



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd  
Addysgu Powys  
Powys Teaching  
Health Board

# Croeso

# Cyfarfod Cyffredinol Blynyddol 15<sup>fed</sup> Medi 2025 Annual General Meeting 15<sup>th</sup> September 2025

# Welcome



# Agenda

13.30 Croeso a Chyflwyniadau  
Dr Carl Cooper, Cadeirydd

13:40 Cyflwyniad y Prif Weithredwr  
Hayley Thomas, Prif Weithredwr

14:05 Safle Ariannol Bwrdd Iechyd Addysgu Powys  
Pete Hopgood, Cyfarwyddwr Gweithredol  
Cyllid, Cyfalaf a Gwasanaethau Cymorth a  
Dirprwy Brif Weithredwr

14:15 Sesiwn Holi ac Ateb gyda'r Bwrdd

14:25 Sylwadau i Gau  
Dr Carl Cooper, Cadeirydd

14:30 Cau

13.30 Welcome and Introductions  
Dr Carl Cooper, Chair

13:40 Chief Executive's Address  
Hayley Thomas, Chief Executive






















14:05 Powys Teaching Health Board Financial Position  
Pete Hopgood, Executive Director of Finance,  
Capital and Support Services and  
Deputy Chief Executive

14:15 Question & Answers with The Board

14:25 Closing Remarks  
Dr Carl Cooper, Chair

14:30 Close

# Ein Bwrdd Our Board

	<p><b>Dr Carl Cooper</b> Cadeirydd Chair</p>	<p>Jennifer Owen-Adams Aelod Annibynnol (Y Trydydd Sector) Independent Member (Third Sector)</p> 	<p><b>Hayley Thomas</b> Prif Weithredwr Chief Executive</p> 	<p><b>Elaine Lorton</b> Cyfarwyddwr Gweithredol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl Executive Director of Primary &amp; Community Care and Mental Health</p> 
	<p><b>Kirsty Williams</b> Is-gadeirydd Vice Chair</p>	<p><b>Simon Wright</b> Aelod Annibynnol (Prifysgol) Independent Member (University)</p> 	<p><b>Pete Hopgood</b> Dirprwy Brif Weithredwr a Chyfarwyddwr Cyllid, Cyfalaf a Gwasanaethau Cymorth Deputy CEO and Executive Director of Finance, Capital and Support Services</p> 	<p><b>Claire Roche</b> Cyfarwyddwr Gweithredol Nyrsio, Ansawdd, Menywod a Iechyd Teulu Executive Director of Nursing, Quality, Women and Family Health</p> 
	<p><b>Dr Rhobert Lewis</b> Aelod Annibynnol Independent Member</p>	<p><b>Ian Thomas</b> Aelod Annibynnol Independent Member</p> 	<p><b>Dr Kate Wright</b> Cyfarwyddwr Meddygol Gweithredol Executive Medical Director</p> 	<p><b>Claire Madsen</b> Cyfarwyddwr Gweithredol Proffesiynau Perthynol i Iechyd, Gwyddorau Iechyd a Digidol Executive Director of Allied Health Professions, Health Science and Digital</p> 
	<p><b>Cathie Poynton</b> Aelod Annibynnol (Undeb Llafur) Independent Member (Trade Union)</p>	<p><b>Ronnie Alexander</b> Aelod Annibynnol Independent Member</p> 	<p><b>Debra Wood-Lawson</b> Cyfarwyddwr Gweithredol Pobl a Diwylliant Executive Director of People and Culture</p> 	<p><b>Nicola Johnson</b> Cyfarwyddwr Gweithredol Cynllunio, Perfformiad a Chomisiynu Executive Director of Planning, Performance &amp; Commissioning</p> 
	<p><b>Cllr Chris Walsh</b> Aelod Annibynnol (Awdurdod Lleol) Independent Member (Local Authority)</p>	<p><b>Mick Giannasi</b> Aelod Annibynnol Independent Member</p> 	<p><b>Mererid Bowley</b> Cyfarwyddwr Gweithredol Iechyd y Cyhoedd Executive Director of Public Health</p> 	<p><b>Helen Bushell</b> Cyfarwyddwr Llywodraethu Corfforaethol / Ysgrifennydd y Bwrdd Director of Corporate Governance / Board Secretary</p> 
	<p><b>Steve Elliot</b> Aelod Annibynnol (Cyllid) Independent Member (Finance)</p>			

# Cyflwyniad y Prif Weithredwr

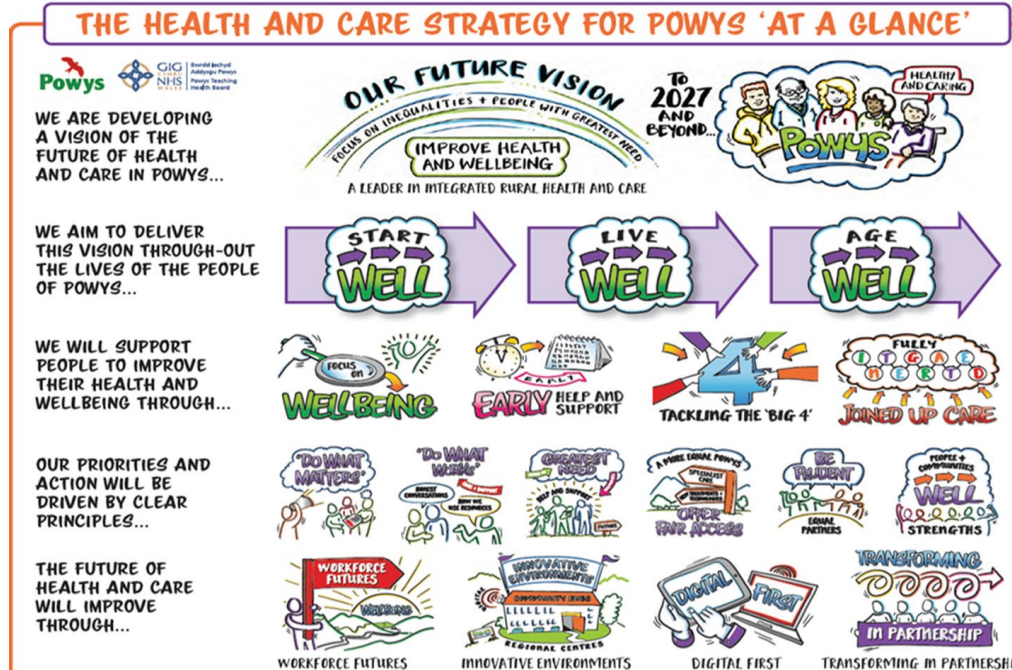
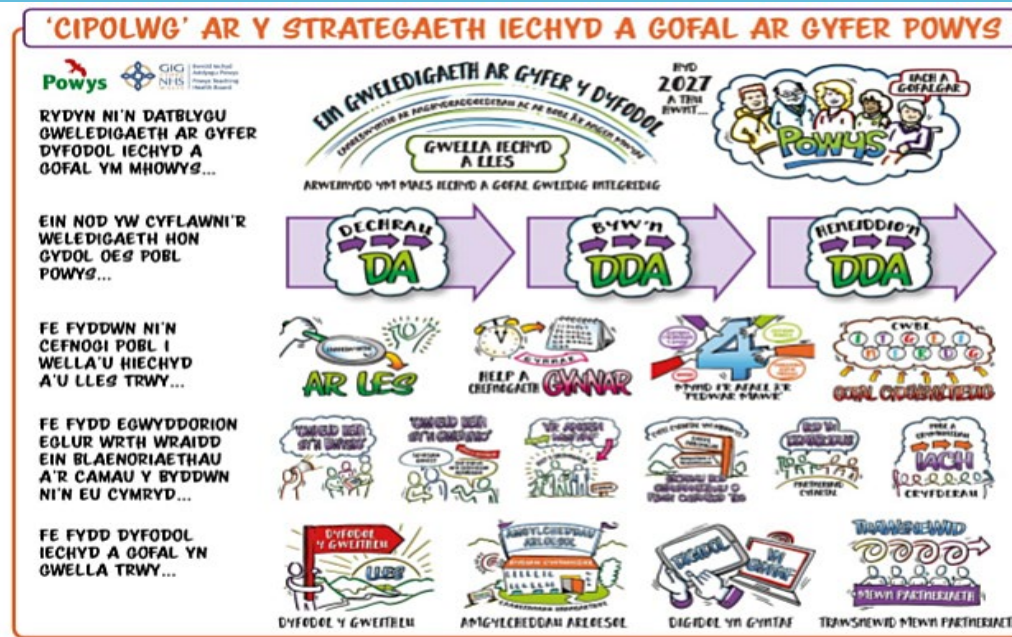
## Chief Executive's Address

Datblygwyd strategaeth ddeng mlynedd uchelgeisiol ar gyfer iechyd a gofal ym Mhowys yn 2017 trwy sgysiau gyda chleifion, y cyhoedd, staff a phartneriaid.

Mae'n strategaeth ar y cyd ar draws BIAP, CSP, PAVO a phartneriaid eraill

Mae'r cyd-destun wedi newid llawer ers 2017, fodd bynnag, mae'r egwyddorion a'r amcanion wedi sefyll treigl amser.

Defnyddir y Weledigaeth, Pedwar Amcan Lles, Pedwar Galluogwr a Chwe Egwyddor i lywio Cynllun BIAP



An ambitious ten-year strategy for health and care in Powys was developed in 2017 through conversations with patients, public, staff and partners.

It is a joint strategy across PTHB, PCC, PAVO and other partners

The context is much changed since 2017, however the principles and objectives have stood the test of time

The Vision, Four Wellbeing Objectives, Four Enablers and Six Principles are used to frame the PTHB Plan

## Cynllun ar dudalen 2024 - 2029

Bwrdd Iechyd Addysgu Powys Powys Teaching Health Board

**EN GWYBODAETH AR GYFER Y DYFODD**

YND 2027 A THY 2029

YND 2027 A THY 2029

YND 2027 A THY 2029

Bwrdd Iechyd Addysgu Powys Powys Teaching Health Board

**AR LES**

**HELP A CHEFIOGAETH GWYBODAETH**

**CYMRU**

**GOAL CYMRU**

**Gwell Gyda'n Gilydd** ar gyfer Model Gofal Cynaliadwy

Dull System Gyfan at Les ac Atal	Diagnosis a thriniaeth gyflymach, effeithiol	Gweithio gyda'n gilydd ar draws Cyflyrau Mawr, Iechyd Corfforol ac Iechyd Meddwl	Cartref yn gyntaf ac yn ôl adref yn fwy heini ac yn gyflymach
<ul style="list-style-type: none"> <li>Datblygu cynllun system gyfan at atal ar hyd oes bywyd</li> <li>Cyflwyno ymateb Diogelu Iechyd gan gynnwys Brechu</li> </ul>	<ul style="list-style-type: none"> <li>Gwella mynediad at ofal sylfaenol a chymunedol</li> <li>Dylunio a Darparu Model Eiddilwch a Chymunedol yn raddol</li> <li>Darparu'r Rhaglen Gofal wedi'i Gynllunio a Diagnosteg</li> </ul>	<ul style="list-style-type: none"> <li>Datblygu a chyflwyno Cynllun Cyflyrau Mawr ar lechyd anadoli a chychredol (Cardiaidd, Diabetes, Strôc) a Chanser</li> <li>Cyflwyno'r Rhaglen Trawsnewid Iechyd Meddwl</li> </ul>	<ul style="list-style-type: none"> <li>Gwella llwybrau gofal sy'n canolbwyntio ar lif y system</li> <li>Cyflawni'r Cynllun Chwe Nod ar gyfer Gofal Brys ac Mewn Argyfwng gan ganolbwyntio ar yr hyn sy'n gweithio i boblogaeth Powys</li> </ul>

**DYFODD Y GWYBODAETH**

**DIGIDOL YN GWYBODAETH**

**AMYLCREDDU HELSOL**

**TRAWNEWID Mewn Partneriaeth**

**Ansawdd yw'r edau aur ar draws y cynllun cyfan**

- Yn seiliedig ar y Safonau Ansawdd: Diogel, Amserol, Effeithiol, Effeithlon, Teg, Canolbwyntio ar yr Unigolion
- Cyflawni Cynlluniau Gweithredu Dylatswydd Ansawdd a Dylatswydd Gonestrwydd
- Rhyngddibyniaethau ar draws y cynllun mewn perthynas â dull seiliedig ar Werth a Llywodraethu effeithiol

Bwrdd Iechyd Addysgu Powys Powys Teaching Health Board

**Plan on a page 2024 - 2029**

**OUR FUTURE VISION 2027 AND BEYOND**

**WELLBEING**

**EARLY HELP AND SUPPORT**

**TACKLING THE 'BIG 4'**

**JUNED UP CARE**

**Better Together** for a Sustainable Model of Care

Whole System Approach to Wellbeing & Prevention	Faster, effective diagnosis and treatment	Working together across Major Conditions, Physical and Mental Health	Home first and back home fitter and faster
<ul style="list-style-type: none"> <li>Develop a whole system prevention plan across the life course</li> <li>Deliver a Health Protection response including Vaccination</li> </ul>	<ul style="list-style-type: none"> <li>Improve access to Primary and Community Care</li> <li>Design and Deliver a phased Frailty and Community Model</li> <li>Deliver the Planned Care and Diagnostics Programme</li> </ul>	<ul style="list-style-type: none"> <li>Develop and deliver a Major Conditions Plan respiratory &amp; circulatory health (cardiac, diabetes, stroke) and cancer</li> <li>Deliver the Mental Health Transformation Programme</li> </ul>	<ul style="list-style-type: none"> <li>Improve pathways of care focused on system flow</li> <li>Deliver the Six Goals Plan for Urgent and Emergency Care focusing on what works for the Powys population</li> </ul>

**WORKFORCE FUTURES**

**DIGITAL FIRST**

**INNOVATIVE ENVIRONMENTS**

**TRANSFORMING IN PARTNERSHIP**

**Quality is the golden thread across the whole plan**

- Underpinned by the Quality Standards: Safe, Timely, Effective, Efficient, Equitable, Person-Centred (STEEEP)
- Delivery of Duty of Quality and Duty of Candour Action Plans
- Interdependencies across the plan in relation to a Value based approach and effective Governance





**Dental Services**

**Gwasanaethau Deintyddol**



**State of the Art X-ray equipment**

**Offer pelydr-X o'r radd flaenaf**



**Growing our workforce**

**Tyfu ein gweithlu**

**NHS 111 Wales**

GIG CYMRU NHS WALES

**111**

**& PRESS OPTION 2**

**For urgent mental health support call 111 and press OPTION 2**

Healthcare advice you can trust – 24 | 7

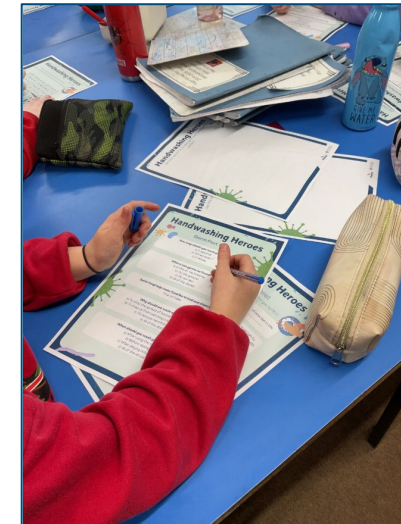
**111.WALES.NHS.UK**

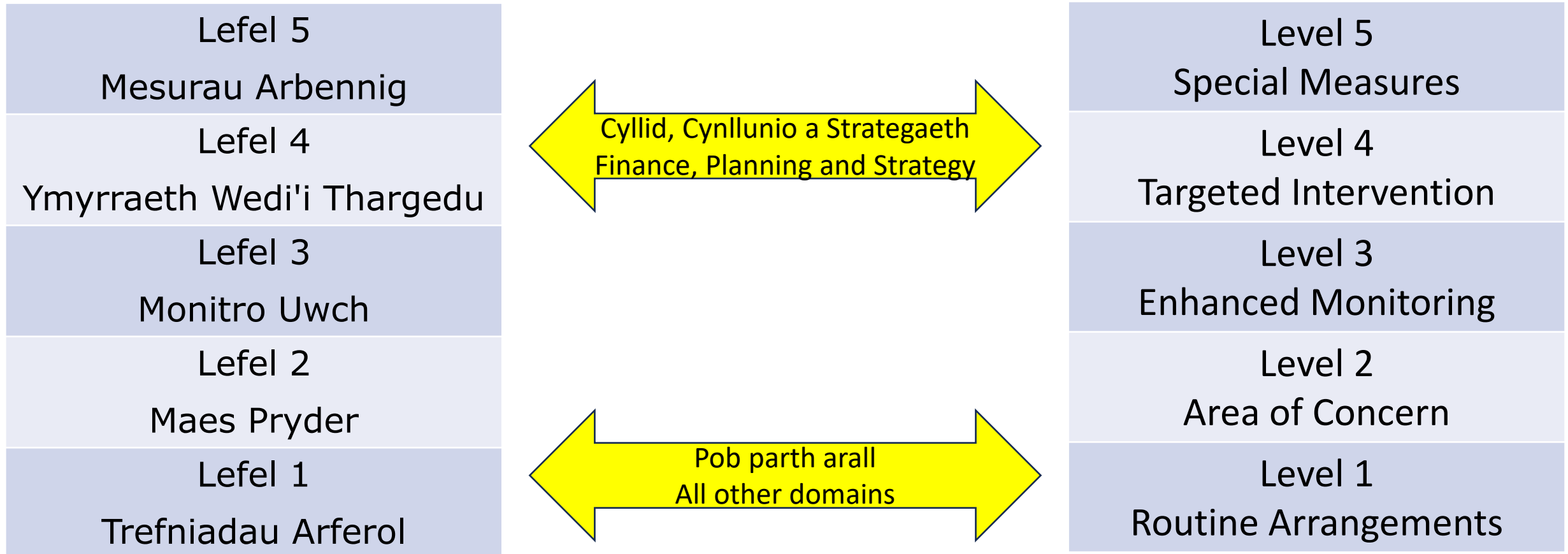
**Mental Health Single Point of Access**

**Un Pwynt Mynediad Iechyd Meddwl**

# Cyflawniadau

# Achievements





**POWYS TEACHING HEALTH BOARD - PERFORMANCE AGAINST TARGET**  
Performance against quadruple aim cohort as at month 12 Integrated Performance reported position (19/05/2025)

Number of measures where the target has been delivered or the actions required are on track

Number of measures where the target has not been delivered or the actions required are not on track and improvements are

**Quadruple Aim 1:** People in Wales have improved health and well-being with better prevention and self-management  
PTHB reports against 10 applicable measures

1 measure

9 measures

**Quadruple Aim 2:** People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement  
PTHB reports against 24 applicable measures

16 measures

8 measures

**Quadruple Aim 3:** The health and social care workforce in Wales is motivated and sustainable  
PTHB reports against 4 applicable measures

2 measures

2 measures

**Quadruple Aim 4:** Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes.  
PTHB reports against 12 measures but 3 are not scored/benchmarked by Welsh Government (Health care acquired infections)

6 measures

3 measures

**SUMMARY**

25 measures

22 measures

Reported as at the 19/05/2025

Ministerial Priority Measures			Baseline	Month												
Measure	NHS Performance Target	KPI Improvement Target	Mar-24		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Number of patients waiting more than 52 weeks for a new outpatient appointment	Zero	40% reduction by end of September 2024 Zero by March 2025	0	Performance trajectory	55	65	55	45	20	8	5	0	0	0	0	0
				Actual	✓ 0	✓ 0	✓ 0	✗ 1	✗ 1	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0
Number of patients waiting more than 104 weeks for referral to treatment	Zero	Zero end of December 2024	1	Performance trajectory	0	0	0	0	0	0	0	0	0	0	0	0
				Actual	✓ 0	✗ 1	✗ 2	✗ 3	✗ 3	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0
Number of patients waiting over 8 weeks for a specified diagnostic	Zero	95% to be zero by December 2024	116	Performance trajectory	230	200	150	75	30	0	0	0	0	0	0	0
				Actual	✗ 140	✗ 171	✗ 157	✗ 155	✗ 140	✗ 124	✗ 107	✗ 83	✗ 84	✗ 70	✗ 79	✗ 79
Number of patients who spend 12 hours or more in all major and minor emergency care facilities from arrival until admission, transfer or discharge	Zero	20% reduction by September 2024 Further 20% reduction by March 2025	0	Performance trajectory	0	0	0	0	0	0	0	0	0	0	0	0
				Actual	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0	✓ 0
Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for people age under 18 years	80%	80% by December 2024	97.7%	Performance trajectory	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%
				Actual	✗ 80.0%	✗ 86.5%	✗ 83.7%	✗ 93.1%	✗ 90.0%	✗ 87.5%	✗ 92.1%	✗ 89.2%	✗ 92.9%	✗ 86.7%	✗ 91.2%	✗ 91.7%
Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for adults age 18 years and over	80%	80% by December 2024	91.1%	Performance trajectory	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%	85.6%
				Actual	✓ 95.2%	✓ 95.3%	✓ 93.0%	✓ 95.10%	✓ 87.50%	✓ 91.7%	✓ 92.3%	✓ 98.3%	✓ 95.6%	✗ 79.0%	✓ 96.2%	✓ 93.7%

Policy Lead Priority Measures				Month												
Age Group	Measure	Target		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	
Under 18's	Mental Health Measure Part 1a - % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral	80%	Performance trajectory	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	
			Actual	✓ 98.0%	✓ 98.1%	✓ 100.0%	✗ 94.6%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%		
	Mental Health Measure Part 1b - % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS	80% by December 2024 (80% monthly is NHS Performance Framework Target)	Performance trajectory	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	86.0%	
			Actual	✗ 80.0%	✓ 86.5%	✗ 83.7%	✓ 93.1%	✓ 90.0%	✓ 87.5%	✓ 92.1%	✓ 89.2%	✓ 92.9%	✓ 86.7%	✓ 91.2%	✓ 91.7%	
	Mental Health Measure Part 2 - % of health board residents in receipt of secondary mental health services who have a valid care and treatment plan	90%	Performance trajectory	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	
			Actual	✓ 94.1%	✓ 93.9%	✓ 90.8%	✓ 91.0%	✓ 93.6%	✓ 94.9%	✓ 94.9%	✓ 97.8%	✓ 94.8%	✓ 96.3%	✓ 95.7%	✓ 97.4%	
Neurodevelopmental - % of children and young people waiting less than 26 weeks to start an ADHS or ASD neurodevelopment assessment	80%	Performance trajectory	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%		
		Actual	✗ 45.4%	✗ 45.8%	✗ 39.6%	✗ 42.0%	✗ 37.2%	✗ 34.3%	✗ 30.9%	✗ 30.5%	✗ 27.3%	✗ 24.4%	✗ 25.9%	✗ 29.9%		
SCAMHS - % of patients waiting less than 28 days for a first appointment for sCAMHS	80%	Performance trajectory	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%		
		Actual	✓ 98.0%	✓ 92.7%	✓ 93.8%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 100.0%	✓ 97.1%	✓ 100.0%	✓ 100.0%	✓ 100.0%		
18 years and over	Mental Health Measure Part 1a - % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral	80%	Performance trajectory	70.0%	70.0%	70.0%	75.0%	75.0%	75.0%	75.0%	75.0%	80.0%	80.0%	80.0%		
			Actual	✗ 44.1%	✗ 54.1%	✗ 69.2%	✗ 74.0%	✗ 45.3%	✗ 46.7%	✗ 58.7%	✗ 71.4%	✗ 78.7%	✗ 58.0%	✓ 85.5%	✓ 98.0%	
	Mental Health Measure Part 1b - % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS	80% by December 2024 (80% monthly is NHS Performance Framework Target)	Performance trajectory	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%		
			Actual	✓ 95.2%	✓ 95.3%	✓ 93.0%	✓ 95.1%	✓ 87.5%	✓ 91.7%	✓ 92.3%	✓ 98.3%	✓ 95.6%	✗ 79.0%	✓ 96.2%	✓ 93.7%	
	Mental Health Measure Part 2 - % of health board residents in receipt of secondary mental health services who have a valid care and treatment plan	90%	Performance trajectory	80%	83%	86%	88%	90%	90%	90%	90%	90%	90%	90%		
			Actual	✗ 89.5%	✗ 89.6%	✓ 90.5%	✓ 90.7%	✗ 89.7%	✗ 89.0%	✗ 89.9%	✗ 86.3%	✗ 81.7%	✗ 82.1%	✗ 82.5%	✗ 81.9%	
Psychological Therapies - % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health	80%	Performance trajectory	80.0%	83.0%	85.0%	88.0%	90.0%	93.0%	95.0%	95.0%	95.0%	95.0%	95.0%			
		Actual	✗ 75.1%	✗ 69.4%	✗ 75.2%	✗ 76.9%	✗ 78.7%	✗ 79.9%	✗ 72.9%	✗ 67.0%	✗ 63.1%	✗ 66.4%	✗ 68.2%	✗ 71.3%		



- Diogel
- Amserol
- Effeithiol
- Effeithion
- Teg
- Person Ganolog



- Safe
- Timely
- Effective
- Efficient
- Equitable
- Person-Centred



## Plan on a page 2025 > 2026

Quality is the golden thread across the whole plan, underpinned by the Quality Standards Of Safe, Timely, Effective, Efficient, Equitable and Person-Centred care (STEEEP)

### Logic Map showing the link between Key Drivers, Objectives, Priorities and CRITICAL ACTIONS

(aligned with escalation status and de-escalation criteria)

**RISK**  
Addressing performance/quality/delivery/corporate risk

**RECOVERY**  
Addressing the drivers of the financial deficit, optimising efficiency and productivity

**SUSTAINABILITY**  
Delivering 'A Healthy Caring Powys' (Health and Care Strategy) through the Better Together Programme

WELLBEING	EARLY HELP AND SUPPORT	TACKLING THE BIG 4	JOINED UP CARE	Wellbeing Objectives
<p><b>A whole system approach to wellbeing &amp; prevention</b></p> <ol style="list-style-type: none"> <li>Whole system Prevention across the life course</li> <li>Health Protection Response including Vaccination</li> <li>Women, Family and Children's health</li> </ol> <p><b>CRITICAL ACTION:</b> • Neurodevelopment Services for Children &amp; Young People</p>	<p><b>A responsive community based model of care</b></p> <ol style="list-style-type: none"> <li>Enhanced Primary &amp; Community Care</li> <li>Planned Care and Diagnostics</li> <li>Complex and Continuing Healthcare</li> </ol> <p><b>CRITICAL ACTION:</b> • Performance &amp; Delivery • Referral Optimisation</p> <p><b>CRITICAL ACTION:</b> • External support for further improvement to develop a new model</p>	<p><b>Effective care across the Big Four</b></p> <ol style="list-style-type: none"> <li>Major Conditions</li> <li>Mental Health</li> </ol> <p><b>CRITICAL ACTION:</b> • High Value High Impact Pathways: Diabetes (2025/26)</p> <p><b>CRITICAL ACTION:</b> • Transformation Programme</p>	<p><b>Sustainable and resilient health care</b></p> <ol style="list-style-type: none"> <li>Community Hospital Model and Rural Regional Centre</li> <li>Improve System Resilience</li> <li>Commissioning for Value</li> </ol> <p><b>CRITICAL ACTION:</b> • Optimising inpatient pathways and bed use</p> <p><b>CRITICAL ACTION:</b> • Six Goals Plan – further development of Hub</p> <p><b>CRITICAL ACTION:</b> • Strategic and Tactical Commissioning Framework</p>	<p>Strategic Priorities</p>
WORKFORCE FUTURES	DIGITAL FIRST	INNOVATIVE ENVIRONMENTS	TRANSFORMING IN PARTNERSHIP	Enablers
<p><b>WORKFORCE FUTURES</b></p> <p><b>CRITICAL ACTION:</b> • Workforce Transformation</p>	<p><b>DIGITAL FIRST</b></p> <p><b>CRITICAL ACTIONS:</b> • Cybersecurity • WCCIS Replacement</p>	<p><b>INNOVATIVE ENVIRONMENTS</b></p>	<p><b>TRANSFORMING IN PARTNERSHIP</b></p> <p><b>CRITICAL ACTION:</b> • RPB Prioritisation for greatest system impact</p>	<p>Enablers</p>

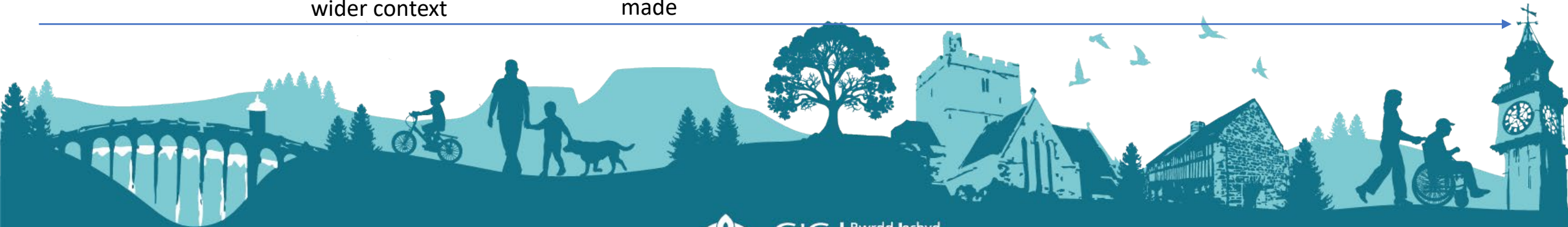
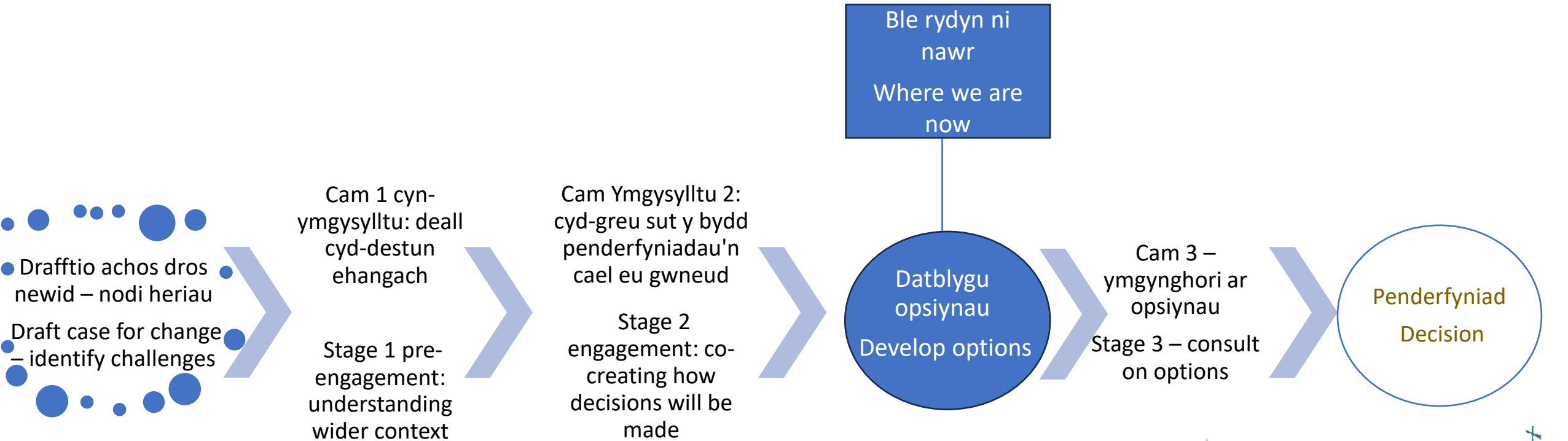


## Cynllun ar dudalen 2025 > 2026

Ansawdd yw'r edau aur ar draws y cynllun cyfan, wedi'i ategu gan Safonau Ansawdd Gofal Diogel, Amserol, Effeithiol, Effeithlon, Cyfartal a Chanolbwytio ar y Person

Map Rhesymeg yn dangos y cysylltiad rhwng Prif Yrwyrr, Amcanion, Blaenoriaethau a Chamau Gweithredu Hanfodol	AR LES	HELP A CHEFNOGAETH GWYBODAETH	TACKLING THE BIG 4	JOINED UP CARE	Amcanion Lles
<p><b>Gyrwyr Allweddol</b> (wedi'i halinio â statws uchwylio a meini prafw dad-dolysau)</p> <p><b>RISG</b> Mynd i'r afael â pherfformiad/ansawdd/darpariaeth/risg corfforaethol</p> <p><b>ADFERIAD</b> Mynd i'r afael â'r ffactorau sy'n achosi'r diffyg ariannol, gan wneud y gorau a effeithlonrwydd a chynhyrchiad</p> <p><b>CYNALIADWYEDD</b> Cyllawni Powys iach a Gofalgar (Strategaeth Iechyd a Gofal) drwy'r Rhaglen Gwella Gyda'n Gilydd</p> <p><b>GWEITHREDU HANFODOL</b> yng Nghynllun Cyflawni 2025 - 26</p>	<p><b>Dull System Gyfan at Les ac Atal</b></p> <ol style="list-style-type: none"> <li>Cynllun system gyfan at atal ar hyd bywyd</li> <li>Ymateb Diogelwch Iechyd gan gynnwys Brechu</li> <li>Iechyd Menywod, Teulu a Phlant</li> </ol> <p><b>GWEITHREDU HANFODOL:</b> • Gwasanaethau Niwroddeblygiad i Blant a Phobl Ifanc</p>	<p><b>Model gofal ymatebol sy'n seiliedig ar y gymuned</b></p> <ol style="list-style-type: none"> <li>Gofal Sylfaenol a Chymunedol Uwch</li> <li>Gofal wedi'i Gynllunio a Diagnosteg</li> <li>Gofal Iechyd Cymhleth a Pharhaus</li> </ol> <p><b>GWEITHREDU HANFODOL:</b> • Perfformiad a Chyflwyni • Optimeiddio Atgyfeiriadau</p>	<p><b>Gofal effeithiol ar draws y pedwar mawr</b></p> <ol style="list-style-type: none"> <li>Cyflyrau Mawr</li> <li>Iechyd Meddwl</li> </ol> <p><b>GWEITHREDU HANFODOL:</b> • Llywybrau Gwerth Uchel Effaith Uchel: Diabetes (2025/26)</p> <p><b>GWEITHREDU HANFODOL:</b> • Iechyd Meddwl</p>	<p><b>Gofal iechyd cynaliadwy a gwydn</b></p> <ol style="list-style-type: none"> <li>Model Ysbyty Cymunedol a Chanolfannau Gwledig Rhanbarthol</li> <li>Gwella Gwydnwch System</li> <li>Comisiynu am Werth</li> </ol> <p><b>GWEITHREDU HANFODOL:</b> • Optimeiddio llywybrau caiffwr newydd a defnydd gweithu</p> <p><b>GWEITHREDU HANFODOL:</b> • Cynllun Chwa Nod – datblygiad pellach yr Hyb</p> <p><b>GWEITHREDU HANFODOL:</b> • Framwaith Comisiynu Strategol a Thategol</p>	<p>Amcanion Lles</p>
	<p><b>DYFODOL Y GWEITHLU</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Trafnodwyr y Gweithlu</p>	<p><b>DIGIDOL YN GYNTAF</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Seiberddiogelwch • Annwidi WCCIS</p>	<p><b>AMGYLCHEDDAN ARLOESO I</b></p>	<p><b>TRAFNODWYD Mewn PARTNERIAETH</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Blaenoriaethu RPB ar gyfer yr effaith system fwyaf</p>	<p>Blaenoriaethau Strategol</p>
	<p><b>DYFODOL Y GWEITHLU</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Trafnodwyr y Gweithlu</p>	<p><b>DIGIDOL YN GYNTAF</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Seiberddiogelwch • Annwidi WCCIS</p>	<p><b>AMGYLCHEDDAN ARLOESO I</b></p>	<p><b>TRAFNODWYD Mewn PARTNERIAETH</b></p> <p><b>GWEITHREDU HANFODOL:</b> • Blaenoriaethu RPB ar gyfer yr effaith system fwyaf</p>	<p>Galluogwyr</p>





## Enghreifftiau o ofal iechyd i bobl Powys:

- Unigolion, teuluoedd a gofalwyr gan gynnwys hunan-ofal, cylchoedd cefnogaeth, gofalwyr teuluol.
- Cymunedau lleol yn cefnogi ei gilydd gan gynnwys trwy fudiadau gwirfoddol.
- Gwasanaethau gofal sylfaenol y GIG ym Mhowys gan gynnwys practisau meddygon teulu, deintyddion, fferyllwyr ac optometryddion.
- Gwasanaethau cymunedol lleol y GIG fel ysbytai cymunedol, nyrsio ardal, gwasanaethau plant cymunedol, therapïau, gofal iechyd meddwl, cymorth i bobl ag anableddau dysgu ac anableddau corfforol.
- Rhaglenni sgrinio ac imiwneiddio a gefnogir gan Iechyd Cyhoeddus Cymru.
- Partneriaethau â sefydliadau iechyd a gofal eraill yn y sector cyhoeddus, gwirfoddol a phreifat gan gynnwys drwy Fwrdd Partneriaeth Rhanbarthol Powys a Bwrdd Gwasanaethau Cyhoeddus Powys.
- Gwasanaethau trafndiaeth frys ac nad ydynt yn argyfwng a ddarperir i drigolion Powys gan Wasanaeth Ambiwlans Cymru a darparwyr trafndiaeth eraill.
- Llwybrau gofal wedi'i gynllunio a gofal brys i ysbytai cyfagos yng Nghymru a Lloegr (e.e. Ysbyty Brenhinol Amwythig, Ysbyty Bronglais, Ysbyty'r Tywysog Siarl).
- Cartrefi nyrsio, gofal preswyl a gwasanaethau gofal cartref.
- Gwasanaethau arbenigol i bobl sydd ag anghenion mwy cymhleth.
- Y rhwydwaith ehangach o wasanaethau a chefnogaeth sy'n ein helpu i fod yn iach ac i gadw'n iach.



## Examples of health care for the people of Powys:

- Individuals, families and carers including self-care, circles of support, family carers.
- Local communities supporting each other including through voluntary organisations.
- NHS primary care services in Powys including general medical practice, dentists, pharmacists and optometrists.
- Local NHS community services such as community hospitals, district nursing, community children's services, therapies, mental health care, support for people with learning disabilities and physical disabilities.
- Screening and immunisation programmes supported by Public Health Wales.
- Partnerships with other health and care organisations in the public, voluntary and private sector including through the Powys Regional Partnership Board and Powys Public Service Board.
- Emergency and non-emergency transport services provided to Powys residents by Welsh Ambulance Service and other transport providers.
- Pathways of planned care and emergency care to neighbouring hospitals in both England and Wales (e.g. Royal Shrewsbury Hospital, Bronglais Hospital, Prince Charles Hospital).
- Nursing homes, residential care and domiciliary care services.
- Specialist services for people with more complex needs.
- The wider network of services and support that help us to be healthy and to stay healthy.

# Cyfrifon Blynyddol 2024/25

## Annual Accounts 2024/25

# Adran 1: Crynodeb Targedau Perfformiad Allweddol

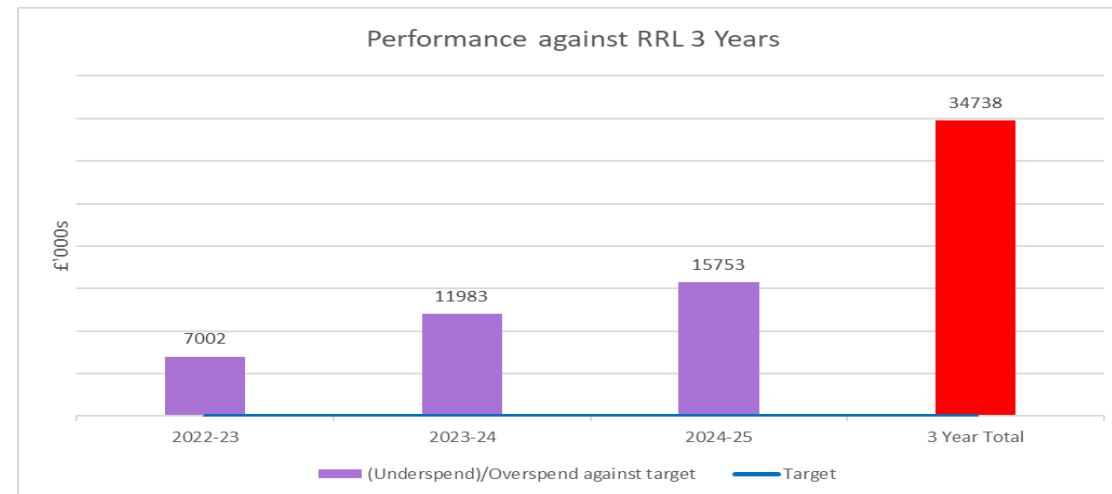
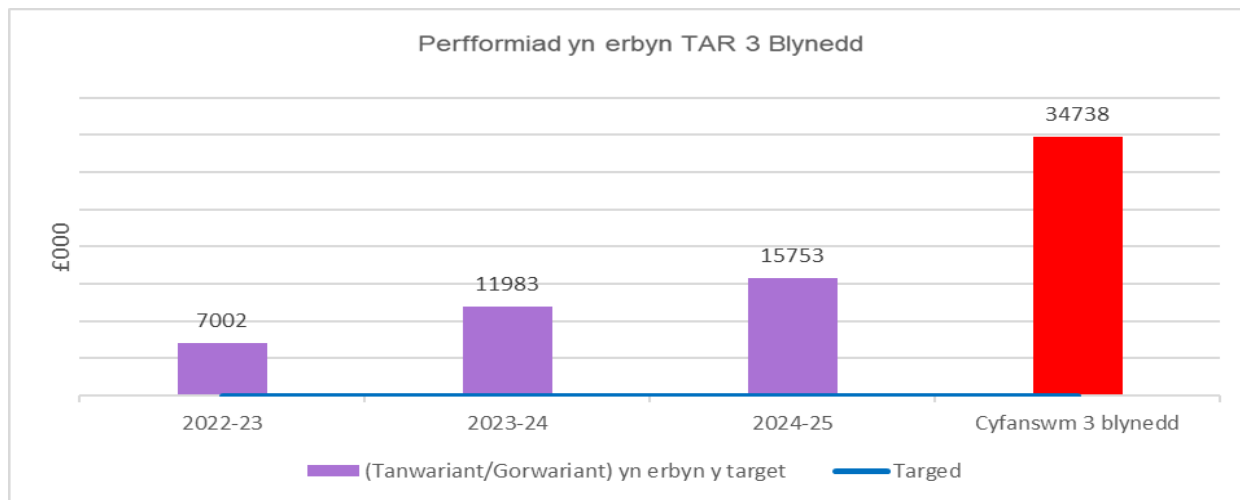
## Section 1: Summary Key Performance Targets

Ardal	DPA Ariannol	Targed	Darparu 2024/25
Refeniw	Sichau nad yw'r costau gweithredu net yn fwy na'r terfyn adnoddau refeniw a bennir gan Lywodraeth Cymru	Amrywiad yn erbyn Diffyg Terfyn Adnoddau Refeniw/(gwarged)	15.753M
Cyfalaf	Er mwyn sicrhau nad yw'r costau'n fwy na'r terfyn adnoddau Cyfalaf a bennir gan Lywodraeth Cymru	Amrywiad yn erbyn Diffyg Terfyn Adnoddau Cyfalaf/(gwarged)	(£50k)
PSPP	Talu o leiaf 95% o gredydwy'r di-GIG o fewn 30 diwrnod ar ol derbyn nwyddu neu anfoneb ddilys	Diwedd Blwyddyn Cronnus % yr anfonebau a dalwyd o fewn 30 diwrnod	93.80%

Area	Financial KPI	Target	Delivery 2024/25
Revenue	To ensure that net operating costs do not exceed the revenue resource limit set by Welsh Government	Variance Against Revenue Resource Limit Deficit / (Surplus)	15.753M
Capital	To ensure that costs do not exceed the capital resource limit set by Welsh Government	Variance Against Capital Resource Limit Deficit / (Surplus)	(£50k)
PSPP	To pay a minimum of 95% of all non-NHS creditors within 30 days of receipt of goods or a valid invoice	Cumulative Year End % of Invoices Paid within 30 days	93.80%

- Mae gan BIAP ddyletswydd statudol i sicrhau nad yw ei wariant yn fwy na'r cyllid cyfanredol (Terfyn Adnoddau Refeniw - TAR) a ddyrannwyd iddo dros y cyfnod o 3 blynedd.
- Nid yw BIAP wedi cyflawni'r gofynion hyn yn 2024/25.

- PTHB has a statutory duty to ensure that its expenditure does not exceed the aggregate funding (Revenue Resource Limit – RRL) allotted to it over the 3 year period.
- PTHB has not achieved this requirements in 2024/25.



## 2.1 Perfformiad Adnoddau Refeniw

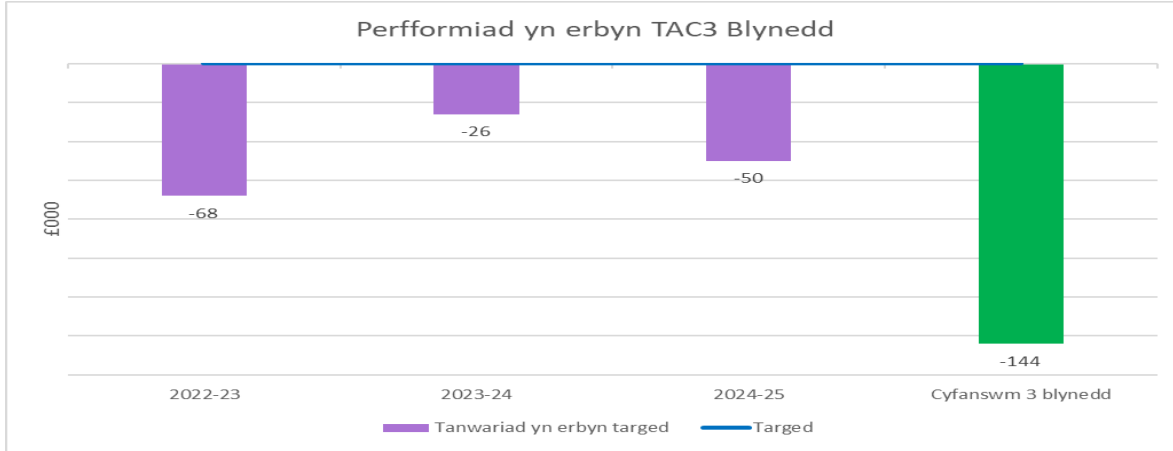
	Perfformiad Ariannol Bly my ddol			
	2022-23	2023-24	2024-25	Cyfanswm
	£000	£000	£000	£000
<b>Costau Gwithredu Net</b>	395,697	429,823	464,384	1,289,904
Llai o wariant ar wasanathau offthalmig cyffredinol a gwariant nad yw'n arian parod	1,609	1,859	1,833	5,301
Llai o ganlyniadau refeniw a ddod a chynlluniau Menter Cyllid Preifat I'r datganiad o'r Sefyllt	0	0	0	0
Llai o ganlyniadau refeniw a ddod a phrydlesau RoU i'r datganiad o'r Sefyllfa Ariannol	0	0	0	0
Cyfanswm Costau Gweithredu	397,306	431,682	466,217	1,295,205
<b>Dyranid Adnoddau Refeniw</b>	390,304	419,699	450,464	1,260,467
Tanwariant / (gorwariant) yn erbyn y Dyranid	<u>(7,002)</u>	<u>(11,983)</u>	<u>(15,753)</u>	<u>(34,738)</u>

## 2.1 Revenue Resource Performance

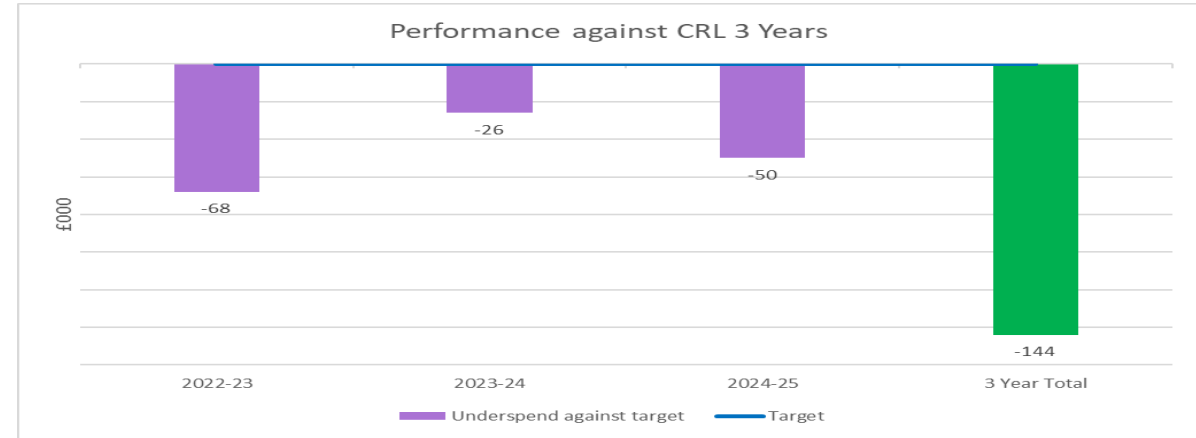
	Annual financial performance			
	2022-23	2023-24	2024-25	Total
	£000	£000	£000	£000
<b>Net operating costs for the year</b>	395,697	429,823	464,384	1,289,904
Less general ophthalmic services expenditure and other non-cash limited expenditure	1,609	1,859	1,833	5,301
Less unfunded revenue consequences of bringing PFI schemes onto SoFP	0	0	0	0
Less unfunded revenue consequences of bringing RoU Leases onto SoFP	0	0	0	0
Total operating expenses	397,306	431,682	466,217	1,295,205
<b>Revenue Resource Allocation</b>	390,304	419,699	450,464	1,260,467
Under / (over) spend against Allocation	<u>(7,002)</u>	<u>(11,983)</u>	<u>(15,753)</u>	<u>(34,738)</u>

# Cyfalaf / Capital

- Mae gan BIAP ddyletswydd statudol i sicrhau nad yw ei wariant yn fwy na'r cyllid cyfanredol (Terfyn Adnoddau Cyfalaf - TAC) a ddyrannwyd iddo dros y cyfnod o 3 blynedd.



- PTHB has a statutory duty to ensure that its expenditure does not exceed the aggregate funding (Capital Resource Limit- CRL) allotted to it over the 3 year period.



## 2.2 Perfformiad Adnoddau Cyfalaf

	2022-23	2023-24	2024-25	Cyfanswm
	£000	£000	£000	£000
<b>Gwariant Cyfalaf Bras</b>	13,211	6,650	14,608	34,469
Ychwanegiad: Colledion wth waredu asedau a roddwyd	0	0	0	0
Llai o NBV o eiddo, offer achyfarpar aca asedau anniriaethol a waredwyd	0	0	0	0
Debyniwyd llai o grantiau cyfalaf	0	0	0	0
Derbyniwyd llai o roddion	(527)	(195)	(141)	(863)
Llai o gydnabyddiaeth gychwynnol o ddirywiad asedau RoU	0	0	0	0
Ychwanegu: cydnabyddiaeth o ddirywiad Asedau RoU ar grisialu	0	0	0	0
<b>Tal yn erbyn Dyrannu Adnoddau Cyfalaf</b>	12,684	6,455	14,467	33,606
Dyrannu Adnoddau Cyfalaf	12,752	6,481	14,517	33,750
(Gwariant drosodd) / Tanwariant yn erbyn Dyrannu Adnoddau Cyfalaf	68	26	50	144

## 2.2 Capital Resource Performance

	2022-23	2023-24	2024-25	Total
	£000	£000	£000	£000
<b>Gross capital expenditure</b>	13,211	6,650	14,608	34,469
Add: Losses on disposal of donated assets	0	0	0	0
Less NBV of property, plant and equipment and intangible assets disposed	0	0	0	0
Less capital grants received	0	0	0	0
Less donations received	(527)	(195)	(141)	(863)
Less initial recognition of RoU Asset Dilapidations	0	0	0	0
Add: recognition of RoU Assets Dilapidations on crystallisation	0	0	0	0
<b>Charge against Capital Resource Allocation</b>	12,684	6,455	14,467	33,606
Capital Resource Allocation	12,752	6,481	14,517	33,750
(Over) / Underspend against Capital Resource Allocation	68	26	50	144

- Mae Llywodraeth Cymru yn mynnu bod Byrddau Iechyd yn talu eu credydwr masnach yn unol â Chod Taliad Prydlon CBI (PSPP) a Rheolau Cyfrifo'r Llywodraeth. Y Targed ariannol yw talu 95% o'r anfonebau hyn nad ydynt yn rhan o'r GIG (nifer nid gwerth ariannol) cyn pen 30 diwrnod ar ôl eu danfon.
- Ni chyrrhaeddodd perfformiad BIAP ar 93.8% y targed o 95% ar gyfer nifer y credydwr nad ydynt yn rhan o'r GIG a delir o fewn 30 diwrnod.

- Welsh Government requires that Health Boards pay their trade creditors in accordance with the CBI Prompt Payment Code (PSPP) and Government Accounting Rules. The financial Target is to pay 95% of these non NHS invoices (number not financial value) within 30 days of delivery.
- PTHB performance at 93.8% did not meet the target of 95% for the number of non NHS creditors paid within 30 days

	2024-25	2024-25	2023-24	2023-24
Y GIG	Nifer	£000	Nifer	£000
Cyfanswm y biliau a dalwyd	2,023	201,408	1,852	181,449
Cyfanswm y biliau a dalwyd o fewn y targed	1,527	191,401	1,298	169,971
Canran y biliau a dalwyd o fewn y targed	75.5%	95.0%	70.1%	93.7%
<b>Nid yw'n GIG</b>				
Cyfanswm y biliau a dalwyd	52,868	126,874	54,338	118,008
Cyfanswm y biliau a dalwyd o fewn y targed	49,586	118,081	50,281	112,735
Canran y biliau a dalwyd o fewn y targed	93.8%	93.1%	92.5%	95.5%
<b>Cyfanswm</b>				
Cyfanswm y biliau a dalwyd	54,891	328,282	56,190	299,457
Cyfanswm y biliau a dalwyd o fewn y targed	51,113	309,482	51,579	282,706
Canran y biliau a dalwyd o fewn y targed	93.1%	94.3%	91.8%	94.4%

	2024-25	2024-25	2023-24	2023-24
NHS	Number	£000	Number	£000
Total bills paid	2,023	201,408	1,852	181,449
Total bills paid within target	1,527	191,401	1,298	169,971
Percentage of bills paid within target	75.5%	95.0%	70.1%	93.7%
<b>Non-NHS</b>				
Total bills paid	52,868	126,874	54,338	118,008
Total bills paid within target	49,586	118,081	50,281	112,735
Percentage of bills paid within target	93.8%	93.1%	92.5%	95.5%
<b>Total</b>				
Total bills paid	54,891	328,282	56,190	299,457
Total bills paid within target	51,113	309,482	51,579	282,706
Percentage of bills paid within target	93.1%	94.3%	91.8%	94.4%

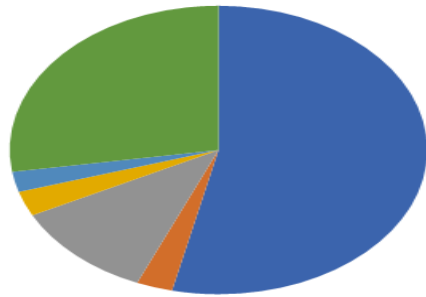
	2024/25	2023/24		2024/25	2023/24
	£'000	£'000		£'000	£'000
Gwariant yn Wasanaethau Gofal Iechyd Sylfaenol	83,495	78,993	Expenditure on Primary Healthcare Services	83,495	78,993
Gwariant ar ofal iechyd o ddarparwyr eraill	246,036	219,145	Expenditure on healthcare from other providers	246,036	219,145
Gwariant ar Wasanaethau Ysbyty ac Iechyd Cymunedol	151,717	147,888	Expenditure on Hospital and Community Health Services	151,717	147,888
	481,248	446,026		481,248	446,026
Llai: Incwm Amrywiol	(16,909)	(16,222)	Less: Miscellaneous Income	(16,909)	(16,222)
<b>Costau gweithredu net cyn llog ac ennillion a cholledion eraill BIL</b>	<b>464,339</b>	<b>429,804</b>	<b>LHB net operating costs before interest and other gains and losses</b>	<b>464,339</b>	<b>429,804</b>
Refeniw Buddsoddi	0	0	Investment Revenue	0	0
Arall (Enillion)/Colledion	(9)	(2)	Other (Gains) / Losses	(9)	(2)
Costau Cyllid	54	21	Finance costs	54	21
<b>Costau gweithredu net ar gyfer y flwyddyn ariannol</b>	<b>464,384</b>	<b>429,823</b>	<b>Net operating costs for the financial year</b>	<b>464,384</b>	<b>429,823</b>

# Adran 2: Gwasanaethau Gofal Iechyd Sylfaenol

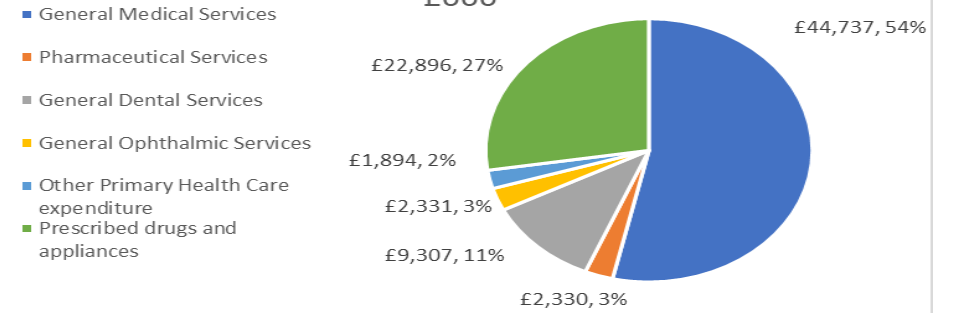
## Section 2: Primary Healthcare Services

2024-5 Gawariant ar Wasanaethau Gofal Sylfaenol  
£000

- Gwasanaethau Meddgol Cyffredinol
- Gwasanaethau Fferyllol
- Gwasanaethau Deintyddol Cyffredinol
- Gwasanaethau Offthalmig Cyffredinol
- Gwariant Gofal Iechyd Sylfaenol arall
- Cyffuriau ac offer rhagnodedig

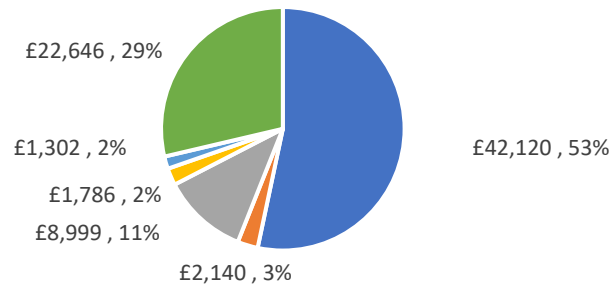


2024-5 Expenditure in Primary Care Services  
£000

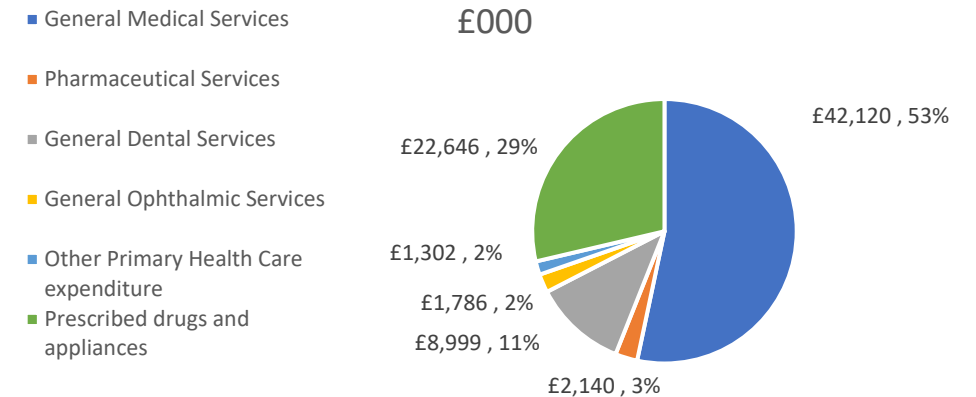


2023/24 Gwariant ar Wasanaethau Gofal Sylfaenol  
£000

- Gwasanaethau Meddgol Cyffredinol
- Gwasanaethau Fferyllol
- Gwasanaethau Deintyddol Cyffredinol
- Gwasanaethau Offthalmig Cyffredinol
- Gwariant Gofal Iechyd Sylfaenol arall
- Cyffuriau ac offer rhagnodedig



2023/24 Expenditure in Primary Care Services  
£000



**Sylwadau:**

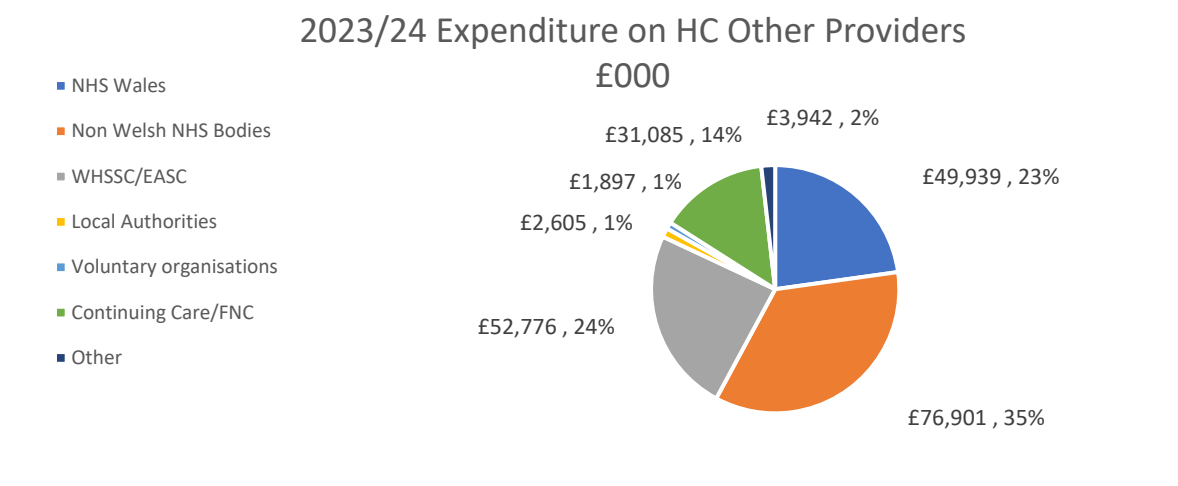
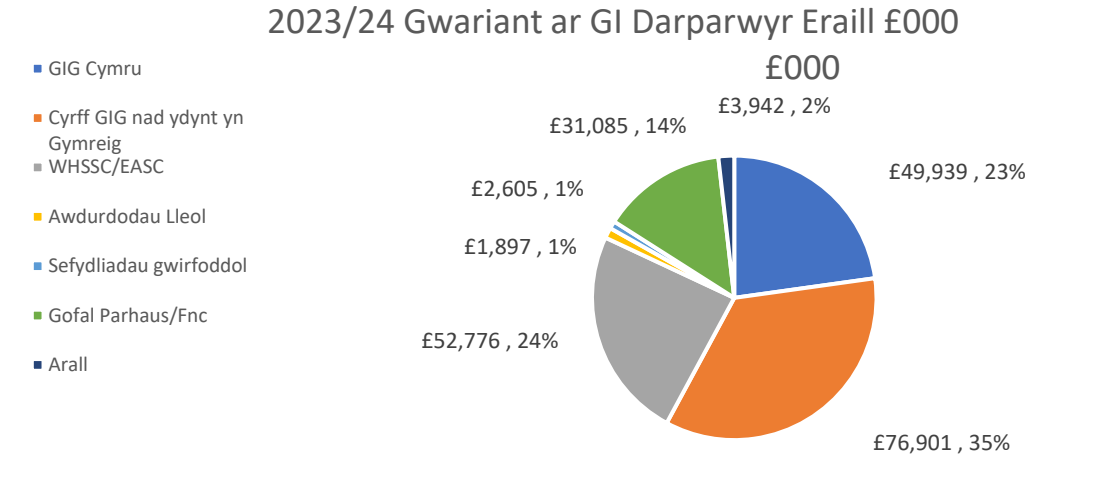
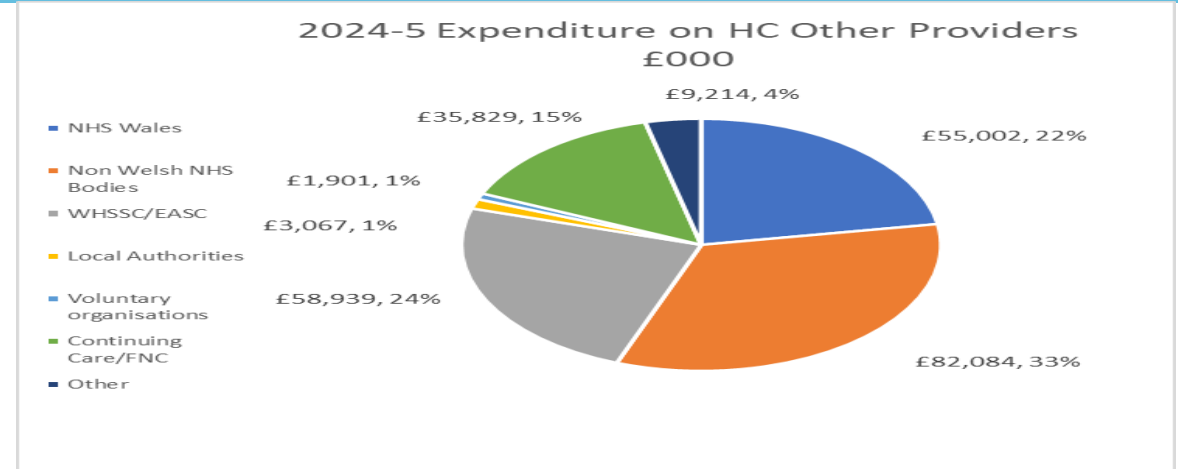
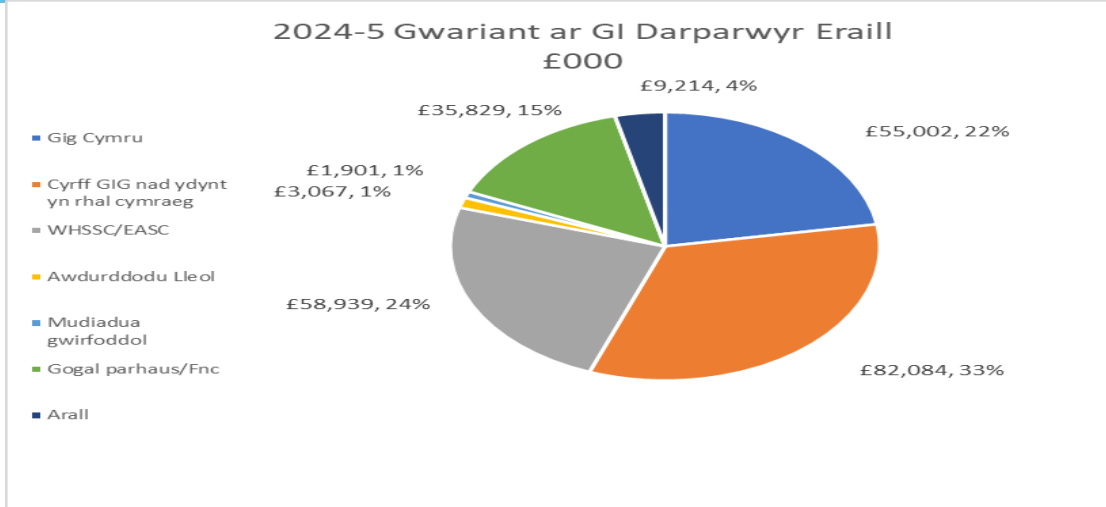
- Mae Gwasanaethau Meddygol Cyffredinol wedi cynyddu rhwng blynyddoedd yn bennaf oherwydd cynnydd mewn cyllid gan Lywodraeth Cymru ar gyfer y swm byd-eang a oedd ar gyfer BIA Powys yn £1.2m yn rheolaidd ac yn £1.0m yn anghylchol.

**Comments:**

- General Medical Services has increased between years mainly due to Welsh Government increase funding for Global sum which for Powys THB was £1.2m recurrent and £1.0m non recurrent

# Adran 2: Gofal Iechyd o Ddarparwyr Eraill

## Section 2: Healthcare from Other Providers



**Sylwadau:**

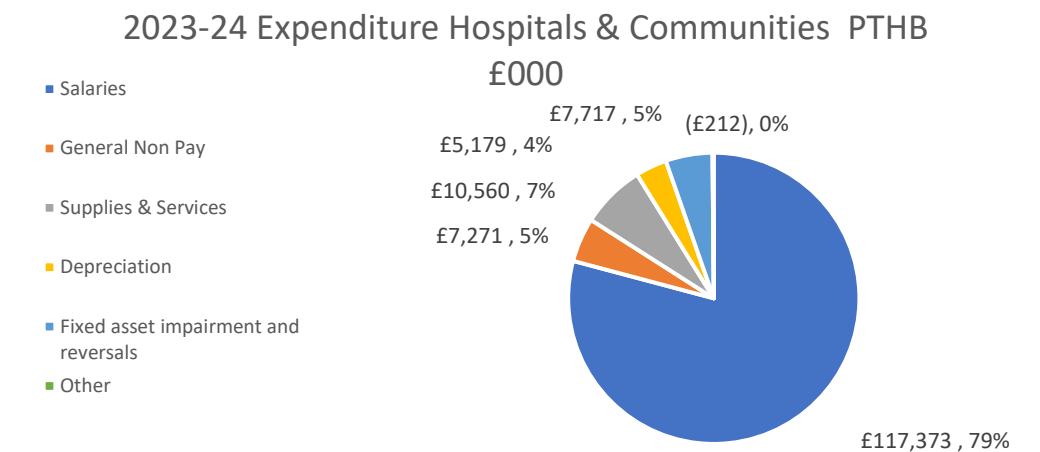
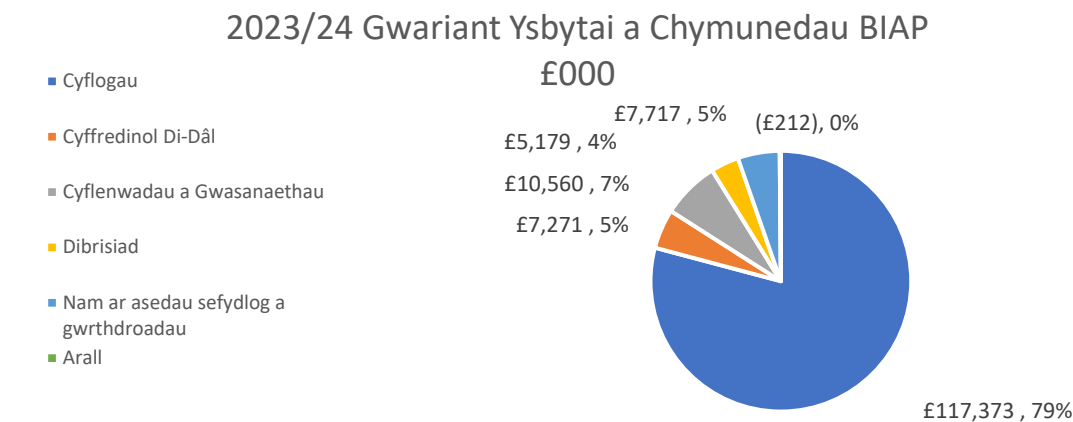
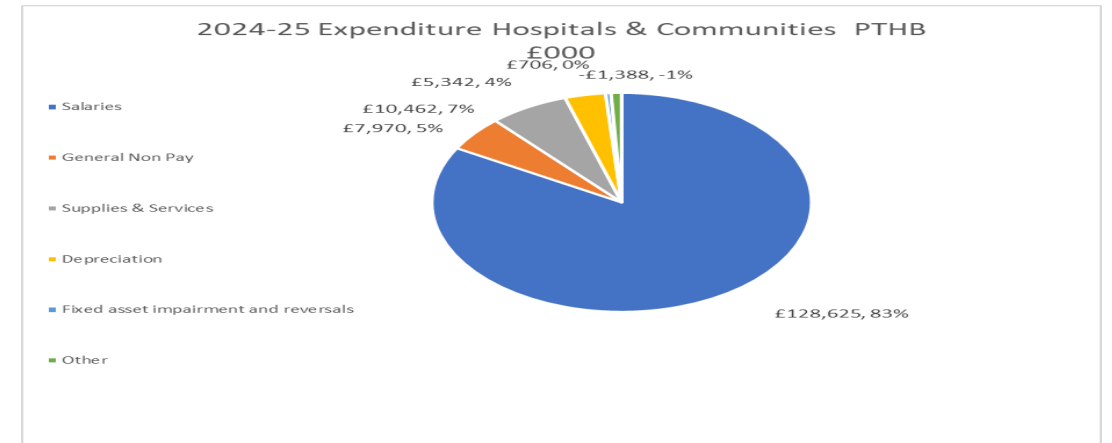
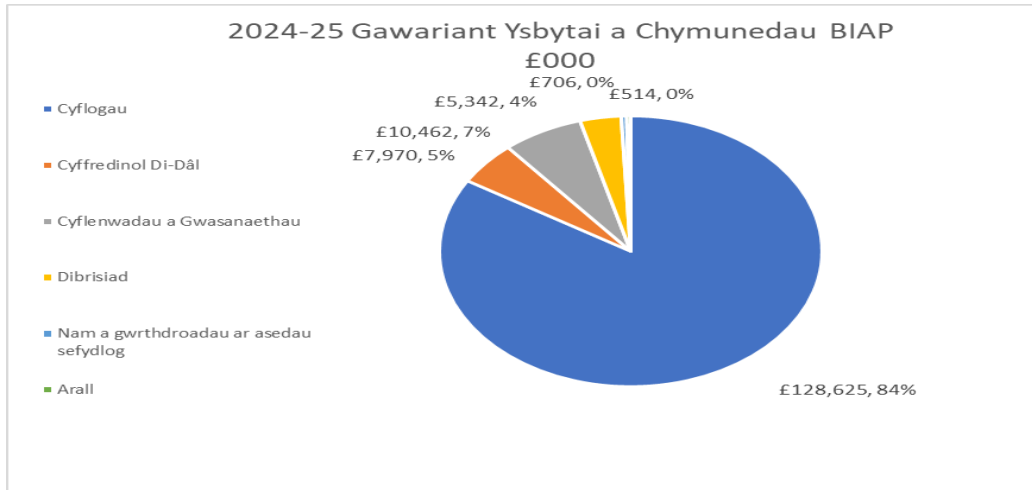
- Cynnydd o £5.1m gyda darparwyr Nad ydynt yn Gymreig gyda Dyffryn Gwy (£4.1m), SATH (£1.2m) yn cynrychioli'r cynnydd mwyaf arwyddocaol wedi'i wrthbwyso gan ostyngiadau llai mewn gwariant gyda Darparwyr Seisnig eraill
- Cynnydd o £4.2m ar GIP, sydd oherwydd cynnydd yn nifer yr achosion a chostau pecynnau
- Cynnydd o £5.2m arall sy'n gysylltiedig yn bennaf â chynnydd mewn lleoliadau darparwyr preifat ar gyfer anghenion iechyd meddwl cymhleth oherwydd diffyg argaeledd o fewn lleoliadau'r GIG.

**Comments:**

- Increase £5.1m with Non Welsh providers with Wye Valley (£4.1m), SATH (£1.2m) representing the most significant increases offset by smaller decreases in expenditure with other English Providers
- Increase £4.2m on CHC, which is due to increases in case numbers and package costs
- Increase £5.2m other linked mainly to the increase of private provider placements for complex mental health needs due to the lack of availability within NHS settings.

# Adran 2: Gwariant Ysbytai a Chymunedau

## Section 2: Hospital & Community Spend



**Sylwadau:**

- *Costau Staff – cynnydd o £11.2m am nifer o resymau, gan gynnwys y codiad cyflog o 5.5-6% ar draws arbenigeddau a chynnydd yng nghyfraniad pensiwn cyflogwyr (nodwch fod y cynnydd mewn cyfraniadau pensiwn yn cael ei ariannu gan Lywodraeth Cymru)*
- *Nid yw Cyflog – y prif effaith yw gostyngiad yn nam ar asedau sefydlog sy'n gysylltiedig â defnyddio Prosiect Ailgyflunio Machynlleth yn 23/24 (£7.7M) o'i gymharu â Phrosiect To Bronllys llai yn 2024/25 (£0.7M)*

**Comments:**

- *Staff Costs – £11.2m increase for number of reasons, including the 5.5-6% pay rise across specialities and increase in employers pension contribution (note the increase in pension contributions is being funded by Welsh Government)*
- *Non Pay – main impact is due to a decrease in Fixed asset impairment relating to the bringing into use of the Machynlleth Reconfiguration Project in 23/24 (£7.7M) in comparison to the smaller Bronllys Roof Project in 2024/25 (£0.7M)*

Mae Archwilydd Cyffredinol Cymru wedi rhannu ei farn ar reoleidd-dra datganiadau ariannol Bwrdd Iechyd Addysgu Powys oherwydd bod y Bwrdd Iechyd wedi torri ei derfyn adnoddau drwy wario £34.7 miliwn dros y £1,260 miliwn y cafodd ei awdurdodi i'w wario yn y cyfnod o dair blynedd 2022-2023 i 2024-25. Mae'r gwariant hwn yn golygu gwariant afreolaidd.

Pan nad yw gwariant y Bwrdd Iechyd yn cyd-fynd â'i ddyraniad dros gyfnod treigl o dair blynedd, mae unrhyw wariant dros y dyraniad adnoddau (h.y. terfyn gwariant) ar gyfer y tair blynedd hynny yn mynd yn uwch na'r awdurdod sydd gan y Bwrdd Iechyd i'w wario ac felly mae'n 'afreolaidd'. Mewn amgylchiadau o'r fath, mae'n ofynnol i Archwilydd Cyffredinol Cymru gymhwyso ei 'farn reolaidd' waeth beth yw gwerth y gwariant gormodol.

Yn ei farn ef, ac eithrio'r mater a ddisgrifir yn adran Sail Barn Amodol Ar Reoleidd-dra ei adroddiad, ym mhob ffordd berthnasol, mae'r gwariant a'r incwm yn y datganiadau ariannol yn cyd-fynd â'r dibenion a arfaethwyd gan y Senedd, ac mae'r trafodion ariannol a gofnodwyd yn y datganiadau ariannol yn cydymffurfio â'r awdurdodau sy'n eu llywodraethu.

The Auditor General for Wales has qualified his opinion on the regularity of the Powys Teaching Health Board's financial statements because the Health Board has breached its resource limit by spending £34.7 million over the £1,260 million that it was authorised to spend in the three-year period 2022-2023 to 2024-25. This spend constitutes irregular expenditure.

Where a Health Board does not balance its books over a rolling three-year period, any expenditure over the resource allocation (i.e. spending limit) for those three years exceeds the Health Boards authority to spend and is therefore 'irregular'. In such circumstances, the Auditor General for Wales is required to qualify his 'regularity opinion' irrespective of the value of the excess spend.

In his opinion, except for the matter described in the Basis for Qualified Regularity Opinion section of his report, in all material respects, the expenditure and income in the financial statements have been applied to the purposes intended by the Senedd and the financial transactions recorded in the financial statements conform to the authorities which govern them.

- Mae Bwrdd Iechyd Addysgu Powys wedi cyrraedd un o dri o'r Targedau Ariannol Statudol ym mlwyddyn ariannol 2024/25 :-
  - Perfformiad Adnoddau Refeniw - Heb gwrdd
  - Perfformiad Adnoddau Cyfalaf - Wedi cwrdd
  - Llywodraeth Cymru yn Cymeradwyo Cynllun Tymor Canolig Integredig 3 blynedd (IMTP) - Heb gwrdd
- Cyhoeddodd yr Archwilydd Cyffredinol Adroddiad Archwilio Anghymwys ar y datganiadau ariannol ar gyfer Barn Wir a Theg 2024/25 (gweler cymhwyster Barn Rheoleidd-dra yn unol â sleid flaenorol)
- Cyflwynwyd Cynllun Blynyddol 2025/26 i Lywodraeth Cymru ar 31 Mawrth 2025 ond nid yw wedi'i gymeradwyo eto. Mae'r BIA yn parhau i drafod â Llywodraeth Cymru ynghylch ei ragolygon ariannol ar gyfer 2025/26.
- Powys Teaching Health Board has met one of three of the Statutory Financial Targets in the 2024/25 financial year :-
  - Revenue Resource Performance - Not met
  - Capital Resource Performance – Met
  - Welsh Government Approval of 3 year Integrated Medium Term Plan (IMTP) – Not met
- The Auditor General issued an Unqualified Audit Report on the financial statements for True and Fair Opinion 2024/25 (see Regularity Opinion qualification as per previous slide)
- The 2025/26 Annual Plan was submitted to Welsh Government on 31st March 2025 which has not been approved. The THB remains in discussion with Welsh Government regarding its financial forecast for 2025/26

# Cwestiynau Questions

# Sylwadau i Gau

# Closing Remarks