

NWSSP Audit Committee

Tue 26 January 2021, 14:00 - 16:00

Microsoft Teams

Agenda

14:00 - 14:00 **1. Standard Business**
0 min

1.1. Welcome and Opening Remarks (Verbal)

Chair

1.2. Apologies (Verbal)

Chair

1.3. Declarations of Interest (Verbal)

Chair

1.4. Minutes of Meeting Held on 20 October 2020

Chair

 DRAFT Minutes of Audit Cttee Part A 20.10.2020.pdf (12 pages)

1.5. Matters Arising

Chair

 1.5 Matters Arising.pdf (1 pages)

14:00 - 14:00 **2. External Audit**
0 min

Steve Wyndham

2.1. Audit Wales Position Statement

Steve Wyndham

 2.1 NWSSP Audit Wales Audit Position Statement Jan-2021.pdf (8 pages)

2.2. NWSSP Audit & Assurance Arrangements

Steve Wyndham

 2.2 2021 Audit Assurance Arrangements - NHS Wales Shared Services Partnership.pdf (10 pages)

2.3. Audit Wales Review of PPE Procurement- Covid-19

Steve Wyndham

 2.3 PPE_Letter_English.pdf (6 pages)

14:00 - 14:00 **3. Internal Audit**
0 min

3.1. Internal Audit Position Statement

James Quance

 3.1 NWSSP Internal Audit Progress Report January 2021.pdf (9 pages)

3.2. Covid-19 Advisory Report

James Quance

 3.2 NWSSP 2020-21 Covid-19 Divisional Preparedness Resilience Advisory Review - FINAL Report.pdf (22 pages)

14:00 - 14:00
0 min

4. Counter Fraud

Nigel Price

4.1. Counter Fraud Position Statement

Nigel Price

 4.1 Counter Fraud Position Statement January 2021.pdf (6 pages)

14:00 - 14:00
0 min

5. Governance, Assurance and Risk

5.1. Verbal Update on NWSSP COVID-19 Matters

Andy Butler

5.2. COVID-19 Related Expenditure Incurred- NHS Wales

Andy Butler

 5.2 COVID-19 Expenditure and Governance Arrangements Update - January 2021.pdf (7 pages)

5.3. Governance Matters

Andy Butler

 5.3 Governance Matters .pdf (12 pages)

5.4. Tracking of Audit Recommendations

Peter Stephenson

 5.4 Tracking of Audit Recommendations.pdf (2 pages)

 5.4.1 Appendix A - Tracking of Audit Recommendations.pdf (1 pages)

 Appendix B Progress of Audit Recommendations January 2021.pdf (3 pages)

5.5. Corporate Risk Register

Peter Stephenson

 5.5 Corporate Risk Register .pdf (2 pages)

 5.5.1 Corporate Risk Register .pdf (5 pages)

14:00 - 14:00
0 min

6. For Information Only

6.1. Audit Committee Forward Plan

 6.1 Audit Committee Forward Plan.pdf (4 pages)

6.2. Auditor General Rollout of Data Analytics Project

 6.2 AC219 - Letter to audited bodies.pdf (4 pages)

6.3. Audit Wales Covid-19 Governance Update

 6.3 Audit Wales Covid-19 Governance update .pdf (20 pages)

6.4. NWSSP Welsh Language Annual Report 2019-20

 6.4 Welsh language Annual Report 2019-2020 v2.pdf (26 pages)

14:00 - 14:00 7. Any Other Business (Prior Approval Only) 0 min

7.1. Meeting Review (Verbal)

Chair

14:00 - 14:00 8. Date and Time of Next Meeting - Tuesday 20 April 2021 at 14:00-16:00 by 0 min **Microsoft Teams**

**VELINDRE UNIVERSITY NHS TRUST AUDIT COMMITTEE FOR
NHS WALES SHARED SERVICES PARTNERSHIP**

**MINUTES OF MEETING HELD TUESDAY 20 OCTOBER 2020
14:00 – 16:00
BY MICROSOFT TEAMS
Part A – Public**

EXPECTED ATTENDEES:		
ATTENDANCE	DESIGNATION	
INDEPENDENT MEMBERS:		
Martin Veale (Chair)	Chair & Independent Member	
Gareth Jones (GJ)	Independent Member	
Janet Pickles (JP)	Independent Member	
ATTENDANCE	DESIGNATION	ORGANISATION
Neil Frow (NF)	Managing Director	NWSSP
Margaret Foster (MF)	NWSSP Chair	NWSSP
Andy Butler (AB)	Director of Finance & Corporate Services	NWSSP
Peter Stephenson (PS)	Head of Finance & Business Improvement	NWSSP
Roxann Davies (RD)	Corporate Services Manager	NWSSP
Simon Cookson (SC)	Director of Audit & Assurance	NWSSP
James Quance (JQ)	Head of Internal Audit	NWSSP
Gareth Price (GP)	Personal Assistant	NWSSP
Linsay Payne (LP)	Head of Financial Management	NWSSP
Ashleigh Trowill (AT)	Finance Graduate Management Trainee	NWSSP
Craig Greenstock (CG)	Local Counter Fraud Specialist	Cardiff and Vale UHB
Lauren Fear (LF)	Director of Corporate Governance	Velindre
Mark Osland (MO)	Director of Finance	Velindre
Gillian Gillett (GG)	Audit Representative	Audit Wales
Andrew Strong (AS)	Audit Representative	Audit Wales

Item		Action
1. STANDARD BUSINESS		
1.1	Welcome and Opening Remarks The Chair welcomed Committee members to the October 2020 Audit Committee meeting, and in particular Andrew Strong, Audit Wales, attending to present the NHS Hosted Systems report and Linsay Payne, Head of Financial Management, NWSSP and Ashleigh	

Item		Action
	Trowill, Finance Graduate Management Trainee, who were both observing the meeting.	
1.2	<p>Apologies Apologies were received from:</p> <ul style="list-style-type: none"> • Steve Ham, Chief Executive, Velindre University NHS Trust • Ann-Marie Harkin, Audit Team Leader, Audit Wales 	
1.3	<p>Declarations of Interest No declarations were received.</p>	
1.4	<p>Minutes of Meeting held on 30 June 2020 The minutes of the meeting held on the 30 June 2020 were AGREED as a true and accurate record of the meeting.</p>	
1.5	<p>Matters Arising from Meeting on 30 June 2020 It was noted that both Matters Arising were completed.</p>	
2. EXTERNAL AUDIT		
2.1	<p>Audit Wales Position Statement GG presented the Audit Wales Position Statement and set out an update on current and planned audit work, together with the Auditor General’s planned programme of topical publications, related studies, good practice, and national events that may be of interest to the Committee.</p> <p>All assurance work has been completed and findings from that work would be presented separately on the agenda. GG drew the attention to the wider work undertaken by Audit Wales, detailed at Exhibit 2, which included the five publications issued since the last meeting of the Audit Committee, including Tackling Fraud in Wales.</p> <p>The Chair requested an update as to current work in progress and GG stated that the COVID-19 learning project was underway, which was looking at best practice and lessons learned. It was noted that Audit Wales had reshaped their programme due to the pandemic.</p> <p>AB stated that Audit Wales would be performing a comprehensive review of personal protective equipment (PPE) procurement and distribution. The study would be led by Mark Jeffers and would look forward for Winter planning as well as looking back in terms of PPE procured over course of the pandemic. Similar projects would be taking place across Scotland and England and good practice would be shared.</p>	

Item		Action
	<p>AS added that since the Position Statement had been drafted, the National Value for Money Report has been published and the Clinical Care Information System Report would be going to the Public Accounts Committee during early November 2020. The Chair confirmed that PS and RD took a role in regularly reviewing new publications and circulating as appropriate for the Committee and Senior Leadership Team's attention.</p>	
2.2	<p>Audit Wales Management Letter 2019-20</p> <p>GG presented the Management Letter for the Committee's attention and stated that the letter summarises the services provided by NWSSP, of which no significant issues were raised that would prevent reliance on those services. GG highlighted that the report makes three recommendations which were agreed with Management. The Chair commented that this was a helpful assurance report with a positive conclusion.</p>	
2.3	<p>Audit Wales Nationally Hosted NHS IT Systems Report 2019-20</p> <p>AS presented the Nationally Hosted NHS IT Systems Report and referenced that all actions were completed from previous years. The scope of the audit looked at four IT systems; Prescription Pricing System, NHAIS, Oracle FMS and the Oracle ESR payroll system.</p> <p>The overall conclusion was that assurance could be given that financial values were likely to be free from material misstatement, with one new recommendation made relating to the ESR reporting system, of medium priority, to be completed by December 2020.</p> <p>The Chair noted the positive findings and progress made to complete recommendations raised previously. The Chair sought clarification on how the report findings would be shared with Health Boards and Trusts. AS confirmed that the Report would be distributed between audit teams who would share more widely. AB identified that it was imperative that the reports were acknowledged within the Health Boards and Trusts as NWSSP were providing these services across NHS Wales and confirmed that the report would be shared with the NWSSP Shared Services Partnership Committee at the next meeting in November 2020.</p>	

3. COUNTER FRAUD

3.1	<p>Raising Our Game; Tackling Fraud in Wales Report</p> <p>AB drew the Committee's attention to the Audit Wales report and recognised the importance of this because of the key role NWSSP plays in the NHS Wales Counter Fraud Service. This is the second report issued by Audit Wales, called Raising Our Game; Tackling Fraud, in which the NHS fairs particularly well relative to Welsh Central and Local Government with areas identified for improvement such as training and data analytics. AB noted that NWSSP have recently appointed a Data Analyst so it was anticipated we would develop in this area.</p> <p>The report highlighted 15 recommendations for the Welsh Public Sector and Graham Dainty, Head of Counter Fraud for NHS Wales agreed at the Directors of Finance meeting that the Counter Fraud Steering Group would prepare an Action Plan for each of the recommendations that were relevant for NHS Wales, for agreement at the Directors of Finance January 2021 meeting. The Chair requested that the Action Plan also be shared with the Audit Committee.</p> <p>The Chair noted that NHS Wales was well positioned but that we were always looking for ways to improve and the recommendation would help to strengthen our assurances.</p> <p>CG stated that overall it was a very positive report and asked if Audit Wales had any best practice to share regarding the recommendation made concerning data analytics and GG confirmed she would liaise with the NFI experts and bring back suggestions. The Chair welcomed this helpful approach.</p>	<p>PS</p> <p>GG</p>
3.2	<p>Counter Fraud Position Statement</p> <p>CG presented the Counter Fraud Position Statement, summarising the recent Counter Fraud and corruption work carried out to 30 September 2020, which highlighted that:</p> <ul style="list-style-type: none">• 35 days' work had been undertaken against the Plan;• There were three cases currently under investigation, with one ongoing civil recovery which was due to be written off, as 50% of monies had been recovered but we had received no further payments for over a year and understood that we were unable to locate the debtor for recovery;• Fraud awareness presentations were offered to NWSSP staff via Microsoft Teams in light of the current circumstances and it was noted that there had been limited take-up at present;	

	<ul style="list-style-type: none"> • In relation to the NFI, there was a timetable released for various data extracts and this was successfully completed by procurement and payroll teams, in good time; and • Fair processing data notices had been included on payslips for September and staff were informed that their data had been shared. <p>The Chair stated that in relation to the Report we received on Raising Our Game; Tackling Fraud in Wales, there was a link here with awareness training and CG confirmed that this had been built into the corporate induction training. There had been discussions to make an e-learning module on ESR and mandate this, however this must be agreed on an all-Wales basis. There is support from the Directors of Finance to implement this module as part of the Core Skills Statutory and Mandatory Framework.</p>	
<p>3.3</p>	<p>Counter Fraud Newsletter</p> <p>The Committee received the latest Counter Fraud newsletter, for approval, as presented by CG. The newsletter had been endorsed by the Senior Leadership Team and had been designed by the Communications Team.</p> <p>The Chair noted that it was an easy read and the design was very professional. GJ felt it was an informed read and highlighted one typographical error to be amended before the newsletter was issued.</p> <p>The Committee was content to approve the newsletter, subject to final amendments. The newsletter would be sent out bilingually, via email and it would be uploaded to the staff intranet page. In the interests of sustainability, the newsletter would remain electronic and we would not issue paper based hard copies.</p>	
<p>4. INTERNAL AUDIT</p>		
<p>4.1</p>	<p>Internal Audit Position Statement</p> <p>JQ presented the Internal Audit Position Statement. The purpose of the report was to highlight progress of the Internal Audit Plan to the Committee, together with an overview of other activity undertaken since the previous meeting. JQ stated that good progress had been made against the Work Plan and this was summarised at Appendix A. The main activities since the last Committee meeting were supporting the Primary Care Services system and setting up the audit programme for the remainder of the financial year.</p>	

	<p>The Chair queried if the programme was where we had expected to be at this point in time and JQ reported that there were no significant issues in regard to completing the existing programme of works that had been agreed, but that he continued to manage resources across the board.</p>	
4.2	<p>Credit Card Expenditure Internal Audit Report JQ introduced the Credit Card Expenditure Internal Audit Report and presented the findings to the Committee, which highlighted achievement of substantial assurance, with one medium and one low priority recommendation for action.</p> <p>AB noted that he had been keen for audit to review the credit card expenditure as spend levels were rising. The recommendations made relate to monitoring control and evidencing of email approvals. AB reassured the Committee that NWSSP works closely with the Finance Team in Velindre to review expenditure, and work undertaken by LP and AT around the control environment to ensure the systems are robust and provide assurance was demonstrated by the report's findings.</p>	
4.3	<p>Declarations of Interest Advisory Report JQ introduced the Declarations of Interest Advisory Report and presented the findings to the Committee, noting advisory reports were not awarded an assurance rating. The report highlights four medium priority recommendations for action.</p> <p>The report referenced the work that had been undertaken by Corporate Services in improving policies, procedures and processes, as regards monitoring and declaring interests. A review was commissioned to highlight any recommendations, before the system was fully embedded across the organisation. The report recognised how the process has been designed regarding guidance documentation and the accessibility of the new process, which has been taken forward and achieved a positive outcome.</p> <p>PS noted that all declarations would now be completed via the Electronic Staff Record (ESR) system, promoting sustainability and standardisation and that NWSSP is taking the issue of declaring interests further than others have done to date.</p>	
4.4	<p>COVID-19 Financial Governance Advisory Report JQ introduced the COVID-19 Financial Governance Advisory Report and presented the findings to the Committee.</p> <p>The scope of this report was financial governance and particularly the work of the Financial Governance Group. Similar reviews have</p>	

	<p>been undertaken across NHS Wales. JQ reported a positive outcome from the review and recognised that in the early days of the pandemic, things were developing rapidly. JQ highlighted that the checks implemented within NWSSP were considered best practice as the risks were mitigated as far as they reasonably could be within the operating environment.</p> <p>Considerations for the future were made and JQ was mindful that arrangements may need to be stepped up and down, depending on how the pandemic plays out. The suggestions were accepted and would be built into the continued development of arrangements.</p> <p>The Chair stated that on the whole it was a positive report, highlighting good practice and there were no significant issues arising.</p>	
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5. GOVERNANCE, ASSURANCE AND RISK

GOVERNANCE AND ASSURANCE MATTERS DURING COVID 19 PANDEMIC

<p>5.1</p>	<p>Verbal Update on NWSSP COVID-19 Matters, including Business Continuity Planning Report</p> <p>The Committee received a comprehensive verbal update from AB in relation to the handling of COVID-19 matters and the impact on the organisation. AB assured the Committee that the PPE plan had been agreed and the focus was to have 24 weeks’ worth of stock in place by 30 November 2020, for which orders have been raised.</p> <p>PS updated the Committee on the business continuity planning (BCP) arrangements for dealing with COVID. The report links to the overall approach to BCP within NWSSP and considers lessons learned from the first wave of the pandemic and what we could do differently in the event of a second wave.</p> <p>PS advised that the Planning and Response Group was established to provide governance over the response and membership included the SLT, Trade Unions, Surgical Materials Testing Laboratory (SMTL) presence, and Communications. The Group made early decisions on allowing staff to work remotely and the migration to Office 365, which was planned to take nine months but was fully implemented within three weeks.</p> <p>Pre-employment checks for Recruitment Services have been conducted remotely and have saved time and resources as they are more accessible. However, the ability to implement this</p>	
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	<p>change on a long-term basis is outside of our gift as it is a national decision, but we would be keen to continue this arrangement as it has worked well.</p> <p>There is now a suite of documentation available to staff to ensure that they remain safe whether working in a NWSSP or Health Board building, or working from home. Operational responsibility for this guidance sits with RD as the Chair of the Building Managers Group. All directorates have updated action cards and/or business continuity plans.</p> <p>Before the pandemic, the demand for office space was increasing, but the experience of the pandemic has reversed this approach. An Agile Working Group has been established to promote new ways of working and encouraging staff to work remotely has helped with work-life balance and childcare arrangements. Tangible examples were extending opening hours for buildings, changing working patterns, and holding virtual meetings. The results of staff surveys demonstrate that these changes have been well-received.</p> <p>There are risks to consider going forward. As more people work from home, the cyber security risk increases and it is imperative that best practice be followed at all times. GJ queried assurances in place for cyber security plans and PS assured the Committee that systems were robust but that the biggest weakness was staff failing to comply with stated practice, and clicking on external links when they shouldn't. NWSSP were fortunate to have a Cyber Security Expert, Nick Lewis, who gives advice nationally regarding security, and who has previously presented to the Committee on this topic. AB requested that NL be invited again to attend a future Audit Committee meeting to update the latest cyber security arrangements.</p> <p>PS noted that as we move into any second wave, maintaining staff morale would become more challenging. The Committee were keen to learn more about the staff welfare, health and well-being offering and PS provided assurances that a huge amount of work was being undertaken including through the various Groups, including Adapt and Future Change and the Health and Well-being Staff Partnership. The Chair queried whether staff were able to utilise their equipment at home, such as monitors and ergonomic chairs. PS confirmed that this was done on a case by case basis, with assets being recorded.</p> <p>The Chair thanked PS for the comprehensive update.</p>	<p>PS/RD</p>
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<p>5.2</p>	<p>Corporate Risk Register</p> <p>PS introduced the Corporate Risk Register. There were four red risks, as follows:</p> <p><u>Demise of Exeter Software System</u></p> <p>The system was due to go live in January and there were challenges but this was now back on track. The NHS Digital arrangement for the current system would take us to the end of March 2021 and this risk should soon be coming off the Register.</p> <p><u>The threat of a no-deal Brexit</u></p> <p>With the threat of a no-deal Brexit looking more imminent, experiences of working through the pandemic have helped us prepare and learn lessons. We have good stock levels at our warehouses, which should help with any implications arising from the impact of a possible no-deal Brexit, but significant activity is being progressed to mitigate this risk as far as possible.</p> <p><u>NHS Digital plans to withdraw the Ophthalmic payment service</u></p> <p>The Primary Care Services’ Ophthalmic Payment System is run by NHS Digital and they are withdrawing this service at the end of March 2021. We were currently in the process of developing an in-house solution which should see this risk come off the Register shortly.</p> <p><u>The total quantum for addressing COVID-19 across Wales remaining fluid and uncertain</u></p> <p>Initial funding has now been provided by Welsh Government to cover the additional costs directly attributable to COVID-19. Total costs for the year in this regard are projected to be in excess of £8m and it remains to be seen whether Welsh Government will be able to fully refund all of the costs.</p> <p>PS also stated that a refresh of the Register had been undertaken with the SLT in August 2020, which saw five risks removed. GJ queried the de-escalation of the risk regarding compliance with the Welsh Language Standards and PS confirmed it would continue to be monitored through the Finance & Corporate Services Risk Register.</p> <p>The Chair asked if plans were in place to maintain supplies for medicines, staffing and medical devices from abroad, given the challenges experienced around the pandemic as regards supply chains. AB confirmed that we had established a Brexit Project Board and have learnt lessons from the procurement of PPE, where we had relied on other parts of the UK previously and we were now</p>
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	ensuring self-reliance as much as possible, with a lot of planning having gone into preparing for a no-deal Brexit.	
3.1	<p>Governance Matters</p> <p>RD presented the Governance Matters paper, which provided the Committee with the contracting activity from June 2020, to date and highlighted that there had been no departure from Standing Orders. NWSSP are also considering developing local Standing Financial Instructions.</p> <p>In relation to contracting activity, there had been 15 contracts let for NWSSP, and 44 contracts let for NHS Wales, of which 13 were at briefing stage, 23 at ratification and 8 were extensions.</p> <p>Where contracting activity related to the procurement of goods for COVID-19, these had been recorded centrally and each had been subject to robust governance and due diligence processes, which required a separate file note to be held</p> <p>In relation to the annual review of stores write-offs for the 2019-20 period, these had totalled £15,623, equating to 0.18% of total stock held. All write-offs were actioned in accordance with the Stores Losses Protocol.</p> <p>There were no declarations made as to gifts, hospitality or sponsorship since the last meeting.</p>	
5.4	<p>Tracking of Audit Recommendations</p> <p>RD advised that NWSSP had not received any Internal Audit Reports with limited or no assurance rating and that of 205 recommendations, 197 were implemented, seven were not yet due and one has a proposed a revised deadline of 30/09/2021, for Committee approval, which was detailed at Appendix B (relating to the cyber security recommendation which has been delayed in its implementation due to the impact of COVID-19 and contractors not able to be present on site to complete the works surrounding the IT cabinet). The Committee were content to approve the revised deadline proposed.</p> <p>RD confirmed that the SLT receive a monthly breakdown of all unimplemented recommendations and that the tracker was due to be updated following the Audit Committee meeting with the finalised Internal Audit Reports within this agenda.</p>	
5.5	<p>Audit Committee Annual Report 2019-20</p> <p>RD presented the Committee with the Annual Report, for approval and stated that the document highlights the activities and details</p>	

	<p>the performance of Committee, assessing the work undertaken by Internal and External Audit, Counter Fraud and the Governance, Assurance and Risk staff at NWSSP.</p> <p>Appendices 1 and 2 detailed a full list of internal audits undertaken, with assurance ratings awarded and all internally generated reports and papers for the period.</p> <p>RD confirmed that once approved, the document would be sent to the Welsh Language Hwb for translation and published bilingually, on both the staff intranet and website.</p> <p>The Committee were content to approve the Audit Committee Annual Report 2019-20.</p>	
5.6	<p>Audit Committee Effectiveness Survey (ACES) Results</p> <p>RD presented a summary of the results and provided an update as to the process for the 2020 review, stating that the ACES comprised of 50 questions across six themes, which covered compliance with law and regulations governing NHS Wales, internal control and risk management, internal and external, counter fraud and Committee leadership.</p> <p>RD stated that the results of the survey provides assurance to the Committee in terms of existing arrangements and potential areas for development, for example, the continuation of virtual meetings.</p> <p>RD reported that the Terms of Reference for the Audit Committee which form an annex to the Shared Services Partnership Committee Standing Orders, were in the process of being reviewed and would be brought back to the January 2021 meeting, for the Committee's approval.</p>	
6. ITEMS FOR INFORMATION		
7.1-7.3	<p>Items for Information</p> <p>The following items were received for Committee information only:</p> <ul style="list-style-type: none"> • Audit Committee Forward Plan 2021-22; • NWSSP Annual Review 2019-20; and • NWSSP Freedom of Information Annual Report 2019-20. <p>In relation to the NWSSP Annual Review, the Chair praised this as a very good document, which was illustrative and provided an excellent overview of NWSSP's achievements throughout the year.</p> <p>As regards the Freedom of Information Annual Report, GJ queried the increase in requests received during October 2019 and RD</p>	

	agreed to provide Independent Members with a breakdown of information relating to these requests.	RD
7. ANY OTHER BUSINESS		
7.1	Any Other Business No further items were raised for discussion during the meeting.	
7.2	Meeting Review The Chair conducted a review of effectiveness of the meeting and the observations of Committee Members were very positive.	
DATE OF NEXT MEETING: Tuesday, 26 January 2021 from 14:00-16:00 NWSSP Boardroom HQ, Charnwood Court, Nantgarw / By Teams (As appropriate)		

Actions arising from the meeting held on 20 October 2020			
Item	Responsibility	Description	Status
3.1	PS	Raising Our Game; Tackling Fraud in Wales Report <ul style="list-style-type: none"> It was agreed that the Counter Fraud Steering Group would prepare an Action Plan for each of the recommendations that were relevant for NHS Wales, to be shared with the Audit Committee in April 2021. 	Complete – Reported is complete, however this will be taken to DOF's meeting scheduled in February 2021 for approval, then brought to April 2021 Audit Committee.
3.1	GG	Raising Our Game; Tackling Fraud in Wales Report <ul style="list-style-type: none"> It was agreed that Audit Wales would look to share best practice regarding the recommendation made concerning data analytics and the National Fraud Initiative and share this with the Committee and Local Counter Fraud Expert. 	Ongoing – GG to share best practice documentation in due course.
5.1	PS	Verbal Update on NWSSP COVID-19 Matters, including Business Continuity Planning Report <ul style="list-style-type: none"> It was agreed that NWSSP's Cyber Security Expert, Nick Lewis, would be invited to a future Audit Committee meeting, to present the latest developments within this area. 	Complete – Nick Lewis has been invited to present the latest developments in Cyber security at April 2021 Audit Committee.
7.3	RD	NWSSP Freedom of Information Annual Report 2019-20 <ul style="list-style-type: none"> It was agreed that RD would provide Independent Members with a breakdown of information relating to Freedom of Information requests during October 2019. 	Complete – This was collated and shared with Independent Members following the October 2020 meeting.

Audit Committee Update - NHS Wales Shared Services Partnership

Date issued: January 2021

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Audit Committee Update

About this document

- 1 This document provides the Velindre University NHS Trust's Audit Committee for Shared Services with an update on current and planned Wales Audit Office work, together with information on the Auditor General's planned programme of NHS related studies and publications together with the work of our Good Practice Exchange (GPX).

Audit update

- 2 Details of our planned work and associated audit assurance arrangements for 2021 are set out in a separate paper that has been issued to this Audit Committee. The majority of this audit work will occur during February and March.
- 3 A summary of this work and any matters arising that need to be considered by the NWSSP management will be reported within our Management Letter in June 2021. This report will also include any issues relating to NWSSP identified by other Welsh health auditors.

Good Practice events and products

- 4 In addition to the audit work set out above, we continue to seek opportunities for finding and sharing good practice from all-Wales audit work through our forward planning, programme design and good practice research.
- 5 Past materials are available via the [GPX webpages](#), along with details of future events.
- 6 In response to the Covid-19 pandemic, we have established a **Covid-19 Learning Project** to support public sector efforts by sharing learning through the pandemic. This is not an audit project; it is intended to help prompt some thinking, and hopefully support the exchange of practice. We have produced a number of outputs as part of the project which are relevant to the NHS, the details of which are available [here](#).

NHS-related national studies and related products

- 7 The Audit Committee may also be interested in the Auditor General's wider programme of national value for money studies, some of which focus on the NHS and pan-public-sector topics. These studies are typically funded through the Welsh Consolidated Fund and are presented to the Public Accounts Committee to support its scrutiny of public expenditure.

- 8 **Exhibit 1** provides information on the NHS-related or relevant national studies published in the last twelve months. It also includes all-Wales summaries of work undertaken locally in the NHS.

Exhibit 1 – NHS-related or relevant studies and all-Wales summary reports

Title	Publication Date
<u>Procurement and supply of PPE during the COVID-19 pandemic</u>	December 2020
<u>NHS Wales Finances Data Tool (mid-year impact of COVID-19 expenditure)</u>	November 2020
<u>Welsh Community Care Information System</u>	October 2020
<u>The National Fraud Initiative in Wales 2018-20</u>	October 2020
<u>10 Opportunities for Resetting and Restarting the NHS Planned Care System</u>	September 2020
<u>Cracking the Code: Management of Clinical Coding Across Wales</u>	September 2020
<u>'Raising Our Game' - Tackling Fraud in Wales</u>	July 2020
<u>Rough Sleeping in Wales – Everyone's Problem; No One's Responsibility</u>	July 2020
<u>NHS Wales Finances Data Tool - up to March 2020</u>	July 2020
<u>Findings from the Auditor General's Sustainable Development Principle Examinations</u>	May 2020



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2021 Audit Assurance Arrangements **NHS Wales Shared Services Partnership**

Audit year: 2020-21

Date issued: January 2021

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Summary

- 1 The purpose of this paper is to set out the 2020-21 audit assurance arrangements for external audit in line with the requirements of International Standards of Auditing (UK and Ireland) (ISAs) relevant to services provided by the NHS Wales Shared Services Partnership (NWSSP).
- 2 External audit assurance arrangements need to consider:
 - ISA 315 – identifying and assessing the risks of material misstatement through understanding the entity and its environment;
 - ISA 402 – audit considerations relating to an entity using a service organisation;
 - ISA 500 – audit evidence (relevant to a management expert); and
 - ISA 610 – using the work of internal auditors.
- 3 This paper sets out my proposed work, when it will be undertaken and who will undertake it.

External audit assurance arrangements

- 4 The Velindre University NHS Trust's external audit team and the Audit Wales IM&T auditors have agreed arrangements to co-ordinate the work necessary to provide the assurances required by the local audit teams of each of the individual health bodies across Wales. Local audit teams decide the work required on the services provided by NWSSP, relevant to their responsibilities for providing an opinion on the related health bodies financial statements. They consider whether testing of the key controls within the system, or substantive testing of the figures produced by the system, provides the required assurance in the most efficient way.
- 5 The assurances that local audit teams have requested for the 2020-21 financial statements are set out in [Exhibit 1](#). The areas we will be auditing, with a brief description of the audit procedures and proposed dates for the audit visits are detailed in [Appendix 1](#).

Exhibit 1: audit assurance arrangements

The table below sets out the content of the audit assurance work programme for 2021

NWSSP managed service	Audit assurance requirements
Understanding the entity and its environment (ISA 315)	
<ul style="list-style-type: none"> • Prescription Pricing System • National Health Application and Infrastructure Services (NHAIS) • Oracle Financial Management System (including OCR invoice scanning) • Oracle ESR Payroll systems administration (user access to payroll elements only) 	<ul style="list-style-type: none"> • Review, document and evaluate the IM&T environment and application controls.
Service organisation (ISA 402)	
<ul style="list-style-type: none"> • Primary Care Services (general medical and general pharmaceutical services) • Employment Services – payroll system • Procurement Services – accounts payables system 	<ul style="list-style-type: none"> • To document the financial systems, identify key controls and evaluate the system. • Controls or substantive testing, as determined by local audit teams.
Management expert (ISA 500)	
<ul style="list-style-type: none"> • Legal and Risk Services 	<ul style="list-style-type: none"> • Document an understanding of the services provided. • Evaluate the competence, capability and objectivity of the service provider. • Evaluate the appropriateness of the work (as relevant to the work of the local audit teams).
Internal audit (ISA 610)	
<ul style="list-style-type: none"> • All-Wales 'management arrangements' • Internal audit services provided to individual NHS bodies 	<ul style="list-style-type: none"> • Assessment of compliance with internal audit standards (applicable to overall management of internal audit services across NHS Wales) – which will include regular liaison with the Director of Audit and Assurance. • Local audit teams may also need to assess compliance with standards relevant to internal audit work at each individual NHS body.

- 6 The NWSSP manages a number of the national NHS IT applications and infrastructure which are used by other NHS organisations in Wales. The Wales Audit Office IM&T auditors will review the IM&T infrastructure and application controls that are applied to the following systems for the purposes of providing assurances for NHS audit opinions to local audit teams:
- Prescription Pricing System which is used to process prescriptions and calculate reimbursement for pharmacy contractor payments;
 - National Health Application and Infrastructure Services (NHAIS) or Exeter, used for NHS demographics and calculating primary care General Medical Services (GMS) contractor payments;
 - Oracle Financial Management System (FMS), including OCR invoice scanning, used by all of NHS Wales as the main accounting system for managing and producing the NHS accounts; and
 - System administration functions for the payroll elements of the Electronic Staff Record (ESR) payroll system.
- 7 In addition, local audit teams have requested that we review all contracts greater than £1 million to ensure that appropriate approval has been sought from Welsh Government.
- 8 Local audit teams may determine that additional assurances are required, from other service areas of the NWSSP, during the course of the audit. If such work arises, we will discuss this with the NWSSP management and update the Audit Committee for Shared Services accordingly.

Fee, audit team and timetable

Fee

- 9 This work is being undertaken in order to provide local audit teams with assurances relevant to their responsibilities. The fee for this work will therefore be included in the individual health board and trust fees, as part of their annual audit outlines.

Audit team

- 10 The main members of my local audit team, together with their contact details, are summarised in [Exhibit 2](#).

Exhibit 2: my local audit team

The table below provides details of my local audit team

Name	Role	Contact number	E-mail address
Ann-Marie Harkin	Engagement Lead – Financial Audit	02920 320562	ann-marie.harkin@audit.wales
Steve Wyndham	Financial Audit Manager	02920 320664	steve.wyndham@audit.wales
David Burridge	Financial Audit Lead	02922 677839	david.burridge@audit.wales
Andrew Strong	Information Management & Technology Audit Lead	02920 320587	andrew.strong@audit.wales

Timetable

- 11 The Velindre University NHS Trust audit team will issue reports that provide:
 - appropriate assurances for local audit teams, or highlighting areas of concern that need to be addressed, to support the work of local audit teams to inform their opinion on the financial statements.
 - provide a summary of the work undertaken, together with any matters arising that need to be considered by the NWSSP management. This report will also include any issues relating to NWSSP identified by other Welsh health auditors.
- 12 The assurance reports provided to local audit teams will be reported to the health board or trust's audit committee, where appropriate, as part of the audit of their financial statements. The report to the NWSSP management will be reported to the Velindre University NHS Trust's Audit Committee for Shared Services, and shared with other audit committees, where matters arising affect their local responsibilities. My key milestones for reporting to NWSSP are set out in [Exhibit 3](#).

Exhibit 3: timetable

The table below sets out the key milestones for delivering my proposed areas of work

Planned output	Work undertaken	Report finalised
Audit assurance arrangements plan	December 2020	January 2021
Nationally Hosted NHS IT systems	January - April 2021	June 2021
Management letter	January - June 2021	July 2021

Appendix 1

Audit areas and proposed timing

Exhibit 4: audit areas and proposed timing

Audit areas	Proposed audit timing	Audit work
Internal audit	February 2021	Review Internal Audits' compliance with Public Sector Internal Audit Standards (PSIAS). Review their annual audit plan and status of their audits.
Payroll	February - April 2021	Update our understanding of the payroll system and identify key controls. Controls testing of exception reports.
General Medical Service South East Wales	January - March 2021	Update our understanding of the general medical service system and identify key controls. Controls testing of global sum payments (capitation lists and patient rates).
General Medical Services West Wales	January - March 2021	Update our understanding of the general medical service system and identify key controls. Controls testing of global sum payments (capitation lists and patient rates).
Pharmacy & Prescribed drugs	January - March 2021	Update our understanding of the pharmacy contract and prescribed drugs. Controls testing of payments to pharmacists (checks undertaken by the Professional Services Team and drug tariff rates).
Accounts Payable & Public Sector Payment Policy	January 2021	Update our understanding of the accounts payable system and undertake any substantive or controls testing as determined by local audit teams. Review the process of how PSCP works in NWSSP.
Procurement	April 2021	Review of contracts awarded with a value greater than £1 million.
Welsh Health Legal	January - March 2021	Assess the competence, capability and objectivity of NWSSP LARS staff (as required by ISA 500). Update our understanding of the systems used to record legal cases, the assumptions and methods used to populate Quantum reports. Test a sample of clinical negligence cases, reviewing the information collated on the Legal and Risk management system.
Nationally Hosted NHS IT systems – IT audit work	January - April 2021	Review our understanding of the general IT controls and identify key controls. Review, document and evaluate the IM&T environment and application controls. Test a sample of IT controls.



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To: Nick Ramsay MS
Chair
Public Accounts Committee
The Senedd

Via email:
nick.ramsay@senedd.wales

Dai Lloyd MS
Chair
Health, Social Care and
Sport Committee
The Senedd

Via email:
dai.lloyd@senedd.wales

Reference: AC/237/caf

Date issued: 15 December 2020

Dear Nick and Dai

Procurement and supply of PPE during the COVID-19 pandemic

I am writing to update you on work Audit Wales is carrying out looking at the procurement and supply of Personal Protective Equipment (PPE) during the COVID-19 pandemic.

There has been a good deal of interest in the issue of PPE since the outset of the pandemic. The Health, Social Care and Sport (HSCS) Committee commented on the supply of PPE in its July 2020 [report](#) on the impact and management of COVID-19 in health and social care. The Public Accounts Committee received evidence about PPE procurement, including domestic supply chains, in September 2020 as part of its inquiry into public procurement.

More recently, interest has been heightened by the publication of two reports by our colleagues in the National Audit Office. The first of these looked at [UK Government procurement](#) during the COVID-19 pandemic, which included a significant focus on procurement of PPE for health and social care in England. There was extensive media coverage of the NAO's findings in relation to a twin-track approach to identifying suppliers, a high-priority lane to assess and process potential PPE leads from government officials, ministers' offices, MPs and members of the House of Lords, senior NHS staff and other health professionals.

The second report looked more broadly at the supply of PPE in England, with extensive coverage of the large increase in the cost of PPE during the pandemic.

About our work

I thought it may be helpful to explain more about our work, which covers the same areas as the NAO: procurement and supply of PPE. We intend to build on the work of the HSCS Committee and to probe in more depth in some specific areas, notably procurement. We expect our work to have a forward-looking focus but based on a robust understanding of the lessons from the early phases of the pandemic.

Our scope takes in the procurement and supply of PPE for all public services. However, in practice, the primary focus will be the NHS and social care. Also, while recognising that there has been local procurement of PPE, this will not be a significant focus of our work. We will focus primarily on the national procurement, led by the Welsh Government and NHS Wales Shared Services Partnership (Shared Services).

We are currently in the fieldwork phase of the study. We have already interviewed several Welsh Government and Shared Services staff. We still have more interviews to carry out over the coming weeks. We have also gathered detailed documentary evidence.

In seeking evidence, we have also written to organisations that supplied evidence related to PPE as part of the HSCS Committee inquiry earlier this year. We have specifically asked for any new evidence or issues that they may wish to share with us.

Our fieldwork so far has focussed on the procurement of PPE. We still have a significant amount of work to do to complete our emerging picture on both procurement and supply. Our intention is to complete our fieldwork and issue our full findings in the spring.

Facts, figures and some emerging findings

In advance of our full report, I thought it would be helpful to share some facts and figures as well as some early emerging findings. I would emphasise that these are early findings and not set in stone. Nonetheless, given the high level of public interest and importance of these issues, I consider that there is merit in setting out the facts around some aspects of what we have found to inform any ongoing scrutiny.

At the start of the pandemic, the Welsh Government had a 'pandemic stockpile' of PPE, developed as part of UK wide arrangements, which it intended to distribute to health and social care bodies. The Welsh Government told us this equipment was crucial during the first wave. However, the stockpile was prepared for an influenza pandemic. Updated guidance on protecting NHS staff from coronavirus required some additional PPE, which was either not in the stockpile at all, or was not held in sufficient quantities to meet the extra demands posed by the

coronavirus. The Welsh Government, like other governments around the world, therefore needed to very quickly procure items such as fluid resistant gowns and respirators. Further, we understand that that some expected deliveries from existing suppliers did not materialise, exacerbating the pressure to quickly acquire more PPE.

The Welsh Government told us that it originally anticipated that there would be a UK-wide approach to PPE procurement. However, it agreed with the UK Government that, given the challenges, the Welsh Government would instead get funding via the Barnett formula and take on responsibility for procuring its own PPE. The Welsh Government told us it had continued to work with the UK Government and other devolved nations on procuring PPE, where opportunities have arisen.

The work to rapidly procure PPE for NHS Wales was led by the NHS Wales Shared Services Partnership and Welsh Government officials. Shared Services has taken on responsibility for providing PPE to services beyond the NHS, notably to social care and independent contractors in primary care.

Spend and distribution of PPE

As set out in our recent [NHS Wales Finances Data Tool](#), at the end of September 2020 the NHS had spent £130 million on PPE for Wales. This includes £17 million in local procurement by health boards and trusts on top of £113 million spent by Shared Services on PPE. The Shared Services total includes £37 million for supply of PPE to social care and primary care services, such as GPs, pharmacists and opticians.

Shared Services expects to spend £239 million on PPE for Wales by the end of March 2021, with social care and primary care accounting for 43% (£104 million) of this expenditure.

In addition to the spend on PPE for Wales, as of the end of September, the Welsh Government had spent £37 million on PPE on behalf of other parts of the UK. It expects to recoup this expenditure. We have not yet examined the financial arrangements in place with the other nations.

The NAO's report on the supply of PPE highlights the significant increases in the cost of PPE at the outset of the pandemic. Shared Services told us that for many items it was a 'seller's market' with governments globally competing for scarce supply. We will be looking in more depth at the relative costs of items before the pandemic and during the pandemic. Where appropriate to do so, we will try to make comparisons with the prices paid by other parts of the UK.

As at 29 November 2020, Shared Services has distributed just under 480 million items of PPE since 9 March 2020¹ with around 240 million of these being issued to the social care sector. The 480 million items include 90.5 million aprons, 120 million masks², 4 million face visors, 255 million gloves and 2 million gowns³.

The Welsh Government and Shared Services intended to build up a 24-week buffer stock of PPE by the end of November 2020. Shared Services told us that at the end of November the PPE buffer stock was largely in place. They were awaiting delivery of FFP3 Respirators made by a particular brand, which have been particularly difficult to source globally, and the receipt of orders that had been placed for gloves. We have visited the warehouse, where a proportion of the buffer stock is held. This visit reinforced to us the scale of the logistical operation. But we have not yet reviewed the modelling used to assess whether the buffer stock is sufficient for 24 weeks and we will do so as part of our fieldwork in the coming weeks.

Contracting approach

Under the Public Contract Regulations 2015 and related guidance⁴ public bodies can enter contracts without competition or advertising so long as there are genuine reasons for extreme urgency. The Welsh Government, via Shared Services, has used these emergency exemptions for its procurement of PPE. Some details of contracts have been placed retrospectively on the Sell2Wales website. As part of our work we will be confirming that the correct contract notification procedures are being followed.

Shared Services has agreed contracts with around 100 different providers. However, many of these are for relatively low values. Around three-quarters of the suppliers have contracts valued at less than £1 million and around half are less than £150,000. Some 94% of the expenditure to the end of September 2020, including the expenditure on behalf of other parts of the UK, was with five suppliers.

While most of the PPE contracts are direct with suppliers, some of the larger contracts involve agents acting as intermediaries with overseas manufacturers. As

¹ Data source – [Stats Wales](#): Weekly number of PPE items issued by date. The reporting of PPE items issued is based on individual units, except for: gloves where a unit is reported based on the unit size of a pack and hand sanitiser where the unit is a bottle regardless of size.

² This figure includes: Type I and Type II mask, Type IIR masks, FFP2 masks, FFP3 masks.

³ This figure includes: Gowns (fluid resistant) and Gowns (other).

⁴ Regulation 32 and Procurement Policy Note 01/20: Responding to COVID-19 – March 2020

part of our fieldwork we are exploring further the use of agents and associated costs.

Although the bulk of PPE came from international suppliers, the Welsh Government and NHS worked with Welsh manufacturers to develop local supply chains. Welsh Government officials told us that this involved collaborative working within the Welsh Government, NHS and Industry Wales through the critical equipment requirements engineering team (CERET). We intend to explore this aspect of the procurement in more detail in the coming weeks.

Checks and approval arrangements

Shared Services and the Welsh Government told us that they have never had an equivalent to the twin-track 'high priority lane' approach to identifying potential suppliers described by the NAO in its report on COVID-19 procurement in England. In Wales, the Life Sciences Hub played a key role as a first point of contact for potential suppliers and manufacturers which, where appropriate, were referred to Shared Services. Shared Services told us that they also identified new suppliers through their existing networks, through suppliers getting in touch themselves and through other referrals. While there were referrals from politicians, Shared Services told us that these were subject to the same process, scrutiny and prioritisation as any other contacts. We are carrying out work to more fully understand how suppliers were identified and how referrals were managed.

The Welsh Government and Shared Services put in place revised governance arrangements around the letting of PPE contracts. All orders over £1 million in value already required the prior approval of the Welsh Government. In addition, a system of due diligence checks, scrutiny arrangements and a hierarchy of approvals were introduced involving the board of Velindre NHS Trust, which hosts Shared Services, and depending on the value and nature of the contract. Shared Services set up a new Finance Governance Group to support rapid decision making. This Group comprised senior managers from the NHS including specialists in areas like audit, fraud prevention, procurement, accountancy, and law.

The Welsh Government and Shared Services told us that the nature of the market during the pandemic meant that in some cases suppliers required an advance payment. To manage the risks, in a small number of instances, Shared Services made these payments through an independent escrow account. Shared Services and Welsh Government told us that this approach meant that the suppliers could see that the funding was in place but could not draw down the money until Shared Services had received the goods and checked that they met the required quality standards. All advance payments had to be approved by the Finance and Governance Group, with the Group referring advance payments more than 25% of a contract's value to Welsh Government for prior approval. We will be exploring in more detail how this system worked in practice as well as the work to check quality, which involved the Surgical Materials Testing Laboratory (SMTL) based in Bridgend.

The NHS Internal Audit service carried out a review of Financial Governance Arrangements during the COVID-19 Pandemic, with a focus on PPE, between March and August 2020. It found that the procedures around background checks, approvals and recording of decisions that the Welsh Government and NHS had put in place were complied with in all cases. It also noted that there were some improvements made to the financial governance arrangements and quality of documentation over the period. As part of our work we plan to test a sample of contracts. In doing so, we intend to place reliance on the work of Internal Audit in verifying compliance, while asking broader questions on value for money.

Next steps

Over the coming weeks, we intend to complete our work on procurement and then start to look in more depth at the issues around maintaining supply to the frontline staff. We will then start to form our conclusions, draft our report and go through our usual process of clearing it for factual accuracy with the Welsh Government and the other named parties.

In the meantime, if there is anything else we can do to help you and your committees on this matter please let me know.

Yours sincerely



ADRIAN CROMPTON
Auditor General for Wales

NHS Wales Shared Services Partnership

Audit Committee

26 January 2021

Internal Audit Progress Report

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1. INTRODUCTION

The purpose of this report is to provide an overview of activity since the previous meeting in October 2020.

2. 2020/21 INTERNAL AUDIT PLAN

Number of audits in plan	17
Of which:	
Number of audits reported as final	4
Number of audits at draft report stage	1
Number of audits in progress	11
Number of audits at planning stage	1

Progress in respect of each of the reviews in the 2020/21 Internal Audit Plan is summarised at Appendix A.

3. OTHER INTERNAL AUDIT ACTIVITY

In addition to the internal audit reviews in the 2020/21 Internal Audit Plan, we have undertaken two additional short reviews at the request of management.

We have reviewed controls and recommended improvements in respect of manual payments and the home electronics salary sacrifice scheme in response to isolated processing errors identified to us by management.

4. ENGAGEMENT

The following meetings have been held/attended during the reporting period:

- Initial planning discussions for the 2021/22 Internal Audit Plan;
- Adapt and Future Change Group;
- project board meetings;
- audit scoping and debrief meetings; and
- liaison meetings with senior management.

5. RECOMMENDATION

The Audit Committee is invited to note the above.

2020/21 Internal Audit Plan

Assignment	Draft to Mgt Response (Days)	Status	Rating	Summary of Recommendations				Notes
				High	Medium	Low	N/A	
AUDITS FOR BOTH NWSSP AND INDIVIDUAL HEALTH BOARDS / TRUSTS								
PRIMARY CARE SERVICES								
General Medical Services (GMS)		Work in Progress						Scheduled for April 2021
General Dental Services (GDS)		Work in Progress						Scheduled for April 2021
General Ophthalmic Services (GOS)		Work in Progress						Scheduled for April 2021
General Pharmaceutical Services (including Prescribing)		Work in Progress						Scheduled for April 2021
General Medical Services Contractor Systems - FPPS		Work in progress						Scheduled for April 2021
General Medical Services Payments System		Draft						Scheduled for April 2021
GOS Contractor Payments System		Work in progress						Timing dependent upon project progress

Assignment	Draft to Mgt Response (Days)	Status	Rating	Summary of Recommendations				Notes
				High	Medium	Low	N/A	
EMPLOYMENT SERVICES								
Payroll Services		Work in progress						Scheduled for April 2021
PROCUREMENT SERVICES								
Purchase to Pay		Work in progress						Scheduled for April 2021
OTHER NATIONAL AUDITS								
Welsh Risk Pool		Work in progress						Scheduled for April 2021
AUDITS FOR NWSSP								
Credit Card Expenditure	1	Final	Substantial	-	1	1		Reported to October 2020 Audit Committee
Employment Services Directorate Review		Work in progress						Scheduled for April 2021
IM&T Control and Risk Assessment		Planning						
Student Awards		Work in progress						Scheduled for April 2021

Assignment	Draft to Mgt Response (Days)	Status	Rating	Summary of Recommendations				Notes
				High	Medium	Low	N/A	
ADVISORY REVIEWS AND RISK AREAS TO BE MONITORED								
Declarations of Interest	4	Final	N/A	-	4	-	-	Reported to October 2020 Audit Committee
Covid-19 Financial Governance	-	Final	N/A	-	-	-	-	Reported to October 2020 Audit Committee
COVID-19 Response	8	Final	N/A	-	2	3	-	Reported to January 2021 Audit Committee
PROJECT MANAGEMENT GROUPS								
WfIS Programme Board: H2R	Ongoing	To sit on Project Board to provide advice on internal controls						
IT Steering Group	Ongoing	To sit on Project Board to provide advice on internal controls						
Information Governance Steering Group	Ongoing	To sit on Project Board to provide advice on internal controls						
Finance Academy P2P Group	Ongoing	To sit on Project Board to provide advice on internal controls						
Audit Tracker Register	Ongoing	Consider the development of audit recommendation tracker functionality within Teammate						
AUDIT MANAGEMENT & REPORTING								
Audit Management & Reporting	Ongoing							

For Reference: The assurance ratings are defined as follows:

Assurance rating	Assessment rationale	Guide to Rating
	<p>The Board can take substantial assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with low impact on residual risk exposure.</p>	<p>Few matters arising and are compliance or advisory in nature. No issues about design of policies or procedures or controls. Any identified compliance (O) issues are restricted to a single control objective or risk area rather than more widespread. No high priority audit findings. Few Low or Medium priority findings. Even when taken together any issues have low impact on residual risk exposure even if remaining unresolved.</p>
	<p>The Board can take reasonable assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with low to moderate impact on residual risk exposure until resolved.</p>	<p>Some matters require management attention in either control design or operational compliance. Any control design (D) limitations are isolated to a single control objective or risk area rather than more widespread. However compliance issues (O) may present in more than one area. Typically High priority findings are rare; but/or some Low or Medium priority findings. Even when taken together these will have low to moderate impact on residual risk exposure until resolved.</p>
	<p>The Board can take limited assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. More significant matters require management attention with moderate impact on residual risk exposure until resolved.</p>	<p>More significant audit matters require management attention either in materiality or number. Control design limitations (D) may impact more than one control objective or risk area. Compliance issues (O) may be more widespread indicating non-compliance irrespective of control design. Typically some high priority audit findings have been identified and these are not isolated; and/or several Medium or Low audit findings. Either individually or when taken together these are significant audit matters with moderate impact on residual risk exposure until resolved.</p>

Assurance rating	Assessment rationale	Guide to Rating
	<p>The Board has no assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Action is required to address the whole control framework in this area with high impact on residual risk exposure until resolved.</p>	<p>Significant audit matters require management attention both in terms of materiality and number.</p> <p>Control design limitations (D) impact the majority of control objectives or risk areas. Alternatively compliance issues (O) are widespread indicating wholesale non-compliance irrespective of control design.</p> <p>Several high priority audit findings have been identified in a number of areas; and/or several Medium audit findings.</p> <p>Either individually or when taken together these are significant audit matters with moderate impact on residual risk exposure until resolved.</p>

For Reference: The priority of the findings and recommendations are as follows:

<p>High</p> <p>Poor key control design OR widespread non-compliance with key control</p> <p>PLUS</p> <p>Significant risk to achievement of a system objective OR evidence present of material loss, error or mis-statement</p> <p>Timescale for action- Immediate</p>	<p>Medium</p> <p>Minor weakness in control design OR limited non-compliance with control</p> <p>PLUS</p> <p>Some risk to achievement of a system objective</p> <p>Timescale for action- Within one month</p>	<p>Low</p> <p>Potential to enhance design of adequate systems further</p> <p>OR</p> <p>Isolated instances of non-compliance with control with negligible consequences</p> <p>Timescale for action- Within three months</p>
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Covid-19 Divisional Preparedness and Resilience

ADVISORY REVIEW REPORT 2020/21

**NHS Wales Shared Services Partnership
Audit and Assurance Services**

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Review reference:	NWSSP-2021-18
Report status:	Final
Fieldwork commencement:	1 st October 2020
Fieldwork completion:	8 th December 2020
Debrief meeting:	15 th December 2020
Draft report issued:	10 th December 2020
Final report issued:	14 th January 2021
Auditors:	James Quance, Head of Internal Audit Emma Rees, Audit Manager
Executive Sign-off:	Andrew Butler, Director of Finance & Corporate Services
Distribution:	Neil Frow, Managing Director Senior Leadership Team Peter Stephenson, Head of Finance & Business Development Carly Wilce, Corporate Services Manager
Committee:	Velindre NHS Trust Audit Committee for NWSSP

ACKNOWLEDGEMENTS

We would like to acknowledge the time and co-operation given by staff during the course of this review and to thank Executive Directors for their engagement during this challenging period.



We conform to all Public Sector Internal Audit Standards.

Validated through an external quality assessment undertaken by the Institute of Internal Auditors.

Please note:

This advisory review report has been prepared for internal use only. Audit & Assurance Services reports are prepared, in accordance with the Service Strategy and Terms of Reference, approved by the Audit Committee. Advisory review reports are prepared by the staff of the NHS Wales Shared Services Partnership – Audit and Assurance Services, and addressed to Independent Members or officers including those designated as Accountable Officer. They are prepared for the sole use of NHS Wales Shared Services Partnership and no responsibility is taken by the Audit and Assurance Services Internal Auditors to any director or officer in their individual capacity, or to any third party.

1. Introduction

Context

The NHS in Wales is currently facing unprecedented and increasing pressure in planning and providing services to meet the needs of those who are affected by Covid-19. Alongside this is the need for organisations to balance continuing to provide and commission life-saving and life impacting essential services. Whilst lockdown measures have ensured NHS Wales has not been overwhelmed by the pandemic thus far, the UK's Chief Medical Officers have stated the 2020/21 winter will be especially hard. They have further warned that the vaccination programme will only have a marginal impact in reducing Covid-19 cases and deaths over the next few months and that social mixing over the Christmas period could put additional pressures on services.

Whilst the majority of NHS Wales Shared Services Partnership (NWSSP) services were not stood down during the initial pandemic response, Covid-19 has significantly changed the way in which the organisation operates. Home working, the rapid roll out of Office 365 and significant investment in IT equipment were instrumental in achieving service continuity and safe working practices. The Planning & Response Group (P&R Group) – largely comprised of the NWSSP Senior Leadership Team (SLT), but also including representation from the Trade Union, Surgical Material Testing Laboratory (SMTL) and Communications – was established to provide effective governance over NWSSP's response.

In July 2020 the Head of Finance & Business Development undertook a review of NWSSP's operational response to Covid-19, identifying key successes, learning and further action required. A summary of the P&R Group activities and outcomes was presented to SMT in July 2020 and a wider review of the measures taken within NWSSP was presented in August 2020. Next steps included incorporating the NWSSP response and learning into its business continuity processes. As part of this, each division has produced Covid-19 Business Continuity Action Cards to outline its continued response to the pandemic and for future business continuity events.

Advisory review

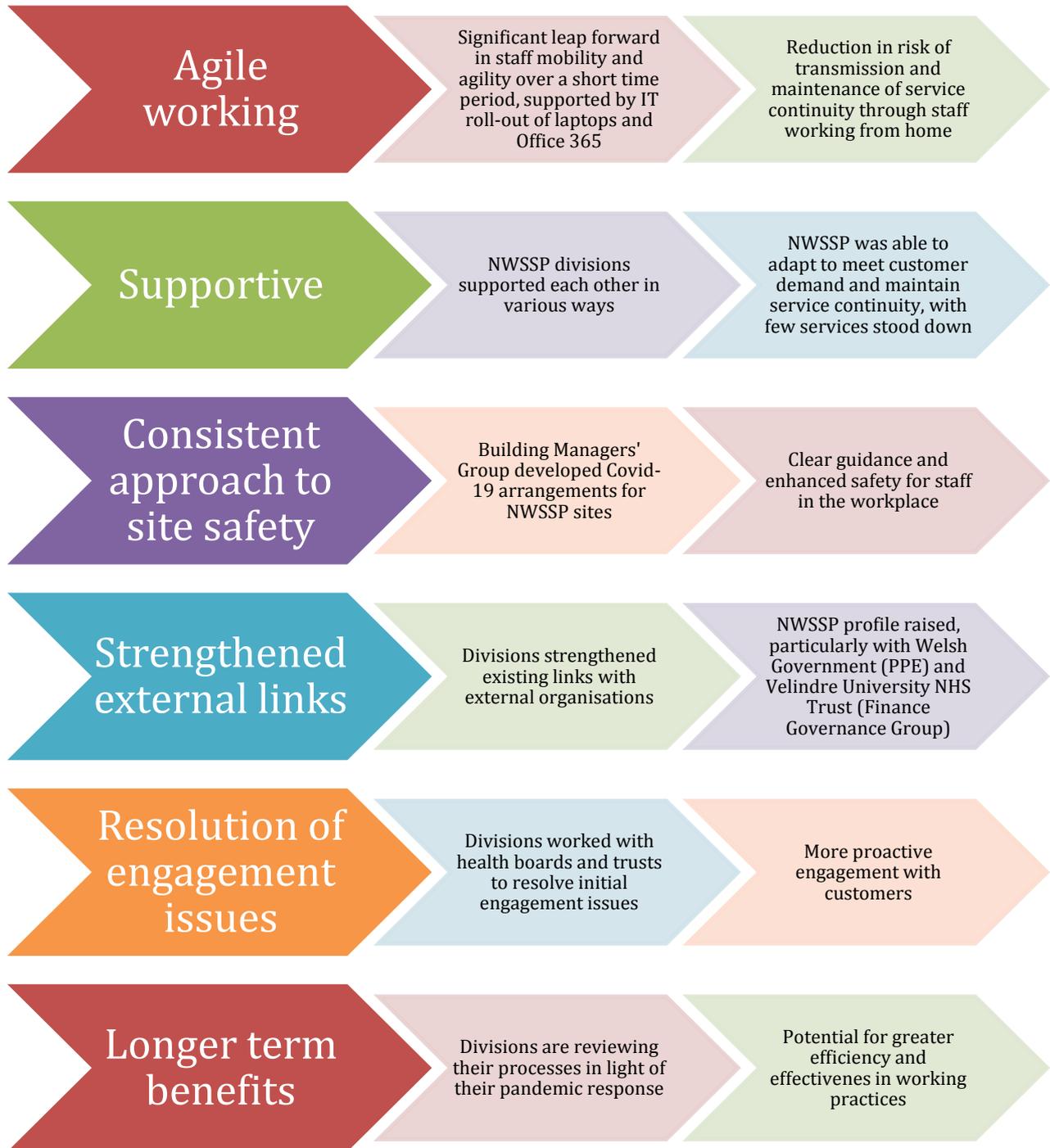
Our work was completed during October and November 2020. The overarching objective was to assess the continued preparedness of the NWSSP divisions to operate throughout the Covid-19 pandemic. The review involved interviewing five NWSSP Executive Directors and high level review of key business continuity documentation. Further detail regarding the scope of the review and the work undertaken are included in [Appendices One](#) and [Two](#).

This is an [advisory review](#), therefore we have **not provided an assurance rating**. Actions have been agreed with management to strengthen and improve future resilience and continuity. These actions are set out in [Appendix Three](#).

2. Executive summary

The NWSSP response has resulted in a number of positive outcomes

NWSSP was able to adapt and build upon existing corporate and divisional business continuity arrangements to develop its Covid-19 pandemic response. The approach resulted in a number of positive outcomes:



Management is addressing ongoing challenges

Good progress has been made across the board in terms of future preparedness and resilience. Management recognises that some key challenges remain and is taking action to address these:

Challenge: Resilience within smaller, specialist teams and frontline staff

Actions:

1. Related risks recognised in divisional risk registers
- 2 Ongoing work between divisions and Workforce, for example, developing new roles and bank positions

Challenge: Supporting and training new staff in a virtual environment

Actions:

1. Retired staff to be brought back in to provide support and relieve pressure off existing managers
2. Regular virtual team and peer support group meetings

Challenge: Implementing a corporate approach to staff resourcing throughout the pandemic and beyond

Actions: Workforce coordination of:

1. Redeployment register
2. Winter resourcing plans
3. Developing "business agility"

Challenge: ensuring staff productivity and wellbeing in a virtual environment

Actions:

1. Regular divisional contact with staff through team and one-to-one support
2. Corporate mental health and wellbeing programmes

Challenge: Making up for the impact of the pandemic on IMTP and KPI performance

Actions:

1. Review and refresh of IMTP objectives
2. Development of plans to maintain and improve KPI performance

Challenge: maximising longer term benefits of agile working and the use of Office 365

Actions:

1. Divisions reviewing systems and processes
2. Adapt & Future Change Group
3. Agile Working Group
4. Office 365 training

Further actions to strengthen resilience and continuity arrangements

We have identified and agreed five actions with management to strengthen resilience and business continuity arrangements.

Two of the actions are **medium** priority:

1. SLT and divisional management will ensure key messages are reiterated around following Covid-19 guidance at NWSSP sites after non-compliances have been

identified and avoidable Covid-19 incidents have occurred – see [action 5](#) in [Appendix Three](#); and

2. Divisional management will ensure audit trails are in place for key divisional decisions taken throughout the pandemic – see [action 3](#) in [Appendix Three](#).

Three **low** priority actions concerned learning from the Covid-19 response, plans for future preparedness and enabling effective future redeployment (see [actions 1, 2](#) and [4](#) in [Appendix Three](#) respectively).

Summary of actions:

Priority	High	Medium	Low	Total
Number of actions	-	2	3	5

The actions are set out in full in [Appendix Three](#).

Good practice identified for sharing between the divisions

We have [identified](#) the following [good practice](#) for sharing between divisions:

Covid-19 business continuity documentation

- Action cards for an outbreak of Covid-19 on site, for example within Procurement Services;
- Action cards for loss of staff due to illness, for example within Primary Care Services and Surgical Material Testing Laboratories; and
- Planning for the second wave risk assessment documents, for example, within Primary Care Services.

Return to site action plans

- Working with the Building Managers' Group to develop site reoccupation plans for essential, on-site staff, for example, within Procurement Services; and
- Managers have proactively met with their staff to develop tailored action plans to return to carrying out essential work at customer sites, for example, within Specialist Estates Services.

Empowering staff to resolve issues

- Divisional senior management teams (SMT) proactively empowering staff to develop solutions to issues arising, rather than relying upon management to do so.

Informal divisional SMT

- Holding weekly informal SMT meeting in between monthly formal meetings, for example, within Primary Care Services - each meeting is to be led by a different service within the division to ensure each service receives regular attention.

3. Detailed findings

Background

In 2018, NWSSP invested in a programme to improve its corporate approach to business continuity (BC), bringing together individual divisional BC plans and risks into a consistent and coordinated approach. The corporate Business Impact Analysis (BIA) and corporate BC Plan were approved by SLT in July 2018.

We undertook a high level review of the corporate and divisional BC documentation in place, noting:

- the corporate BIA contains NWSSP's BC policy and objectives and identifies key BC scenarios, NWSSP services, IT systems, roles, suppliers, etc;
- the corporate BCP documents include the procedures to be followed to achieve timely recovery of communication systems and ongoing processes that NWSSP is responsible for; and
- all divisions interviewed had documented BC arrangements in place – see area for development below.

Additionally, the corporate BIA was updated in September 2020 to include an overview of the NWSSP Covid-19 response, lessons learned to date and a high level divisional risk assessment of Covid-19 preparedness.

We identified some areas of development to further strengthen the BC arrangements:

- the documented BC arrangements within the divisions varied in detail with differing approaches to documentation. We would expect to see some variation in the level of detail dependent upon risk. However, it seems that not all divisions are following the corporate approach and some divisions may benefit from more formally documented plans; and
- NWSSP has taken on new services since its BC arrangements were developed. These services will need to be incorporated into the corporate and divisional BC documents.

See [action 1](#) in [Appendix Three](#).

Corporate Covid-19 BC arrangements

As for many organisations across Wales and the UK, the unprecedented nature of the Covid-19 pandemic required NWSSP to adapt and build-upon its existing BC arrangements. Traditional BC measures tend to focus on short term, single scenario BC events, whereas the pandemic was recognised to be longer term, involving multiple BC scenarios at once. The Senior Leadership Team acted swiftly to ensure appropriate measures were put in place.

As noted above, the corporate BC arrangements have been updated to incorporate the Covid-19 response as a standalone section. We understand that the longer term intention is to fully integrate the response and related learning once the pandemic is over (see [action 1](#) in [Appendix Three](#)).

Divisional Covid-19 BC arrangements

The divisions were also able to build upon their existing BC arrangements in order to develop their pandemic responses.

All NWSSP divisions produced Covid-19 BC action cards, providing an overview of action taken, planning for future preparedness and general actions to be undertaken by line managers. Where needed, the divisions have developed more specific plans beyond the Covid-19 BC action cards.

The updated corporate BIA contains a service prioritisation list and a high level Covid-19 preparedness risk assessment for the divisions. Furthermore, we understand that, in their SMT meetings, the divisions have discussed their critical services in the context of the pandemic and considered which services could be stood down if necessary. However, some divisions did not minute (or otherwise evidence) their SMT meetings during the first three months of the pandemic and not every division has formally documented these considerations (see [actions 2 and 3](#) in [Appendix Three](#)).

A number of divisions have documented action cards in place to address the risk of an outbreak of Covid-19 within an onsite team. However, other key divisions have not formally documented these considerations (see [action 2](#) in [Appendix Three](#)).

Divisional IT dependencies and the related continuity arrangements are documented in the corporate BIA, although we note that some divisions' arrangements are missing from this assessment (see [action 1](#) in [Appendix Three](#)). We also identified that there was no documented evidence that assurances over the Covid-19 BC arrangements for third party IT dependencies had been sought, either by the divisions or corporately (see [action 2](#) in [Appendix Three](#)).

Divisional resilience

As a testament to the organisation's resilience and adaptability, NWSSP did not have to stand down many services during the initial Covid-19 response. The organisation was able to flex to meet customer Covid-19 demands and all services are now operating as 'business as usual', albeit in a new and agile manner. Where services were stood down or scaled back, we understand that this was either dictated by Welsh Government or where client demand switched from non-Covid-19 to Covid-19 activities.

Both corporately and divisionally, management swiftly increased organisational resilience and reduced the risk of Covid-19 transmission amongst teams through equipping staff to work from home wherever possible. Working from home continues to be the policy, which is subject to regular review by the SLT.

For staff working at NWSSP sites, Covid-19 procedures and guidance were developed by the Building Managers' Group (see below). Management also set up team 'bubbles' where practical, with the bubbles rotating in and out of the workplace to mitigate the risk of transmission and self-isolation within teams.

Resilience issues within smaller, more specialist teams and front line services have been identified by the relevant divisions and action is being taken to mitigate the related continuity risks.

Having identified potential issues during the first wave and taken action to address them, the divisions now feel confident there is resilience in their leadership and management structures.

For most of the divisions, we understand that few actions remain outstanding to ensure future preparedness. Key actions in progress include:

- reducing dependencies upon paper-based processes which require staff to work on site within Employment Services – this is being monitored by Employment Services SMT;
- provision of a small number of laptops to further enable home working, overseen by divisional management in conjunction with NWSSP IT; and
- roll out of softphones, particularly to areas with helpdesks – this is being overseen by NWSSP IT, divisional management and the Building Managers' Group.

Working together

The divisions were united in their praise of the support received from other divisions during the pandemic. In particular, the following was highlighted:

- assistance from the NWSSP support services, including Workforce, recruitment, payroll, finance and the Finance Governance Group;
- collaboration between divisions where existing working relationships were already strong;
- staff freed up for redeployment into other divisions; and
- NWIS and NWSSP IT support for the swift provision and roll-out of laptops, VPNs, Office 365, etc.

We understand that Workforce has coordinated a number of initiatives to support service continuity and improve longer-term resilience within NWSSP, including:

- development of a redeployment register (see below);
- identification of needs and coordination of staff resources for the winter period;
- identification of priority roles for recruitment and vaccination;
- development of the staff bank, including translation of agency workers to bank staff; and
- ongoing development of "business agility", developing a corporate (rather than divisional) approach to staff resourcing with staff upskilled and ready to be redeployed as and when necessary.

In terms of redeployment, there was a willingness from the divisions to free up staff where possible. However, it was difficult for the divisions to plan effectively and identify their needs due to the unprecedented nature of the circumstances. We understand that an updated and improved redeployment register has been developed, based upon the key services the divisions want to offer and the roles required to support this.

SLT now faces the challenge of balancing business as usual operations against critical service needs, and never more so than throughout the winter months, when service pressures are high and year-end deadlines approach. We understand that the Senior Leadership Team, supported by Workforce, sees the longer term solution to this as being the development of business agility. However, in the short term (i.e., for the duration of the pandemic), should redeployment to support critical services be required, SLT will need to continue to demonstrate strong, collective leadership to release staff where it can. See action 4 in [Appendix Three](#).

Alongside this, SLT and divisional management have identified and are undertaking further action over some of the other key challenges to joined-up working:

- redeployment from within NWSSP into the smaller, more specialist teams (for example, Specialist Estates or Surgical Materials Testing Laboratory) is not practical – these teams are working with Workforce to increase resilience, for example, through the use of the bank or development of new roles; and
- it is difficult to provide support to new or redeployed staff whilst working from home – in the short term, some divisions intend to bring back retired staff to support this training to reduce pressure on existing managers.

Building Managers' Group

The Senior Leadership Team established the Building Managers' Group (BMG) in the early stages of the pandemic to coordinate a consistent, corporate approach to Covid-19 safety at NWSSP sites. Alongside the Building Managers, the BMG has representation from Procurement, Health & Safety, Workforce, Specialist Estates, Surgical Materials Testing Laboratory and Communications. It is chaired by the Corporate Services Manager.

The BMG has developed and implemented a significant level of guidance in response to the Covid-19 regulations and requirements. This group has been fundamental to ensuring the safety of NWSSP's onsite and front line staff throughout the pandemic.

Amongst the guidance developed is the 'return to the workplace' (RTWP) checklist. This aims to ensure all staff are aware of what has been put in place and what is required to ensure Covid-19 safety at NWSSP sites. Line managers must complete this checklist with any staff member wishing to return to the workplace during the pandemic and the divisions are responsible for ensuring this is done. However, we are aware that:

- not all staff returning to the workplace are completing the RTWP checklist, although we understand that the number of staff returning is minimal;
- there are no controls in place to monitor that the RTWP checklist is being completed when required; and
- there has been small a number of recent avoidable incidents of teams having to self-isolate due to staff not adhering to the Covid-19 safety requirements.

There is a risk that, as the pandemic progresses, staff may become complacent or that key messages may be forgotten. See [action 5](#) in [Appendix Three](#).

We are currently undertaking a separate audit of NWSSP Covid-19 Premises Safety.

Communicating with staff

The divisions have employed a number of mechanisms to ensure all staff are aware of the BC arrangements in place, alongside ensuring ongoing communication with staff and monitoring staff wellbeing. This has included:

- line management structures to cascade information;
- divisional director “open door” policy;
- regular formal and informal contact between line managers and their teams, including one to one meetings;
- regular team meetings – frequency varying dependent upon need;
- WhatsApp groups between teams and peers to ensure swift communication of important messages; and
- peer support groups holding virtual informal chats, coffee mornings, etc.

Alongside these mechanisms, the divisions have valued the corporate Covid-19 communications from Workforce and the NWSSP Managing Director.

However, as noted above, there is a need to reiterate key messages, particularly around social distancing, hygiene and the RTWP checklist. Additionally, our review of the NWSSP Covid-19 intranet pages highlighted that, over time, these pages have become difficult to navigate, due to the volume of information therein and the manner in which it has been added to over the course of the pandemic (see [action 5](#) in [Appendix Three](#)).

Key challenges with staff communication and management in a virtual environment, which are being managed by the divisions, include:

- integrating new starters into teams;
- ensuring staff productivity and engagement; and
- supporting staff wellbeing.

Engagement with health boards and trusts

The divisions communicated with their customers through existing channels, with additional mechanisms developed where necessary, for example, the PPE cells within each NHS Wales organisation.

At the outset of the pandemic, the divisions had varying levels of engagement from health boards and trusts in spite of every effort to communicate with customers. In key risk areas, such as procurement of PPE and clinical safety of the field hospitals, engagement was good, with health boards and trusts proactively involving NWSSP in their decision-making processes. However, in other areas, for example, recruitment and field hospital leases, health boards and trusts were not always proactive in their engagement of NWSSP.

We understand that the divisions have now resolved these engagement issues, having communicated with their customers that proactive involvement of NWSSP upfront in decision-making will ensure smoother processes can be developed at pace and on an All-Wales basis. The divisions now feel that their customers are proactively engaged with them on a timely basis.

Engagement with external organisations

The divisions represented NWSSP at various national Covid-19 groups established to develop the Covid-19 response and ensure joined up working. Many of these groups were stood down as the initial pandemic wave eased, but will be stood up again if required.

Alongside these national groups, the divisions were able to use and strengthen existing links and relationships to ensure they remained up to date with relevant legislation, guidance and nationwide approaches during the pandemic.

Through these groups and links, we understand that the divisions have contributed to raising NWSSP's profile, including:

- Specialist Estates Services (SES) has led on developing guidance for health boards and trusts and are the regional estates lead for Wales in relation to oxygen provision;
- SMTL is helping Welsh businesses to meet the required standards for provision of PPE into NHS Wales; and
- Procurement Services has been at the forefront of the PPE discussions within Wales and the wider UK.

Monitoring the impact on performance

The quarterly divisional performance reviews with the NWSSP Managing Director continued throughout the pandemic.

All divisions are monitoring their existing key performance indicators (KPIs) in the context of the pandemic to identify issues with service continuity. Other monitoring mechanisms have also been employed, including monitoring of complaints, concerns and compliments, incident monitoring, etc.

The divisions have reviewed their IMTPs to identify what remains achievable and where modifications are required. We understand that the divisions have plans in place to maintain and improve KPI performance.

Longer term benefits

Beyond the Covid-19 pandemic, the divisions are identifying actions to improve their services and working practices in the longer term, including around resilience, efficiency and agile working. For example:

- Procurement Services: the pandemic has highlighted where development and improvements are required to ensure the different services within the division work effectively together. This is likely to result in a restructure of the division; and
- Employment Services: the division's SMT is reviewing processes based upon how teams have operated throughout the pandemic response to identify whether longer term efficiencies can be gained from the streamlined approaches.

Additionally, all divisions are beginning to get to grips with agile working and Office 365 and are looking to maximise efficiencies and benefits from both.

The Senior Leadership Team has established the Adapt & Future Change Group (AFCG). The primary function of the AFCG is to lead decision making around the response needed for Covid-19 pressures and the recovery of services. Its role also includes the adjustments to current workplaces and the adoption of new working practices which may have longer term benefits beyond the pandemic. Alongside the AFCG, the Agile Working Group is developing the organisations Agile Working Strategy.

APPENDIX ONE: Terms of Reference

Scope and Objectives

This review assessed NWSSP's future preparedness to operate throughout the Covid-19 pandemic. Actions have been agreed with management to strengthen and improve future resilience and continuity.

The areas we considered were:

- divisional arrangements, in particular:
 - how the divisions are prepared for future lockdowns and the impact of self-isolation if Covid-19 cases are identified within the site-based workforce;
 - how the divisions are working together to support one another and bolster resilience; and
- how the corporate response to Covid-19 links into the overall business continuity planning arrangements within NWSSP.

Limitations of Scope

This review considered NWSSP's operational response to Covid-19 and does not cover the financial governance arrangements during the pandemic. We considered the latter as part of a separate review.

Associated Risks

The key risk considered in the review was that NWSSP may be unprepared for future lockdowns or similar business continuity events.

APPENDIX TWO: What we did

We undertook the following review activity:

- Interviews with:
 - Director and Deputy Director of Procurement Services;
 - Director of Specialist Estates Services;
 - Director of Employment Services;
 - Director of Primary Care Services;
 - Director of Surgical Materials Testing Laboratory and members of the SMTL Senior Management Team;
 - Director of Workforce & Organisational Development & Employment Services;
 - Head of Finance & Business Development;
 - Specialist Estates Services Business Manager;
 - Corporate Services Manager;
 - Head of Workforce & Organisational Development; and
 - Senior Workforce Advisor.
- High level review of the following business continuity documentation:
 - NWSSP Business Impact Analysis;
 - NWSSP Business Continuity Plan;
 - divisional business continuity documentation for five divisions (Procurement Services, SES, SMTL, PCS and Employment Services), including BC plans and action cards and the Covid-19 BC action cards;
- High level review of documentation produced by the Building Managers' Group, including:
 - example agenda and meeting minutes;
 - example site risk assessment and action plan for Companies House;
 - reoccupation plans for Procurement Services;
 - SES Covid-19 space planning guidance and example space plans for the Nantgarw HQ building;
 - example of corporate communications from the BMG;
 - NWSSP Covid-19 intranet pages;
 - 'Return to the workplace' checklist and associated documents; and
 - example evidence of monitoring staff numbers at NWSSP sites.
- Review of five months' Planning & Response Group agendas and actions, with the related Covid-19 risk register.

APPENDIX THREE: MANAGEMENT ACTION PLAN

Observation	Agreed action	Priority rating	Responsible officer	To be completed
1. Learning from the Covid-19 response				
<p>The longer term intention is to fully integrate the Covid-19 response and learning into the corporate BC arrangements once the pandemic is over.</p> <p>We identified some areas for development to further strengthen BC arrangements within the divisions:</p> <ul style="list-style-type: none"> varying levels of detail in, and differing approaches to, BC documentation; and new services need to be incorporated into the NWSSP BC approach. <p>Potential risks:</p> <ul style="list-style-type: none"> learning from the Covid-19 response is not incorporated into future business continuity planning; and lack of preparedness for future business continuity events. 	<p>After the Covid-19 pandemic is over, the Senior Leadership Team and divisional management will:</p> <ol style="list-style-type: none"> take stock of learning from the Covid-19 pandemic and incorporate this into their business continuity plans; revisit existing corporate and divisional documentation to ensure risk assessments, prioritisations and dependencies remain appropriate; and ensure all new services / divisions are incorporated into the corporate BIA and that divisional arrangements are in alignment with the corporate business continuity approach. <p>The Senior Leadership Team will provide clear direction as to the level of documentation required within each division.</p>	Low	<p>Andrew Butler, Director of Finance & Corporate Services</p> <p>Peter Stephenson, Head of Finance & Business Development</p>	Post pandemic
2. Future preparedness for the Covid-19 pandemic				
<p>The divisions have considered:</p> <ul style="list-style-type: none"> their critical services; which services could be stood down if necessary; and 	<p>Divisional management will ensure that the following are documented and available to relevant staff:</p>	Low	<p>Andrew Butler, Director of Finance & Corporate Services</p>	March 2021

Observation	Agreed action	Priority rating	Responsible officer	To be completed
<ul style="list-style-type: none"> their considerations of actions required in the event of a Covid-19 outbreak within the division. <p>However, not all divisions have formally documented these considerations.</p> <p>There was no documented evidence that assurances over the Covid-19 BC arrangements for third party IT dependencies have been sought, either by the divisions or corporately.</p> <p>Potential risk:</p> <ul style="list-style-type: none"> not being fully prepared for future waves of Covid-19 outbreaks, in particular over the winter period; and business critical services may not be maintained during future waves of the pandemic. 	<p>2.1 their critical services in the context of the pandemic;</p> <p>2.2 services that could be stood down in order to support continuity of critical services, including an assessment of the risk and impact of doing so (see action 4.1 also);</p> <p>2.3 the impact of a Covid-19 outbreak on their division and the required actions to take;</p> <p>2.4 related action plans supporting the Covid-19 response.</p> <p>Divisional management will also seek documented assurances from IT providers over their Covid-19 business continuity arrangements.</p>		Peter Stephenson, Head of Finance & Business Development	

3. Audit trail for key Covid-19 decisions

<p>Some divisions did not minute (or otherwise evidence) their SMT meetings during the first three month of the pandemic.</p> <p>Potential risk:</p> <ul style="list-style-type: none"> inability to evidence appropriate discussion and scrutiny of key decisions taken at a divisional level throughout the pandemic. 	<p>3.1 Going forward, divisional management will ensure appropriate audit trails are in place for key divisional decisions taken throughout the pandemic, for example, through the use of divisional decision logs.</p>	<p>Medium</p>	Senior Leadership Team	Immediately
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Observation	Agreed action	Priority rating	Responsible officer	To be completed
4. Enabling effective redeployment				
<p>Supported by Workforce, NWSSP has developed a redeployment register. There was willingness from all divisions to provide support where possible through redeployment in the first wave, although this was not required in the end.</p> <p>Whilst longer term solutions are being developed, in the short term, if considered necessary, successful redeployment to support critical services throughout the remainder of the pandemic will require continued strong, collective leadership from SLT to release staff where it can.</p> <p>Potential risks:</p> <ul style="list-style-type: none"> • inability to staff critical services during times of increased pressure; and • business critical services may not be maintained during future waves of the pandemic. 	<p>4.1 The Senior Leadership Team will continue to provide collective leadership, implementing a corporate approach to staff resourcing to balance business as usual operations against critical service needs (see action 2.2 also).</p>	<p>Low</p>	<p>Senior Leadership Team</p>	<p>Immediately</p>
5. Staff compliance with Covid-19 guidance				
<p>Not all staff returning to the workplace are completing the RTWP checklist and there are no controls in place to monitor this checklist is being completed when required. Note: we understand the number of staff returning to</p>	<p>The Senior Leadership Team and divisional management will:</p> <p>5.1 ensure key messages are reiterated around following Covid-19 guidance at NWSSP sites, in particular:</p>	<p>Medium</p>	<p>Andrew Butler, Director of Finance & Corporate Services</p>	<p>March 2021</p>

Observation	Agreed action	Priority rating	Responsible officer	To be completed
<p>the workplace is low, with the vast majority of staff still working from home.</p> <p>There has been a small number of recent, avoidable incidents of teams having to self-isolate due to staff not adhering to the Covid-19 safety requirements in place.</p> <p>Potential risks:</p> <ul style="list-style-type: none"> as the pandemic progresses, staff may become complacent or key messages may be forgotten; Covid-19 outbreaks amongst site-based staff, including front line or specialist services; and business critical services may not be maintained during future waves of the pandemic. 	<ul style="list-style-type: none"> i. the requirement for line managers to complete the 'return to the workplace' checklist; and ii. using the recent avoidable incidents as examples. <p>5.2 review the layout and set up of information on the Covid-19 intranet pages;</p> <p>5.3 consider developing controls to monitor completion of the return to the workplace checklist. Corporate Services is looking into trialling a desk booking system to manage staff numbers on site, which could incorporate the requirement to confirm the checklist has been completed before a desk can be booked.</p>		<p>Peter Stephenson, Head of Finance & Business Development</p> <p>Carly Wilce, Corporate Services Manager</p> <p>Abi Sheppard, Senior Workforce Advisor</p>	

APPENDIX FOUR: Priority ratings

We categorised the agreed actions using our established priority rating system:

Priority Level	Explanation	Management action
High	Poor key control design OR widespread non-compliance with key controls. PLUS Significant risk to achievement of a system objective OR evidence present of material loss, error or misstatement.	Immediate*
Medium	Minor weakness in control design OR limited non-compliance with established controls. PLUS Some risk to achievement of a system objective.	Within One Month*
Low	Potential to enhance system design to improve efficiency or effectiveness of controls. These are generally issues of good practice for management consideration.	Within Three Months*

* Unless a more appropriate timescale is identified/agreed at the assignment.

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NHS WALES SHARED SERVICES PARTNERSHIP

Audit Committee – 26th January 2021

**Counter Fraud Progress Report
as at 31st December 2020**

**CRAIG GREENSTOCK
COUNTER FRAUD MANAGER
CARDIFF & VALE UNIVERSITY HEALTH BOARD**

NHS WALES SHARED SERVICES PARTNERSHIP

AUDIT COMMITTEE 20th OCTOBER 2020

COUNTER FRAUD PROGRESS REPORT

1. Introduction
 2. Current Case Update
 3. Progress and General Issues
- Appendix 1 Summary Plan Analysis
- Appendix 2 Assignment Schedule

Mission Statement

To provide the NWSSP with a high quality NHS Counter Fraud Service, which ensures that any report of fraud is investigated in accordance with the Directions for Countering Fraud in the NHS and all such investigations are carried out in a professional, transparent and cost effective manner.

1. INTRODUCTION

1.1 In compliance with the Directions on Countering Fraud in the NHS, this report details the current Counter Fraud and Corruption work carried out, by the Local Counter Fraud Specialists, for the period 30th September 2020 to the 31st December 2021.

The Progress Report's style has been adopted, in consultation with the Velindre NHS Trust and NWSSP's Finance Directors, with the prime objective of informing, and updating, the Audit Committee members of the outline detail of significant changes in cases worked on during the period and any current operational issues.

Progress against the NWSSP Annual CF Work-Plan of **75days**, has been reported in **Appendix 1** and as at 31st December 2020, **35days of** Counter Fraud work has been undertaken and this has also been reported in **Appendix 1**.

Any significant changes in the progress/work undertaken are outlined in point 2 below.

2. CURRENT CASE UPDATE

There are two cases under investigation and one other case which is still open due to a lengthy repayment period.

3. PROGRESS AND GENERAL ISSUES

3.1 Fraud Awareness Presentations

COVID-19 restrictions have considerably reduced the amount of sessions the department can deliver but during this reporting period three sessions have been delivered to 31 delegates through Microsoft Teams.

3.2 National Fraud Initiative 2020/21

Velindre University NHS Trust recently received the proposals of the Auditor General for Wales that were issued for consultation in relation to the planned National Fraud Initiative (NFI) 2020-21 work programme and the draft data specifications for this work.

In relation to that, arrangements are now being made within NWSSP and together with other NWSSP colleagues (i.e. Procurement and Payroll) for the required data to be made available and in the required format to meet the deadlines and Fair Processing Notices have also been included on payslips to make staff aware, as is required, that their personal data is being shared in this format.

The updated timetable, for NFI 2020-21 is as follows:

Activity	Date
Submit privacy notice compliance returns	By 25 th September 2020
Extract/submit NFI 2020/21 data	9 th October 2020
Deadline for data submissions	1 st December 2020
2020/21 matches available	From 31 st January 2021

APPENDIX 1

COUNTER FRAUD SUMMARY PLAN ANALYSIS 2020/21

AREA OF WORK	NWSSP	Days to Date
General Requirements		
Production of Reports to Audit Committee	3	1
Attendance at Audit Committees	3	1
Planning/Preparation of Annual Report and Work Programme	5	5
Annual Activity		
Creating an Anti Fraud Culture	0	0
Presentations, Briefings, Newsletters etc.	14	6.5
Other work to ensure that opportunities to deter fraud are utilised	0	0
Prevention		
The reduction of opportunities for Fraud and Corruption to occur	0	0
Detection		
Pro-Active Exercises (e.g. Procurement)	17	7
National Fraud Initiative 2020/21	2	1
Investigation, Sanctions and Redress		
The investigation of any alleged instances of fraud	25	12
Ensure that Sanctions are applied to cases as appropriate	4	2
Seek redress, where fraud has been proven to have taken place	2	0
		0
TOTAL NWSSP	75	35.5

APPENDIX 2

COUNTER FRAUD ASSIGNMENT SCHEDULE 2020/21

Case Ref	Subject	Status	Open/Closed
SSP14.05	Unauthorised Sale of NHS Property	Crown Court Hearing (Suspended Sentence) Civil Recovery (5k) was being made at £50 per month	Open - Balance o/s £2424.25 Consideration to be given as to whether to contact HMCTS or whether "write-off" would be appropriate as the subject has not made any payments since 2019.
SSP20.07	Falsely retained Childcare Costs	The allegation is that the student has received her childcare payments, but has not then passed those payments onto her childcare provider.	This investigation was closed in November. Inquiries established the case is a civil matter between the University and the student.
SSP20.08	False Claim for Costs	Alleged that subject lives with partner and has failed to declare her actual personal income.	Ongoing enquiries with NHS Student Finance and the Local Authority to try to establish the nature of the subject's claim and also the named occupants where the subject is registered as living.
SSP21.01	False COVID-19 Absence	The allegation is that the subject gave false or misleading information in relation to the actual destination of a planned holiday.	The subject told her Line Manager that she was going to Turkey on holiday but she travelled to the Canary Islands and didn't self-isolate when she returned. By not saying where she was going so she didn't have to take additional leave days or unpaid leave because she knowingly travelled to a country on the Government's quarantine list. She was interviewed under caution in November 2020, after which she was asked to provide evidence to support what she told the investigators.



MEETING	Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership
DATE	26 January 2021
AGENDA ITEM	
PRESENTED BY	Andy Butler, Director of Finance and Corporate Services, NWSSP
PREPARED BY	Lindsay Payne - Head of Financial Management
TITLE OF REPORT	Update on COVID-19 Expenditure and Governance Arrangements

PURPOSE

The purpose of this paper is to provide the Audit Committee with an update as to the expenditure incurred during COVID-19 and governance arrangements put in place.

This includes expenditure incurred on behalf of the Welsh Government relating to All Wales purchases and separately the additional expenditure incurred by NWSSP in 2020/21.

1. INTRODUCTION

The Covid-19 pandemic has provided unprecedented challenges to health and social care provision and required significant and sometimes difficult decisions to be made at pace. NWSSP has needed to move swiftly and put in place revised operating procedures to provide required responses on a timely basis.

As identified in the April, June and October Covid expenditure and governance arrangements report, NWSSP has responded in a timely manner to support Welsh Government priorities. Primarily this has required utilising our procurement expertise to secure the supply of vital equipment and to establish a supply chain for Personal Protective Equipment (PPE) for NHS and Social Care services in Wales. Welsh Government have agreed funding for these All Wales procurement orders that are being placed through NWSSP.

We have incurred unprecedented levels of expenditure since mid March 2020 and have been required to enter into new contracts with both existing and new suppliers to meet the growing levels of demand from NHS and Social Care bodies in Wales. We have also received requests

from suppliers for significant payments in advance at an unprecedented level.

As the predicted second wave of the Covid virus pandemic has gathered pace, the implementation of the NWSSP Winter Plan for PPE, which identified the need for a 24 week stockholding of PPE, is proving critical. To ensure this could be achieved to meet the demand requirements of NHS Wales across primary, secondary and social care, a number of additional large orders of PPE were placed to ensure the supply to PPE was available to meet the forecast demand levels.

2. GOVERNANCE AND ASSURANCE ARRANGEMENTS

Delegated limits for COVID expenditure

The Velindre NHS Trust Board agreed on 18 March 2020 to change its own and the NWSSP Scheme of Delegation to help facilitate the increased value and volume of expenditure being incurred on behalf of the Welsh Government at this time. The revised limits delegated authority for the NWSSP Chair and either of the NWSSP Managing Director or the NWSSP Director of Finance & Corporate Services was increased from £100,000 to £2 million.

It soon became apparent that this limit was too low and it was increased to £5m on 31 March 2020, to enable timely approval of time critical orders. It was agreed that this limit would remain in place until 30 June 2020, and then be reviewed. The Velindre Trust Board meeting on 25th June 2020 approved a paper requesting the extension of this limit to 30th September 2020. Due to the ongoing requirement to continue to approve large value orders at pace, a further paper was submitted to, and approved by, the Velindre Trust Board in September requesting the extension of this limit to 31st March 2021 to cover the full winter period.

Welsh Government approval continues to be required for any contracts in excess of £1m and for advanced payments exceeding 25%.

Additional assurance arrangements introduced for COVID expenditure

Covid-19 has placed exceptional demands on services and NHS finance functions. Suppliers have requested advance payment for orders and the associated risks of making these payments (non-delivery of goods or services or supplier insolvency and consequential financial loss) have been assessed against the risks if payments are not made (interruptions to

critical supply chains). Staff and patient safety considerations have continued to be paramount during this period.

As previously detailed, the NWSSP Finance Governance Group, chaired by Simon Cookson, Director of Audit and Assurance was established to consider these significant advance payment requests. The group membership includes NWSSP representation from the Director of Legal Services, Director of Finance & Corporate Services, Head of Counter Fraud Wales and senior members of the Finance team in addition to the Director of Finance and the Vice Chair of Velindre University NHS Trust.

The group met frequently throughout April and early May, and continue to meet when required, to assess any advance payment requests for new contracts. These were on a less frequent basis during the summer months when longer-term PPE stock supplies had been secured. As we approached the winter months with the requirement to purchase substantial volumes of PPE to meet the requirements of the Winter Plan, the Finance Governance Group met more recently in late September and early October.

To date 47 contracts have been reviewed, 43 by the Finance Governance Group and 4 by the NWSSP Managing Director and Director of Finance in late March/very early April prior to the Finance Governance Group being established. 44 of these contracts requested an advance payment to be made. The table below summarises the outcome of the review of these contracts requesting advance payments:

FGG approved contract and advance payment made	33
NWSSP Managing Director and Director of Finance approved contract and advance payment made	4
FGG did not approve contract or contract not proceeded with	6
TOTAL CONTRACTS	43

NWSSP continues to maintain a checklist of all these advance payments for both stock and non-stock orders. Deliveries are tracked and recorded to ensure all the contracts where advance payments have been made are honoured and completed. Three of the orders where advance payments were made were subsequently cancelled and the advance payments have all been returned.

This checklist now also includes details of the retrospective OJEU contract notice publication dates or contract references. This also includes the details of ten All Wales stock contracts for PPE which were retrospectively

reviewed by the Finance Governance Group on 1st October 2020. There were no advance payments made in respect of these orders and all contracts were directly awarded under regulation 32(2)(c) of the Public Contract Regulations 2015 ('Direct Award due to reasons of extreme urgency'). The checklist as at 15th January 2021 is provided in **Appendix 1** for information.

3. COVID-19 EXPENDITURE – All Wales

To enable ongoing context to be added to the arrangements we have implemented, a summary of the Covid-19 expenditure we have committed on behalf of the Welsh Government as at 31st December 2020 is detailed below. This includes the value of April to December issues of PPE to Primary and Social Care totalling £54.614m:

	Capital	Revenue	TOTAL
	£m	£m	£m
2019/20	0.465	0.206	0.671
2020/21	10.585	278.606	289.191
TOTAL	11.050	278.812	289.862

Within the reported 2020/21 expenditure figures we have also provided support via supplies of PPE to NHS colleagues in England, Scotland and Northern Ireland. The net Wales expenditure figure is shown in the table below:

	Capital	Revenue	TOTAL
	£m	£m	£m
TOTAL	10.585	278.606	289.191
Provision to other Nations		- 37.460	- 37.460
WALES TOTAL	10.585	241.146	251.731

The split of this Wales only expenditure between Equipment, PPE, Testing and Services is:

Equipment	PPE	Testing	Services	TOTAL
£m	£m	£m	£m	£m
31.626	208.446	11.234	0.425	251.731

253 purchase orders have been placed with 116 different suppliers and 29 of these have order values exceeding £1m that have required Welsh Government approval. The specific details of all orders are detailed in **Appendix 2**.

The full year 2020/21 forecast of additional Covid revenue expenditure, including both All Wales expenditure on PPE, Equipment and Testing, support to Track, Trace & Protect, the mass vaccination programme, PPE distribution and additional NWSSP operational revenue expenditure totals **£259.163m**. This is in addition to the **£10.585m** capital expenditure forecast. The revenue expenditure forecast is detailed in the table below:

	YTD	M10	M11	M12	TOTAL
All Wales Non stock PPE	81.333	49.522	9.297	10.010	150.162
Social/Primary Care PPE	54.614	3.000	3.000	3.000	63.614
Pandemic Stock PPE	3.865				3.865
Mass Vaccination PPE	0.266	0.120	0.128	0.129	0.643
All Wales Covid Equipment	20.809	0.329	0.329		21.467
TTP	6.560	2.286	1.195	1.193	11.234
Mass Vaccination (excl PPE)	0.102	0.130	0.168	0.207	0.607
NWSSP Operational Costs	5.442	0.817	0.530	0.782	7.571
TOTAL	172.991	56.204	14.647	15.321	259.163

4. COVID-19 EXPENDITURE – NWSSP

We continue to submit additional Covid operational expenditure returns to Welsh Government as part of the monthly monitoring returns for 2020/21. At the close of Month 9, additional NWSSP operational expenditure to support Covid-19 of £5.443m has been incurred, with a full year forecast totalling £7.571m.

This current and forecast expenditure can be categorised as follows:

Additional COVID Expenditure	YTD	Full Year Forecast
	£m	£m
Staff costs - bank and overtime	1.877	2.549
Staff costs - agency	0.771	0.817
Interim F1s	0.513	0.513
Transportation costs	0.941	1.410
Additional cleaning/equipment/security	0.379	0.638
Distribution of shielding letters	0.064	0.064

Additional COVID Expenditure	YTD	Full Year Forecast
External laboratory testing	0.081	0.087
Loss of income	0.000	0.020
Temporary Medicines Unit	0.345	0.589
Oracle Licences/Bomgar Licences	0.175	0.175
Pulse oximeters - primary care	0.101	0.269
Annual leave accrual		0.250
Other non pay costs	0.196	0.190
TOTAL	5.443	7.571

The overall forecast has reduced slightly from the £8.098m reported to the October committee, primarily due to a reduction in staffing costs, which didn't increase as early in the financial year as previously forecast, in addition to making savings against the running costs for the Temporary Medicines Unit.

Audit Wales Review - Procurement and Supply of PPE

Audit Wales have commenced a review of the Procurement and Supply of PPE in Wales. The reviews are along similar lines to that being undertaken by the National Audit Office in England. The key areas of focus being :

Q1 – Has the public sector in Wales learnt lessons from the initial response to the pandemic (wave 1)?

Q2 –Do public services have good arrangements in place to meet current and future demand for PPE?

In undertaking their work Audit Wales have completed interviews with several key personnel involved with the PPE process in recent months and are reviewing documentation provided by NWSSP in respect of PPE Procurement and distribution. Regular catch up meetings are held with Audit Wales the most recent being held on 9th January 2021. It is evident that good progress was being made and it is envisaged that a first draft of the report should be produced by end of February 2021

5. RECOMMENDATIONS

The Committee is asked to **NOTE** the report.

MEETING	Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership
DATE	20 January 2021
PREPARED BY	Carly Wilce, Corporate Services Manager
PRESENTED BY	Andy Butler, Director of Finance and Corporate Services
RESPONSIBLE HEAD OF SERVICE	Andy Butler, Director of Finance and Corporate Services
TITLE OF REPORT	Governance Matters
PURPOSE	The purpose of this paper is to provide the Audit Committee with a brief update on governance developments within NWSSP.

1. STANDING ORDERS AND FINANCIAL INSTRUCTIONS (SOs and SFIs)

There have been no departures from the Standing Orders and financial regulations during the period.

The Directors of Finance have set up a task and finish group to review and update the model standing financial instructions for Health Boards and Trusts. The Group has substantially completed the review and produced an updated versions of the model SFIs for review by the All Wales Directors of Finance Forum and the All Wales Board Secretaries at their October and November meeting.

The Group have also made a number of recommendations one of which relates to the SFIs used by NWSSP. Currently NWSSP operates under a set of standing orders however since 2012, utilises the Velindre SFIs. It has been agreed that a separate set of SFIs should be produced for NWSSP reflecting the All Wales arrangements and hosting arrangements in place with Velindre. These are currently being complied

2. CONTRACTS FOR NWSSP

The table overleaf summarises contracting activity undertaken during the period **02 October 2020 to 07 December 2021**. A summary of activity for the period is set out in **Appendix A**.

Description	No.
File Note	1
Invitation to competitive quote of value between £5,000 and £25,000 (exclusive of VAT)	4
Invitation to competitive tender of value between £25,000 and the prevailing OJEU threshold (exclusive of VAT)	0
Single Tender Actions	4
Single Quotation Actions	2
Direct Call Off against National Framework Agreement	0
Invitation to competitive tender of value exceeding prevailing OJEU threshold (exclusive of VAT)	0
Contract Extensions	0
Total	11

3. NWSSP PROCUREMENT SERVICES ALL WALES CONTRACTING ACTIVITY

During the period **1 October 2020** to **31 December 2020**, activity against **51 contracts** have been completed. This includes **16** contracts at the **briefing** stage and **25** contracts at the **ratification** stage. In addition to this activity, **10 extensions** have been actioned against contracts. A summary of activity for the period is set out in **Appendix B**.

4. GIFTS, HOSPITALITY & SPONSORSHIP

There have been **0** declarations as to Gifts, Hospitality or Sponsorship made since the last Audit Committee meeting.

5. WELSH GOVERNMENT QUARTERLY UPDATE

On a quarterly basis, we issue a letter to Dr Andrew Goodall at Welsh Government to confirm any Audit Reports which have achieved limited or no assurance. We were pleased to submit a nil return to the latest report, for the last quarter.

6. RECOMMENDATIONS

The Committee is asked to **NOTE** the report.

APPENDIX A - NWSSP Contracting Activity Undertaken (02/10/2020 to 07/01/2021)

No.	Trust	Division	Procurement Ref No	Date	SFI Reference	Agreement Title/Description	Supplier	Anticipated Agreement Value (ex VAT)	Reason/Circumstance and Issue	Compliance Comment	Procurement Action Required
1.	VEL	NWSSP-L&R	NWSSP-RFQ-699	23/10/2020	Request for Quote	Professional Fees To 30/9/2020 Perusing Papers And Research, Settling Draft Advice.	Blackstone Chambers Ltd	£5,000	Awarded based on M.E.A.T	Compliant, 3 suppliers viewed the opportunity, 3 response received	No action required
2.	VEL	NWSSP-SMTL	NWSSP-RFQ-705	29/10/2020	Request for Quote	For the safe and legal removal following F-gas legislation of 5 air conditioning units within SMTL.	Riverside Industrial Equipment	£ 11,187.70	Awarded based on M.E.A.T	Compliant, 3 suppliers viewed the opportunity, 3 response received	No action required
3.	VEL	NWSSP-PCS	NWSSP-STA-715	24/01/2020	Single Quotation Action	NWSSP K2 Five Builder User Subscription License	Sourcecode UK Ltd	£ 14,250.00	The extension was critical to the provision of an interim solution which has provided a low cost method of continuing business as usual and avoided potential major expenditure on a full solution that would have had a short life expectancy.	NWSSP-PCS	NWSSP-STA-715
4.	VEL	NWSSP-WOD	NWSSP-RFQ-716	24/11/2020	Request for Quote	Painting and decorating work in Companies House	Haines Painting & Decorating Ltd	£ 8,632.00	Awarded based on M.E.A.T	Compliant, 3 suppliers viewed the opportunity, 3 response received	No action required
5.	VEL	NWSSP-Procurement services	NWSSP-STA-717	26/11/2020	Single Quotation Action	Professional legal fees for providing legal counsel to	Blackburn & Associates Legal Costs Consultants	£ 6,543.95	The loss of critical legal expertise and case cost knowledge that has been developed since the case	Endorsed	No action required

						NWSSP and NHS Wales on a dispute relating to a maintenance contract. Despite mediation, settlement could not be reached, has now reached court proceedings (trial planned for Spring/Summer 2021).	Ltd		reached litigation, and thus potential submission of cost disputes, placing a significant risk upon NWSSP/NHS Wales.		
6.	VEL	NWSSP-Procurement services	NWSSP-STA-718	27/11/2020	Single Tender Action	As ref 5	Thirty Park Place	£ 94,792.59	As ref 5	Endorsed	No action required
7.	VEL	NWSSP - HCS	NWSSP-STA-725	10/12/2020	Single Tender Action	Provision of a Temperature Scheduling and Dispatch System (CAD) for Health Courier Service and Supply Chain Vehicles	Cleric Computer Services	£44,000.00	Due to the impact with current work being carried out by Supply chain on Brexit preparation and COVID-19, introducing a new system at this stage would cause unnecessary pressure to the service and present a significant risk to NHS Wales.	Endorsed	Formal Procurement to be undertaken
8.	VEL	NWSSP-Employment Services	NWSSP-STA-726	10/12/2020	Single Tender Action	Welsh Government initiative hosted by NWSSP for Student Bursary Awards.	Kainos Software Ltd	£51,750.00	The impact of COVID-19 has diverted resources and the ability to maintain timeframes. The existing System expires on 31st March 2021. The new completion target for a competitive Tendering exercise is 1st April 2022 therefore an agreement has put in place for an interim 12 month period with the existing supplier for continuity of service.	Endorsed	Formal Procurement to be undertaken

9.	VEL	NWSSP-WOD	NWSSP-RFQ-729	15/12/2020	Request for Quote	To remove and replace heavy duty carpet tiles.	Office Visions Wales Ltd	£6,322.00	Awarded based on M.E.A.T	Compliant, 3 suppliers viewed the opportunity, 3 response received	No action required
10.	VEL	NWSSP – Corporate Services	NWSSP-STA-736	29/12/2020	Single Tender Action	Development Of The Employment Services New Appointment Form (NAF)	Redcortex Ltd	£ 44,800.00	Operational problems encountered by other NHS Wales organisations trying to use employment services macro enabled forms when they migrate to O365 which will significantly delay the recruitment of staff to help address both the continuing impact of the pandemic and the specific requirements of the Vaccination programme	Endorsed	No action required
11.	VEL	NWSSP-Procurement services	VEL-NWSSP-FN-079	09/10/2020	File Note	Professional legal fees for providing legal counsel to NWSSP and NHS Wales on a dispute between NHS Wales and Schindler Ltd relating to the All Wales Lift Maintenance contract.	Thirty Park Place	£5,906.59	NWSSP Legal Services have an arrangement in place with 30 Park Place where there are very favourable set rates we use to utilise their barristers. Legal and Procurement Services are currently receiving legal advice and support in readiness for trial in 2021	Endorsed	No action required

APPENDIX B - All Wales Contracting Activity In Progress (1/10/2020-31/12/2020)

No.	Contract Title	Doc Type	Total Value	Jl approval <£750K	WG approval >£500k	NF approval £750-£1M	Chair Approval £1M+
1.	SBU Tonna Mother & Baby Unit initiative To Provide South Wales with a dedicated, safe and fit for purpose Mother and Baby Unit for women requiring in-patient care after giving birth in accordance with NICE guidelines and RCPSYCH's Quality Network for Perinatal Mental Health Services' standards Contract term - 14 week schedule	ratification	£ 972,396	20/10/2020	28/10/2020	trust gov applies	trust gov applies
2.	Provision of Health Professional Education & Training Services HEIW ensures that the people and healthcare professionals of Wales benefit from a cohesive, consistent approach to education and training, and to workforce modernisation and planning. In addition, they benefit from the enhanced skills, knowledge, and expertise that a combined organisation of this standing provides Contract term - 7 Years (with the option to extend in three 12 month intervals)	briefing	£ 973,127,838	02/10/2020	11/11/2020	N/A	N/A
3.	CVU WRU - COVID support Dragons Hospital As part of the COVID response to be prepared, negotiations were held and agreed with Welsh Government, the Health Board, Councils and the Welsh Rugby Union to secure the Principality Stadium in the Cardiff City Centre to transform the space into a temporary Field Hospital that could accommodate up to 2000 additional beds for COVID 19 but based on intelligence gathered around the patient numbers and flow, this has been reduced to 1500 beds during the planning stages.- Contract term - one off requirement	ratification	£ 1,080,000	01/10/2020	09/10/2020	trust gov applies	trust gov applies
4.	CVU Cardiff Blues - COVID support Dragons Hospital As part of the COVID response to be prepared, negotiations were held and agreed with Welsh Government, the Health Board, Councils, Welsh Rugby Union and Cardiff Blues to secure the Principality Stadium and surrounding areas in the Cardiff City Centre to transform the space into a temporary Field. The Arms Park was engaged to provide logistical support during the building of the Field Hospital. Once the Dragon's Heart Hospital was completed, the home of Cardiff Blues was planned for a staff welfare centre, catering facilities and the headquarters for DHH's facilities management. In addition, it will also support the decommissioning of DHH. Contract term – one off requirement	ratification	£ 1,080,000	01/10/2020	09/10/2020	trust gov applies	trust gov applies
5.	CVU Mott McDonald - COVID support Dragons Hospital The provider for this contract will work closely with all parties involved in the setup of the Field Hospital to capture the clinical, operational and other associated requirements and translate them into deliverable plans for the Principal Contractor to achieve.	ratification	£ 4,500,000	01/10/2020	09/10/2020	trust gov applies	trust gov applies
6.	NWIS OFWCMS server user To provide a single supplier framework for NHS Wales to call off for the provision of service user feedback Contract term - 4 year Framework Agreement with the option to extend for a further 1 year plus 2 years.	ratification	£ 889,000	05/10/2020	12/11/2020	12/11/2020	n/a
7.	HDDA Bluestone extension & decommissioning To extend the existing contract relating to the provision of Covid-19 emergency surge capacity via a Licence To	ratification	£ 2,233,000	20/10/2020	19/11/2020	trust gov	trust gov

	Occupy (LTO) of Adventure Centre. 128 surge Bed capacity from 31st December 2020 to 31st March 2021. Also reinstatement costs for the Adventure Centre. Contract term - 31st December 2020 to 31st March 2021					applies	applies
8.	Anti-infective drugs3 To contract for Generic Drugs –Anti Infective Drugs Items to purchase for use by All Wales hospital pharmacy departments, as requested by the All Wales Drug Contracting Committee. Contract term 01/02/2021 to 31/01/2022 (1 years) with an option to extend for a further 12 months to 30/06/2023 (1 years)	briefing	£ 2,259,936	09/10/2020	sent to WG 9/10		
9.	AB OJ45 - Support House The purpose of the Support House is to provide a high quality support service for Gwent residents (aged 18 and over) who are experiencing a mental health crisis in a homely and supportive environment, using a social model of recovery. It will offer an alternative to hospital inpatient admission and may also be used as a step-down service following an inpatient admission. Contract term 3 years plus option to extend for a further 2 year period	briefing	£ 2,500,000	20/10/2020	sent to WG 20/10		
10.	Maintenance of Azurion Radiography Systems Provision of regular servicing, corrective maintenance visits to site and the supply and fitting of replacement parts, including specialist parts (tubes & detectors) for the life of the systems. Contract term 7 years [Warranty plus 6 years] 16th November, 2020 – 15th November, 2027	ratification	£ 1,797,764	19/10/2020	23/10/2020	06/11/2020	06/11/2020
11.	Plaster Room encompasses a range of casting materials and accessories widely used within A&E, Plaster Room and Trauma departments though out NHS Wales. Contract term 01/04/2021 – 31/03/2025	briefing	£ 2,119,127	21/10/2020	06/11/2020	n/a	n/a
12.	CT scanner servicing at CTMUHB/Princess of Wales Hospital. Provision of regular servicing, corrective maintenance visits to site and the supply and fitting of replacement parts, including specialist parts (tube & detector) for the life of the CT scanner. Contract term 7 years [Warranty plus 6 years] 07/09/2020 – 06/09/2027	ratification	£ 562,500	20/10/2020	06/11/2020	n/a	n/a
13.	IV and Irrigation This contract is for all parenteral preparations for fluid and electrolyte imbalance and irrigations solutions that are purchased by hospital pharmacy departments in Wales. The IV Infusions are given intravenously to maintain normal fluid and electrolyte requirements levels. They are also given to replenish substantial deficits or continuing losses when the patient is nauseated or vomiting and is unable to take adequate amounts by mouth. In comparison to other routes of administration, the intravenous route is the fastest way to deliver fluids and medication throughout the body. Irrigation products are used when a wound or body organ needs cleaning by flushing or washing out with water or a medicated solution. Contract term – 3yrs + 2 yr extension option	extension	£ 2,807,922	20/10/2020	original approval applies - 30/1/19	19/11/2020	20/11/2020
14.	CVU Renal services West Wales The West Wales Renal Dialysis contract expires on the 31st August 2021, this provides an exciting opportunity to re-design the service which underpins prudent healthcare, and value based outcomes, as well as supporting a streamlined patient pathway from acute services to ISP. As a consequence it is proposed that the Renal Network and Swansea Bay Health board will continue the partnership approach with the independent sector providers. It is proposed that all renal contracts should be aligned regionally and procured to improve the opportunities with economies of scale, rationalisation of clinical services, streamlined patient pathways and outcomes. contract term Seven years with option to extend for up to thirty six months at the sole discretion of the Health Board	briefing	£ 71,969,399	22/10/2020	06/11/2020	n/a	n/a

15.	AB Inbuilding mobile system The proposal includes all necessary equipment, hardware installation in the designated main equipment room, associated racks, hardware installation at the designated ceiling locations, all structured cabling (Cat6A Shielded S/FTP or F/FTP with earthed FTP patch panels and FTP junction boxes to ensure earthed continuity and all fibre), all commissioning, system test, optimisation, ongoing monitoring, support and maintenance as a fully managed service. Contract term 1st November 2020 – 30th November 2027 (with options to extend until 30th November 2030)	ratification	£ 1,260,000	02/11/2020	sent to WG 2/11		
16.	Vaccines To contract for Adult Vaccines to purchase for use by All Wales hospitals, as requested by the All Wales Drug Contracting Committee Contract term 1st February 2021 to 31st January 2024 with option to extend for a further 12 months to 31/01/2025	ratification	£ 945,253	05/11/2020	16/12/2020	16/12/2020	n/a
17.	CVU Haemodialysis In-Centre Equipment and Consumables Our program emphasises the benefits of home therapies, and currently there are approximately 35 patients receiving home haemodialysis with a further 60 on peritoneal therapies. Outpatient Haemodialysis is delivered through a network of Satellite units across the region, supported by The David Thomas Haemodialysis Unit (DTU) on-site at UHW. DTU has recently been extensively refurbished and has seven stations, providing capacity for up to 28 patients per week. The unit focuses on providing outpatient dialysis for patients with complex needs who require specific care best provided on a Hospital site, and also treats Chronic Haemodialysis patients who may be admitted to UHW with non-renal problems. Contract term 5 years with 2 years extension option at the sole discretion of the Health Board	briefing	£ 2,602,675	05/11/2020	09/12/2020	n/a	n/a
18.	HDDA DrDoctor To provide the rapid expansion of Value Based Health Care in support of the Health Board Clinical Strategy through the provision of software and associated implementation and integration services. Contract term - 2.25 years	ratification	£ 781,574	06/11/2020	sent to WG 6/11		
19.	Disinfectants To contract for disinfectants to purchase for use by All Wales hospitals, as requested by the All Wales Drug Contracting Committee. Contract term 1st February 2021 to 31st January 2024 with option to extend for a further 12 months to 31/01/2025	ratification	£ 3,831,098	06/11/2020	31/12/2020	04/01/2021	04/01/2021
20.	Healthcare Waste & Sharps Containers contract consists of a variety of products which have evolved in line with healthcare requirements and legislation to cover the safe disposal of clinical waste and sharps in all circumstances and includes both plastic moulded items and cardboard boxes. Plastic containers come with colour-coded lids, to aid waste segregation, an essential aspect of the contract. A selection of waste stream colour-coded cardboard containers also provide a cost saving and sustainable approach to the disposal of non-sharp items such as administration sets and PPE. Contract term 3 years - 01/04/2018 to 31/03/2021 plus 2 year extension option	extension	£ 6,538,600	06/11/2020	original approval applies 21/12/17	06/11/2020	06/11/2020
21.	anti-infective drugs2 contract includes high value antibiotic medicines and there is concern that renewing the contract so close to EU exit gives us a huge potential risk. It is vital that sufficient stock of these medicines are held by as many of our current contractors as possible over the EU exit period so where lines are still competitive we propose to extend these. The service leads have given their support to this extension and there are no issues/problems with the current suppliers.	extension	£ 2,416,126	06/11/2020	original approval applies 8/11/19	06/11/2020	06/11/2020

	Contract term 1st February 2020 to 31st January 2021 plus 1 yr extension option						
22.	anti-infective drugs1 This contract includes high value antibiotic medicines and there is concern that renewing the contract so close to EU exit gives us a huge potential risk. It is vital that sufficient stock of these medicines are held by as many of our current contractors as possible over the EU exit period so where lines are still competitive we propose to extend these. The service leads have given their support to this extension and there are no issues/problems with the current suppliers. contract term 1st February 2018 to 31th January 2022 (Previous extension 1st February 2020 – 31st January 2021)	extension	£ 508,039	06/11/2020	original approval applies 8/11/19	n/a	n/a
23.	BCU automated blood sciences Automated Blood Sciences instrumentation is used to facilitate diagnosis and monitoring of a range of conditions in both acute inpatient and outpatient settings and primary care services. These investigations may commonly include renal status, liver status, full blood counts, cardiac events, coagulation disorders and haematological conditions, in addition to a range of routine and novel biomarkers. contract term 8 years with optional 7 year extension	briefing	£ 40,561,590	16/11/2020	sent to WG 16/11		
24.	Dressings adhesive & surgical tape The contract is to cover surgical tapes, dressing island and wound closure strips that are widely used across health care activities. The products are simple in nature but vital for delivering day-to-day healthcare operations Contract term 1st December 2020 – 30th November 2024	ratification	£ 1,099,530	10/11/2020	15/12/2020	sent to NF 15/12	
25.	BCU Agile working it hardware There is a requirement for laptops and accessories to allow the continuation of the replacement of devices in support of the migration to Windows 10 and to support key community based staff. Contract term one off purchase	ratification	£ 829,570	11/11/2020	13/11/2020	trust gov applies	trust gov applies
26.	Antiretroviral drugs There is no cure for infection caused by the human immunodeficiency virus (HIV), but a number of drugs slow or halt the progression. These drugs are known as ARVs Contract term 1st July 2018 to 30th June 2020,(Previous extension 1st July 2020 – 31st January 2021, new extension 1st February 2021 to 31st January 2022	extension	£6,939,264	13/11/2020	original approval applies 29/3/18	16/11/2020	16/11/2020
27.	Outsourcing of Radiotherapy services To overcome the issues that will present, because of the strategic events and the pandemic, there are a number of options currently under review by VCC to expand capacity for the next two years. One such option is to outsource Radiotherapy services on an ad hoc basis (non-committal) for a period of one year with an option to extend the agreement if necessary for two further years in one-year periods. The potential to outsource activity is a clinically viable option for prostate and breast cancer treatments, provided the clinical governance arrangements and patient pathways are clearly captured and understood. Contract term 1 year (with an option to extend for two 1 year intervals)	briefing	£ 3,493,872	19/11/2020	25/11/2020	n/a	n/a
28.	Injections/Infusions 4 to re-tender part of the current Generic Drug - Injections/Infusions contract 1 year period with an option to extend for up to a further 12 months	briefing	£ 2,119,377	25/11/2020	10/12/2020	n/a	n/a
29.	Data Centre Requirements - Replacement of BDC Provision of a Tier 3 Data Centre, which is geographically diverse from the primary data centre in Newport to host NHS Wales' National IT Services. This is a replacement to the Blaenavon Data Centre. for a period of five (5) years	ratification	£ 3,925,022	27/11/2020	03/12/2020	03/12/2020	03/12/2020

30.	Audiology The framework will provide hearing aids, hearing aid batteries, ear moulds, bone anchored hearing systems, cochlear implants and associated consumables (to include assessment consumables and wax removal consumables). Contract term 1st January 2021 – 31st December 2024 (Option to extend 12 months)	ratification	£ 24,858,671	03/12/2020	31/12/2020	04/01/2021	04/01/2021
31.	Fruit & Veg Direct delivery of fresh fruit and vegetables to all participating Health Boards Contract term - 3 years plus 1 year extension	ratification	£ 7,465,382	23/11/2020	sent to WG 23/11		
32.	Agency Nurses Supply of Agency Nurses, Midwives, Healthcare Assistants and Operating Department Practitioners, 3 year period with an option to extend for a further 12 months	briefing	£ 336,000,000	27/11/2020	sent to WG 27/11		
33.	Allocate eRoster The single supplier contract aims to achieve better value for money on existing contracts and to provide access to the Allocate Software product to all NHS Wales organisations, aligning itself to the “Once for Wales” strategy. Duration of the contract is five (5) years	ratification	£ 7,990,270	04/12/2020	10/12/2020		
34.	CAMHS PICU beds additional mental health in-patient capacity from the independent sector to enable additional mental health capacity 2nd Nov 2020 until 31st March 2021	ratification	£ 2,700,000	27/11/2020	31/12/2020	04/01/2021	04/01/2021
35.	Fuel Oils extension The incumbent supplier (distributor) of fuel oils to NHS Wales is Certas Energy UK Limited, trading as Emo Oil Ltd, who supply Gas Oil, Kerosene, Therma 35, and Ultra Low Sulphur Diesel (ULSD) to NHS sites across Wales. Contract term 1st December 2015 to 30th November 2020 (5 years) extension for additional 3 months	extension	£ 5,771,825	02/12/2020	original approval applies 19/10/15	02/12/2020	02/12/2020
36.	HDDA - Parc Scarlets To provide a governance tool covering emergency occupation of a part of the Parc-Y Scarlets Barn site, duration 9 months	ratification	£ 765,000	01/12/2020	03/12/2020	trust gov applies	trust gov applies
37.	Generic topicals & misc This contract consists of all Generic liquids, creams, emollients, gels and miscellaneous products such eye drops, inhalers, patches etc, which are purchased through hospital Pharmacy Departments for a 3 year period with an option to extend for a further 12 months	briefing	£ 7,644,116	02/12/2020	14/12/2020	n/a	n/a
38.	BCU - Provision of Educational Training for Nursing, Midwifery, OPD & HCSW for BCUHB To provide high quality education for nurses, midwives, operating department practitioners and health care support workers to ensure delivery of high quality patient centred care in line with the Quality Improvement Strategy (2017), BCUHB values and organisational objectives. The contract has been running for two years and this extension is requested until 31st March 2022	extension	£ 663,933	07/12/2020	sent to WG 8/12	n/a	n/a
39.	Prosthetics A prosthetic is an artificial substitute or replacement of a part of the body such as joints for the hip, knee, elbow, and ankle. A prosthetic is designed for functional or cosmetic reasons or sometimes both. 2 years with the option to extend for a further 24 months	briefing	£ 6,400,000	AS 18/12/20	22/12	sent to WG 22/12	
40.	Parenteral Nutrition This contract consists of all Parenteral Nutrition products purchased through Pharmacy Departments. Parenteral Nutrition requires the use of a solution containing amino acids, glucose, fat, electrolytes, trace elements and vitamins. This is now commonly provided by Pharmacy Departments in the form of a 3-litre bag. for a 3 year period with an option to extend for a further 12 months	briefing	£ 1,179,706	22/12/2020	sent to WG 22/12		

41.	Additional Radiology Reporting Capacity provision of radiology reporting services to Everlight Radiology (Everlight) was made on the 1st November 2019. This was a direct award against a Health Trust Europe Framework Agreement, awarded in March 2018 following a full EU competition. This award is the third of its kind for such services, prior to the original award of contract in 2014, there was a national shortage of Consultant Radiologists within Heath Boards in Wales, which had resulted in a lack of capacity and unacceptable reporting times for some radiology procedures. 1st November 2019 to 31st October 2022 with an option to extend at the discretion of the contracting Authority NWSSP/Velindre for a further two (2) year up to 31st October 2024.	extension	£ 30,403,760	15/12/2020	original approval applies 1/8/19	15/12/2020	15/12/2020
42.	CLI-OJEU-40703 Sterilisation and Decontamination Consumables The Framework offers a wide range of products that are utilised by Sterile Services and Endoscopy Decontamination Units, including: autoclave accessories and sterilisation testing required for accreditations, sterilisation/endoscopy brushes, chemicals and wipes, polypropylene bowls/gallipots/kidney dishes, sterilisation wrap/paper/pouches and reels and tray liner, instrument trays, tracking paperwork, Endoscopy storage/bags and washer and dryer accessories. The Framework is serviced by 36 suppliers covering 22 Lots. Contract term 1st August 2019 to 31st July 2021 (with option to extend for 2 x 12 months)	extension	£ 14,000,000	22/12/2020	original approval applies 10/06/19	22/12/2020	22/12/2020
43.	Anti infective drugs 3 To contract for Generic Drugs –Anti Infective Drugs Items to purchase for use by All Wales hospital pharmacy departments, as requested by the All Wales Drug Contracting Committee. 01/02/2021 to 31/01/2022 (1 years) with an option to extend for a further 12 months to 30/06/2023 (1 years)	ratification	£ 1,552,597	18/12/2020	sent to WG 18/12		
44.	BCU - Provision of Mobile Scanners & Personnel Supply of mobile scanners for the radiology department in order to provide MR, CT and US scanning capacity across BCU to assist with post Covid backlog recovery. 12 Months	ratification	£ 3,844,595	18/12/2020	sent to WG 18/12		
45.	Blood Glucose and keytone testing Blood glucose monitoring refers to testing the concentration of glucose and ketones in the blood to aid in the management of Diabetes types 1 and 2. Blood glucose and ketones can be self-monitored by patient's themselves to aid in the understanding of how well controlled their condition is, and can inform any changes that may help to improve their control. 1st January 2021 – 31st December 2022	ratification	£ 10,050,622	AS 17/12/20	n/a	22/12/2020	23/12/2020
46.	Biologics This contract is for the re-tender of the biologic and biosimilars contract for Infliximab, Etanercept, Rituximab, Bevacizumab, & Teriparatide and will also incorporate the biologic contract for Adalimumab, effectively producing one overarching Biologics Framework Agreement. Contract to be let for a 24 month period with option to extend for a further 12 + 12 months	briefing	£ 71,669,324	23/12/2020	sent to WG 23/12		
47.	Trastuzumab This contract is for the supply of Trastuzumab and biosimilar Trastuzumab medicines, along with the combination therapy of Trastuzumab combined with Pertuzumab. These medicines have been kept separate from the proposed All Wales Biologics contract due to the high tech nursing service required for the administration of Trastuzumab. Contract to be let for a 24 month period with option to extend for a further 12 + 12 months	briefing	£ 26,395,032	23/12/2020	sent to WG 23/12		
48.	Frozen Meals This Frozen Meals procurement exercise incorporates current frozen plated meals, texture modified, multi-portion meals, cultural meals, desserts and frozen side products. 1 Year with the option to extend for up to 36 months	briefing	£ 7,573,384	23/12/2020	sent to WG 23/12		

49.	Patient Monitoring equipment This is a partnership agreement for the maintenance of Patient Monitoring equipment. The EBME Department of Aneurin Health Board will undertake Planned Preventative servicing and the contractor will supply necessary PPM Service kits & batteries and will cover any repairs including accidental damage cover. Repairs will be undertaken on-site. 5 year agreement	ratification	£ 916,736	23/12/2020	sent to WG 23/12		
50.	NGS Somatic panel the All Wales Medical Genomics Laboratory (AWMGL) has a long history delivering precision medicine molecular pathology services for Welsh cancer patients, and also for referrers outside of Wales (but within the UK). These services utilise FFPE tissue samples from a range of solid tumour types including lung, colorectal, melanoma, GIST, sarcoma, and gliomas. The services also utilise bone marrow and blood samples from patients with a range of haematological malignancies. Two (2) years with the option to extend for three (3) years at annual intervals.	ratification	£ 10,768,696	23/12/2020	sent to WG 23/12		ratification
51.	IMCA The Mental Capacity Act (MCA) 2005 came into force in October 2007 introducing the new statutory role of the Independent Mental Capacity Advocate (IMCA) to support people who lack capacity to make certain decisions. The introduction of the statutory duty imparted a legal obligation on Local Authorities and UHB/Trust bodies in Wales to make an IMCA service available under the criteria set out within the MCA. 3 years with an option to extend for two further 12-month periods.	extension	£ 883,620	23/12/2020	original approval applies 23/11/18	23/12/2020	n/a



MEETING	Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership
DATE	26 January 2021
PREPARED BY	Carly Wilce, Corporate Services
PRESENTED BY	Peter Stephenson, Head of Finance & Business Development
RESPONSIBLE HEAD OF SERVICE	Andy Butler, Director of Finance and Corporate Services
TITLE OF REPORT	Update on the Implementation of Audit Recommendations
PURPOSE <p>This report provides an update to the Audit Committee on the progress of tracking audit recommendations within NWSSP. In this report, the base position has been taken from the previous report presented to the Audit Committee. Therefore, please note that this report does not include figures and assurance ratings for the audit reports listed on the present Audit Committee agenda.</p>	

1. INTRODUCTION

NWSSP records audit recommendations raised by Internal Audit, Audit Wales and other external bodies, as appropriate. It is essential that stakeholder confidence is upheld and maintained; an important way in which to enhance assurance and confidence is to monitor and implement audit recommendations in an effective and efficient way. As previously agreed at Committee, all active recommendations are reviewed annually, and this meeting (i.e. January 2021) is the scheduled meeting for that to happen.

2. CURRENT POSITION

The detailed recommendations raised in respect of our services have been captured in a detailed tracking database. A copy of the summary extract is attached at **Appendix A**, for your information.

There are **51** reports covered in this review; **13** reports have achieved **Substantial** assurance; **25** reports have achieved **Reasonable** assurance, **0** reports have been awarded **Limited** assurance or **No Assurance**; and **13** reports were generated with **Assurance Not Applicable**. The reports include **201** recommendations for action.

Table 1 - Summary of Audit Recommendations

As at 18/01/2021					
Recommendations		Implemented	Not Yet Due	Overdue	Not NWSSP Action
Internal Audit	149	141	7	0	1
<i>High</i>	14	14	0	0	0
<i>Medium</i>	72	67	4	0	1
<i>Low</i>	63	60	3	0	0
<i>Not Applicable</i>	0	0	0	0	0
External Audit	25	25	0	0	0
<i>High</i>	0	0	0	0	0
<i>Medium</i>	23	23	0	0	0
<i>Low</i>	2	2	0	0	0
<i>Not Applicable</i>	0	0	0	0	0
Other Audit	31	31	0	0	0
<i>High</i>	4	4	0	0	0
<i>Medium</i>	7	7	0	0	0
<i>Low</i>	20	20	0	0	0
<i>Not Applicable</i>	0	0	0	0	0
TOTALS:	205	197	7	0	1

3. REVISED DEADLINES FOR APPROVAL

There are currently **2 recommendations** that have not been implemented within their target completion date, which present a **Revised Deadline for Approval**. The detail of each is as follows:

- Payroll Services
 - The work on a standardised All-Wales Overpayment Process commenced in early March 2020, however due to Covid-19 this project was placed on hold. The project has been resumed in January 2021 with focus on completion by 31st March 2021. Extension of this action is therefore requested from 31 December 2020 to 31 March 2021.
 - Work has similarly commenced on the implementation of an all-Wales approach to the checking of amendments to payroll data. The only outstanding issue is in North Wales where some technical issues with macros have been found during testing. These are anticipated to be resolved by the end of February and therefore extension of this action is also requested from 31 December 2020 to 31 March 2021.

Full details of the recommendations are set out in Appendix B, for the attention of the Audit Committee.

4. RECOMMENDATIONS

The Audit Committee are asked to:

- **NOTE** the report findings and progress made to date regarding implementation of audit recommendations; and
- **APPROVE** the proposed Revised Deadline, as detailed at **Appendix B**.

Appendix A

SUMMARY OF LATEST AUDIT REVIEWS BY SERVICE AREA

Internal Audit Reference	Reference	Directorate	Health Board/Trust	Report Title	Year	Assurance Rating	Recommendations	Implemented	Not Yet Due	Revised Deadline	Overdue	Not NWSSP Action
NWSSP-1718-03	CORP/17-18/2	Corporate Services	NWSSP	Non-Medical Education Training Budget	2017-18	Substantial	3	3	0	0	0	0
NWSSP-1718-12	CORP/17-18/3	Corporate Services	NWSSP	Audit Tracker Review	2017-18	Substantial	2	2	0	0	0	0
NWSSP-1718-16	CORP/17-18/4	Corporate Services	NWSSP	Corporate Governance	2017-18	Substantial	2	2	0	0	0	0
NWSSP-1718-06	CORP/17-18/5	Corporate Services	NWSSP	Surgical Materials Testing Laboratory (SMTL)	2017-18	Reasonable	3	3	0	0	0	0
NWSSP-1718-09	CORP/17-18/6	Corporate Services	NWSSP	Performance Management	2017-18	Reasonable	3	3	0	0	0	0
NWSSP-1819-02	CORP/17-18/6	Corporate Services	NWSSP	BACS Bureau Review	2018-19	Advisory Report	4	4	0	0	0	0
NWSSP-1819-04	CORP/18-19/1	Corporate Services	NWSSP	Wales Infected Blood Support Scheme	2018-19	Reasonable	10	10	0	0	0	0
NWSSP-1819-10	CORP/18-19/2	Corporate Services	NWSSP	Welsh Language Standards	2018-19	Reasonable	3	3	0	0	0	0
NWSSP-1819-14	CORP/18-19/3	Corporate Services	NWSSP	Risk Management and Assurance	2018-19	Substantial	2	2	0	0	0	0
NWSSP-1819-07	CORP/18-19/4	Corporate Services	NWSSP	Business Continuity Planning	2018-19	Reasonable	3	3	0	0	0	0
NWSSP-1819-11	CORP/18-19/5	Corporate Services	NWSSP	General Data Protection Regulation (GDPR)	2018-19	Substantial	3	3	0	0	0	0
NWSSP-1920-08	CORP/19-20/1	Corporate Services	NWSSP	Performance Reporting	2019-20	Substantial	1	1	0	0	0	0
NWSSP-1920-04	CORP/19-20/2	Corporate Services	NWSSP	IR35	2019-20	Reasonable	4	4	0	0	0	0
NWSSP-1920-13	CORP/19-20/3	Corporate Services	NWSSP	Strategic Planning	2019-20	Reasonable	2	2	0	0	0	0
NWSSP-1920-15	CORP/19-20/4	Corporate Services	NWSSP	Cyber Security	2019-20	Reasonable	5	3	2	0	0	0
NWSSP-1920-03	CORP/19-20/5	Corporate Services	NWSSP	Accounts Payable P2P	2019-20	Reasonable	5	5	0	0	0	0
NWSSP-1920-11	CORP/19-20/6	Corporate Services	NWSSP	Budgetary Control and Financial Reporting	2019-20	Substantial	2	2	0	0	0	0
NWSSP-2021-12	CORP/20-21/1	Corporate Services	NWSSP	Credit Card Expenditure	2019-20	Substantial	2	2	0	0	0	0
NWSSP-2021-01	CORP/20-21/2	Corporate Services	NWSSP	Declarations of Interest	2020-21	Advisory Report	4	4	0	0	0	0
Internal Audit	EMP/16-17/2	Employment Services	All Wales	TRAC System	2016-17	Reasonable	3	3	0	0	0	0
NWSSP-1920-10	EMP/19-20/1	Employment Services	NWSSP	Staff Expenses	2019-20	Reasonable	4	4	0	0	0	0
NWSSP-1920-02	EMP/19-20/2	Employment Services	All Wales	Payroll Services	2019-20	Reasonable	7	4	3	0	0	0
NWSSP-1819-15	PCS/18-19/1	Primary Care Services	All Wales	Patient Medical Records Store and Scan on Demand Service	2018-19	Reasonable	6	6	0	0	0	0
NWSSP-1920-14	PCS/19-20/1	Primary Care Services	All Wales	Post Payment Verification (PPV)	2019-20	Substantial	2	2	0	0	0	0
NWSSP-1920-01	PCS/19-20/2	Primary Care Services	All Wales	Contractor Payments	2019-20	Substantial	0	0	0	0	0	0
Internal Audit	PROC/16-17/3	Procurement Services	All Wales	Supplier Master File Follow Up	2016-17	Reasonable	2	2	0	0	0	0
Internal Audit	PROC/16-17/4	Procurement Services	Velindre/PHW	Local Procurement Team	2016-17	Reasonable	5	5	0	0	0	0
Internal Audit	PROC/16-17/5	Procurement Services	All Wales	Denbigh Stores	2016-17	Reasonable	7	7	0	0	0	0
NWSSP-1718-19	PROC/17-18/1	Procurement Services	ABMU	Carbon Reduction Commitment (CRC) Payment Review	2017-18	Advisory Report	5	5	0	0	0	0
NWSSP-1718-01	PROC/17-18/2	Procurement Services	All Wales	WAO Audit RKC Associates Lessons Learned by NWSSP	2017-18	Advisory Report	2	2	0	0	0	0
NWSSP-1819-01	PROC/18-19/1	Procurement Services	All Wales	Health Courier Services	2018-19	Reasonable	7	7	0	0	0	0
NWSSP-1819-08	PROC/18-19/2	Procurement Services	All Wales	Cwmbran Stores	2018-19	Reasonable	2	2	0	0	0	0
NWSSP-1920-06	PROC/19-20/1	Procurement Services	All Wales	Procurement Services Directorate Review	2019-20	Reasonable	5	5	0	0	0	0
NWSSP-1920-09	PROC/19-20/2	Procurement Services	All Wales	Stores - IP5	2019-20	Substantial	0	0	0	0	0	0
SSU SES 1819 01	SES/18-19/1	Specialist Estates Services	All Wales	Primary Care Rental Reimbursement Reviews	2018-19	Reasonable	7	7	0	0	0	0
SSU NWSSP 1920 0	SES/19-20/1	Specialist Estates Services	All Wales	Business Case Scrutiny Processes	2019-20	Reasonable	2	2	0	0	0	0
Internal Audit	WORK/16-17/1	Workforce	All Wales	WfIS ESR OH Bi-Directional Interface	2016-17	Reasonable	4	4	0	0	0	0
NWSSP-1718-17	WORK/17-18/1	Workforce	All Wales	WfIS ESR / Occupational Health Bi-Directional Interface (Immunisations)	2017-18	Substantial	1	1	0	0	0	0
NWSSP-1718-04	WORK/18-19/1	Workforce	All Wales	GP Specialty Training Registrars	2018-19	Reasonable	4	4	0	0	0	0
NWSSP-1819-09	WORK/18-19/2	Workforce	NWSSP	Annual Leave Management	2018-19	Reasonable	5	5	0	0	0	0
NWSSP-1819-05	WORK/18-19/3	Workforce	NWSSP	Recruitment and Retention	2018-19	Advisory Report	3	3	0	0	0	0
NWSSP-1920-07	WORK/19-20/1	Workforce	NWSSP	Time Recording	2019-20	Substantial	1	1	0	0	0	0
NWSSP-1920-05	WORK/19-20/2	Workforce	NWSSP	Health and Safety	2019-20	Reasonable	5	5	0	0	0	0
NWSSP-1920-16	WORK/19-20/3	Workforce	NWSSP	Contact Centres	2019-20	Advisory Report	3	0	3	0	0	0
External Audit	AW/19-20/1	All Services	All Wales	Audit Wales Management Letter	2019-20	Not Applicable	2	2	0	0	0	0
External Audit	AW/19-20/2	All Services	All Wales	Audit Wales Nationally Hosted NHS IT Systems Assurance Report	2019-20	Not Applicable	13	13	0	0	0	0
Other Audit	ICO/17-18	Corporate Services	NWSSP	Information Commissioner's Office (ICO) Training Audit	2017-18	Not Applicable	10	10	0	0	0	0
Other Audit	ISO14001/18-19	Corporate Services	NWSSP	SGS UK Ltd Audit of ISO14001 Environmental Management System	2018-19	Not Applicable	1	1	0	0	0	0
Other Audit	SECURITY/18-19	Corporate Services	NWSSP	Physical Security Review of NWSSP	2018-19	Not Applicable	18	18	0	0	0	0
Other Audit	Cardiff/WAO/F7	Corporate Services	NWSSP	WAO Management Letter for Cardiff and Vale University Health Board	2018-19	Not Applicable	1	1	0	0	0	0
Other Audit	Velindre/WAO/F3	Corporate Services	NWSSP	Audit of Financial Statements Report and Management Letter for Velindre University NHS Trust	2018-19	Not Applicable	1	1	0	0	0	0

APPENDIX A - PROGRESS OF AUDIT RECOMMENDATIONS

ID	Internal Audit Report Ref Rec No / Ref NWSSP Service Report Title Report Year	Status	Issue Identified	Risk Rating	Recommendation	Responsibility for Action	Management Response	Original Deadline	Updated Deadline	Update On Progress Made
NOT YET DUE RECOMMENDATIONS										
FINANCE AND CORPORATE SERVICES										
Cyber Security 2019-20										
1.	NWSSP-1920-15 5 CORP/19-20/4 Corporate Services NWSSP Cyber Security 2019-20	NOT YET DUE	The switch cabinet in SES (Companies House) has fallen from the wall and is left open. This leads to a risk of unauthorised access. Risk of loss of IT services as a result of attack from entities external to the organisation, exploiting common vulnerabilities.	Medium	The cabinet should be locked to prevent individuals from accessing the switches.	Head of Finance and Business Development - Peter Stephenson	The cabinet will be repaired and re-located.	30/09/2020	30/09/2021 – Revised deadline approved 20/10/2020	Director of Finance & Corporate Services gave authority for this work to proceed. No progress to date mainly due to other pressures but also because of the embargo against bringing external contractors on site at Companies House whilst lockdown restrictions are in place. This issue will be resolved when other priorities allow and contractors are able to access the site. Approved at Audit Committee 20/10/2020.
2.	NWSSP-1920-15 4 CORP/19-20/4 Corporate Services NWSSP Cyber Security 2019-20	NOT YET DUE	Currently the NWSSP network is not separated from the NWIS network. The network has a flat architecture with limited segregation. This means that the NWSSP is accessible by more staff than necessary and there are limited barriers within the network to prevent an intruder moving around / seeing the whole network and increases the risk of a cyber attack. Risk: Risk of loss of IT services as a result of attack from entities external to the organisation, exploiting common vulnerabilities.	Medium	The NWSSP network should be separated from the NWIS network and improved network segmentation with the NWSSP network should be employed.	Head of Finance and Business Development – Peter Stephenson	The NWSSP network is maintained by NWIS client services and so cannot be completely separated from the NWIS network without a negative impact on security. The following actions have been discussed with Matthew Walters (NWIS Client Services) and Mike Bryan (NWSSP IT) in order to improve the network segregation and improve the security of the NWSSP network. A project to implement these changes will have to be raised with NWSSP PMO: <ul style="list-style-type: none"> • Installation and configuration of firewalls in Companies House, Alder House and Matrix House • Departmental VLANS to be implemented during new switch installation. • Review of stores wired and wireless networks • Review of redundancy of PSBA connections • Installation and configuration of internal network monitoring and intrusion detection • Review of current remote connection methodologies for both security and business continuity • Implementation of national Nessus vulnerability management system. • Procurement, installation and configuration of Paws and Nipper for network device and asset monitoring • Testing of failover in virtual hyperV environment 	31/12/2020		The following has been completed: <ul style="list-style-type: none"> • Procurement of switches and firewalls for all NWSSP environments • Early discussion of network architecture to provide segregation of NWSSP network areas • Testing of intrusion detection system for NWSSP in Companies House completed • Stores Wireless networks now under NWIS management and wired networks will pass to NWIS later in 2021 • Testing of new 3rd party access to NWSSP networks in progress • PSBA connections reviewed • NESSUS acquired • Implementation of O365 and move to multi-factor authentication has largely addressed concerns over remote connection methodologies <p>The remaining work requires the input of NWIS to complete and negotiations are underway to facilitate this.</p>

APPENDIX A - PROGRESS OF AUDIT RECOMMENDATIONS

EMPLOYMENT SERVICES									
Payroll Services 2019-20									
3.	NWSSP-1920-02 1 EMP/19-20/2 Employment Services All Wales Payroll Services 2019-20	NOT YET DUE	The new appointment forms (NAF) developed by Employments Services include additional controls, to improve data quality and reduce the risk of fraud, compared to paper-based forms. However, the NAF had only been used for 18 of the 37 new starters sampled, as HDUHB and ABUHB were still using manual forms. However, ABUHB will be using the NAF from 2020/21. Risk: Inappropriate or erroneous payments, resulting in financial loss to the customer organisation.	Medium	All organisations should be encouraged to use the NAF forms.	Janet Carsley / Beverley Cokeley	There are on-going discussions with organisations to roll out the New Appointment Form. ABUHB already utilises the New Appointment Form for Bank Appointments with a rollout plan for 2020/21 for substantive staff. The NAF is in use in Cwm Taff, Cardiff and Vale, PHW and Velindre. The NAF for, is not in use in SBUHB however are in discussions and are keen to go live in 2020/21. The NAF is also in use with BCU & WAST.	31/03/2021	Office 365 will not support the NAF process, therefore, on-going discussion/work in place in respect of a replacement of NAF Forms. Decision not to pursue rollout of NAF with outstanding organisations in the short time, will include with new Office 365 process when finalised. ABUHB are opening Grange University Hospital 4 months earlier than scheduled in November 2020, therefore ABUHB are not in a position to change document submission process in 2020/21 as GUH work takes priority. Re-scheduled rollout to new electronic enrolment form in 2021/2022. Work currently on-going using external contractors (RedCortex) to enable compatibility of NAF with Office365.
4.	NWSSP-1920-02 3 EMP/19-20/2 Employment Services All Wales Payroll Services 2019-20	EXTENSION REQUIRED	Overpayment registers are maintained for each of the 11 organisations. However, there is a lack of a coherent approach between each team. There has been an improvement, particularly with the Payroll teams based at Companies House, where there is a combined approach for the Cardiff based teams. Risk: Overpayments are not recovered, resulting in financial loss to the customer organisation.	Medium	As previously recommended, an all-Wales approach to the management of overpayments should be agreed and adopted across all Payroll teams.	1. Janet Carsley 2. Janet Carsley 3. J Janet Carsley/Enablement Team 4. Janet Carsley	The Overpayments Teams in Companies House has been combined to form the South East Wales Overpayments Team where processes have been reviewed and standardised. Work is continuing on an on-going basis to develop the team including working with organisations in respect of high overpayment areas. The NWSSP Overpayment review has commenced a review of overpayments which is a project that will be included on an all Wales basis. The overpayment process will be discussed on an all Wales basis including the development of a single All-Wales Overpayment Policy.	1. 30/09/2019 - Complete 2. 31/12/2020 - Complete 3. 31/12/2020 4. 31/12/2020	31/03/2021 Overpayment review for Standardised All Wales Overpayment Process commenced in early March 2020, however due to Covid-19 this project was placed on hold. Overpayment Project will be resumed in January 2021 with focus on All Wales Standard Process for a completion by 31st March 2021
5.	NWSSP-1920-02 4 EMP/19-20/2 Employment Services All Wales Payroll Services 2019-20	EXTENSION REQUIRED	Within each team there are various processes for generating checking reports. These reports serve as an additional control for ensuring starters, leavers, changes and other actions are processed correctly. However, we found that some teams do not evidence their review of the checking reports, when completed. In particular: - PTHB generate the reports, but do not evidence any of their reviews of the reports; and - for a sample of two months selected for review, the reports utilised for checking had been generated for CTUHB, CVUHB, HEIW, PHW and VNHST, but had not been evidenced as review in some instances. Finally, the Payroll Exception Report compares current period pay to the previous period and there were variations between the way that teams produce and check these reports. Risk: Inappropriate or erroneous payments, resulting in financial loss to the customer organisation.	Medium	1. As recommended last year an all-Wales approach to the payroll checking process should be agreed and adopted across all 11 Payroll Teams. 2. Management should note the risk associated with the macro-filtered reports used by the Cardiff teams for payroll checking and exception reporting. The source documents produced from ESR should be retained, and consideration given to the feasibility and benefit of checking the completeness of the macro-filtered reports against the source documents, to ensure that all transactions that require checking are included. 3. A report of changes to payroll data should be produced and checked by the North Wales, Swansea and Carmarthen payroll teams. 4. Checking reports should be signed to confirm a review of the checking process.	1. Christine Richards, Janet Carsley, Neil Evans, Beverley Cokeley 2. Christine Richards 3. Christine Richards, Janet Carsley, Neil Evans, Beverley Cokeley 4. Christine Richards	1 Shared approach in place at Companies House. On-going discussions on a Wales wide basis for standard process. 2 The source documents are retained and used to verify checking prior to filing. There is an automatic field on the report for the supervisor to confirm report checked. However, this has not always been completed. Supervisors reminded of the importance of this. Whilst the process has already been agreed by Audit prior to rollout, additional work will be undertaken in respect of comments. 3 Process has been shared with North Wales, Swansea and Carmarthen in 2019. As per point 2, on-going discussions as to All Wales agreed process. 4 Payroll checking already as system to support sign off documents, however due to resource issues, this had not been followed completely for CTUHB, CVUHB, HEIW, PHW and VNHST. Supervisors have been reminded of the importance of sign off checking processes.	1. 31/03/2021 2. 31/03/2020 - Complete 3. 31/12/2020 4. 30/04/2020 - Complete	31/03/2021 1 Deputy Payroll Managers reviewed and agreed Checking Process to be utilised including use of macros by all Payroll Teams. Process agreed and currently being tested in all Payroll Teams across Wales. Discovered issued during the process due Excel, on target for resolution date 28th Feb 2021 2 Supervisors have been reminded by all Sections on both issue - Complete 3 Payroll checking reports produced for new checking process and in testing across all sites as per Point 1. The recommendation is still in the testing stage here in North Wales as there have been some technical issues to resolve with macros. On target for resolution date 28th Feb 2021 4. Complete

APPENDIX A - PROGRESS OF AUDIT RECOMMENDATIONS

WORKFORCE AND ORGANISATIONAL DEVELOPMENT										
Contact Centres 2019-20										
6.	Advisory Review NWSSP-1920-16 1 WORK/19-20/3 Workforce NWSSP Contact Centres 2019-20	NOT YET DUE	Advisory review - Continuous improvement programme	Low	Continuous improvement programme - Create, review and update a NWSSP contact centre optimisation maturity framework, as illustrated within Appendix A to identify the current versus anticipated position. Whether NWSSP's objective is to deliver higher cost savings, better decision making or increased service levels, a contact centre's continuous improvement programme should address the following areas: strategy; service delivery; organisation; and operations and technology.	IMTP Project Manager - Kelsey Rees-Dykes	To co-ordinate this process, an initial planning meeting was held during January 2020, with the support of a newly appointed project manager. The recommendations will be implemented through the 2020-2021 IMTP process.	31/03/2021		The business justification case along with an options appraisal for discussion and approval to be taken to SMT meeting for an agreement on the preferred way forwards.
7.	Advisory Review NWSSP-1920-16 2 WORK/19-20/3 Workforce NWSSP Contact Centres 2019-20	NOT YET DUE	Advisory review - Learn from each other and externally	Low	Learn from each other and externally - NWSSP should consider the creation of a Contact Centre Working Group, for the purposes of sharing ideas and assisting each divisional contact centre in growing in maturity level. Items for discussion should include, but not limited to: · benchmarking performance and consideration of process re- engineering, including setting standard KPIs such as "call abandonment rate"; · the procedure and benefit of gaining a quality standard accreditation, such as Procurement Services' ISO9001; · good news stories related to talent management, such as a Contact Centre Manager being seconded to the role of Accounts Payable Manager for a number of health boards; and · consider NWSSP membership of contact centre-related associations for up-to-date improvement measures and knowledge awareness.	IMTP Project Manager - Kelsey Rees-Dykes	To co-ordinate this process, an initial planning meeting was held during January 2020, with the support of a newly appointed project manager. The recommendations will be implemented through the 2020-2021 IMTP process.	31/03/2021		A working group will be established following the assigned preferred way forward, to be agreed at a future SMT meeting. The implementation of a programme board is underway. Links have been made with the telephony project within IT services, following a briefing on both projects at Adapt and Change.
8.	Advisory Review NWSSP-1920-16 3 WORK/19-20/3 Workforce NWSSP Contact Centres 2019-20	NOT YET DUE	Advisory review - Centralisation of the divisional contact centres	Low	Centralisation of the divisional contact centres - Undertake a feasibility study regard the virtual centralisation of the NWSSP divisional contact centres, to provide a single point of contact for all customers.	IMTP Project Manager - Kelsey Rees-Dykes	To co-ordinate this process, an initial planning meeting was held during January 2020, with the support of a newly appointed project manager. The recommendations will be implemented through the 2020-2021 IMTP process.	31/03/2021		A Maturity Matrix has been conducted to provide further data and rational for a way forwards, using a multitude of data collections and analytics to support the need for change.

MEETING	Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership
DATE	26 January 2021
PREPARED BY	Peter Stephenson, Head of Finance and Business Development
PRESENTED BY	Peter Stephenson, Head of Finance and Business Development
RESPONSIBLE HEAD OF SERVICE	Andy Butler, Director of Finance and Corporate Services
TITLE OF REPORT	NWSSP Corporate Risk Register – January 2021

PURPOSE

To provide the Audit Committee with an update as to the progress made against the organisation's Corporate Risk Register.

1. INTRODUCTION

The Corporate Register is presented at **Appendix 1** for information.

2. RISKS FOR ACTION

The ratings are summarised below in relation to the Risks for Action:

Current Risk Rating	January 2021
Red Risk	3
Amber Risk	14
Yellow Risk	1
Green Risk	0
Total	18

2.1 Red-rated Risks

Risk A1 - Demise of the Exeter Software System

The replacement of the GMS systems continues to be on track and we are now undertaking the checking process for validation of the new system. A period of dual running is due to commence shortly to ensure the accuracy of the new system, with a partial go-live scheduled for March for Swansea Bay UHB. Full go-live for all Health Boards will commence from 1 April. The planned implementation of the Capita system in NHS England is also

due to go-live on 1 April but Capita have asked NHS Digital for six months of continued contingency cover. If there were therefore any issues with the Northern Ireland system, we would have a further six months to resolve them.

Risk A2 – Threat of No-Deal BREXIT

The signing of a deal immediately prior to Christmas was good news but for the time being the risk will stay red while the implications of the deal are considered.

Risk A3 - NHS Digital were planning to withdraw the Ophthalmic Payment service from the end of March 2020.

The in-house development of the replacement Ophthalmology Payments system is on track, and a number of Health Boards went live with this before Christmas. The remaining Health Boards will go-live by 31 March.

2.2 Changes to Risk Profile

One risk has been added since the last meeting of the Audit Committee. This relates to the transfer of approximately 250 laundry staff to NWSSP in April 2021 under TUPE arrangements.

3. RISKS FOR MONITORING

There is one risk that has reached its target score and which is rated as follows:

Current Risk Rating	January 2021
Red Risk	0
Amber Risk	0
Yellow Risk	1
Green Risk	0
Total	1

4. RECOMMENDATION

The Audit Committee is asked to:

- **NOTE** the Corporate Risk Register.

Corporate Risk Register

Ref	Risk Summary	Inherent Risk			Existing Controls & Mitigations	Current Risk			Further Action Required	Progress	Trend since last review	Target & Date
		Likelihood	Impact	Total Score		Likelihood	Impact	Total Score				
Risks for Action												
A1	The Northern Ireland model procured to replace the NHAIS system fails to deliver the anticipated benefits within required timescales impacting the ability to pay GPs (Original risk added April 2017) Escalated Directorate Risk	4	5	20	Legal Counsel advice received. PMO Support Project and Programme Boards in place Heads of Agreement signed	3	5	15	Programme and Project Boards to review progress in lead-up to go-live date for GP payments. Sign off contract extension to March 2021 with NHS Digital.	Work is on-going with Northern Ireland to implement the new system to allow 3 months parallel running with a go-live date in April. Roll-out of the Capita system in England has again been delayed with the existing service being available until at least September 2021. Risk Lead: Director of Primary Care Services	➔	31-mar.-21
A2	Risks to continuity of supplies and services to NHS Wales resulting from a no-deal Brexit (added Apr 2019) Strategic Objective - Customers	5	5	25	Storage facility in place (IP5) that has been adequately stocked to cope with a no-deal Brexit. BREXIT Mobilisation Team BREXIT Group which includes WG representation.	3	5	15	Review of Critical Care Items being undertaken. Review of NSDR arrangements. Clinical Decision making arrangements to be raised with Medical Directors.	The signing of a deal immediately prior to Christmas was good news but for the time being the risk will stay red while the implications of the deal are considered. Risk Lead: Director of Procurement Services	➔	31-jan.-21
A3	NHS Digital are withdrawing the Ophthalmics Payment service from the end of September 2020. (Added June 2019) Escalated Directorate Risk	5	5	25	Contingency arrangements in place in the event of NHS Digital switching off services before new solution in place. Programme Board established.	3	5	15	Developing in-house solution making use of K2 software. This was used to develop the Student Awards Service. The decision to move to a bespoke development and not to engage with CAPITA relates mainly to the fact that WG sources suggest a move away from the	The in-house development of the replacement Ophthalmology Payments system is on track, and a number of Health Boards went live with this before Christmas. The remaining Health Boards will go-live by 31 March. Risk Lead: Director of Primary Care Services	➔	31-mar.-21
A4	NWSSP's lack of capacity to develop our services to deliver further efficiency savings and introduce innovative solutions for NHS Wales and the broader public sector. The restrictions on availability of capital due to COVID may increase the profile of this risk. (Added April 2017) Strategic Objective - Service Development	4	4	16	IMTP Horizon scanning days with SMT and SSPC to develop services Established new Programme Management Office (PMO) IT Strategy Regular reporting to SMT and SSPC	2	4	8	1. Implementation of project management software (AB) 2. Invest in Robotic Process Automation (AB)	1. Procurement pilot project completed - currently being rolled out in NWSSP 2. RPA pilot in progress - update to July SMT and further update to Dec 2019 SMT Risk Lead: Director of Finance & Corporate Services	➔	31-mar.-21
A5	Suppliers, Staff or the general public committing fraud against NWSSP. (added April 2019) Strategic Objective - Value For Money	5	3	15	Counter Fraud Service Internal Audit WAO PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	4	3	12	1. Make better use of NFI (PS 31/12/20) 2. Produce Action Plan from Audit Wales "Raising ourGame" report (PS 31/03/21)	Risk increased due to COVID-19 and significant increase in expenditure. Further Audit Wales report demonstrates that NHS Wales is in a good place for fraud prevention and detection compared to Central and Local Government but there are still further actions to be undertaken. Struggling to get access to NFI - being taken through DoFs. Risk Lead: Director of Finance & Corporate Services	➔	31-mar.-21
A6	Risk of cyber attack exacerbated if NWSSP, or other NHS Wales organisations, run unsupported versions of software. (added Apr 2019) Strategic Objective - Service Development	5	5	25	Cyber Security Action Plan Stratia Consulting Review IGSG Information Governance training Mandatory cyber security e-learn introduced Dec 19 Internal Audit review - Reasonable Assurance (April 2020)	2	5	10	Follow up progress with Cyber Security Plan (PS On-going) Move all desktop devices to Windows 10 by the Windows 7 end of support (PS 31/03/21)	Nick Lewis presented update to October 2019 Audit Committee and August 2020 Informal SMT. E-learn introduced during 2020. Windows 10 migration delayed by COVID but almost complete as at Dec 20 HEIW have recently been the subject of a hacking attack. Risk Lead: Director of Planning, Performance & Informatics	➔	31-mar.-21
A7	The failure to engage with appropriate specialists (e.g. H&S/Fire Safety, Information Security/IG) sufficiently early enough when considering major developments may result in actions being taken that do not consider all relevant potential issues. Strategic Objective - Service Development	4	4	16	In-house H&S and Fire Safety Expertise Role of PMO	3	4	12	PMO to ensure that Project Officers consult appropriately at outset of project.	All organisations contributing towards a Fire & Evacuation Strategy for IP5. Risk Lead: Director of Workforce and OD	➔	31-mar.-21

A8	The transfer of approximately 250 laundry staff to NWSSP under TUPE arrangements many not proceed smoothly impacting the reputation of NWSSP in NHS Wales, and leading to further delays with the implementation of the Laundry Programme Strategic Objective - Service Development	4	4	16	All-Wales Programme Business Case Programme Board	3	4	12	Workforce workstream to oversee the TUPE arrangements.	PBC approved by WG in November 2020.Update provided to SSPC in November 2020.		31-mar.-21
A9	There is an increased fire risk with a consequence for protection of buildings at Alder House, Brecon House and Matrix House due to a lack of compartmentation in the roof space. <i>(added Feb 2020)</i> Strategic Objective - Staff	2	5	10	Fire Safety Officer Risk Assessment - assessed risk to life as low - Update Paper to Feb, May and November SMTs.	2	5	10	Discrete fire risk assessments to be undertaken for each site and results reported back to February 2021 SLT.	Landlords consider any work on compartmentation to be our responsibility. SES reported to Nov 2020 SLT where it was agreed that the risk to life is very low. Further discrete risk assessments to be undertaken and reported back to Feb 2021 SLT.		28-feb.-21
COVID-19 Risks												
CV1	The total quantum for funding for addressing Covid-19 across Wales remains fluid and uncertain. There is a risk that the organisation's operational cost of addressing the pandemic cannot be contained within available funding resulting in a potential breach of the planned outturn for 2020-21.	5	5	25	Financial modelling and forecasting is co-ordinated on a regular basis; Financial reporting to Welsh Government on local costs incurred as a result of Covid-19 to inform central and local scrutiny, feedback and decision-making; Oversight arrangements in place at SMT level, and through the command structure. Financial Governance Committee considers VFM in all expenditure	2	5	10	Ensure that the costs directly associated with COVID-19 are identified and accurately captured. Provide regular updates to Welsh Government.	WG have agreed funding of projected total expenditure of £8m for full financial year.		31-mar.-21
CV2	By requiring our staff to continue working we expose them to a greater risk of being infected with COVID-19 which may cause them significant health problems.	5	5	25	All staff encouraged to work from home where possible. Risk Assessments undertaken for all staff. Social Distancing measures in place in each office. Any staff displaying any symptoms told not to come into office or go home immediately. Testing for front-line staff Weekly Site Leads' meetings to assess position in each office. Provision of hand sanitisers and soap. Enhanced Cleaning services Notices in all buildings reminding of good hygiene practices. Regular SMT walk-arounds of all sites. COVID-19 Adapt and Future Change Group <i>More flexible building opening times</i>	2	5	10	Continue to monitor effectiveness of current measures through Site Leads and the weekly Site Leads meeting.	Current measures seem to be effective. Large numbers of staff are working from home and social distancing measures are in place for those staff who need to continue to come into work. Daily reporting of absences shows that the numbers of staff reporting COVID-19 like symptoms continues to fall. The regular meetings of the Site Leads provide on the ground information in real time and the Site Leads Meeting includes direct representation from the COVID-19 Planning and Response Group so that matters can be escalated appropriately. Risk assessment exercises completed. 2nd Staff Survey reported in Dec and demonstrates that staff satisfaction with current arrangements is being sustained.		31-mar.-21
CV3	NWSSP are unable to procure sufficient orders of PPE, medical consumables and equipment resulting in clical staff being able to treat patients safely and effectively. This risk may be exacerbated due to the potential need to supply Social Care, Primary Contractors, Carers and even retailers and train passengers. The continuing global difficulties with China also increases this risk.	5	5	25	PPE Winter Plan Finance Governance Committee Streamlined arrangements for Trust Board and WG approvals Increased limits approved for Scheme of Delegation. Regular meetings with UK and Welsh Government. Active involvement in UK Mutual Aid Schemes. Deloitte undertook consultancy work on behalf of WG to assist in this area. <i>Internal Audit Review (Sept 2020)</i>	2	5	10	Review being undertaken by Audit Wales (AB 31 Jan 21) - draft letter of initial findings produced December 20.	The PPE plan has been developed in consultation with key stakeholders, and includes the arrangements to distribute PPE to the wider Family Care Practitioners and Social Care sectors. As services across Wales start to open back up, demand for such equipment is increasing in line with our expectations. The Welsh Local Government Association have been a key partner in helping us to take this agenda forward with Local Authorities		31-mar.-21
CV4	NWSSP are unable to continue to provide business-critical services due to having insufficient numbers of staff available and able to undertake the work.	5	5	25	Identification of all business-critical services Redeployment of staff to business-critical services Increased provision of laptops and VPN Roll-out of Office 365 Use of Bomgar service for PCS Daily monitoring and reporting of absence figures. Weekly IT Update meetings. IT Update also given to weekly COVID-19 Planning & Response Group	2	5	10	Updated BCP document covering response to COVID and possible impact of future waves presented to August SMT, and September SSPC. Further investment in laptops to ensure that PCS staff are able to work remotely. Increase investment in softphones.	The daily report on staff absence shows that absence rates are falling. The investment in hardware and software has allowed large numbers of staff to work remotely with minimal problems thus far.		31-mar.-21

CV5	Staff wellbeing is adversely affected through concerns arising from COVID-19 either directly in terms of their health and that of their families, or financially from loss of income of a family member.	5	5	25	Regular communications to all staff Reminders of how to access Employee Assistance schemes Mental Health First Aiders Formal Peer Group with phone surgery times (includes Trade Union Leads) Staff Surveys Virtual Coffee Mornings with SLT	2	5	10	Implement action plan to respond to findings from staff surveys - monitored and managed through Adapt and Future Change Group.	As previously stated, absence rates are falling linked to COVID-19 symptoms. Communications are being issued on a regular basis and all Directors and Managers are tasked with regularly checking the health and well-being of their staff. 2nd Staff Survey results suggest that arrangements in place still viewed as largely positive.	➔	31-mar.-21
CV6	Current uncertainty over the specific requirements for Field Hospitals is impacting on storage facilities within NWSSP impacting current and future plans for their strategic use.	4	4	16	IP5 Board Additional facilities secured at Picketston	2	4	8	Seek clarification from Welsh Government on future plans for Field Hospitals. Undertake wider consideration of the IP5 SOC alongside the future requirement for equipment needed to deal with emergency situations. Seek additional storage capacity - particularly for Medical Records.	Discussions are on-going with Welsh Government with regards to the Strategic Outline Case for IP5. Welsh Government have also agreed to cover the running costs of the facility for the current financial year as part of the overall COVID and BREXIT contingency arrangements. We are awaiting news on further capital allocations to cover the costs of additional roller-racking for increased stock holding requirements.	➔	31-mar.-21
CV7	The impact of the pandemic on workload and also travel restrictions has meant that staff have largely not taken annual leave in the first few months of the year and may be equally less inclined to do so over the summer. This stores up the potential for large numbers of staff to be looking to take high volumes of annual leave in relatively short timeframes towards the end of the year, impacting on service delivery.	5	4	20	Relaxation of carry-over rules that might lead to a flattening of the curve in terms of large numbers of staff being off at the same time. Updated guidance on annual leave approved by Planning & Response Group on 2 June.	1	4	4	Monitor taking of annual leave through directorate SMTs.	Trade Unions largely supportive of measures which are being introduced on an all-Wales basis.	➔	31-mar.-21
CV8	Lack of clarity regarding the requirements of HCS, and the timescale for delivery, of assisting with distributing vaccines leads to an inability to plan effectively for this service.	4	4	16	CNS & Saline being provided by UK Government leaving only medical consumables as risk. Staff Group & Picking Area ring-fenced. Rapid Staff Induction process for Bank/Agency QA Process to manage Pack Quality Spare Fleet in place and arrangements with hire companies for additional vehicles at short notice Work undertaken with specialists to address known security threats	3	4	12	Need to ensure that HCS staff are treated as Priority 1 for vaccinations so that they are able to undertake this work.	Pfizer Vaccine approved for use on 2/12/2020 and now being rolled out. Potential for HCS to be asked to deliver to Community Pharmacists - meeting being held 11/1 to discuss. Update on SSPC agenda 21/1/21.	➔	31-mar.-21
CV9	GP Trainees, who are employed by NWSSP, are exposed to a level of risk of risk of catching COVID-19 but are outside the direct control and influence of NWSSP.	5	5	25	Risk Assessments by Education Supervisor - leads to decision on what PPE is to be provided. Tripartite Agreement	2	5	10	This was raised at the SLE Project Board Skype call on 27 May. The tripartite 'duties' agreement goes a long way to emphasising the health and safety at work responsibilities of the host. This will be pointed out at the meeting in the context of Covid-19 risks with emphasis on the risk assessment process.	The tripartite agreement was agreed by the Project Board on 7/9/2020 and sets out the general duties of the host organisation for all trainees employed by NWSSP including the general duty to provide a safe working environment. Vaccination of front-line staff will further mitigate this risk.	➔	31-mar.-21
Risks for Monitoring												
M1	Disruption to services and threats to staff due to unauthorised access to NWSSP sites. (Added May 2018) Strategic Objective - Staff	5	4	20	Manned Security at Matrix CCTV Locked Gates installed at Matrix. Security Review Undertaken (reported Dec 18) Increased Security Patrols at Matrix.	1	4	4	Continue to monitor, and reissue comms to all staff to remind them of need to keep buildings and information secure. (PS 31/08/2020 - complete)	Security Review undertaken and reported to SMT in Dec 2018. No major findings and all agreed actions implemented or superceded.	➔	
										Risk Lead; Director Specialist Estates Services/Director of Finance and Corporate Services		

Key to Impact and Likelihood Scores						
		Impact				
		Insignificant	Minor	Moderate	Major	Catastrophic
		1	2	3	4	5
Likelihood						
5	Almost Certain	5	10	15	20	25
4	Likely	4	8	12	16	20
3	Possible	3	6	9	12	15
2	Unlikely	2	4	6	8	10
1	Rare	1	2	3	4	5
	Critical	Urgent action by senior management to reduce risk				
	Significant	Management action within 6 months				
	Moderate	Monitoring of risks with reduction within 12 months				
	Low	No action required.				

Consequence					
Likelihood	Insignificant	Minor	Moderate	Major	Catastrophic
Almost Certain	Yellow 5	Amber 10	Red 15	Red 20	Red 25
Likely	Yellow 4	Amber 8	Amber 12	Red 16	Red 20
Possible	Green 3	Yellow 6	Amber 9	Amber 12	Red 15
Unlikely	Green 2	Yellow 4	Yellow 6	Amber 8	Amber 10
Rare	Green 1	Green 2	Green 3	Yellow 4	Yellow 5
Red: Critical - Urgent action and attention by senior management to reduce risk					
Amber: Significant - Management consideration of risks and reduction within 6 months					
Yellow: Moderate - Monitoring of risks with a view to being reduced within 12 months					
Green: Low - These risks are considered acceptable					

	New Risk
	Escalated Risk
	Downgraded Risk
	No Trend Change

MEETING	Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership
DATE	26 January 2021
PREPARED BY	Carly Wilce, Corporate Services Manager
PRESENTED BY	Carly Wilce, Corporate Services Manager
RESPONSIBLE HEAD OF SERVICE	Andy Butler, Director of Finance and Corporate Services
TITLE OF REPORT	Audit Committee Forward Plan 2021-22

PURPOSE

To provide a summary of items expected to be presented at forthcoming Audit Committee meetings, scheduled for 2021-22.

Month	Standing Items	Audit Reports	Governance	Annual Items
<p>Q4 2020/21 26 January 2021</p> <p><i>Boardroom NWSSP HQ, Unit 4/5 Charnwood Court, Heol Billingsley, Parc Nantgarw, Cardiff, CF15 7QZ</i></p> <p><i>or by Teams (as appropriate)</i></p>	<p>Minutes & Matters Arising</p> <p>External Audit Position Statement</p> <p>Internal Audit Progress Report</p> <p>Counter Fraud Position Statement</p>	<p>External Audit Audit Wales Office Proposed Audit Work</p> <p>Internal Audit As outlined in the Internal Audit Operational Plan</p>	<p>Governance Matters</p> <p>Tracking of Audit Recommendations</p> <p>Corporate Risk Register</p>	<p>Pre-meet between Audit Committee Chair, Independent Members, Internal and External Auditors and Local Counter Fraud</p> <p>NWSSP Welsh Language Annual Report 2019-20 (info only)</p>
<p>Q1 2021/22 20 April 2021</p> <p><i>Boardroom NWSSP HQ, Unit 4/5 Charnwood Court, Heol Billingsley, Parc Nantgarw, Cardiff, CF15 7QZ</i></p> <p><i>or by Teams (as appropriate)</i></p>	<p>Minutes & Matters Arising</p> <p>External Audit Position Statement</p> <p>Internal Audit Progress Report</p> <p>Counter Fraud Position Statement</p>	<p>Internal Audit As outlined in the Internal Audit Operational Plan</p> <p>Head of Internal Audit Opinion</p> <p>Review of Internal Audit Operational Plan</p> <p>Quality Assurance & Improvement Programme</p>	<p>Governance Matters</p> <p>Tracking of Audit Recommendations</p> <p>Corporate Risk Register</p> <p>Review of Risk Management Protocol, Assurance Mapping, Appetite Statement and Board Assurance Framework</p> <p>Review of Standing Orders for the Shared Services Partnership Committee</p> <p>Review of Audit Committee Terms of Reference</p>	<p>Audit Committee Effectiveness Survey</p> <p>Annual Governance Statement, Health and Care Standards Self-Assessment and Action Plan</p> <p>Counter Fraud Self-Review Submission Tool</p> <p>Counter Fraud Work Plan</p> <p>Counter Fraud Annual Report</p> <p>Draft Integrated Medium Term Plan Summary (info only)</p> <p>Head of Internal Audit Opinion and Annual Report</p>

Month	Standing Items	Audit Reports	Governance	Annual Items
<p>Q1 2021/22 29 June 2021</p> <p><i>Boardroom NWSSP HQ, Unit 4/5 Charnwood Court, Heol Billingsley, Parc Nantgarw, Cardiff, CF15 7QZ</i></p> <p><i>or by Teams (as appropriate)</i></p>	<p>Minutes & Matters Arising</p> <p>External Audit Position Statement</p> <p>Internal Audit Progress Report</p> <p>Counter Fraud Position Statement</p>	<p>Internal Audit As outlined in the Internal Audit Operational Plan</p> <p>Head of Internal Audit Opinion</p> <p>Review of Internal Audit Operational Plan</p> <p>Quality Assurance & Improvement Programme</p>	<p>Governance Matters</p> <p>Tracking of Audit Recommendations</p> <p>Corporate Risk Register</p> <p>Assurance Mapping</p>	<p>Audit Committee Effectiveness Survey Results</p> <p>Annual Governance Statement</p> <p>Counter Fraud Policy Review</p> <p>Audit Committee Annual Report</p> <p>Review of Standing Orders for the Shared Services Partnership Committee</p> <p>Review of Audit Committee Terms of Reference</p> <p>Audit Committee Annual Report</p> <p>Integrated Medium Term Plan</p>
<p>Q3 2021/22 12 October 2021</p> <p><i>Boardroom NWSSP HQ, Unit 4/5 Charnwood Court, Heol Billingsley, Parc Nantgarw, Cardiff, CF15 7QZ</i></p> <p><i>or by Teams (as appropriate)</i></p>	<p>Minutes & Matters Arising</p> <p>External Audit Position Statement</p> <p>Internal Audit Progress Report</p> <p>Counter Fraud Position Statement</p>	<p>External Audit Audit Wales Nationally Hosted IT Systems Report</p> <p>Audit Wales Management Letter</p> <p>Internal Audit As outlined in the Internal Audit Operational Plan</p>	<p>Governance Matters to include Annual Review of Stores Write-Off Figures</p> <p>Tracking of Audit Recommendations to include Annual Review of Audit Recommendations Not Yet Implemented</p> <p>Corporate Risk Register</p> <p>COVID-19 Review of Business Continuity Planning</p> <p>COVID-19 Expenditure and Governance Arrangements</p>	<p>Audit Committee Effectiveness Survey Results</p> <p>Audit Committee Annual Report</p> <p>Freedom of Information Annual Report</p> <p>NWSSP Annual Review 2019-20</p>

<p>Q4 2021/22 25 January 2022</p> <p><i>Boardroom NWSSP HQ, Unit 4/5 Charnwood Court, Heol Billingsley, Parc Nantgarw, Cardiff, CF15 7QZ</i></p> <p><i>or by Teams (as appropriate)</i></p>	<p>Minutes & Matters Arising</p> <p>External Audit Position Statement</p> <p>Internal Audit Progress Report</p> <p>Counter Fraud Position Statement</p>	<p>External Audit Audit Wales Office Proposed Audit Work</p> <p>Internal Audit As outlined in the Internal Audit Operational Plan</p>	<p>Governance Matters</p> <p>Tracking of Audit Recommendations to include Annual Review of Audit Recommendations Not Yet Implemented</p> <p>Corporate Risk Register</p> <p>Review of Standing Orders for the Shared Services Partnership Committee</p> <p>Review of Audit Committee Terms of Reference</p>	<p>Pre-meet between Audit Committee Chair, Independent Members, Internal and External Auditors and Local Counter Fraud</p> <p>NWSSP Welsh Language Annual Report 2019-20</p> <p>Draft Integrated Medium Term Plan Summary</p> <p>Health and Care Standards Self-Assessment and Action Plan</p> <p>Review of Raising Concerns (Whistleblowing) Policy</p>
<p>Future Committee Dates 2021-2022</p>	<p>Q1 2022/23 TBC April 2021 <i>Boardroom, NWSSP HQ or by Teams (as appropriate)</i></p>	<p>Q1 2022/23 TBC June 2021 <i>Boardroom, NWSSP HQ or by Teams (as appropriate)</i></p>	<p>Q3 2022/23 TBC October 2021 <i>Boardroom, NWSSP HQ or by Teams (as appropriate)</i></p>	<p>Q4 2022/23 TBC January 2022 <i>Boardroom, NWSSP HQ or by Teams (as appropriate)</i></p>

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Reference: AC/219/caf

Date issued: 2 November 2020

Dear Colleague

Request for support on data analytics

I am writing to ask for your support as we modernise our work, with the aim of securing benefits for Audit Wales and also for the bodies we audit.

In our increasingly digital world, data is becoming a hugely important enabler for us, as it is for every organisation. As such, we have bold ambitions to transform the way we use data.

Our Data Analytics team has begun to make real progress, including:

- Publishing interactive data tools as a new type of product from our audits. These data tools add value to our work by making better use of the data we have collected and by generating more insightful analysis for exploration by the public, politicians, press and public bodies.
- Creating bespoke apps to automate aspects of our work. These apps have considerable potential to streamline our work, creating efficiencies for Audit Wales but also for the bodies we audit, mainly through eliminating the repetitive and time-consuming work associated with data collection and transfer.
- The team has a specific remit to collaborate with other public bodies. We have held numerous 'show and tell' sessions with other bodies, to talk about our new approaches and share our learning so far. We have also shared training materials that we have used to upskill our data analytics team. Please contact the team at data.analytics@audit.wales if you want to know more.

I am delighted with what we have achieved so far but we can do so much more, as set out in the Appendix to this letter.

The next critical step for us is to secure routine data downloads from the principle financial systems of the bodies we audit. This is why I am writing to you. Historically, our data requests have been ad hoc, and dependent on the area of testing being undertaken by the auditor. This can be onerous for your officers, and inefficient for my audit teams. Instead, we are now looking to routinely request data downloads, and here are the specific details of what I am asking for:

- Initially we will request a full download of your general ledger data for 2019-20 financial year for comparative purposes. We will then request downloads of your general ledger data for the 2020-21 financial year at interim and final audit stage. In future years, we may request this data on a quarterly or even monthly basis. We will also move on to requesting data from other key financial systems such as payroll and fixed assets.
- I would be grateful if you could convey your in-principle support to your Directors of Finance and Heads of IT, whom we are likely to speak with directly about accessing your organisation's data.
- We have invested in a Data Analytics Storage Solution based on Amazon Web Services' workspaces, which will underpin all of our future work on data analytics. This safe and secure environment will allow us to store and work with large datasets as well as sensitive data. We will work with you to determine the best way to transfer your data to us, which may be through the use of Objective Connect (an online transfer portal) or possibly via a specialist third party (that can directly link to your financial system).

In the medium term, we hope this new approach will save everyone time and effort by virtually eliminating the current data request process, which is sometimes protracted and repetitive. But more than that, these routine data downloads are a major steppingstone towards a higher-quality audit approach, based on a significantly larger evidence base, and which produces greater assurance and insight for organisations like yours.

I am hugely excited about the future for data analytics at Audit Wales so I would be more than happy to talk to you directly about this should you want to. Thank you in advance for your support and please don't hesitate to get in touch if you have any questions or concerns.

Yours sincerely

ADRIAN CROMPTON
Auditor General for Wales

Appendix: Details of our future vision for data analytics

Our Long-Term Vision for data analytics sets out a deliberately ambitious plan for the future, including:

- Streams of live data from public bodies allowing us to analyse performance and risks in real time.
- Use of machine learning and artificial intelligence to automatically cleanse data and flag high-risk issues for further consideration by auditors.
- Automatic linking and matching of data to detect fraud and anomalies.
- A move towards predictive analytics, to help us be more forward-looking in our commentary and recommendations.

Achieving this vision will be difficult and will take time but it is essential that we push ourselves.

A key change commitment within my Annual Plan 2020-21 is to improve how we “source, acquire and analyse data”. We are determined that this will lead to further improvements in the quality and efficiency of our work, and allow us to provide earlier, more insightful analysis to organisations like yours.

One of our most important projects is called Analytics Assisted Audit. This seeks to place data at the centre of our accounts work. There are four stages which underpin this project:

- **Data ingestion.** This is the most difficult stage. We need to be able to efficiently and securely transfer/ingest data from public bodies. However, public bodies have different systems. For example, Welsh public bodies use over 15 different financial ledger systems, excluding those used in support for HR, payroll, assets, schools, primary care, social care, etc.
- **Processing.** Once we have the data, we need to process it into a format that it can be easily read by our applications whilst ensuring its integrity. This will enable us to reproduce the trial balance from the source data, reconcile it to the accounts and automate analytical review. Auditors will have access to data at their fingertips, enabling them to drill down to transaction level data.
- **Testing.** We have developed applications to carry out key audit tests, freeing up our auditors to evaluate the outcomes and evidence their judgement. Examples include risk assessing transactions, selecting audit samples, linking to external data sources to independently verify transactions and balances (e.g. Land Registry, Companies House).
- **Visualisation.** Visualising the results of the data analysis will pave the way for more effective, interactive reporting of our audit work which we can share with our audited bodies.

The data downloads we will request from your financial systems will primarily be used within our Analytics Assisted Audit approach. We hope this approach will lead to more efficient audits, that have a more comprehensive evidence base, allowing us to create new insights and additional value to the bodies we audit.

Doing it Differently, Doing it Right?

Governance in the NHS During the COVID-19 Crisis
– Key Themes, Lessons, and Opportunities

January 2021



This report has been prepared for presentation to the Senedd under section 145A of the Government of Wales Act 1998 and section 61(3) (b) of the Public Audit Wales Act 2004.

Audit Wales is the non-statutory collective name for the Auditor General for Wales and the Wales Audit Office, which are separate legal entities with their own legal functions. Audit Wales is not a legal entity. Consequently, in this Report, we make specific reference to the Auditor General or Wales Audit Office in sections where legal precision is needed.

If you require this publication in an alternative format and/or language, or have any questions about its content, please contact us using the details below. We welcome correspondence in Welsh and English and we will respond in the language you have used. Corresponding in Welsh will not lead to a delay.

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Mae'r ddogfen hon hefyd ar gael yn Gymraeg

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Summary

- 1 In times of crisis, the challenge for all public bodies is to adapt their governance systems, processes, and structures to ensure good governance is maintained. Indeed, it could be argued that maintaining good governance is more necessary than ever during a time of crisis to:
 - sustain public confidence and trust;
 - support agile and effective decision making;
 - provide continued assurance to all relevant stakeholders; and
 - facilitate post-crisis learning and recovery.

Governing during a crisis, therefore, is about doing it differently, but still doing it right.

- 2 As the COVID-19 crisis unfolded, it became increasingly clear there was no blueprint for governing during such unprecedented times. As a result, all NHS bodies in Wales were required to adapt their governance systems, structures, and processes and embrace new ways of working at an extraordinary pace.
- 3 Our structured assessment work this year provided a unique opportunity for us to see exactly how each NHS body adapted their governance systems, processes, and structures during the crisis to enable them to respond effectively to the numerous challenges and pressures posed by the pandemic.
- 4 We found that all NHS bodies operated effectively with a sense of urgency and a common purpose to adopt lean and agile ways of working and achieve rapid transformation whilst also maintaining a clear focus on core areas of business and governance.
- 5 This report provides an all-Wales summary of our structured assessment work with the aim of highlighting key themes, identifying future opportunities, and sharing learning in relation to the following areas of governance:
 - putting citizens first;
 - decision making and accountability; and
 - gaining assurance.



In times of crisis, the challenge for all public bodies is to adapt their governance systems, processes, and structures to ensure good governance is maintained. Indeed, it could be argued that maintaining good governance is more necessary than ever during a time of crisis.

I have been assured that NHS bodies have largely maintained good governance throughout the crisis, with revised arrangements enabling them to govern in a lean, agile, and rigorous manner.

The challenge now for each individual body is to fully evaluate their new ways of working, consider the opportunities outlined in this report, and maintain the sense of urgency and common purpose created during the crisis to establish and embed new approaches to governance in a post-pandemic world. ”

Adrian Crompton
Auditor General for Wales

1. Introduction

- 1.1 NHS bodies in Wales have faced unprecedented challenges and considerable pressures during the COVID-19 pandemic. Throughout this crisis, NHS bodies have had to balance several different, yet important, needs - the need to ensure sufficient capacity to care for people affected by the virus; the need to maintain essential services safely; the need to safeguard the health and wellbeing of their staff; and, the need to maintain good governance. In order to respond to these needs effectively, NHS bodies have been required to plan differently, operate differently, manage their resources differently, and govern differently.
- 1.2 Our structured assessment work¹ this year was designed and undertaken in the context of the ongoing pandemic. As a result, we were given a unique opportunity to see how NHS bodies have been adapting and responding to the numerous challenges and pressures posed by the COVID-19 crisis.
- 1.3 This report is the first of two publications which summarise the findings of our structured assessment work on an all-Wales basis with the aim of highlighting key themes, identifying future opportunities, and sharing learning both within the NHS and across the public sector in Wales more widely. This report focuses on how NHS bodies have governed during the COVID-19 crisis. Our second report will focus on how NHS bodies have supported the health and wellbeing of their staff during the pandemic, with a particular emphasis on the arrangements they have put in place to safeguard staff at higher risk from COVID-19.
- 1.4 In this report, we discuss the importance of maintaining good governance during a crisis and describe how NHS bodies in Wales operated differently during the pandemic in relation to the following areas of governance:
 - putting citizens first;
 - decision making and accountability; and
 - gaining assurance.

This reports also considers the key lessons that can be drawn from the experiences of NHS bodies of governing during the COVID-19 crisis and concludes by highlighting potential opportunities for the future.

1 A structured assessment is undertaken in each NHS body to help discharge the Auditor General's statutory requirement, under section 61 of the Public Audit (Wales) Act 2014, to be satisfied they have made proper arrangements to secure economy, efficiency and effectiveness in their use of resources. Individual reports are produced for each NHS body, which are available on our [website](#).

2. Maintaining good governance during a crisis

- 2.1 The systems, processes, and structures in place to maintain good governance are often placed under pressure when public bodies are reacting and responding to a crisis. This is understandable, as those systems, processes, and structures are largely designed to support and maintain good governance in normal times. In times of crisis, the challenge for public bodies is to adapt their systems, processes, and structures to ensure good governance is maintained and not weakened or overlooked in any way.
- 2.2 Indeed, it could be argued that maintaining good governance is more necessary than ever during a time of crisis for the following reasons:
- **Sustaining public confidence and trust** – public scrutiny is often greater during times of crisis. The public need to be assured that public bodies are responding appropriately in the public interest to the pressures and challenges they face during a crisis, and that any disruptions or changes to service provision or quality are managed, minimised, and communicated as much as possible. A failure to act in the public interest, to communicate effectively, and to maintain openness and transparency during a crisis could significantly weaken public confidence and trust in public bodies.
 - **Ensuring the right decisions are made in the right way at the right time** – due to the uncertain, complex and dynamic nature of a crisis, leaders and managers need to be empowered to react and respond at pace. Agile and rapid decision making, therefore, are critical during a time of crisis. However, decision-making authority during a time of crisis needs to be clearly defined and communicated to ensure the right decisions are made by the right people in the right way at the right time. Furthermore, in the interests of openness, transparency, and accountability, decisions made during a time of crisis need to be documented accurately, accompanied by a clear rationale, and made available for inspection and scrutiny.

- **Providing continued assurance** – maintaining, and adapting where necessary, key internal controls is more necessary than ever during a time of crisis to assure stakeholders that all relevant risks are managed; that resources continue to be used efficiently and economically; and, that service quality and safety is maintained. The challenge, however, for those responsible for providing oversight and scrutiny of public bodies – both internally and externally – is not to overburden or distract leaders and managers whilst they are dealing with a crisis. Instead, the level of oversight and scrutiny should be proportionate and targeted to ensure the relevant stakeholders receive sufficient assurance over key matters during the crisis.
- **Supporting public bodies to build back better** – maintaining good governance during a crisis can support public bodies to transition effectively from the response phase of a crisis to the recovery phase by ensuring non-essential services, processes, and systems are reinstated and reintroduced in the right way at the right time. Good governance during a crisis can also support public bodies to ‘build back better’ by enabling them to capitalise on the opportunities created by a crisis for them to innovate, transform, and achieve greater resilience.

In short, therefore, governing during a crisis is about doing it differently, but still doing it right.

3. How health bodies governed differently during the pandemic

- 3.1 All NHS bodies quickly adapted their governance arrangements at the outset of the pandemic in line with their emergency plans and Welsh Government guidance.² The Welsh Government guidance, which was issued in May 2020, endorsed a series of principles developed by Board Secretaries which were designed to help focus consideration of governance matters during the response phase of the pandemic. The guidance also outlined key areas for the Quality and Safety Committees and Audit Committees of each NHS body to discharge during the period.
- 3.2 In this section, we briefly describe how NHS bodies governed differently during the pandemic, focusing in particular on their arrangements for putting citizens first, decision making and accountability, and gaining assurance.

Putting citizens first

- 3.3 All NHS bodies are expected to conduct their business in an open and transparent manner and actively encourage the engagement of their local populations, partners, and other stakeholders. This is achieved in a number of ways, including actively engaging partner organisations such as Community Health Councils, conducting board meetings in public, and making board and committee papers and minutes available for public inspection. However, NHS bodies have been unable to hold their meetings in public in the normal manner during the pandemic due to the need to observe social distancing guidelines and restrict public gatherings. As a result, they have been required to embrace new ways of working to maintain openness and transparency and to ensure effective engagement with all relevant stakeholders during the crisis.
- 3.4 We found that all NHS bodies moved swiftly to holding virtual board and committee meetings at the start of the pandemic. Although a small number of NHS bodies encountered some challenges rolling-out the necessary technology and software required to support virtual meetings, these were overcome relatively quickly. We found that all NHS bodies adapted well to virtual meetings, with participants observing suitable etiquette and using the relevant software features appropriately to ensure online meetings were conducted effectively.

² [Guidance Note: Discharging Board Committee Responsibilities during COVID19 response phase](#)

- 3.5 In order to maintain openness and transparency during the pandemic, we found that NHS bodies have been using a range of different online video platforms to either live-stream or record all relevant meetings. Several NHS bodies also increased the frequency of their board meetings to provide greater public transparency on their response to the pandemic. In terms of facilitating public involvement in virtual meetings, we found that most NHS bodies have been able to support members of the public either to submit their questions in advance of a meeting or to ask their questions directly during the relevant meeting.
- 3.6 In addition to holding virtual meetings, we found that all NHS bodies continued to publish board and committee papers on their websites in advance of meetings. We also found that minutes of meetings were produced in a timely manner, with some NHS bodies publishing summary versions on their websites within a matter of days to enhance openness and transparency. In addition to publishing information on their websites, we found that all NHS bodies have also been making effective use of their official social media channels to provide information to the public and other stakeholders on a range of matters, including information relating to their revised governance arrangements.
- 3.7 We found that all NHS bodies established mechanisms to maintain regular communication with partners during the pandemic, such as Members of Parliament, Members of the Senedd, Local Authority Leaders and Chief Executives, Police Forces, Fire and Rescue Services, Community Health Councils, third sector organisations, and other health bodies within their regional footprint. In terms of Community Health Councils (CHCs), we saw examples of effective communication and joint working between some health bodies and their respective CHCs, such as:
- inviting CHC Chief Officers to participate in virtual board and committee meetings;
 - sharing details of temporary services changes introduced during the pandemic with CHCs; and
 - involving CHCs in quarterly operational planning arrangements, or consulting with them on draft operational plans prior to their submission to Welsh Government for approval.

Decision making and accountability

- 3.8 All NHS bodies are required to operate within a robust framework for decision making and accountability, which is largely codified in a series of governing documents such as Standing Orders, Schemes of Delegation, and Standing Financial Instructions. Collectively, these documents set out the arrangements within which the boards, committees, and the executive and operational structures of NHS bodies undertake their day-to-day activities, make decisions, and ensure accountability. However, during the COVID-19 crisis, all NHS bodies were required to revise their arrangements and structures in order to respond strategically, tactically, and operationally to the challenges and pressures posed by the pandemic.
- 3.9 We found that the majority of NHS bodies agreed temporary revisions to their Standing Orders to enable and facilitate new ways of working during the crisis; to ensure a focus on essential business and key COVID-19 related risks and matters; and, to minimise the administrative and reporting burden placed on leaders and managers during the pandemic. Whilst each body revised their Standing Orders to meet their own individual business needs and circumstances, we found some common temporary changes, including:
- standing down some board committees;
 - redistributing essential committee business and postponing non-essential business;
 - creating provision for streamlined agendas, including the use of a consent agenda³ in some bodies;
 - enabling focused reporting, including greater use of verbal reporting; and
 - allowing Independent Members to submit questions and comments on papers in advance of board and committee meetings.

Revisions to Standing Orders were also made to enable the changes discussed previously relating to virtual meetings and public participation during the pandemic. We found that boards and committees adapted well to these new ways of working, with Independent Members continuing to provide effective scrutiny and challenge within the streamlined and virtual meeting environment.

3 A consent agenda is a technique for addressing and approving several matters in a single agenda item, such as reports, minutes, and other items that do not require discussion.

- 3.10 We found that all NHS bodies established formal command and control structures to enable rapid and agile decision making and ensure a coordinated response to the pandemic at a strategic, tactical, and operational level within their organisations. The command and control structures in most NHS bodies included Gold (Strategic) Groups, Silver (Tactical) Groups, and Bronze (Operational) Groups, underpinned by planning cells with responsibility for specific aspects of the response, such as securing and distributing personal protective equipment for example. All NHS bodies also had clear deputising arrangements in place to ensure resilience, responsiveness, and continuity as required.
- 3.11 We found that most command and control structures operated within existing frameworks for decision making. However, some NHS bodies needed to introduce temporary revisions to their Schemes of Delegation to ensure the relevant groups, managers and leaders were empowered to operate at pace during the pandemic. We found that most NHS bodies had clear arrangements in place for recording and documenting decisions, with some key decisions being published with the papers of board meetings to ensure openness and transparency.
- 3.12 All boards continued to meet during the pandemic, albeit virtually as noted earlier, thus allowing the corporate decision-making body of each organisation to maintain oversight of the response, hold the command structure to account, and make collective decisions on key matters during the crisis. Recognising the importance of reacting and responding at pace to the dynamic nature of the crisis, we found that each NHS body had suitable processes in place to enable Chair's actions on urgent matters. However, we found that Chair's actions were kept to a minimum and only used as a last resort in the majority of NHS bodies during the pandemic.
- 3.13 Some NHS bodies established temporary decision making and oversight groups involving Independent Members as part of their command and control structures. One body established a Cabinet, consisting of three Independent Members and three Executive Officers, to oversee the organisation's response and enable timely decision making and scrutiny. Another body established a Board Governance Group, which operated as a Chair's Action Group, to provide scrutiny and governance over the decision-making process as well as to provide assurance to the board that this was taking place. The membership of the Board Governance Group was restricted to the Chair, Chief Executive Officer, and two Independent Members.

Gaining assurance

- 3.14 All NHS bodies are required to establish and maintain a robust risk and assurance framework to ensure their boards and committees receive sufficient, timely, and reliable information that enables them to exercise good oversight of the management of risks, the quality and performance of services, and the efficient and effective use of resources. NHS bodies gain assurance from a range of internal and external sources, and report on the effectiveness of their arrangements to the public and other stakeholders via Annual Governance Statements and Annual Quality Statements. However, during the COVID-19 crisis, all NHS bodies were required to revise their arrangements to ensure the flows of assurance to their boards and committees were timely, proportionate, and covered the relevant key issues during the pandemic.
- 3.15 We found that all NHS bodies adapted their risk management arrangements and considered their risk appetite during the pandemic. However, only some bodies decided to increase their risk appetite during the crisis. We found that some NHS bodies established stand-alone risk registers to capture, manage, and mitigate the key risks relating to COVID-19, whereas others adapted existing risk registers to incorporate COVID-19 related risks. We found that all NHS bodies had suitable processes in place to monitor and manage strategic, tactical, and operational COVID-19 risks through their command and control structures. However, we found there were variable approaches to the oversight of significant COVID-19 risks at board and committee level, with some NHS bodies not fully utilising their committees to review and scrutinise all relevant risks during the pandemic.
- 3.16 We found that the Quality and Safety Committee of each NHS body continued to meet during the pandemic, with some increasing the frequency of meetings to provide timely oversight and scrutiny. The majority of committees adjusted their work programmes in line with Welsh Government guidance to enable them to maintain a handle on core quality, safety, and experience issues, as well as to provide an increased focus on the impact of COVID-19 on the quality and safety of services. We saw evidence of good information flows to boards and committees to provide assurance and enable effective oversight and scrutiny on the relevant quality and safety matters during the pandemic. However, we found there was scope to strengthen these arrangements in a very small number of NHS bodies.

3.17 In addition to providing information and assurance to Independent Members via board and committee papers, we found that all NHS bodies used a range of different approaches and mechanisms to keep their Independent Members informed and engaged during the crisis, including:

- sharing daily situational reports which provided status updates across a range of COVID-19 related indicators;
- providing written and face-to-face briefings, either on a daily or weekly basis;
- using board development sessions to highlight and discuss topics relating to the pandemic;
- providing access to the papers of command and control group meetings, mostly Gold Command Groups and Silver Command Groups;
- enabling committee chairs to meet with the relevant executive leads on a regular basis; and
- establishing virtual groups for Independent Members on online and mobile communication platforms to enable them to communicate and share information with each other on an ongoing basis.

We also found that some NHS bodies created opportunities to build knowledge, understanding and resilience across its cadre of Independent Members during the pandemic by, for example, inviting them to observe committees they do not normally sit on.

4. Key lessons and opportunities for the future

- 4.1 As the COVID-19 crisis unfolded, it became increasingly clear there was no blueprint for governing during such unprecedented times. As a result, NHS bodies were required to redefine their governance systems, structures, and processes and embrace new ways of working at an extraordinary pace to meet their own business needs and circumstances. Indeed, the crisis demonstrated that NHS bodies are capable of operating effectively with a sense of urgency and a common purpose to adopt lean and agile ways of working and achieve rapid transformation whilst also maintaining a focus on core areas of business.
- 4.2 As they slowly move towards the full recovery phase and enter a post-pandemic world, NHS bodies should seek to reflect on their experiences of governing during the crisis by evaluating fully their revised arrangements in order to:
- consider what worked well and what did not work so well;
 - identify what they would do differently during another crisis; and
 - establishing which new ways of working introduced during the pandemic should be retained going forward to enhance their governance arrangements for the future.

We suggest this evaluation is undertaken as part of a wider formal programme of learning within each NHS body which enables them to reflect on all aspects of their response to the pandemic in a systematic and meaningful way. Indeed, we believe the sense of urgency and common purpose created by the crisis presents a unique opportunity for each NHS body to continue encouraging, embracing, and embedding innovation, transformation and learning in all aspects of their work going forward in order to enable them to truly become learning organisations.

4.3 In terms of governance specifically, we have identified several potential opportunities for the future:

- **Virtual meetings** – virtual meetings have proven to be an efficient and effective way of working and have also enabled boards and committees to maintain and, in some respects, enhance openness and transparency. Even when restrictions on public gatherings are lifted and social distancing rules are relaxed, we believe there is scope for NHS bodies to consider sustaining virtual meetings in some form particularly given their benefits and the level of investment that occurred during the pandemic to support and facilitate virtual working.
- **Effective and efficient meetings** – all NHS bodies adopted leaner and agile ways of working during the crisis which generated less bureaucracy and enabled more effective and efficient board and committee meetings to take place. For example, using more focused and organised agendas (such as consent agendas), keeping meetings as paper light as possible, and inviting Independent Members to submit questions in advance of meetings. The use of online video platforms also forced NHS bodies to think differently about the way they organised and structured their meetings to ensure they were run as effectively and efficiently as possible in a virtual environment. We believe there is scope for NHS bodies to consider retaining and refining some of these new ways of working to ensure meetings continue to be as effective and efficient as possible in a post-pandemic world.
- **Agile decision making** – one of the key features of governance during the crisis in each NHS body was the introduction of structures and processes that facilitated rapid and agile decision making. For example, clinicians were empowered to make swifter decisions about patient care within revised clinical and ethical parameters, and leaders, managers, and groups were given greater autonomy to make spending decisions. Whilst all of this was necessitated by the need to react and respond at pace to the crisis, we believe there is scope for NHS bodies to consider retaining and refining agile approaches to decision making to enable and facilitate innovation, transformation and learning on an ongoing basis in a post-pandemic world. However, to enable this, each NHS body would need to review and realign their individual risk appetites and be assured they have robust internal controls in place to minimise fraud and ensure high standards of probity.

- **Reshaping strategy** – NHS bodies have been operating within shorter planning cycles during the crisis to enable them to respond appropriately to the various operational challenges and risks posed by the pandemic. As NHS bodies slowly move towards the full recovery phase, there is both a need and an opportunity for them to review and reshape their vision and priorities to ensure they're appropriate for a post-pandemic world. Indeed, the crisis has enabled some NHS bodies to deliver their priorities in certain areas sooner than expected, such as rolling-out digital health and care. Furthermore, the crisis has also highlighted the need to ensure a greater focus in other areas, such as addressing health inequalities. Reshaping their strategies for a post-pandemic work will also enable NHS bodies to reframe their Board Assurance Frameworks and refocus their risk management arrangements.
- **Focused, targeted, and integrated assurance** – adopting more efficient and leaner ways of working has enabled NHS bodies to provide focused, targeted, and in some cases, integrated assurance to their boards and committees. This has been particularly true in the context of quality assurance, with many bodies combining operational, financial, and workforce issues with core quality, safety, and experience issues. In reshaping their vision and priorities, we feel there is scope for NHS bodies to also consider redesigning their governance structures and build upon existing arrangements to provide more integrated assurance to their boards and committees in future. However, in doing so, NHS bodies should ensure sufficient attention is given to each area of assurance embedded within an integrated framework.
- **Enhanced communication** – the crisis has undoubtedly facilitated greater communication between NHS bodies and their partners, as well as enhanced communication with and between Independent Members. The use of online video platforms and official social media channels has also enabled NHS bodies to ensure visibility, provide information, and maintain ongoing engagement with their local populations and communities. We feel there is scope for NHS bodies to maintain, and enhance where possible, new forms and ways of communication introduced during the pandemic to sustain collaboration, partnership working, and public engagement in the post-pandemic world.

4.4 In conclusion, NHS bodies have adapted well to the many challenges and pressures posed by the pandemic. We have been assured that NHS bodies have largely maintained good governance throughout the crisis, with revised arrangements enabling them to govern in a lean, agile, and rigorous manner. The challenge now for each individual body is to fully evaluate their new ways of working, consider the opportunities outlined in this report, and maintain that sense of urgency and common purpose created during the crisis to establish and embed new approaches to governance in a post-pandemic world.



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Welsh Language Annual Performance Report

NHS Wales Shared
Services Partnership

Cymraeg



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

Executive Summary

The Welsh Language Annual Performance Report for 2019/2020 focuses on the work the Welsh Language Unit within NWSSP has undertaken to support it in further delivering its services through the medium of Welsh to our service users across the NHS.

This year is the first year whereby we report on our performance on achieving the Welsh Language Standards (no.7) 2018 which were introduced on the 30th of May 2019.

Welsh Language within the NWSSP include the following principles:

- To promote awareness and knowledge of the use of the Welsh Language in Wales;
- To inform staff of the expectations of individuals and the wider public who receive services from NWSSP through the medium of Welsh;
- To provide staff with the appropriate tools to support and enable them to comply with the Welsh Language Standards; and
- To ensure that all services, operational procedures, policymaking decisions and records are compliant with the law of the Welsh Language (Wales) Measure 2011, and the Welsh Language Standards (No.7) Regulations 2018.

NWSSP continues to work towards positioning the organisation and the staff who work within it to be confident and consistent in the way that the Welsh language is integrated into service planning and delivery, to avoid duplication of effort, to share good practice and to lead towards continuous improvements in the following areas:

- Providing services to individuals, persons and the public at large through the medium of Welsh, which is equal to the English language;

- Continue to ensure compliance with the Welsh Language Standards;
- Continued employee awareness, training and development; and
- Continue to look at the best ways of delivering Welsh language services to meet the needs of NWSSP as well as other NHS organisations in Wales.

The Welsh Language Services Manager has continued to work in collaboration with Welsh Government, the Welsh Language Commissioner's Office and other NHS Wales organisations to promote the 'Once for Wales' vision, in order to share best practice and resources to make the Welsh Language Standards more achievable to all organisations within NHS Wales.

NWSSP has invested significantly in assistive technologies and resources to meet the demand for translation services, which has enabled increases in capacity. Staff have been informed and engaged through a series of meetings, briefing sessions and training which has enabled them to plan, develop and deliver our services in both the Welsh and English languages.

Enquiries from staff across the whole organisation have increased and the Welsh Language Unit has been able to respond positively to the additional workload.

We have undertaken large scale projects to meet the requirements of the standards, specifically the Service Delivery and Operational Standards, resulting in correspondence being readily available in Welsh, as well as undertaking a project to translate a large number of job descriptions during the year.

Overall we've had a successful year in promoting the Welsh language and developing our services further. Here is a summary of the progress made this year:

Enquiries relating to the Welsh Language:



Translation Enquiries:

2019 – 2020 Enquiries:	2018 – 2019 Enquiries:	Increase
2,217	563	> 294%



Welsh Language Courses:

2019 – 2020 Enquiries:	2018 – 2019 Enquiries:	Increase
136	121	> 12%



Welsh Language Training:

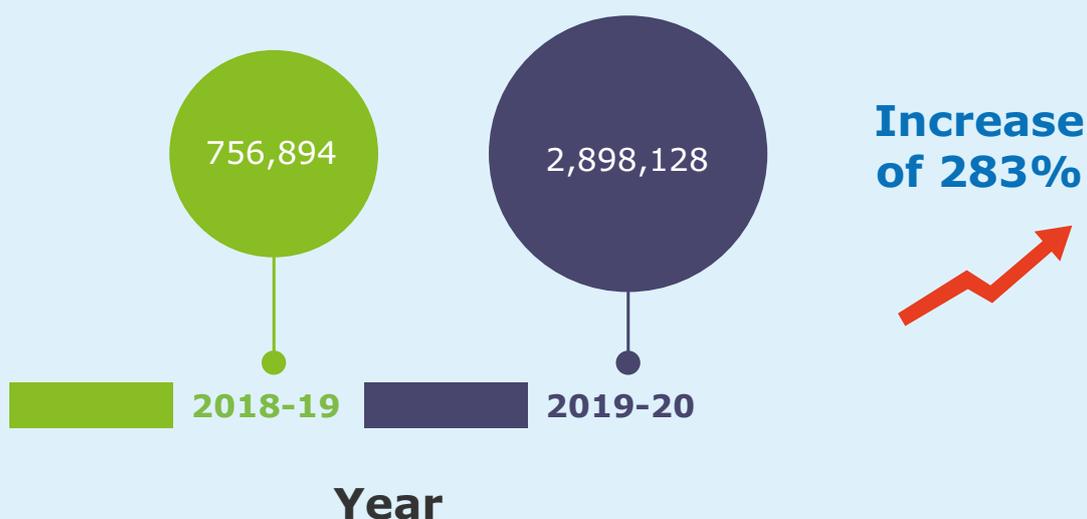
2019 – 2020 Enquiries:	2018 – 2019 Enquiries:	Increase
212	87	> 143%



Legislative Enquiries:

2019 – 2020 Enquiries:	2018 – 2019 Enquiries:	Increase
412	352	> 17%

Number of words translated



Training:



Staff trained through Welsh Language Awareness Training:

2019 – 2020 Figures: **598**
2018 – 2019 Figures: **523**

Increase of **13%**



Managers trained through Welsh Language Awareness Training:

2019 – 2020 Figures: **127**
2018 – 2019 Figures: **97**

Increase of **31%**



Compliance of noting Welsh language skills:

2019 – 2020 Figures: **97%**
2018 – 2019 Figures: **97%**

Remains the same **97%**

Non Richards

Welsh Language Services Manager

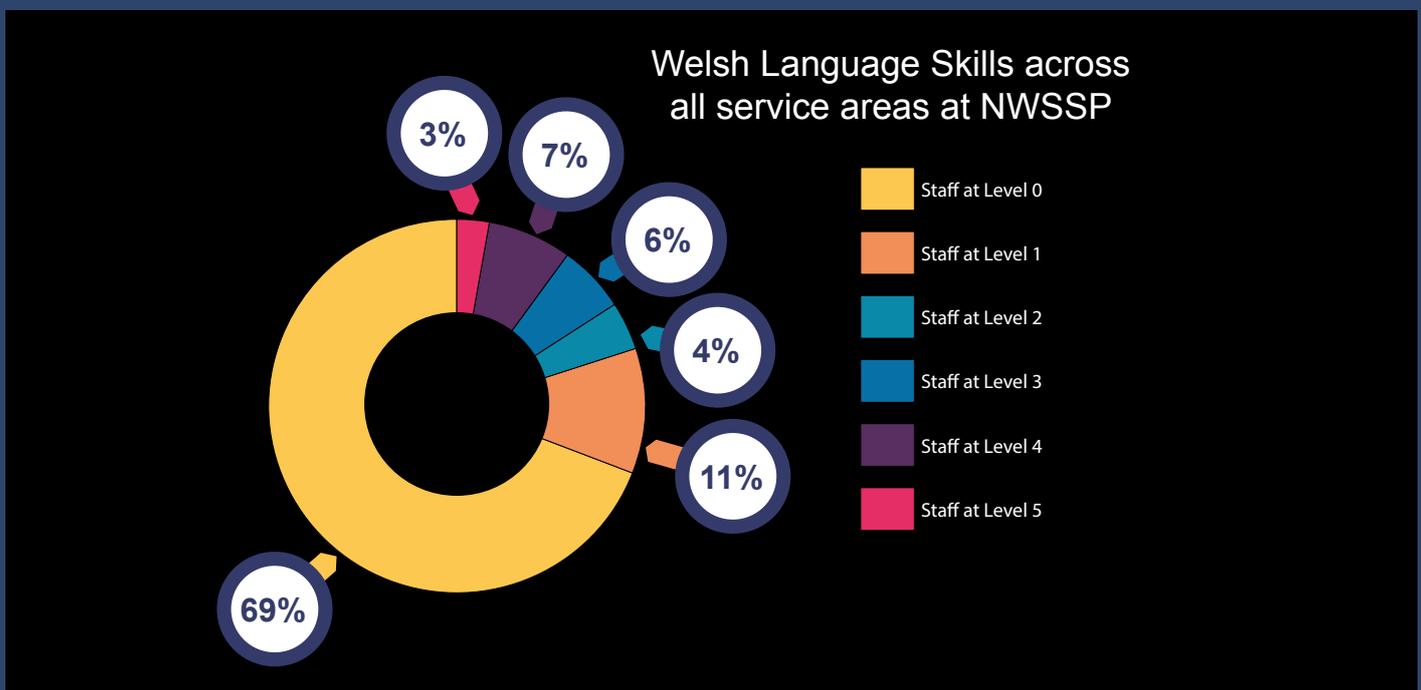
Welsh Language Annual Performance Report 2019-2020

This year has seen significant progress in strengthening NWSSP's capacity to offer services in Welsh. The Welsh Language Standards have assisted in focusing on priority areas and identifying key areas for further developments.



Staff Welsh Language Skills

The overall skill base of Welsh Language Skills across the organisation is as follows:



The figures have generally remained static this year in comparison with 2018/19 and previous years. The NWSSP recognises that we need to increase our capacity to deliver our services in Welsh. During 2020/21 we will be reviewing our current Bilingual Skills Strategy, which will give recruiting managers a guide to audit existing Welsh language skills within their services areas/teams and undertake a skills gap analysis.

Once the gap analysis has been completed, service areas/teams will be required to produce a local action plan on how they intend to increase capacity to deliver their services in Welsh, to ensure that there are adequate numbers of staff with the necessary skills to offer real language choice, as part of our 5 year Welsh Language Action Plan.

A full detail of Welsh skills per service area is available in **Appendix 1**.

Welsh Language Awareness Training for Staff

Welsh Language Awareness Training for Staff throughout the organisation has continued to be a core element of the support services that the Welsh Language Unit provides.



Staff trained through Corporate Induction:

2019 – 2020 Figures: **186 Attendees**
2018 – 2019 Figures: **160 Attendees**
Increase of **16.25%**



Staff trained through Welsh Language Awareness Training:

2019 – 2020 Figures: **598 Attendees**
2018 – 2019 Figures: **523 Attendees**
Increase of **13%**



Managers trained through Welsh Language Awareness Training:

2019 – 2020 Figures: **127 Attendees**
2018 – 2019 Figures: **97 Attendees**
Increase of **31%**



Compliance of noting Welsh language skills:

2019 – 2020 Figures: **97%**
2018 – 2019 Figures: **97%**
Remains the same **97%**



Welsh Language Lessons for Staff at work during 2019/20

Welsh Language Lessons for staff are promoted and are available to staff across all of our business areas. During 2019/20, 60 members of staff attended Welsh classes in the workplace, which is a reduction in numbers when compared to the prior year. This was due to a number of staff who were learning Welsh obtaining appointments elsewhere in NHS Wales and external pressures on the organisation (e.g. Brexit and more latterly COVID) resulting in staff finding it difficult to commit to lessons. In 2020/21 we will be addressing this issue through having conversations with managers about the commitment that is expected of staff to attend courses made available to them, and offering a more flexible approach to learning Welsh at work through online classes for our staff. We will also regularly promote the shorter courses that are available on the Learn Welsh portal as well as plan Welsh language promotional events in our office locations across Wales. We will also explore other opportunities to learn Welsh through exchanging best practice models with other organisations.

We offer Welsh lessons to staff throughout the year. Courses run for 30 weeks, and each lesson lasts 2 hours. Staff are supported to learn Welsh at the appropriate skill level as detailed here, and are encouraged to practice and use their new Welsh skills within the workplace with colleagues and peers.

The numbers on this page show how many staff attended Welsh lessons at our offices during 2019/20.



Pontypool

Entry Level 1: **4**



Alder House

Entry Level 1: **6**

Entry Level 2: **4**

Foundation Level 1: **3**



Nantgarw

Entry Level 1: **2**

Foundation Level 1: **2**



Companies House

Entry Level 1: **6**

Entry Level 2: **8**

Foundation Level 1: **3**

Intermediate Level 1: **6**

Taster sessions x 3: **16**

Jobs Advertised as Welsh Essential/Welsh Desirable/Welsh Needs to be Learnt

Number of vacancies advertised



Welsh Essential:

2019 – 2020

Figures: **7**

2018 – 2019

Figures: **6**



Welsh Desirable:

2019 – 2020

Figures: **443**

2018 – 2019

Figures: **441**



Welsh needs to be learnt:

2019 – 2020

Figures: **0**

2018 – 2019

Figures: **0**



Total number of vacancies advertised:

2019 – 2020

Figures: **450**

2018 – 2019

Figures: **447**

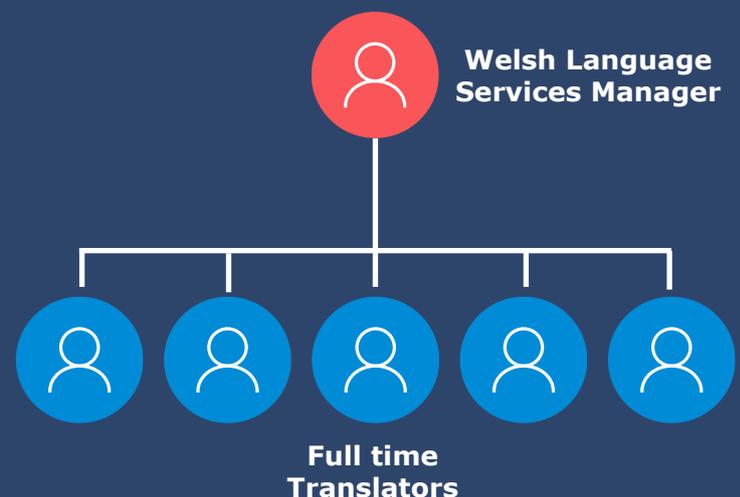
NWSSP currently advertises vacancies as Welsh desirable as a bare minimum and assesses vacancies that need to be Welsh Essential. However, NWSSP recognises the need to further assess vacancies for Welsh skills prior to advertising and recruiting vacancies and further work will be undertaken during 2020/2021 through developing a new Bilingual Skills Strategy.

During 2019/20 NWSSP has invested significantly in the translation of all job descriptions that exist within the NWSSP employment structure. This will enable the organisation to be fully compliant with Standards 106A and 107A with regards to the advertising of vacancies and job descriptions in both Welsh and English.

We recognise a need to undertake more in-depth analysis and assessments of vacancies requiring Welsh language skills so that we are confident in the delivery of our services in both Welsh and English. Further work will be undertaken in this area by Workforce and Organisational Development supported with advice and guidance from the Welsh Language Services Manager during 2020/21.

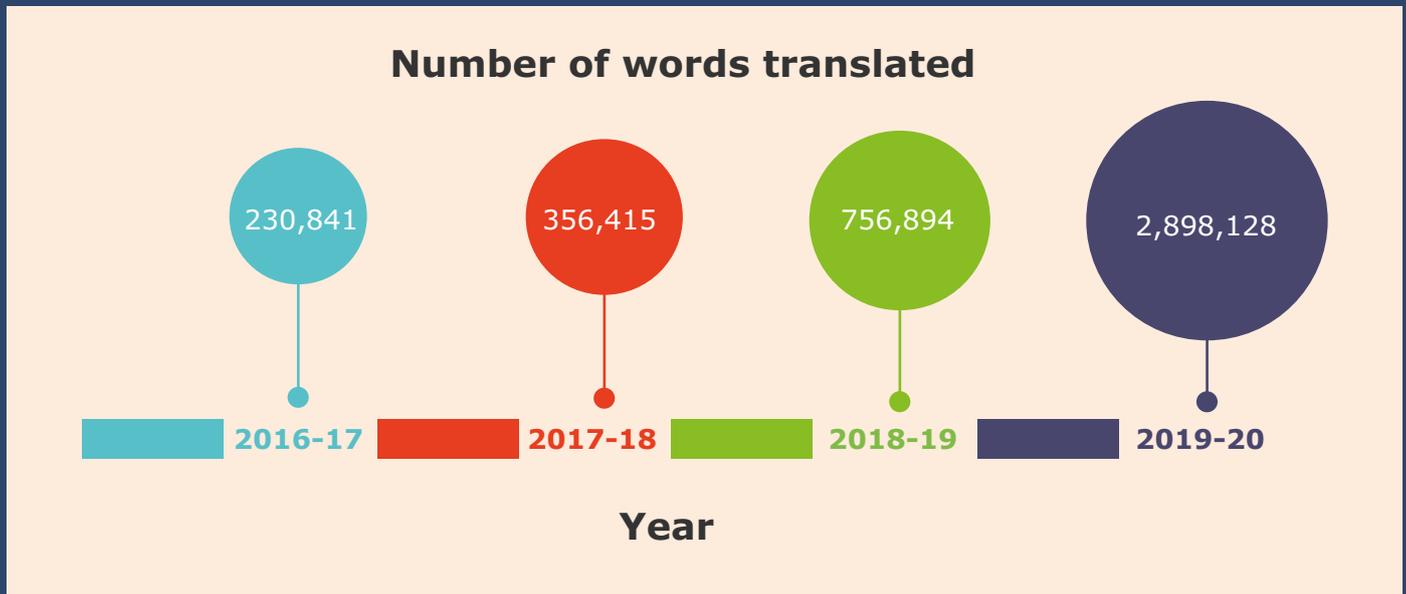
Investment in technology and resources to enable the NWSSP to comply with the Welsh Language Standards.

NWSSP continues to invest in technology to enable the Welsh Language Unit to respond to demand in an efficient and effective manner. In addition to the purchase of Memsorce, a translation memory software, we have also recruited four additional full time translators to support the organisation with Welsh language translations. The Welsh Language Unit in 2019/20 comprised of:



Translation Services:

The increase in capacity within the Welsh Language Unit has meant that NWSSP has been able to meet the demand for Welsh language translation services effectively and efficiently.



The need to provide more websites, social media posts, correspondence, information leaflets and forms means that the demand for translation services over the last four years has substantially increased, and in 2019/20 the need to be compliant with the Welsh language standards has also influenced the increase in demand for translation services.



Promoting and facilitating the Standards

Our promotion of the Welsh Language Standards has proven to be successful during 2019/2020 and as a consequence we have seen an increase in the demand for support services and advice across the whole organisation.



Translation Enquiries:

2019 – 2020 Enquiries:
2,217

2018 – 2019 Enquiries:
563



Welsh Language Courses:

2019 – 2020 Enquiries:
136

2018 – 2019 Enquiries:
121



Welsh Language Training:

2019 – 2020 Enquiries:
212

2018 – 2019 Enquiries:
87



Legislative Enquiries:

2019 – 2020 Enquiries:
412

2018 – 2019 Enquiries:
352

A Welsh Language intranet support page has been created to give guidance and support to NWSSP staff across all sites on how to deliver services in Welsh and English. The intranet page gives advice, support, and guidance consisting of standard operating procedures, FAQ's about the standards and how to implement them successfully, as well as practical solutions such as out of office messages, and key phrases for answering the phone and corresponding.

We have introduced a Welsh Language Impact Assessment form into the planning and development process of new projects and services being developed by NWSSP. The form is also utilised in reviewing existing services, when service reviews take place, in order to identify areas for improvement.



This tool is used by the Project Management Office, Service Improvement Team and Corporate Governance. The Welsh Language Manager has involvement in an advisory capacity.

We offer staff Welsh language awareness training on the Corporate Induction programme which is provided to all new members of staff joining the organisation. The training outlines everything new members of staff need to be aware of during their first few months within the organisation.

A dedicated training programme for staff and managers has also been developed and delivered successfully during the year, outlining the expectation of service users and our requirements to comply with the Welsh Language Standards.

Badges and Iaith Gwaith lanyards are provided to Welsh speaking staff of different abilities, and lanyards are also given to staff learning Welsh, which provides opportunities to practice their skills with other Welsh speakers.

Welsh classes continue to be offered to staff, and an emphasis on using the online resources on Dysgu Cymraeg has been promoted to staff, so that they can familiarise themselves with basic Welsh greetings and terms.

Reception staff have been supported by the Welsh Language Services Manager through providing key phrases to use when welcoming visitors. A standard operating procedure to ensure that a Welsh speaker who wishes to speak to someone in our reception areas is able to receive a Welsh Language service is available at our key sites in Alder House, Charnwood Court and Matrix House.

Progress with the Service Delivery Standards



Correspondence

All templates of corporate letter heads now have a line to clearly state to all recipients of our correspondence that we welcome correspondence in Welsh.

All emails have a line to clearly state that we welcome correspondence in Welsh and ask individuals, persons and the public to state if they wish to be corresponded with in Welsh.

Generic emails and letters created from our systems have been translated, in order to ensure that if we are unaware of the language choice that the letters/emails can go out bilingually.



Telephone

Staff have been advised and given guidance on answering the telephone bilingually, on main telephone numbers, helpline, call centre numbers and direct line numbers.

Wherever possible the call will be dealt with in Welsh until such point as it is necessary to transfer the call to a member of staff who does not speak Welsh who can provide a service on a specific subject matter and likewise when no Welsh speaking member of staff is available to provide a service on that specific subject matter.

We promote our services as being available in Welsh.



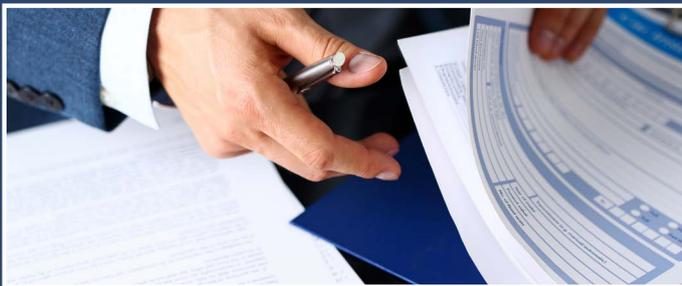
Meetings

When meetings are organised by NWSSP, staff have been advised to check language preference. A booking form and standard operating procedure is available on the intranet to book an interpreter if a person wishes to participate in a meeting in Welsh. Persons wishing to participate in Welsh are notified that an interpreter will be present.



Public meetings

The Partnership Committee is the only public meeting hosted by NWSSP. Details of committee meetings are available on our website. To date we have not received a request from a member of the public to attend in either Welsh or English.



Forms and Documents for individuals

NWSSP has undertaken a project to identify, audit and review forms and documents made available to individuals as identified in the standards, and these have been translated. As new forms and documents become available they are translated prior to publication.



Websites

All NWSSP websites are fully bilingual and as new pages are created, or amendments are made to existing pages, they are translated prior to publication. This activity is monitored by the Communications Strategy Group and the Web Authoring Group.



Apps

No apps were published for individuals or the public by the NWSSP during 2019/20.



Social Media

Any anchor social media posts made from our corporate accounts are published in Welsh and English. If we receive posts in Welsh we reply in Welsh if a reply is required.



Signage (Permanent and Temporary)

The responsibility for signage in all departments at all sites falls to the divisional leads and the Business Support Managers to undertake regular audits and to arrange that signage, whether permanent or temporary, to be translated and made available in both Welsh and English at the same time.



Reception Services

Reception staff across NWSSP have mixed skill levels in the Welsh language. A standard operating procedure has been made available to all staff working on our reception areas together with a helpful guide to enable them to greet visitors to our sites in both Welsh and English. Those members of staff who are not entirely fluent in the Welsh language have been given guidance to call a Welsh speaker to the reception area if a visitor wishes to speak to someone at reception in Welsh. Signing in forms and signage made available in our receptions are in both Welsh and English. We display a sign to state that visitors are welcome to converse with us in Welsh in our reception areas.



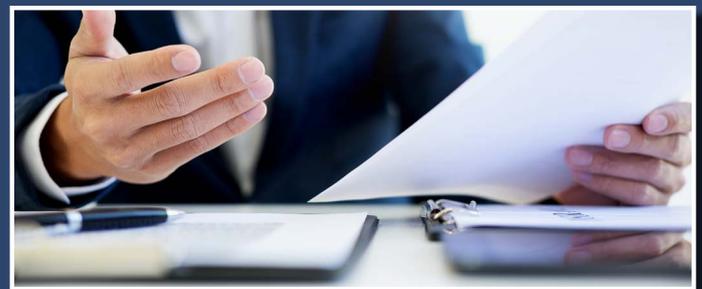
Procurement Services

Whilst the main responsibility of ensuring that services made available to patients lie with the Health Boards and Trusts, the NWSSP Procurement Service also recognises the need to challenge and make commissioning staff aware of Welsh language considerations in the procurement and contracting of services in Welsh.

A comprehensive training programme has been completed during 2019/2020 to make Procurement staff aware of the requirements of Standards 57, 58 and 59 of the Welsh Language Standards, and that Welsh Health Boards and Trusts are also aware of the requirements of the Standards when planning, procuring and contracting services.

During 2019/20 there were no requests received for procurement documents to be made available in Welsh, and no bids were therefore submitted in Welsh.

Progress with the Operational Standards:



Welsh Language Policy

A Welsh Language Policy has been developed on using Welsh internally and externally and is available for staff to view on the intranet page.



Employees within the organisation:

Candidates are able to apply for posts advertised in either Welsh or English. The electronic application form and all supporting documents in the recruitment process have been translated to Welsh and are readily available;

It is made clear to candidates applying for any posts to declare if they wish for their interview to be conducted in Welsh by completing a tick box on the application form;

Upon appointment to a vacancy at NWSSP, recruiting managers are aware that they must ask new staff if they wish to receive a copy of their contract of employment in Welsh or English. Documents relating to employment including all workforce policies are available in Welsh.

If a complaint is made against a member of staff by another member of staff or if a member of staff wishes to have meetings with our workforce department in Welsh, their request will be dealt with in Welsh if that is the wish of the requestor. Any outcome reports, decisions and correspondence with the requestor will be made available in Welsh. Meetings with staff regarding disciplinary matters will be conducted in Welsh if requested.

Our Corporate Induction Toolkit is available to all staff in Welsh as is the training upon request, whereby the training is currently facilitated by an interpreter.

Intranet pages

The relevant pages on our intranet are available in both Welsh and English and a specific page has been created to support staff with Welsh language guidance and advice.



Staff Skills

NWSSP staff are required to complete a Welsh language skills assessment on the Electronic Staff Record so that we can assess the level of skills across the organisation.



Training for staff

If a member of staff requests specific training as listed in the Welsh Language Standards, the training will be provided through the support of an interpreter at the training sessions.



Opportunities to learn Welsh during work hours

Staff are encouraged to learn Welsh at work and we offer Welsh Language classes at work and promote online learning that is available to staff through several platforms including Dysgu Cymraeg, Say Something in Welsh and Duolingo.



Emails, signatures and out of office messages

A comprehensive review was undertaken in 2018/19 and 2019/20 of signatures and out of office messages. These have been translated, staff have been made aware of the requirement through training, internal communication and guidance on the intranet site.



Identifying Welsh speakers and learners in the organisation

All staff who are able to speak Welsh or are learning Welsh and are willing to wear the badge or have requested the badge to indicate that they are Welsh speakers, are given either a lanyard or pin to indicate this.



Advertising posts and publishing job descriptions

NWSSP has undertaken the substantial task of translating job descriptions during 2019/20. We challenged the initial timescale given to be able to comply with the standards and at the time of writing, we are consulting with and appealing to the Commissioner's office on this matter.



Signage (Permanent and Temporary)

All managers and staff have been made aware that permanent and temporary signage should be made available in both Welsh and English. Site managers monitor this and arrange for translation where required.

Progress with the Policy Making Standards

All workforce and organisational development policies for NWSSP have been translated and it is made clear to staff within those policies that they may discuss and/or meet with Workforce and Organisational Development regarding any aspect of their employment with the NWSSP in Welsh or English. An EQIA is available to aid the development or review of policies and the facilitation of Welsh within those policies.

Progress with Reporting Standards

This report is the first annual report reporting on the progress made to comply with the Welsh Language Standards, introduced on the 30th of May 2019.

Supporting and enabling other NHS Wales Organisations through All-Wales Projects.

- Partnership working with the NHS Confederation during 2019/20 has seen all 'All Wales' workforce and OD policies translated. All policies under review consider the Welsh language and new policies are translated for the benefit of NHS Organisations.
- The Job Description Collaborative is an all-Wales NHS partnership whereby NWSSP, NHS Employers and Workforce and OD departments at each Health Board and Trust work together to share job descriptions and their translation. During the last six months of 2019/20 NWSSP received 60 Job Descriptions from NHS Employers to translate and which can now be used across NHS Wales. This work is ongoing for 2020/21 and beyond.

- The GP Wales site is a website for Practice Managers, Partners, Salaried Doctors and GP Registrars and other staff across Wales to advertise and apply for vacancies on either a temporary or permanent basis. This is a collaborative partnership project between NWSSP, Welsh Government and GP Wales. The Welsh Language Unit have played a key part in advising on bilingual matters, the translation of the site, and quality assuring the site's functions prior to launch.

- The Welsh Language Unit was approached by several NHS organisations during 2019/20 to provide translation services. Service Level Agreements have been agreed with Public Health Wales and the NHS Wales Informatics Service and informal translation support has been provided to the NHS Confederation, NHS Collaborative, Health Education Improvement Wales, and Velindre University NHS Trust during the year.

- The Audit and Assurance Directorate of NWSSP conducted audits of Welsh Language Services and compliance with the Welsh Language Standards for the following Health Boards and Trusts in 2019/2020:

- Betsi Cadwaladr University Health Board;
- Hywel Dda University Health Board;
- Aneurin Bevan University Health Board;
- Powys Teaching Health Board; and
- Wales Ambulance Services Trust.

Findings and recommendations are available on the respective Health Board or Trust's website.



Complaints

During 2019/20 we received two complaints.

The first was received in June 2019. The complaint was made directly to NWSSP regarding a patient letter being sent in English only. Sufficient steps were taken to address the complaint and this was resolved locally. The Welsh Language Commissioner was notified of the complaint, but no further action was taken by the Commissioner's Office.

The second was received in March 2020. The complaint was received through the Welsh Language Commissioner's office regarding a patient dental registration form not being available in Welsh. The Welsh Language Services Manager investigated the complaint, and identified that dental forms are NHS Wales forms, which are authored and published by the Welsh Government. NWSSP distributes Welsh, English and bilingual forms to all primary care providers, including dental forms to dental practices. It was explained to the Welsh Language Commissioner's Office that the matter should be addressed directly with the dental practice and Health Board in question. The complaint was resolved by the Welsh Language Services Manager on the 16th of March 2020.

APPENDIX: Welsh Language skills in each directorate

Audit & Assurance Services

Listening/Speaking Welsh

No Skills	28
Entry	6
Foundation	3
Intermediate	5
Higher	1
Proficiency	9
No skill level recorded	1

Total **53**

Reading Welsh

No Skills	26
Entry	9
Foundation	5
Intermediate	2
Higher	1
Proficiency	9
No skill level recorded	1

Total **53**

Writing Welsh

No Skills	28
Entry	8
Foundation	5
Intermediate	2
Higher	2
Proficiency	7
No skill level recorded	1

Total **53**

Corporate Services

Listening/Speaking Welsh

No Skills	148
Entry	29
Foundation	4
Intermediate	3
Higher	1
Proficiency	8
No skill level recorded	5

Total **198**

Reading Welsh

No Skills	147
Entry	29
Foundation	4
Intermediate	3
Higher	2
Proficiency	8
No skill level recorded	5

Total **198**

Writing Welsh

No Skills	157
Entry	21
Foundation	3
Intermediate	3
Higher	2
Proficiency	7
No skill level recorded	5

Total **198**

Counter Fraud Services

Listening/Speaking Welsh

No Skills	5
Entry	na
Foundation	1
Intermediate	na
Higher	na
Proficiency	1
No skill level recorded	na

Total 7

Reading Welsh

No Skills	5
Entry	na
Foundation	1
Intermediate	1
Higher	na
Proficiency	na
No skill level recorded	na

Total 7

Writing Welsh

No Skills	5
Entry	na
Foundation	1
Intermediate	na
Higher	na
Proficiency	1
No skill level recorded	na

Total 7

Digital Workforce Solutions

Listening/Speaking Welsh

No Skills	14
Entry	2
Foundation	na
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	na

Total 17

Reading Welsh

No Skills	14
Entry	1
Foundation	na
Intermediate	na
Higher	1
Proficiency	1
No skill level recorded	na

Total 17

Writing Welsh

No Skills	14
Entry	1
Foundation	na
Intermediate	na
Higher	1
Proficiency	1
No skill level recorded	na

Total 17

APPENDIX: Welsh Language skills in each directorate

E-Business Central Team Services

Listening/Speaking Welsh

No Skills	6
Entry	1
Foundation	na
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	2

Total 10

Reading Welsh

No Skills	6
Entry	na
Foundation	1
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	2

Total 10

Writing Welsh

No Skills	3
Entry	3
Foundation	1
Intermediate	1
Higher	na
Proficiency	na
No skill level recorded	2

Total 10

Employment Services Management Service

Listening/Speaking Welsh

No Skills	252
Entry	50
Foundation	23
Intermediate	12
Higher	10
Proficiency	8
No skill level recorded	10

Total 365

Reading Welsh

No Skills	260
Entry	43
Foundation	19
Intermediate	10
Higher	15
Proficiency	7
No skill level recorded	11

Total 365

Writing Welsh

No Skills	269
Entry	37
Foundation	17
Intermediate	16
Higher	9
Proficiency	6
No skill level recorded	11

Total 365

Finance Services

Listening/Speaking Welsh

No Skills	19
Entry	2
Foundation	na
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	4

Total 26

Reading Welsh

No Skills	19
Entry	2
Foundation	na
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	4

Total 26

Writing Welsh

No Skills	19
Entry	2
Foundation	na
Intermediate	na
Higher	1
Proficiency	na
No skill level recorded	4

Total 26

GP Trainees

Listening/Speaking Welsh

No Skills	122
Entry	31
Foundation	7
Intermediate	2
Higher	2
Proficiency	22
No skill level recorded	318

Total 504

Reading Welsh

No Skills	91
Entry	22
Foundation	6
Intermediate	1
Higher	1
Proficiency	15
No skill level recorded	368

Total 504

Writing Welsh

No Skills	91
Entry	21
Foundation	6
Intermediate	1
Higher	2
Proficiency	14
No skill level recorded	368

Total 504

APPENDIX: Welsh Language skills in each directorate

Legal & Risk Services

Listening/Speaking Welsh

No Skills	74
Entry	20
Foundation	5
Intermediate	1
Higher	3
Proficiency	6
No skill level recorded	5

Total 114

Reading Welsh

No Skills	73
Entry	20
Foundation	5
Intermediate	3
Higher	2
Proficiency	6
No skill level recorded	5

Total 114

Writing Welsh

No Skills	74
Entry	20
Foundation	5
Intermediate	3
Higher	2
Proficiency	5
No skill level recorded	5

Total 114

Primary Care Services

Listening/Speaking Welsh

No Skills	263
Entry	17
Foundation	11
Intermediate	5
Higher	6
Proficiency	9
No skill level recorded	na

Total 311

Reading Welsh

No Skills	264
Entry	16
Foundation	9
Intermediate	6
Higher	8
Proficiency	7
No skill level recorded	1

Total 311

Writing Welsh

No Skills	267
Entry	12
Foundation	10
Intermediate	8
Higher	7
Proficiency	6
No skill level recorded	1

Total 311

Procurement Services

Listening/Speaking Welsh

No Skills	426
Entry	82
Foundation	18
Intermediate	27
Higher	7
Proficiency	31
No skill level recorded	16

Total 607

Reading Welsh

No Skills	444
Entry	69
Foundation	19
Intermediate	21
Higher	8
Proficiency	30
No skill level recorded	16

Total 607

Writing Welsh

No Skills	447
Entry	67
Foundation	19
Intermediate	21
Higher	7
Proficiency	28
No skill level recorded	18

Total 607

Specialist Estates Services

Listening/Speaking Welsh

No Skills	39
Entry	3
Foundation	3
Intermediate	na
Higher	1
Proficiency	1
No skill level recorded	na

Total 47

Reading Welsh

No Skills	39
Entry	3
Foundation	3
Intermediate	1
Higher	na
Proficiency	1
No skill level recorded	na

Total 47

Writing Welsh

No Skills	39
Entry	3
Foundation	3
Intermediate	1
Higher	na
Proficiency	1
No skill level recorded	na

Total 47

APPENDIX: Welsh Language skills in each directorate

Surgical Materials Testing Laboratory

Listening/Speaking Welsh

No Skills	16
Entry	4
Foundation	na
Intermediate	na
Higher	na
Proficiency	1
No skill level recorded	na

Total **21**

Reading Welsh

No Skills	17
Entry	3
Foundation	na
Intermediate	na
Higher	na
Proficiency	1
No skill level recorded	na

Total **21**

Writing Welsh

No Skills	17
Entry	3
Foundation	na
Intermediate	na
Higher	na
Proficiency	1
No skill level recorded	na

Total **21**

Welsh Employers Unit

Listening/Speaking Welsh

No Skills	3
Entry	na
Foundation	1
Intermediate	na
Higher	na
Proficiency	na
No skill level recorded	na

Total **4**

Reading Welsh

No Skills	3
Entry	na
Foundation	1
Intermediate	na
Higher	na
Proficiency	na
No skill level recorded	na

Total **4**

Writing Welsh

No Skills	3
Entry	na
Foundation	1
Intermediate	na
Higher	na
Proficiency	na
No skill level recorded	na

Total **4**

Workforce & OD Services

Listening/Speaking Welsh

No Skills	15
Entry	3
Foundation	1
Intermediate	na
Higher	4
Proficiency	na
No skill level recorded	3

Total	25
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Reading Welsh

No Skills	15
Entry	3
Foundation	1
Intermediate	na
Higher	4
Proficiency	na
No skill level recorded	3

Total	25
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Writing Welsh

No Skills	15
Entry	3
Foundation	1
Intermediate	na
Higher	4
Proficiency	na
No skill level recorded	3

Total	25
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Contact

For any questions on the content of this review, please contact:

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