at the latest within few months. Mr Dyfed Edwards responded that there are difficulties in recruiting experienced staff to deal with referrals. He said that the Board is trying to create a Team across the region that can respond to the caps in the recruitment of specialist staff. The Director of Social Services said that regional work is also undertaken with the Social Services Department and the six local authorities in the West are working with the Health Board to have a resolution to the needs to support children with specific needs. He highlighted that not all children on the waiting list needs referral to the Neurodiverse and Autism Service as schools refer children directly to the Social Services Department as they do not have another avenue to address the problems children may experience. He noted that innovative work is currently undertaken regionally to bring down the waiting list.
- Reference was made to the Dementia Services and questions were raised whether there are adequate Community Psychiatric Nurses (CPN) on Anglesey to support patients and families. Mr Tom Regan - Mental Health Team – Betsi Cadwaladr University Health Board responded that there is capacity of CPNs on Anglesey compared to Gwynedd as additional funding was received toward Intensive Assistant Team. He noted that it has taken time to integrate the system within the Community Mental Health Team on Anglesey to assist patients.
- Reference was made that there is a new Government in the Senedd in Cardiff and questions were raised as whether it has given Health Board confidence that the Board will see improvements. Further questions were raised as to what Welsh Government should do to strengthen the relationship between the Health Board and local authorities. Mr Edwards responded that Welsh Government have said that Health is a priority and wish to see an improvement to services provided to patients. He noted that during discussion with the Ministers in Welsh Government he has emphasised that Health and Wellbeing should be viewed through a wider perspective across the spectrum with partner organisations rather than focusing on figures and data. He considered that joint funding with

local authorities should be undertaken rather than separate services afforded by the Health Board and local government. Further questions were raised as to whether the Council supports the joint funding of health and care. The Chief Executive responded that the statutory responsibilities of every organisation should be fully funded as there are additional pressures been placed on organisations without adequate funding. He considered that responsibility and accountability is weakened with joint funding and this authority is working across the region in several areas at present.

- Questions were raised as to how the Health Board ensures that patients who wish to receive services and communicate through the Welsh language. Mr Edwards responded that the Health Board is committed to the Welsh Language Act 1993 and the Board has an ambition to promote the use of the Welsh language within the daily services afforded to patients. An Annual Report is presented to the Health Board meeting which highlights the number of patients wishing to receive services through the medium of Welsh. He noted that there is a need to support and encourage staff to speak Welsh with patients and families.
- Questions were raised whether the Health Board has plans in place to tackle the parking issues at Ysbyty Gwynedd. Mr Paul Andrew responded that a parking strategy has been undertaken by the Director of Facilities regarding parking issues in all the Health Board hospitals. He noted that additional bus services have been afforded to come to Ysbyty Gwynedd following the publication of the parking strategy and staff are encourage to car share. Further suggestions were made that patients could receive a QR code with their appointments letter to use public transport to the hospitals. The Chief Executive said that there are parking options off-site that needs to be considered with the park and ride facilities in Gaerwen and Llanfairpwll; people's perception needs to change to not be solely dependent on cars. The Chief Executive suggested that Transport for Wales Partnership Group could assist the Health Board in tackling the parking issues. The Portfolio Member for Children's and Families referred to a meeting with the Deputy Minister for Transport with the Aethwy Members and the Leader of the Council and Officers recently with regards to the resilience of the bridges across the Menai Straits and the use of public transport and the impact it can have on services such as parking issues at Ysbyty Gwynedd. He noted that there are challenges with some people using the Ysbyty Gwynedd car parks as a park and ride facility and leaving their cars there all day. The building of multi-storey parking facility on the site could be an option but the cost implications and the impact on the parking provision during construction would be immense. He further said that Welsh Health Board are unable to charge for parking which is similar in England.
- Reference was made that it has recently reported in the press that the Health Board has loss a third of their Leadership Team with 4 Senior Management Staff leaving their posts whilst Audit Wales has reported last year that there has been stability within the Board. Questions were raised whether there is stability in the management of the Health Board as the patients report that they have not witness any changes to the services. Mr Dyfed Edwards responded that Audit Wales had reported that there was stability within the Health Board and mainly within the Boards Membership and the Independent Members. He agreed that there are significant gaps within the Leadership Team and there are recruitment issues that needs to be addressed as salaries are higher in England and senior staff seems to only stay for a short period in the Health Boards in Wales. He

noted that there is a need to create a Health Board that staff can progress within their careers and people who are local to the area are more likely to stay longer within their posts in the Health Board. The Portfolio Member for Children and Families said that the People and Culture Board within the Health Board are considering issues of recruitment and succession planning.

- Questions were raised whether there is an issue with the recruitment of District Nurses. Mr Paul Andrew responded that the Head of Nursing is responsible for District Nurses and it has been reported that there have been significant challenges due to sickness and maternity leave. He noted that training of staff is currently taking place within the District Nurses Team and a development Matron will be working closely with the team. The workplace Dashboard has improved the sharing of information and working collaboratively with the Community Resilience Team is welcomed. Further questions were raised whether there is pressure been put on other services if staff must cover for the lack of District Nurses attending to patients. Mr. Paul Andrew responded that there are challenging in moving staff to different roles especially during the weekends but patients' needs to be addressed and staff are sent to carry out different roles.
- Questions were raised whether 24-hour care in A+E has been regarded as the norm as there are reports of people having to be in Ambulances outside the A+E department and patients sitting in A+E for hours. Mr Dyfed Edwards responded that patients are having to wait longer in the A+E department than 2/3 years ago. He noted that people seem to be using A+E as a drop-in facility for all ailments rather than attending their GP surgeries. Mr Paul Andrew said that people are under the perspective that the A+E department is a 24-hour service and there is a need to change that expectation and to prevent it to be normalised. He said that it is unacceptable that patients have to be in Ambulances for hours outside the A+E department and significant work is currently undertaken by the Health Board to address the issues of communication and education of people that there are other facilities available to them to be seen with general ailments rather than attending the A+E department. Welsh Government has indicated that they wish to see the Health Board affording additional community services which is challenging when the Health Board has a £43m deficit.
- Reference was made that it was pleasing to hear that the waiting times of Ambulances awaiting outside A+E departments has improved. Questions were raised as to what the Health Board has achieved to improve the situation and how does Ysbyty Gwynedd transfer times compare with the other two hospitals in North Wales and how does the Health Board compare with other hospitals in Wales. Mr Paul Andrew responded that the peak of patients has not increased as was expected and accountability meetings are undertaken with the Emergency Care Team who are responsible for A+E departments to improve the system within these departments. He noted that challenges of transfer of patients in other hospitals differ at certain periods and it is difficult to compare due to the location of hospitals. He further said that the Ambulance Services has a timeframe of 45 minutes handover of patients nationally. It was noted that the statistics for patient transfers is included on Welsh Government website.
- Further questions were raised whether there is evidence that people from England are attending A+E departments in North Wales. Mr Dyfed Edwards responded that he would investigate any evidence of people crossing the border from England to A+E departments in North Wales. He noted that A+E departments across the border is also facing challenges with people having to

wait hours in these departments for treatment. Comments were made that there are examples of people, whilst on holiday, having to attend the A+E department in Ysbyty Gwynedd and been call-back to Bangor for further treatment. It was considered that these patients should be transferred to their own hospital for further treatment rather than having local people having to wait on the waiting list longer than expected. Mr Paul Andrew said that currently 12 patients from over the border currently in-patients at Ysbyty Gwynedd and efforts are made to move them back to their local hospitals.

- Questions were raised as to the timeframe for works to be completed at the Penrhos Stanley Hospital in Holyhead and whether the hospital in Holyhead could be utilised to alleviate the problems within the A+E department in Ysbyty Gwynedd. Mr Paul Andrew responded that works at Penrhos Stanley Hospital has now been completed. He noted that a Pharmacy Robot is to be installed at the hospital to give the opportunity for patients to collect their prescriptions. He noted that innovative work is undertaken at the hospital with Bangor University staff working regularly from the site. The Chief Executive considered that there is a need for an awareness raising campaign to inform people as to the services provided in Penrhos Stanley Hospital and to alleviate the pressure in the A+E department in Ysbyty Gwynedd.
- Questions were raised as to whether there is an update on the proposed Medical Centre in Holyhead. Mr Dyfed Edwards responded that the Health Board is eager to develop such a Medical Hub in Holyhead but there is ongoing discussion with different agencies and the Council. He noted that he would correspond with the Members when details are available. The Chief Executive said that there are concerns as to the lack of progress in the development of a Medical Centre in Holyhead which is urgently needed. He noted that the Authority is eager to collaborate with the Health Board for such a facility in Holyhead. He suggested that a planning application needs to be submitted and that thereafter capital funding can be sought when the opportunity is available.
- Questions were raised as to how the Health Board collates customer satisfaction figures and whether it is collated through GP surgeries and if they are consistent questions asked within the surgeries. Mr Paul Andrew responded that there are consistencies as to how customer satisfaction data is recorded by the Health Board and information of how it is collated and reported can be shared with the Members of the Council.
- Reference was made to 13 reported cases of 'never events' undertaken across the Betsi Cadwaladr University Health Board over the last 12 months. Questions were raised whether the data was available of the 'never events' which occurred in Ysbyty Gwynedd and whether it is higher in the Health Board than other Health Boards. Mr Dyfed Edwards said that he did not have such details of such occurrences, history, background and analysis of each case and he would share the information with the Members in due course.
- Questions were raised whether opening the Cottage Hospitals would alleviate the pressure on Ysbyty Gwynedd. Mr Edwards responded that capacity in the community is important in treating patients but with so many patients awaiting to be discharged from hospital it creates problems and the flow of patients in and out of hospital is creating the problems within A+E departments in every hospital. He referred to the Môn Enhancement Care Team (MEC Team) on Anglesey who treat people with the home environment which is similar to the provision that Cottage Hospitals provided over the years. Mr Paul Andrew said that over the

last 6 to 8 months work has been undertaken with external care providers who work across the Health Board together with the 6 local authorities and have advised that there is over prescribing of the patients' pathway. Clear intervention is required is to get patients out of the hospital environment early as possible due to infection risk and mobility issues if in hospital for a long period.

- Questions were raised whether the Health Board charges for treatment of visitors from abroad. Mr Paul Andrew responded that charges for treatment of visitors from abroad is undertaken by the finance department of the Health Board.
- Reference was made that there has been an increase in the numbers of people with Mental Health illnesses and some incidents of suicide. Questions were raised as to whether there is an increase on Anglesey of suicide incidents. Mr Tom Regan responded that a thematic review is currently undertaken of the suicide incidents last year. The previous years review across Wales noted that the suicide trends were among middle aged men and work is currently ongoing to review the trend of these suicides. He noted that there are people who are not known/registered to mental health services who are suffering from mental health and potential suicides. A protocol is currently being undertaken by Regional Co-ordinator for suicides. He referred to the 111+2 service, established 3 years ago, which is available for people with mental health problems.
- Reference was made to the Medical School at Bangor University and there is now a campaign for a Dental School. Questions were raised as the possibilities of having a Dental School in the area. Mr Dyfed Edwards responded that the Medical School at Bangor University has been a success and there is good collaboration with placements from the Medical School into the hospitals. He expressed that there is a need to support the students to consider different areas of expertise within the Health Board i.e. GP's, Surgeons etc. However, people's expectations of work life balance have changed with staff wishing to work part-time employment. He noted that he hoped that a Dental School will come to the area.
- Questions were raised as to whose responsibility, accountability and funding is for the Dashboard. The Head of Adults' Services responded that the Council and the Health Board share accountability for the Dashboard and a meeting is held every Wednesday afternoon to review the cases. Some additional assistance may be needed by other services within the Council i.e. Housing Services. The funding of the services through the Dashboard varies as to whom that responsibility is for a specific case. Mr Paul Andrew said that there is a data shared agreement between the Health Board and the Authority to ensure better services for the residents.

It was RESOLVED to accept the presentation by the representatives from the Health Board.

4 COMMITTEE FORWARD WORK PROGRAMME - 2026/2027

The report of the Scrutiny Officer setting out the Partnership and Regeneration Scrutiny Committee's indicative Forward Work Programme 2026/20267 was presented for consideration.

It was RESOLVED:-

- To agree the current version of the forward work programme for 2026/2027;
- To note the progress thus far in implementing the forward work programme.

COUNCILLOR SONIA WILLIAMS
CHAIR