### **Shared Services Partnership Committee - PART A**

Thu 21 September 2023, 09:00 - 11:00

**Teams** 

### **Agenda**

## 5 min

#### 09:00 - 09:05 1. Agenda

1.1. Welcome and Introductions

Tracy Myhill, Chair

1.2. Apologies for absence

Tracy Myhill, Chair

1.3. Declarations of Interest

Tracy Myhill, Chair

1.4. Draft Minutes of the meeting held on 20 July 2023

Tracy Myhill, Chair

NWSSP SSPC Minutes Part A 230720 FINdocx.pdf (7 pages)

1.5. Action Log

Tracy Myhill, Chair

1.5 Action Log September 2023.pdf (1 pages)

## 0 min

### 09:05 - 09:05 2. Matters Arising

#### 2.1. Duty of Quality Update

Verbal Ruth Alcolado, Medical Director

#### 2.2. Recruitment Modernisation Update

Darren Rees, Interim Director of Employment Services

2.2 Reducing Time to Hire - SSPC Sept 2023 FIN(02).pdf (10 pages)

## 10 min

### 09:05 - 09:15 3. Chair/Managing Director's Reports

#### 3.1. Chair's Report

Tracy Myhill, Chair Verbal

#### 3.2. Managing Director's Update

Neil Frow, Managing Director

### 30 min

#### 09:15 - 09:45 4. Governance, Performance & Assurance

#### 4.1. Finance Report

Andrew Butler, Director of Finance & Corporate Services

4.1 SSPC Finance Report Sept 2023.pdf (8 pages)

#### 4.2. People and OD Report

Sam Graf, Head of People & Business Partnering

4.2 SSPC People & OD Report Aug 2023.pdf (10 pages)

#### 4.3. Performance Report

Alison Ramsey, Director of Planning, Performance & Informatics

- 4.3 Sept 23 SSPC Performance Report Cover (1).pdf (2 pages)
- 4.3 SSPC Performance Report Sept 23 (1).pdf (13 pages)

#### 4.4. PMO Highlight Report

Alison Ramsey, Director of Planning, Performance & Informatics

4.4 PMO Bi Monthly Report Sept 23 Final (3).pdf (29 pages)

#### 4.5. Corporate Risk Register

Peter Stephenson, Head of Finance & Business Development

- 4.5 Corporate Risk Reg Sept 2023 Cover .pdf (4 pages)
- 4.5 20230907 Corporate Risk Register .pdf (5 pages)

### 09:45 - 09:50 5. Items for Information

#### 5.1. WIBSS Annual Report 2023/24

Alison Ramsey, Director of Planning, Performance & Informatics

5.1 WIBBS Annual Report V4 -compressed 1.pdf (25 pages)

#### 5.2. PPE Stock Report

Andrew Butler, Director of Finance & Corporate Services

5.2 NWSSP PPE Stock Report.pdf (1 pages)

#### 5.3. Audit Committee Assurance Report

Andy Butler, Director of Finance & Corporate Services

5.3 SSPC Audit Comm Assur Report 230711.pdf (5 pages)

#### 5.4. Finance Monitoring Returns

Andrew Butler, Director Corporate and Finance Services

- 5.4 Monitoring Return Comm Month 4 NWSSP 2023-24.pdf (9 pages)
- 5.4 Monitoring Return Comm Month 5 NWSSP 2023-24.pdf (8 pages)

## 09:50 - 09:55 6. Any Other Business 5 min

### 09:55 - 09:55 7. Date and Time of Next Meeting

0 min

Thursday, 23 November, 2023 10am (Teams)



## NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

### MINUTES OF MEETING HELD THURSDAY 20th JULY 2023 10:00 - 11.30 Meeting held on TEAMS Part A - Public

ATTENDANCE		DESIGNATION	ORGANISATION
MEMBERS:			
Tracy Myhill (TM)		Chair	NWSSP
Neil Frow	(NF)	Managing Director	NWSSP
Catherine Phillips	(CP)	Director of Finance	C&VUHB
Hywel Daniel	(HD)	Executive Director for People	СТМИНВ
Claire Osmundsen-Little	(COL)	Director of Finance	DHCW
Pete Hopgood	(PH)	Director of Finance	PTHB
Debbie Eyitayo	(DE)	Director of Workforce & OD	SBUHB
Steve Ham	(SH)	Chief Executive	Velindre
Matt Denham-Jones	(MDJ)	Deputy Director of Finance	Welsh Government
OTHER ATTENDEES:			
Peter Brown	(PB)	Assistant Director of Workforce and OD	ABUHB
Joanna Garrigan	(JG)	Finance Director, Commissioning	BCUHB
Rhiannon Becket	(RB)	Deputy Director of Finance	HEIW
Rhian Davies	(RD)	Assistance Director of Finance	HDUHB
Alison Ramsey (AR)		Director, Performance, Planning and Information	NWSSP
Andy Butler	(AB)	Director, Finance & Corporate Services	NWSSP
Gareth Hardacre	(GH)	Director of People and OD	NWSSP
Ruth Alcolado	(RA)	Medical Director	NWSSP
Linsay Payne	(LP)	Deputy Director, Finance & Corporate Services	NWSSP
Peter Stephenson (PS)		Head of Finance & Business Development	NWSSP
Anamaria Carvajal-Illanes	(ACI)	Corporate Support Officer - Minutes	NWSSP
PRESENTERS			
N/a			

Item		Action
1.1	Welcome and Opening Remarks	
	The Chair welcomed members to the July 2023 Shared Services Partnership Committee meeting.	
1.2	Apologies Received From:	
	<ul> <li>Sarah Simmonds – Director of Workforce &amp; OD, ABUHB</li> <li>Russel Caldicot – Interim Director of Finance, BCUHB</li> <li>Glyn Jones – Director of Finance, HEIW</li> <li>Huw Thomas – Director of Finance, Hywel Dda UHB</li> <li>Paul Veysey – Board Secretary, PHW</li> <li>Chris Turley – Director of Finance, WAST</li> </ul>	
1.3	Declarations of Interest	
	There were no declarations of interest.	
1.4	Minutes of Previous Meeting	
	The minutes of the May meeting of the Committee were reviewed and approved.	
1.5	Action Log	
	All actions were either complete or not yet due. The Chair referred to a further action in the minutes relating to the approval of the SLA for Llais. This was taken to the May meeting, but further changes were required so it was agreed that this would need to be brought back to Committee when ready for formal approval. AB stated that the SLA is still not yet complete. This is due to Llais using an external legal firm who are recommending multiple and detailed changes to the wording of the SLA some of which were not acceptable to NWSSP . As agreed, it will be brought back to the Committee for approval when finalised.	PS
2.	Chair and Managing Director Reports	
2.1	Chair Report	
	The Chair updated on her attendance at the following meetings:	
	<ul> <li>The July Audit Committee held in person at IP5 on 11 July;</li> <li>The Welsh Risk Pool Committee held on 19 July;</li> <li>The NHS Wales Chairs' meeting in July; and</li> <li>A session with NWSSP Directors and their deputies held in place of the planned SSPC development day in June. This was a useful day which will help to inform the agenda for the further SSPC Development day planned for November.</li> </ul>	
	The Chair also wanted to congratulate NF on behalf of the Committee for the award of an OBE in the King's Birthday Honours List.	
	The Committee <b>NOTED</b> the Update.	

#### 2.3 Managing Director Update

NF updated the Committee on recent developments:

- The issue with the reinforced autoclaved aeriated concrete (RAAC) in Brecon House is worse than first thought and necessitates the permanent withdrawal from this building. A revised method of operating for staff has been implemented in line with health and safety guidance. Negotiations to acquire another building close by are at an advanced stage;
- The proposed planned move from Companies House to the Welsh Government building in Cathays Park remains on track for the start of the 2024 calendar year:
- The recent Joint Executive Team meeting with Welsh Government was very positive;
- The lack of available capital is severely curtailing plans for major projects such as the Laundry Transformation and TrAMS. It is likely that some smaller amounts of capital will be made available and a programme of work to utilise this level of funding has been developed
- The recently established Service Improvement Team is working well and is currently reviewing procedures relating to payroll, accounts payable and customer service excellence; and
- NF was pleased to participate in celebrating 75 years of the NHS with the thanksgiving service at the Church of Resurrection in Ely.

The Committee **NOTED** the Report.

#### 3. Items for Approval

#### 3.1 Annual Review

AB presented the Annual Review for 2022/23. While there is no mandatory requirement for NWSSP to produce this document, it is good practice to do so. The Annual Review highlights the activities and achievements across NWSSP and AB drew particular attention to the progress made on Health and Wellbeing, Sustainability, and the promotion of the Welsh Language. The document is produced in-house by the Communications Team and demonstrates their abilities and professionalism. Once approved by the Committee, the Annual Review will be published on the intranet and website and will also be shared with key stakeholders. Members of the Committee were very complimentary of both the content and the design of the document.

The Committee **APPROVED** the report.

#### 3.2 Revised Standing Orders

PS presented a number of amendments to the Standing Orders for approval prior to sign-off by the Velindre University NHS Trust Board. The amendments are both externally and internally driven. The external amendments reflect the establishment of Llais, and the introduction of the Duties of Quality and Candour. The internal amendments include the establishment of the Welsh Energy Group, changes to the Scheme of Delegation, and the annual approval of the terms of reference for both the Audit Committee and the Welsh Risk Pool Committee.

TM added that the meeting of the Welsh Risk Pool Committee on the previous day had considered and approved the terms of reference for that Committee, but that there may need to be some further amendments. If so, these would be brought back to the Partnership Committee for approval.

The Committee **APPROVED** the Revised Standing Orders.

#### 3.3 All Wales Establishment Control Programme

GH presented the report designed to initiate a programme of work to scope, assess and recommend options for the implementation and roll out of Establishment Control across all NHS Wales organisations. Some NHS Wales organisations have already adopted this functionality.

GH explained that Establishment Control is a functionality within ESR that enables organisations to accurately report on both funded establishments and vacancy data. It is the formal process for matching data on funded posts in an organisation to the details of the staff employed in those posts. Establishment Control ensures activity connected to recruitment, workforce and budgetary changes can be actioned in a controlled way and supports the accurate reporting of vacancy data.

He also highlighted that the implementation of Establishment Control brings a number of benefits including greater accuracy of information, earlier identification of risks to service provision, and better alignment with overall workforce plans and strategies. However, it is acknowledged that its implementation and on-going maintenance requires significant resource, but advancing technologies are helping to reduce this burden.

Committee members were supportive of the proposal but expressed some concern at the resource implications. GH stated that the purpose of the next phase of work was to identify what this might mean for each organisation, although he reaffirmed that there would be a need for organisations to invest time to work with NWSSP to ensure the successful implementation of Establishment Control.

The Committee **ENDORSED** the establishment of an All-Wales Project Board under the governance and oversight of the All-Wales Digital Workforce Optimisation Steering Group, Directors of Workforce and Directors of Finance to:

- Scope current organisational approaches to Establishment Control and develop an options appraisal for implementation based on best practice both within and external to NHS Wales;
- Explore the use of technological and other innovations in supporting a sustainable delivery model including but not limited to the use of Robotic Process Automation (RPA), outsourcing and centralisation of the transactional process elements;
- Report to Executive Directors of Workforce/Finance in Q3 23/24 with recommendations on a preferred option arising from the options appraisal taking into full account individual organisational priorities, resource commitments and the approval of Executive Directors of Workforce and Finance;
- Explore synergies between ESR's Establishment Control functionality and the
  potential development and deployment of related functionality for the recording
  and monitoring of NHS Wales' contingent workforce and ensure these are fully
  considered within the overall project plan;
- Following approval of the agreed delivery model, develop a standardised process map to incorporate all elements including the potential to streamline dependant and subsidiary processes and SOPs across NHS Wales organisations; and
- Develop a national project plan for the implementation of Establishment Control including agreed timescales for delivery and key milestones within local

	organisations.	
4.0	Items for Noting	
4.1	PPE Update	
	AB reminded Committee members that Audit Wales undertook a review of the procurement and supply of Personal Protective Equipment (PPE) and issued their final report in April 2021. While the review was very positive, they made a number of recommendations that were either directed at Welsh Government or NWSSP, or in some cases required a joint response. The majority of actions were implemented immediately, and progress was reported via the NWSSP Shared Services and Audit Committees. The update identified that good progress had been made in implementing recommendations requiring action from within NWSSP. The Welsh Government specific actions have not been updated, but we continually meet with them to discuss the ongoing approach to the procurement and supply of PPE. At the moment we continue to hold 16 weeks' stock of PPE, but we are awaiting a decision from Welsh Government on whether these stockholdings can be reduced.	
	The Committee <b>NOTED</b> the update.	
4.2	Final Annual Governance Statement	
	PS reminded Committee members that the draft Annual Governance Statement had been brought to the May meeting for comment. The statement has now been updated for the Head of Internal Audit Opinion and the year-end sustainability figures and was formally approved at the Audit Committee on 11 July. It is therefore being brought back to the Shared Services Partnership Committee meeting in its final format for noting.	
	The Committee <b>NOTED</b> the Final Annual Governance Statement.	
4.3	Audit Committee Annual Report	
	AB presented the report which sets out the activities and achievements of the Audit Committee for the 2022/23. The report is generally very positive and was approved at the July Audit Committee meeting.	
	The Committee <b>NOTED</b> the Report.	
5.	Governance, Performance & Assurance	
5.1	Finance Report	
	LP presented the Report giving an update at the end of Quarter 1.	
	A break-even financial position was reported with an underlying underspend in services of £0.448m due to the non-recurrent over achievement of savings in Quarter 1. A break-even financial position is forecast for 2023/24 dependent upon a number of	
	income assumptions and anticipating savings achieved to date will be required to support and fund the transitional and removal costs relating to the transfer of significant volumes of medical records from Brecon House arising due to the RAAC issue. Welsh Risk Pool spend to Month 3 is £6.456m compared to £10.277m at Month 3 last year. The high-level forecast for 2023/24 is £135.727m which is in line with the IMTP forecast. This requires £26.494m to be funded under the Risk Share Agreement.	
	The Committee <b>NOTED</b> the Report.	
5.2	People & OD Report	

	GH presented the report. Both in-month and 12-month sickness absence rates are improving and remain very low. Statutory and Mandatory training rates are good, but PADR compliance needs improvement. There has been a particular focus on retention of staff in recent weeks.			
	The Committee <b>NOTED</b> the Report.			
5.3	Performance Report			
	AR presented the report. The in-month May performance was generally good with 34 KPIs achieving the target against the total of 38 KPIs. The four KPIs that are current rated as amber are for Audit and Assurance and Recruitment, with two amber KPIs in each service. Professional influence benefits amount to £34M at end of May.			
	The Committee <b>NOTED</b> the Report.			
5.4	IMTP Q1 Progress Report			
	AR presented the report. At the end of Quarter 1 83% (129) of our objectives are on track. Reporting on objectives remains on a self-assessment basis by the divisional Heads of Service, scrutinised through the Quarterly Review process. Performance against key objectives and milestones, and an understanding of the risks to delivery, are being closely monitored. As stated in the MD update, the recent JET meeting with Welsh Government was very positive, albeit that our current IMTP is still to be formally acknowledged and accepted.			
	The Committee <b>NOTED</b> the Report.			
5.5	PMO Highlight Report			
	AR presented the report which captures the work of the Service Improvement Team for the first time. Two projects are currently rated as red, these are the Brecon House relocation where issues with the roof make the current building unsafe, and the TrAMS project whereby accommodation in Southeast Wales is urgently required.			
	The Committee <b>NOTED</b> the Report			
5.6	Corporate Risk Register			
	PS informed the Committee that there are currently six red risks on the Corporate Risk Register. Most of these have been discussed at some point on the agenda and cover energy costs, staffing shortages, the Legal & Risk Case Management System, Brecon House, TrAMs, and the reputational issues for NWSSP relating to the situation at BCUHB.			
	The Committee <b>NOTED</b> the Register.			
6	Items for Information			
6.1	Declaration of Interest Annual Report			
6.2	Gifts & Hospitality Annual Report			
6.3	Counter Fraud Annual Report			
6.4	Welsh Language Annual Report			
6.5	Health & Safety Annual Report			
6.6	PPE Stock Report			
6.7 6.8	Finance Monitoring Returns – Months 2 & 3. 2023/24 SSPC Forward Plan			

7.	Any Other Business	
	N/a	
8.	Date and Time of Next Meeting	
	DATE OF NEXT MEETING:	

Thursday, 21st September from 10:00-12:00

Via Teams



Item 1.5

#### **ACTION LOG**

#### **SHARED SERVICES PARTNERSHIP COMMITTEE**

#### **UPDATE FOR 21 SEPTEMBER 2023 MEETING**

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS SEPTEMBER 2023
1.	2023/05/1	May 2023	Duty of Quality Update The Committee NOTED the verbal update and AGREED to the request of a further formal update in September 2023.	RA	September 2023	On Agenda
2.	2023/05/2	May 2023	Llais Service Level Agreement The final version of the Service Level Agreement to be brought back to the Committee for final approval.	PS	September 2023	In progress A meeting is to be arranged later this month with the Llais CEO to finalise the SLA, which will then be brought back to the November Committee.

	Partneriaeth Cydwasanaethau Shared Services Partnership		
Title:	Reducing the Time to Hire – Owning the Journey		
POD:	Gareth Hardacre, Director of People, OD & Employment Services		
Project Lead:	Darren Rees, Deputy Director of Employment Services		
	Kelly Skene, Assistant Director of Employment Services		

Purpose: SSPC to understand the issues and support the resolutions for what organisations can do to reduce the time to hire

#### **Reducing the Time to Hire**

Recruitment undertook a Workforce and Organisational Development (WOD) responsiveness programme in 2021, where feedback was received on how to improve the service. This led to the development of the Recruitment Modernisation Programme whereby a number of changes and improvements have been made to Process, Education and Technology.

Key process changes that have been implemented include;

- reducing the pre-employment checks that are mandatory prior to start date.
- booking a provisional start date with the candidate at time of verbally offering the post
- no references for internal to organisation appointments
- recruitment can approve references if they contain no sickness or disciplinary information.
- implementation of Digital Identity Validation software (Trust ID)
- Supporting roll out of the new Occupational Health (OH) system OPAS G2 to be complete by December 2023.

Activity levels have also significantly increased since pre-pandemic times as the tables below demonstrate.

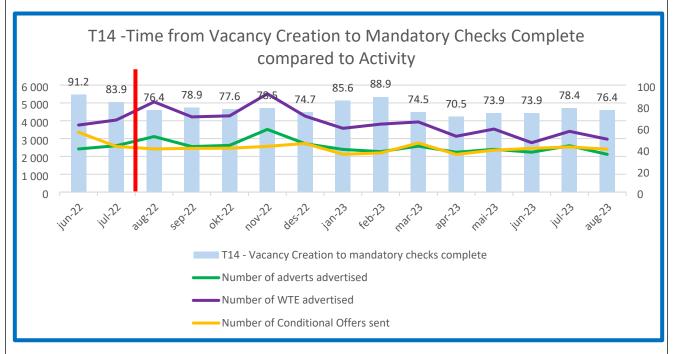
Recruitment Volumes	2019/20	2022/23	Number increase	% increase
Number of Vacancies Raised	19,019	43,880	24,861	56.7
Number of WTE Raised	29,882	75,056	45,174	60.2
Number of Conditional Offers Sent	18,202	30,475	12,273	40.3

Recruitment Volumes	Apr-23	May- 23	Jun-23	Jul-23	Aug-23	2023/24 Forecast based on 5 months activity
Number of Vacancies Raised	4,827	4,752	4,549	4,777	4,358	56,000
Number of WTE Raised	7715.8	6930.6	6526.1	8261.8	6314.4	86,000
Number of posts advertised	2,233	2,397	2,238	2,600	2,116	28,000
Number of WTE advertised	3130.0	3535.3	2769.2	3405.9	2967.4	38,000
Number of Conditional Offers Sent	2,113	2,350	2,451	2,534	2,405	28,500

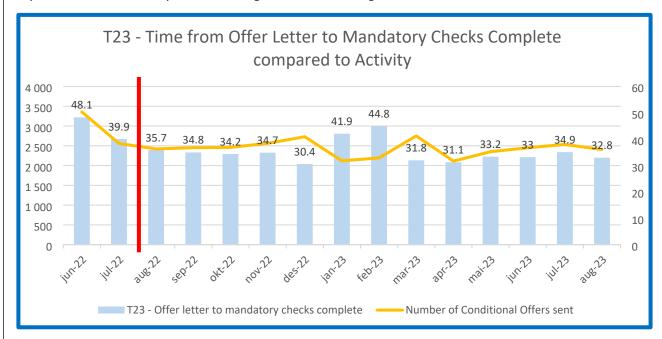
N.B. The forecast is rounded to whole numbers.

The table above showing the forecasted activity for 2023 to 2024, is based on the first 5 months of 2023 (April to August). NWSSP Recruitment Services are aware that organisations have implemented further scrutiny as part of their vacancy approval processes which could impact the activity forecast, but it is difficult to assess the impact of those local interventions at this stage.

Despite the increases in activity, the process changes implemented are showing improvements and reductions in the time to hire, see graphs below.



Implementation of the process changes started in Aug 2022.

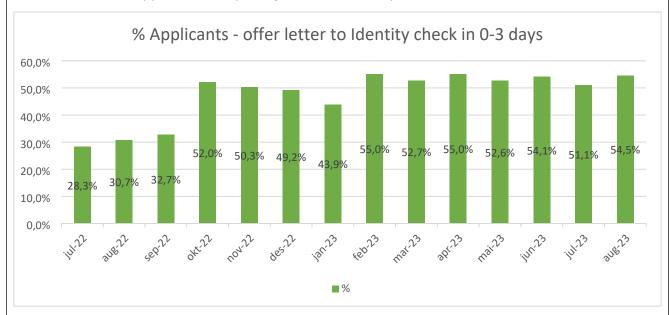


Implementation of the process changes started in Aug 2022.

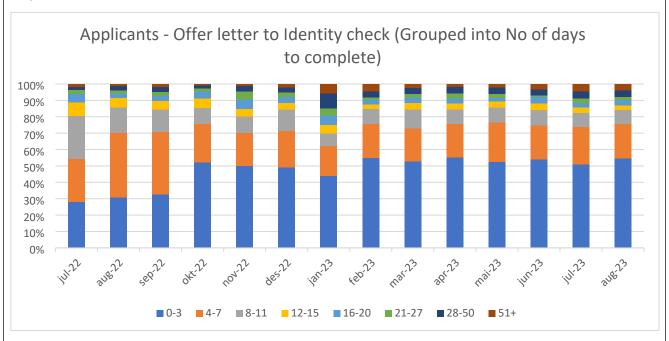
N.B. Peaks in Jan and Feb 2023 for both graphs due to work being undertaken on older records in the Trac Recruitment system.

#### **Digital Identity Checks - Improvements**

The implementation of Trust ID in October 2023 has also seen an impact on the time taken to complete identity checks, with over 50% of applicants now completing their identity check within 3 days of receiving their offer letter, compared to 30% prior to implementation. As applicants can access this system 24 hours a day, 7 days a week at their convenience, a target for this is 75% of applicants completing this within 3 days.



Implementation of Trust ID in October 2022.



Implementation of Trust ID in October 2022.

#### Reducing Time to Hire - Owning the Recruitment Journey

Whilst the changes to process and implementing Trust ID software is showing positive results, there are also other things organisations, and their managers can do to support a reduction in the time to hire.

A key component to the recruitment process is the managers participation as they are the employer. Managers are advised to keep in touch with their appointee and review the Trac recruitment system so any delays can be reduced, weekly update reports are also sent to managers automatically from the Trac system to provide updates.

Managers usually have a small number of appointees at any one time, which means they can stay in contact with the appointee on a personal level as they will become part of their team. NWSSP Recruitment Services administer high volume, transactional processing and ensure appointees are safe to work. They are managing thousands of recruitment activities across NHS Wales at any one time.

Some organisations have larger internal resourcing teams than others, which impacts their ability to support managers with their responsibilities. One organisation's time to hire is lower than others due to some of the best practice activities they undertake such as:

- No vacancy is approved for publishing unless there are closing dates, pre-planned short-listing times and arranged interview dates. This supports time to hire as there are specific and measurable dates and times for tasks and responsibilities to be completed by the managers.
- The in-house resourcing team are also an alternative point of contact for recruiting managers and applicants. They can support NWSSP to answer queries about the approval process and pre-employment checks. They will also take details and information from managers and appointees and update the Recruitment System and inform the recruitment service.
- When taking calls from managers and applicants the in-house team update the Trac recruitment record and if possible complete a file review to chase any outstanding checks still required.
- When resource allows, and times of extremely high activity they will also support with general recruitment workload like offers, face to face pre-employment checks and communications on Trac to support the efficiency of the overall recruitment journey.

The Recruitment Service are working with organisations to continue to hold engagement sessions with managers on the Recruitment Modernisation Programme and to communicate tips to reduce the time to hire. However, not all organisations are engaging with this activity.

#### **Issues and Solutions**

Please see below some of the issues that can cause delays in the time to hire with accompanying resolutions:

#### **Vacancy Approval**

ISSUE	RESOLUTION
Managers who do not recruit	Managers to familiarise themselves with the
frequently can find it difficult to	process and Trac by utilising the tools training
navigate the system and may be	and drop-in sessions, that Recruitment have
unaware of changes to process.	available. All information is available on the
	Recruiting Managers pack available here

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Waiting until someone has left before starting the vacancy approval process and entering the vacancy into Trac	As soon as you are aware that someone is planning on leaving, create the vacancy in Trac to start the recruitment process. The Key Performance Indicator for this is 5 working days.
Health Boards are adding additional scrutiny into their vacancy approval process	Ensure the approval process is all in Trac, not on forms being emailed and reviewed with no audit trail or visibility.
Approval Panels are not daily	This creates a delay in time to approve and bulk receipt of activity in Recruitment
Delays in authorisers approving vacancies in Trac	Act on approving vacancies daily
Lack of consistency of the approval route in some orgs	Limit number of approvers and ensure they are consistent
Approver is on Annual Leave (A/L) causes delays approving vacancies	Change approver on Trac if going on A/L or add a delegate to your Trac account (note – the audit trail in Trac will show as the account holder taking the actions, not the delegate).
Delays shortlisting and interview are often caused because Sick Leave or Interview dates have not been planned	Do not approve vacancies unless there is an interview date in Trac. This can be planned if vacancy approval timelines are adhered to.
Essential requirements for the role are listed in different ways in person specifications which makes it difficult to check the required qualification, for example:  • Qualification is essential. • Qualification or equivalent experience is essential. • Qualification or equivalent qualification is essential	Ensure you are adding 'or equivalent experience' to all person specifications if the successful candidate can be appointed based on experience, where they don't hold the qualification.
NHS Wales have hard to fill vacancies, that still need to go through vacancy approval.	Remove vacancy approval for these posts, such as Band 5 Nurses.
The final approver in the organisation has not checked quality/equality/Welsh Requirements which can lead to delays in advertising	Final approver in all organisations to complete the final quality check so Recruitment can process without checking again.
Can't telephone manager	Manager to update contact details in their Trac account.
Incorrect Disclosure and Barring Service (DBS) level requested for the vacancy	Managers enter correct DBS level or the final approver in the organisation checks the level is correct.
Incorrect Job Description/Person Specification attached to the vacancy	Ensure the most up to date correct JDPS is attached to the vacancy.

### <u>Advertising</u>

ISSUE	RESOLUTION
Managers advertise the vacancy for too long, 14 days in some cases.	Know the number of applicants you are likely to get for a post from historical experience and adjust your closing date accordingly.
HR approval is needed for certain changes to the advert/offer i.e., to	Review the list prepared by NWSSP to remove unnecessary HR approval.

extend closing date once an advert has closed	
Adverts closing and manager finds there too few applicants/quality of the applicants. This leads to rework and delays.	Manager to review the applicants as the closing date approaches. This means they can extend the closing date via a phone call to the Recruitment Helpdesk, and this is a task that be acted upon immediately.

### **Shortlisting**

ISSUE	RESOLUTION
Number of short listers can add to delays	Limit number of short listers in Trac and shortlist together, with one person recording the information in the system.
Short lister is on A/L	If you are on annual leave when the post closes, change the short lister in Trac or add a delegate user to your Trac account, (note – the audit trail in Trac will show as the account holder taking the actions, not the delegate).
Criteria entered into Trac means shortlisting takes too long to score each candidate	Limit this to the criteria that is essential. If a qualification is essential, just review the qualification element of each application form first.
Clinical staff have not got the capacity to spend time shortlisting	Remove shortlisting process for registered posts, use a filter question instead so applicants can't apply unless they have relevant registration. Then move them straight through to interview.
Shortlisting not planned or entered into diaries in advance, cause delays with shortlisting	Put time in your diary with fellow short listers, as close as possible to the closing date.  Applicants expect applications to be reviewed close to the closing date. With a shortage of applicants in the market we need to move quickly to let people know they are through to the interview stage.

### **Interviews**

ISSUE	RESOLUTION
Delays between shortlisting and interviewing	Set the interview date when the vacancy is entered in Trac for approval and book it into calendars
Candidate not knowing what will happen next	Give candidates the information sheet that is part of the interview pack so they can prepare their documents if offered the job.
Candidate bringing ID and Qualifications to interview don't get looked at – frustrating for candidates	Managers must view these at interview to ensure the person attending for interview is the same person who applied and to ensure they are qualified for the job. Stops delays further down the process.
Incorrect referee details on application form	Check with the applicant at interview that there is a referee business email address present in the application form for their employers.

<u>Offer</u>			
ISSUE	RESOLUTION		
Delays offering the post	All candidates must be contacted verbally whether successful or unsuccessful.		
Lack of clarity on next steps when offering the post causes delays and applicants generate queries  Offer the post subject to pre-employment checks. Ensure you agree a provisional state with the appointees to focus their recompleting pre-employment checks as so possible and to ensure they start with you soon as possible. Enter the information in Trac, as soon as possible but no later the working days.			
Managers leaving blank fields or not entering the correct information in Trac for the offer – delays offer letter being sent	Manager to enter correct information into Trac.		
Not enough WTE approved for the number of posts offered – delays offer letter being processed	Manager to ensure correct WTE is appointed to.  Or  Recruitment to process what comes in without		
	checking it		
Offer is made to appointee, then they don't hear from the manager until they start.	On release of the offer letter, manager should call the candidate/email them to confirm receipt and ask them to complete what is required promptly. Keep reviewing the Trac record and contact to see if support is required if delays become apparent. When a candidate is offered a job, this is the most critical stage of the process, and it is imperative the manager stays in contact to show the appointee they are wanted in the organisation. This is also the time the candidate hands their notice in with their current employer, most organisations will try to keep these good staff, so we need to ensure continuous engagement. This also enable us to know if the candidate has changed their mind and allows us to go to other suitable candidates from the same interviews to offer them the job.		

### **Pre-employment checks**

ISSUE	RESOLUTION
Delays with Identity check	Ensure the candidate received the `what happens next' information sheet at interview. View the ID and Qualifications the candidate brings to the interview.
	If they have an in-date UK or Irish Passport this check can be undertaken remotely through Trust ID software.
	If not, they can book to attend a face-to-face pre-employment check meeting at one of our

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	sites across Wales. Appointments are always available daily.
	Candidates can use the intelligent checklist in Trac to select the documents they need to bring/send via Trust ID.
Delays with qualification check	Ensure you are adding 'or equivalent experience' to all person specifications if the successful candidate can be appointed based on experience, where they don't hold the qualification.
Delays with references	Check the email address for the referee is present in the application form and is a business email address where possible.
	Obtain one if not present and this can be added to the notes in Trac.
	Ensure the candidate lets their referee know to expect a reference request.
	Approve the reference as soon as it comes into Trac, managers can see this in real time.
	References are factual across NHS Wales to enable speedier response from referees.
Delays with DBS check	This will depend on the time taken to review the police information. This is all done electronically.
	Ensure the candidate completes the electronic DBS form as soon as they receive it with their offer letter.
	If there is information on the DBS check, follow your internal escalation process promptly to ensure resolution quickly.
Delays with Occupation Health check	The OH form is in Microsoft word, this causes delays in returning to OH, with no tracking available. OH are in the process of rolling out a fully electronic form that is integrated with Trac. This will speed this process up.
	Candidates must complete the form as soon as they receive the link with their offer letter.
Delays with Right to Work Check	This will be completed electronically via Trust ID if the appointee has an in-date UK or Irish passport. If not, they will need to book a face-to-face check – as per the ID section above.
	Some candidates will require a Certificate of Sponsorship (CoS). This does take more time than UK Right to Work check, so the quicker the request is made, the quicker the CoS and Visa application can be completed.

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Internal appointees still require preemployment checks. Managers don't always realise this, and sometimes start people with incomplete mandatory pre-employment checks. This means reporting on time to hire is skewed, as the person has started in post, but has not completed their checks for 300+ days in some cases. Recruitment will re-use any relevant checks they already hold, and only request new checks where relevant for appointees who move between Health Organisations in NHS Wales. This process has also been reviewed and improved as part of the Recruitment Modernisation programme.

Older records sitting in the system with outstanding pre-employment checks when they may have already started in post, increases the time to hire.

The Recruitment Modernisation Programme Board have been asked to review the data, which is issued monthly, starting with records older than 91 days. (See appendix 1 for current position). If these records can be closed, the time to hire will increase initially, however the fewer older records there are in the system, the more realistic the time to hire will be going forward.

#### **Recommendation**

Shared Services Partnership Committee are asked to note this report. Further dialogue with the Workforce Directors and Recruitment Modernisation Board will take place to support the resolutions put forward in this paper in order to reduce the time to hire.

### Appendix 1

Table as at 7<sup>th</sup> September 2023 showing number of records with mandatory preemployment checks outstanding over 91 days compared to total number outstanding.

	As at 7th September 2023						
Org	Count of records older than 91 days	Oldest in working days	Total count of checks outstanding	% of records older than 91 days			
AB	317	383.4	954	33.2%			
BCU	88	263.4	804	10.9%			
СТМ	94	323.8	590	15.9%			
CV	139	369.2	808	17.2%			
DHCW		81.7	27	0.0%			
HD	61	541.0	394	15.5%			
HEIW		64.6	27	0.0%			
NWSSP	25	389.1	78	32.1%			
PHW	3	230.0	42	7.1%			
Powys	2	160.5	83	2.4%			
SB	145	815.1	745	19.5%			
vcc	12	259.2	75	16.0%			
VEL	1	99.4	18	5.6%			
WAST	39	234.3	207	18.8%			
WBS		61.1	11	0.0%			



**AGENDA ITEM:3.2** 

**21 September 2023** 

### The report is not Exempt

### Teitl yr Adroddiad/Title of Report

#### **Managing Director's Report**

ARWEINYDD:	Neil Frow – Managing Director
LEAD:	
AWDUR:	Peter Stephenson, Head of Finance & Business
AUTHOR:	Development
SWYDDOG ADRODD:	Neil Frow – Managing Director
REPORTING	
OFFICER:	
MANYLION	Neil.frow@wales.nhs.uk
CYSWLLT:	
CONTACT DETAILS:	

### Pwrpas yr Adroddiad: Purpose of the Report:

To provide the Committee with an update on NWSSP activities and issues since the last meeting in July.

Llywodraethu/Governance				
Amcanion:	To ensure that NWSSP openly and transparently reports			
<b>Objectives:</b>	all issues and risks to the Committee.			
Tystiolaeth:	N/a			
Supporting				
evidence:				

### Ymgynghoriad/Consultation:

Shared Services Partnership Committee

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$ ):							
DERBYN/ APPROVE	ARNODI/ ENDORSE						
Argymhelliad/ Recommendation	The Partnership Committee is to <b>NOTE</b> an <b>DISCUSS</b> the report.			and			

Crynodeb Dadansoddi Summary Impact Ana	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	No direct impact.
Cyfreithiol: Legal:	No direct impact.
Iechyd Poblogaeth: Population Health:	No direct impact.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct impact.
Ariannol: Financial:	No direct impact.
Risg a Aswiriant: Risk and Assurance:	This report provides an assurance that NWSSP risks are being identified and managed effectively.
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/10">http://www.wales.nhs.uk/sitesplus/documents/10</a> 64/24729 Health%20Standards%20Framework 2  015 E1.pdf.
Gweithlu: Workforce:	No direct impact.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open

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#### Introduction

This paper provides an update into the key issues that have impacted upon, and the activities undertaken by, NWSSP, since the date of the last meeting in July.

#### **Finance**

The Month 5 financial position is a year-to-date overachievement of non-recurring savings of £0.999m. We continue to forecast a break-even financial position for 2023/24 dependent upon a number of income assumptions relating to pay award funding, energy costs for laundries, continued demand and the costs to support increased transactional activity, IP5 running costs and transitional funding for TRAMS.

We are anticipating an element of savings achieved to date will be required to support the transitional and removal costs relating to the transfer of significant volumes of medical records to new premises. This is required due to the existence of RAAC at Brecon House, Mamhilad.

Welsh Risk Pool spend to Month 5 2023/24 is £13.638m compared to £20.963m at the same point in 2022/23. Our 2023/24 IMTP DEL forecast was £135.929m which requires £26.494m to be funded under the Risk Share Agreement. A review of the forecast and high value cases due to settle at Month 5 indicates a potential reduction in the forecast to £130.751m. This would reduce the contribution required from the Risk Share to £21.316m. We will continue to monitor the forecast closely as there continue to be a number of factors that will impact the outturn position as we progress through the remainder of the financial year.

Our Capital Expenditure Limit at the end of August was £4.049m with £0.666m expenditure incurred to date. Additional funding of £1.464m to progress laundry equipment replacement and £0.558m for the replacement of the Primary Care Workforce Intelligence System has been confirmed in recent months, in addition to Quarter 1 new/renewed IFRS16 leases.

#### **Cost Savings**

The letter from Judith Paget to all Chairs and CEOs dated 31<sup>st</sup> July concerning the need to identify levels of savings to address the forecast deficit also required organisations who had submitted balanced plans to go further to identify additional savings.

The NWSSP return incorporates three main categories of savings for 2023/24:

1. Savings that will arise within the books of NWSSP – up to £1.777m. This category represents additional savings that will be made within

- NWSSP's budget but will not have a detrimental impact on the services provided to NHS Wales. It is important to note that the NWSSP IMTP already includes savings of £3.326m in this category.
- 2. Savings that could arise within the books of Health Boards and Trusts up to £23.6m. These savings will accrue directly in the books of NHS bodies and include energy and drugs costs, and reductions in the Welsh Risk Pool Sharing Agreement.
- 3. Savings that will accrue to Welsh Government £1.120m. These savings relate to lower than budgeted reimbursement costs for PPE related matters and the reversal of a year-end accounting accrual.

At the August Senior Leadership Group meeting it was agreed to establish a Value and Sustainability Group within NWSSP to drive an organisation wide approach to strengthen cross divisional working, to co-ordinate and deliver actions to demonstrate value for money as well as continue to innovate and improve quality and consistency for NHS Wales. The Value and Sustainability Group mirrors the national approach and will closely monitor progress in achieving the planned savings.

#### **Integrated Medium Term Plan**

The IMTP 2023-24 has been approved by the Committee and submitted to Welsh Government on 31st March 2023. It appears that the approval of IMTPs has been further delayed and continue to be subject of further discussions between officials in Welsh Government.

#### **Neonatal Prompt**

Following the publication of the Discovery Phase Report of the Maternity & Neonatal (MatNeo) Safety Support Programme, NWSSP Welsh Risk Pool has been asked by Welsh Government to consider the steps needed for the introduction of a PROMPT Wales style of training to be introduced for the Neonatal sector. This would bring the team dynamics, human factors, situational awareness, and scenario / emergency planning principles.

Neonatal teams do undertake some skills and drills training currently. However, the main change by introducing the principles of PROMPT Wales will be the inclusion of a multi-professional training programme and human factors awareness – the common causes of incidents and claims are of course documentation, communication and escalation.

The WRP team have considered potential approaches. Simply including neonatal staff on existing PROMPT Wales training has been discounted as this would leave large numbers of participants without the ability to participate in all of the scenarios and potential extend the training day to unmanageable durations to include all relevant scenarios. Therefore, the decision has been made to design, development, pilot and launch a dedicated programme in a similar way to that used for Maternity PROMPT Wales.

The benefits include the likely reduction in the causes of claims, along with detailed analysis of incidents and the likely introduction of national algorithms similar to that seen with PROMPT Wales. The initial phase is likely to result in some benefits, with further benefits seen as the programme continues to grow.

Funding requirements revolve around the secondment of a suitably experienced PROMPT Wales leader to coordinate the new programme, under the guidance of the existing PROMPT Wales national team. The costs are £24,798 in 2023/24 and £24,798 in 2024/25.

This initiative is a first – PROMPT training has not previously focussed on neonatal sectors, and this is a further opportunity for NHS Wales to lead a development. Community PROMPT Wales is now in use internationally and is a shining example of NHS Wales leading the way. It is hoped that Neonatal PROMPT Wales will be another example.

#### **Laundry Services**

The Laundry Service is the subject of a separate agenda item, but in overall terms the plan is to reduce the laundry production units currently utilised in the All-Wales Laundry service from five to four units through the decommissioning of the West Wales unit in Carmarthen and the formation of a storage and distribution hub.

#### Single Lead Employer - Potential for Industrial Action

Linked to our employment responsibilities for the doctors in training under the Single Lead Employer Model, it is understood that discussions are likely to commence between the British Medical Association and Welsh Government, but no further details are available at present.

#### **Brecon House**

The negotiations with the landlord on the Mamhilad site for provision of alternative accommodation for the Patient Medical Record service are nearing completion following the discovery of significant Reinforced Autoclaved Aerated Concrete issues in Brecon House, Mamhilad. The costs of moving are substantial with the need to move over 140,000 boxes of records and we are working on how to undertake the move in the most cost-effective way.

#### **Move to Cathays Park**

The planned move from Companies House to the Welsh Government offices in Cathays Park is scheduled for January 2024. The relocation should bring a number of benefits including more attractive facilities for our staff in an

environment that supports agile working and sustainable travel. There would also be significant financial savings against the current footprint within Companies House.

A number of workstreams have been established covering People, Finance, Estates, Facilities and Informatics, and good progress is being made in all areas. There are however a number of issues that require further discussion and decision relating primarily to the accessibility of the site for NWSSP staff and visitors and we have therefore extended the consultation period for staff so that these areas can be worked through in more detail.

Further details will be provided to the Committee once a final decision on the options is made.

#### **Corporate Risks**

The Corporate Risk Register is reviewed monthly by the Senior Leadership Group. New risk relating to the overall financial climate across NHS Wales, and the potential for industrial action by Junior Doctors employed under the Single Lead Employer Scheme, have recently been added.

#### **NHS Confederation Conference**

We had a number of staff attending the recent NHS Confederation Conference in Cardiff on the 18<sup>th</sup> of September.

#### **Staff Changes**

Andy Butler, Director of Finance & Corporate Services, has announced his intention to retire at the end of March 2024 and so we will be starting a process to recruit a successor over the next few months.

Neil Frow OBE, Managing Director, NWSSP, September 2023





As at 31st August 2023

Adding Value Through Partnership, Innovation and Excellence

### Financial Position Update - 1<sup>st</sup> April 2023 to 31<sup>st</sup> August 2023

	<b>Annual Budget</b>	YTD Budget	YTD Expend	YTD Variance
	£'000	£'000	£'000	£'000
Income	-653,600	-226,600	-227,381	-781
Pay	325,216	135,146	133,136	-2,011
Non Pay	192,454	77,816	79,609	1,793
WRP - DEL	135,929	13,638	13,638	0
Corporate Reserves	0	0	999	999
	0	0	0	0

		2023/2	24	
	NWSSP Cash	NHS Wales	Welsh	TOTAL
	Releasing £m	Cash	Government	
		Releasing £m	£m	
Schemes in Progress	1.600	13.880	1.120	16.600
Potential Schemes				
requiring agreement	0.177	14.600	-	14.777
TOTAL	1.777	28.480	1.120	31.377

Covid Costs	YTD M5	2023/24
	£m	£m
PPE Operational Costs	1.233	3.586
Social Care/Primary Care PPE	1.676	4.021
Mass Vacc - Pay & Non Pay (non PPE)	0.351	1.042
Lateral Flow Testing	0.056	0.135
TOTAL	3.316	8.785

£3.316m of Covid funded expenditure has been incurred in the financial year to 31<sup>st</sup> August 2023 with a full year forecast of £8.785m

NWSSP reported a break-even Month 5 financial position with a year to date overachievement of non-recurring savings of £0.999m.

We continue to forecast a break-even financial position for 2023/24 dependent upon a number of income assumptions relating to pay award funding, energy costs for laundries, continued demand and the costs to support increased transactional activity, IP5 running costs and transitional funding for TRAMS.

We are anticipating an element of savings achieved to date will be required to support the transitional and removal costs relating to the transfer of significant volumes of medical records to new premises. This is required due to the existence of RAAC at Brecon House, Mamhilad.

Our additional savings submission to Welsh Government on 11<sup>th</sup> August identified we can make a £1.600m distribution this financial year, in addition to identifying NWSSP supported initiatives that will result in cash releasing savings direct to NHS Wales Organisations and Welsh Government. We also identified a number of potential schemes that we could progress to generate savings that would require agreement from NHS Wales Organisations.

Organisation	%	DISTRIBUTION £
Aneurin Bevan	9.85	157,600
Swansea Bay	8.80	140,800
Betsi Cadwaladr	11.98	191,680
Cardiff and Vale	10.49	167,840
Cwm Taf	10.60	169,600
Hywel Dda	7.77	124,320
Powys	1.95	31,200
Velindre	1.17	18,640
WAST	1.28	20,480
Public Health Wales	0.87	13,920
Welsh Government	35.25	563,920
Total	100.00	1,600,000

The £1.600m distribution will be apportioned to NHS Wales Organisations and Welsh Government based on the original contribution shares into NWSSP in line with previous financial year distributions.

### Welsh Risk Pool

DEL spend to Month 5 2023/24 is **£13.638m** compared to **£20.963m** at the same point in 2022/23.

Our 2023/24 IMTP DEL forecast was £135.929m which requires £26.494m to be funded under the Risk Share Agreement.

A review of the forecast and high value cases due to settle at Month 5 indicates a potential reduction in the forecast to £130.751m. This would reduce the contribution required from the Risk Share to £21.316m. We will continue to monitor the forecast closely as there continue to be a number of factors that will impact the outturn position as we progress through the remainder of the financial year.

DEL FORECAST	2023/24
Month 5 2023/24	£000s
Actual spend to August 2023	13,638
Settled cases – awaiting payment	5,054
JSM/RTM/Offer	49,772
PPO's to March 2024	18,788
Sub Total	87,252
Future Estimated Settlements	43,499
Month 5 2023/24 DEL forecast	130,751
IMTP DEL Forecast 2023/24	135,929

The 2023/24 risk share apportionment has been updated in August to reflect the updated cost driver information from the 2022/23 outturn position.

This resulted in some sizeable changes to the contributions from Organisations as a result of movements in the actual 2022/23 data. The updated apportionment of the forecast £26.494m risk share contribution is detailed below against the 2022/23 contributions and the IMTP planning assumptions (which were based on the 22/23 cost drivers).

WRP Creditor balances have reduced significantly since the beginning of the financial year although remain high at

#### Movement on Creditors

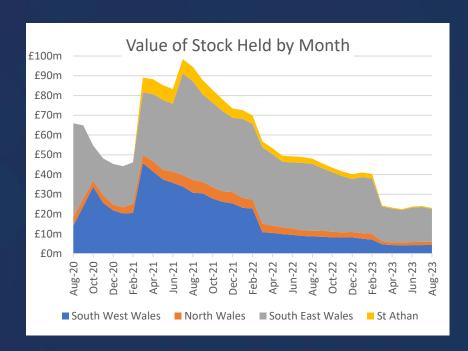
remain high at											
£110.733m	2022/23 - M12	2023/24 - M5	Movement								
	£M	£M	£M								
SWANSEA BAY	20.163	14.602	(5.561)								
ANEURIN BEVAN	29.277	24.871	(4.406)								
BETSI CADWALADR	26.696	19.048	(7.648)								
CARDIFF & VALE	19.738	15.960	(3.778)								
CWM TAF MORGANNWG	12.988	12.442	(0.546)								
HYWEL DDA	19.132	20.161	1.029								
POWYS	0.767	0.730	(0.037)								
PHW	0.877	0.819	(0.058)								
WAST	2.202	2.089	(0.113)								
VELINDRE	0.057	0.011	(0.046)								
	131.897	110.733	(21.164)								

	RSA 2022/23	2022/23	Planned RSA 2023/24 - IMTP	RSA 2023/24 Updated %	RSA 2023/24 Updated £	Movement from forecast
ANEURIN BEVAN	16.80%	4,261,419	4,454,607	18.08%	4,790,198	335,591
SWANSEA BAY	16.38%	4,150,433	4,338,590	13.45%	3,562,369	-776,221
BETSI CADWALADR	19.71%	4,997,106	5,223,647	18.56%	4,916,201	-307,446
CARDIFF & VALE	14.43%	3,657,387	3,823,193	16.03%	4,246,968	423,775
СТМ	13.15%	3,332,279	3,483,346	15.12%	4,005,958	522,612
HYWEL DDA	10.74%	2,721,884	2,845,279	10.45%	2,769,214	-76,065
POWYS	4.51%	1,142,601	1,194,401	4.13%	1,095,377	-99,024
PHW	1.34%	338,627	353,978	1.16%	308,635	-45,343
VELINDRE	1.10%	277,640	290,226	1.09%	287,799	-2,427
WAST	1.84%	465,624	486,733	1.93%	511,281	24,548
TOTAL	100.00%	25,345,000	26,494,000	100%	26,494,000	0
70.000			11			27/14

## **Capital & Stock**

Scheme	Allocation	YTD Spend	Balance Outstanding
	£000	£000	£000
Telephony & Contact Centre	90	28	-62
IP5 LED lights Phase 2	3	3	0
Storage canopy Glan Clwyd	1	1	0
Cathays Park PSBA line	20	0	-20
Laundry Services Discretionary allocation	200	0	-200
Unallocated	414	0	-414
Discretionary Capital Total	728	32	-696
IP5 discretionary	130	81	-49
Scan for Safety 23/24	69	62	-7
TRAMS OBC 23/24	217	109	-108
Bank of dryers for Tunnel Washer x 7, Green Vale	118	0	-118
Tunnel washer dryer, North Wales	74	0	-74
IP5 PV scheme (EFAB Funding)	300	0	-300
All Wales Laundry Programme	1,464	0	-1,464
Primary Care Workforce Intelligence System	558	0	-558
VAT credits	0	-9	-9
Additional Capital Total	2,930	243	-2,687
New/Renewal IFRS16 Leases	391	391	0
TOTAL CAPITAL ALLOCATION	4,049	666	-3,383

Our Capital Expenditure Limit at the end of August was £4.049m with £0.666m expenditure incurred to date. Additional funding of £1.464m to progress laundry equipment replacement and £0.558m for the replacement of the Primary Care Workforce Intelligence System has been confirmed in recent months, in addition to Quarter 1 new/renewed IFRS16 leases.



The value of stock held in Stores at 31<sup>st</sup> August 2023 was £23.1m. We continue to maintain the 16 week PPE stock holding as requested by Welsh Government and continue discussions regarding the levels of stocks that we need to continue to hold in the longer term.

## Energy

ALL WALES ENERGY	2023	/24 FORECAS	T £m
	Gas	Electricity	Total
August 2022	142.830	146.600	289.430
September 2022	87.672	95.778	183.450
October 2022	107.377	116.219	223.596
November 2022	75.956	102.002	177.958
December 2022	83.859	102.076	185.935
January 2023 (1)	55.452	78.399	133.851
January 2023 (2)	52.297	71.877	124.174
February 2023 (included in IMTPs)	43.831	66.260	110.091
March 2023	38.486	62.586	101.072
April 2023	41.803	64.081	105.884
May 2023	35.320	57.641	92.961
June 2023	38.013	59.647	97.660

The NHS Wales energy cost forecasts provided by British Gas have varied considerably over the last year, which we report through the All Wales Energy Price Risk Management Group (EPRMG).

Welsh Government have confirmed they will not provide any energy funding in 2023/24. Our IMTP identified forecast energy costs of £7.213m which have reduced to £4.755m at the end of August due to a reduction in energy market prices.

The reduced costs still create a £2.437m pressure across NWSSP, the majority of which relates to our Laundry Services. We are liaising with UHBs regarding the need for increased energy charges to be added to the Laundry SLAs.

The All Wales energy contract is transferring to the Crown Commercial Services (CCS) Framework from 1<sup>st</sup> October 2023.

From July we have provided hybrid forecasts with the 6 months supply from British Gas and 6 months from CCS.

We are working with CCS to review forecasts they have provided for the October 23 – March 24 period. At present the forecast for non-commodity costs are based on wider public sector basket averages with different meter compositions than our NHS meters, which CCS believe may be overstating the forecast costs.

	Apr 23	- Sept 23 (Britis	sh Gas)	Oc	t 23 - Mar 24 (C	CS)	2023/24 TOTALS				
Forecast	Gas £m	Electricity £m	Total £m	Gas £m	Electricity £m	Total £m	Gas £m	Electricity £m	Total £m		
July 2023	13.740	27.522	41.262	29.588	35.383	64.971	43.328	62.905	106.233		
August 2023	14.053	27.490	41.543	28.270	35.658	63.928	42.323	63.148	105.471		

The CCS non-commodity costs which are under review, relate to Use of System charges which should be standard regardless of supplier. Given the forecast from British Gas, our current supplier, should include more accurate information with regards to these Use of System charges that are levied, we have analysed the forecast at a lower level using CCS commodity costs and British Gas non-commodity costs for the October to March period. This indicates the All Wales forecast could reduce to £95.175m.

Until invoices are received from CCS and charges confirmed we have advised Organisations to continue to forecast their share of the £105.471m with the potential recognition of an opportunity that this may reduce.

	BRITISH GAS (APR-SEP)			BRITISH GAS (OCT-MAR)			cc	S (OCT-MA	AR)	POTENTIAL 2023/24 FORECAST			
	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL	
Commodity	8.612	11.980	20.592				15.100	12.727	27.827	23.712	24.707	48.419	
Non-Commodity	5.441	15.510	20.951	8.770	17.035	25.805			-	14.211	32.545	46.756	
TOTAL	14.053	27.490	41.543	8.770	17.035	25.805	15.100	12.727	27.827	37.923	57.252	95.175	

## Financial Position and Key Targets

		2022/23								2023/24					
KPI	Target	August	September	October	November	December	January	February	March	April	May	June	July	August	Trend
Financial Position – Forecast Outturn	Break even Monthly	Breakeven													
Capital financial position	Within CEL Monthly	On Target													
% of Non NHS Invoices paid within 30 days (In Month)	95% Monthly	97.12%	95.73%	95.51%	95.04%	93.91%	89.64%	100.07%	98.06%	98.24%	98.87%	96.55%	97.51%	97.14%	~~
% of Non NHS Invoices paid within 30 days (Cumulative	) 95% Monthly	95.96%	95.92%	95.85%	95.75%	95.51%	94.90%	95.50%	95.71%	98.24%	98.56%	97.84%	97.76%	97.62%	~~
% of NHS Invoices paid within 30 days (In Month)	95% Monthly	84.09%	86.67%	86.52%	83.82%	76.29%	85.83%	91.73%	87.38%	98.76%	95.00%	99.15%	94.64%	94.50%	~~~
% of NHS Invoices paid within 30 days (Cumulative)	95% Monthly	91.02%	90.07%	89.44%	88.77%	86.96%	86.79%	87.50%	86.44%	98.76%	97.32%	97.89%	97.15%	96.67%	5

## Corporate

		2022/23								2023/24					
KPI	Target	August	September	October	November	December	January	February	March	April	May	June	July	August	Trend
NHS Debts in excess of 17 weeks - number of invoices	0 Monthly	2	3	1	7	12	5	11	0	0	2	12	11	18	~~~
Variable Pay – Overtime	<£75k Monthly	£140k	£148k	£137k	£143k	£120k	£104k	£108k	£106k	£120k	136k	£109k	105K	122K	$\neg$ _ $\wedge$
Agency % to date	<0.8% Cumulative	0.33%	0.32%	0.30%	0.31%	0.29%	0.31%	0.32%	0.29%	0.28%	0.30%	0.32%	0.33%	0.32%	W/\
Agency % Adjusted to exclude SLE	<1% Cumulative	1.16%	1.13%	1.08%	1.10%	1.04%	1.10%	1.16%	1.03%	1.01%	1.08%	1.03%	1.02%	1.03%	W

30/:

### Recommendations

The Shared Services Partnership Committee is asked to note:

- 1. The financial position to 31st August 2023
- 2. The additional savings proposals submitted to Welsh Government
- 3. The 2023/24 £1.600m savings distribution
- 4. The WRP forecast position and revised risk share apportionments for 2023/24
- 5. The updated energy forecast
- 6. Achievement against key financial targets
- 7. The content of this update and seek further information if required.







Adding Value Through Partnership, Innovation and Excellence

# NHS WALES SHARED PARTNERSHIP SERVICES COMMITTEE People and Organisational Development (OD) Report

MEETING	Shared Services Partnership Committee (SSPC)
REPORT DATE	25 <sup>th</sup> August 2023
REPORT AUTHOR	Sarah Evans, Deputy Director of People and OD
RESPONSIBLE DIRECTOR OF SERVICE	Gareth Hardacre, Director of People, OD and Employment Services
TITLE OF REPORT	Report of the Director of People, OD and Employment Services

#### **PURPOSE OF REPORT**

The purpose of this report is to provide SSPC with a comprehensive update of current workforce performance across the organisation through a range of workforce information key performance indicators (KPIs) as at 31<sup>st</sup> July 2023. The report also provides an update on current work programmes being undertaken by the People and OD Function as well as any organisational change activity ongoing throughout August 2023.

The report is split into sections, starting with a workforce summary showing key performance indicators, followed by the initiatives the team are leading/supporting regarding the Employee Value Proposition and lastly the interventions/activities concerning the employee experience. This format hopes to showcase the moments that matter to NWSSP employees and to encourage open and honest conversations to take place, in relation to our strategic objective; to have an appropriately skilled, productive, engaged and healthy workforce.

### Full Dashboard

Once opened, please click 'Editing' to open in desktop

### Top 3 reasons for absence by FTE days Lost

- 1. S10 Anxiety/stress/depr ession/other psychiatric illnesses
- 2. S13 Cold, Cough, Flu - Influenza
- 3. S25 Gastrointestinal problems

### Welsh Language **Awareness**

Compliance is at 88.81% which has improved from 86.83% last month. This excludes the Single Lead

Including Single Lead **Employer Division** compliance drops to 41.21%



### **PADR Compliance**

is at **80.00%** which is below the target of 85% compliance. The compliance has followed an overall downward trend for the period and was at its highest for August 22 at 86.73%

0.45%

Variance



Key Meeting or Off target On course for target Positive change Negative change Change not measured exceeding target

# NWSSP Overall Sickness Absence % Monthly Comparison over 3 Years 4.50% 4.00% 3.50% 2.50% 2.00% 1.50% 1.00% 0.50% 0.00% Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul 2020/21 2021/22 2022/23 ----- Target Data Source: ESR



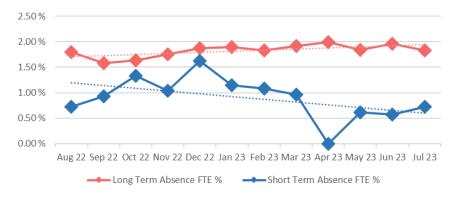
# Long Term Vs Short Term Absence

Long term absence is at **1.83%**. The top reason for long term absence for the period was

Anxiety/stress/depression/other psychiatric illnesses

Short term absence has increased from the June position and is at **0.72**%

# NWSSP Overall - Long Term / Short Term Sickness Absence FTE % Over Time



Data Source: ESR

### In Month Sickness Absence Percentage by Division

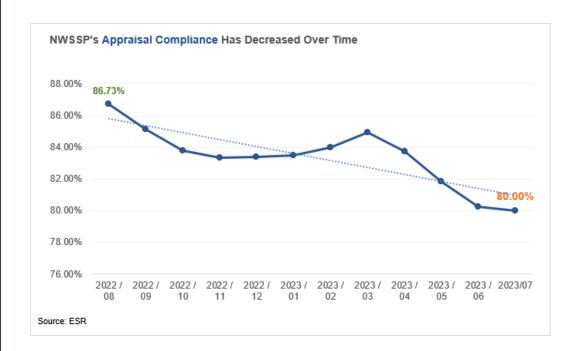
Division	Jun-23	Jul-23	Change
Accounts Payable Division	2.36%	2.90%	0.54% ▲
Audit & Assurance Division	2.52%	2.31%	-0.21% ▼
Corporate Division	4.05%	2.00%	-2.05% ▼
Counter Fraud Division	0.95%	0.00%	-0.95% ▼
Digital Workforce Division	0.00%	0.92%	0.92% 🔺
E-Business Central Team Division	7.16%	7.54%	0.38% 🛦
Employment Division	3.94%	4.69%	0.75% 🔺
Finance Division	1.02%	0.92%	-0.10% ▼
Hosted Services Division	0.00%	0.00%	0.00%
Laundry Division	7.00%	3.93%	-3.07% ▼
Legal & Risk Division	1.50%	1.46%	-0.04% ▼
Medical Examiner Division	4.23%	4.57%	0.34% 🔺
Medical Workforce Division	9.66%	0.00%	-9.66% ▼
People & OD Division	2.88%	0.61%	-2.27% ▼
Pharmacy Technical Services Division	0.00%	0.67%	0.67% ▲
Planning, Performance and Informatics Division	0.00%	0.50%	0.50% 🛦
Primary Care Division	3.75%	4.32%	0.57% ▲
Procurement Division	5.62%	6.04%	0.42% 🔺
Single Lead Employer Division	1.48%	1.46%	-0.02% ▼
Specialist Estates Division	0.53%	1.97%	1.44% ▲
Surgical Materials Testing (SMTL) Division	1.59%	0.25%	-1.34% ▼
Welsh Employers Unit Division	14.63%	3.57%	-11.06% ▼
Grand Total	2.53%	2.55%	0.02% ▲
Course FCD			

Source: ESR

In month sickness has increased from the June 23 position and is now 2.55% which is still below the target of 3.30%

eBusiness Central Team Division has the highest in month sickness Percentage for July at **7.54**%

### PADR Compliance



### **PADR Compliance**

is at **80.00%** which is below the target of 85% compliance.

The compliance has followed an overall downward trend for the period and was at its highest for August 22 at 86.73%

Welsh Employer Division, Medical Workforce Division and Laundry Division have the lowest compliance scores.

### **Appraisal Compliance by Division**

Division	Jun-23	Jul-23	Change
Accounts Payable Division	90.14%	91.43%	1.29% ▲
Audit & Assurance Division	84.00%	84.00%	0.00%
Corporate Division	76.92%	85.19%	8.26% ▲
Counter Fraud Division	100.00%	100.00%	0.00%
Digital Workforce Division	90.91%	95.24%	4.33% ▲
E-Business Central Team Division	92.86%	92.86%	0.00%
Employment Division	72.65%	69.92%	-2.73% ▼
Finance Division	78.26%	81.82%	3.56% ▲
Hosted Services Division	76.92%	76.92%	0.00%
Laundry Division	57.03%	51.54%	-5.49% ▼
Legal & Risk Division	83.22%	83.33%	0.11% 🛦
Medical Examiner Division	73.44%	67.65%	-5.79% ▼
Medical Workforce Division	7.69%	7.14%	-0.55% ▼
People & OD Division	82.93%	85.37%	2.44% ▲
Pharmacy Technical Services Division	58.33%	68.00%	9.67% ▲
Planning, Performance and Informatics Division	75.68%	75.68%	0.00%
Primary Care Division	90.75%	90.11%	-0.64% ▼
Procurement Division	82.88%	84.96%	2.08% ▲
Specialist Estates Division	93.88%	85.42%	-8.46% ▼
Surgical Materials Testing (SMTL) Division	95.45%	95.65%	0.20% 🛦
Welsh Employers Unit Division	0.00%	0.00%	0.00%
Grand Total	80.22%	80.00%	-0.22% ▼

Source: ESR

# **E-Learning Competency Compliance**

Division	NHS CSTF Equality, Diversity and Human Rights - 3 Years	NHS CSTF Fire Safety - 2 Years	NHS CSTF Health, Safety and Welfare - 3 Years	NHS CSTF Infection Prevention and Control - Level 1 - 3 Years	NHS CSTF Information Governance (Wales) - 2 Years	NHS CSTF Moving and Handling - Level 1 - 2 Years	NHS CSTF Resuscitation - Level 1 - 3 Years	NHS CSTF Safeguarding Adults - Level 1 - 3 Years	NHS CSTF Safeguarding Children - Level 1 - 3 Years	NHS CSTF Violence and Aggression (Wales) - Module A - No Specified Renewal
Accounts Payable Division	100.00%	95.10%	99.30%	97.90%	93.01%	93.71%	100.00%	98.60%	97.90%	100.00%
Audit & Assurance Division	96.15%	94.23%	98.08%	98.08%	94.23%	92.31%	96.15%	94.23%	96.15%	100.00%
Corporate Division	92.86%	89.29%	92.86%	92.86%	82.14%	85.71%	92.86%	89.29%	89.29%	96.43%
Counter Fraud Division	100.00%	100.00%	100.00%	85.71%	100.00%	100.00%	85.71%	85.71%	85.71%	100.00%
Digital Workforce Division	95.83%	95.83%	95.83%	100.00%	100.00%	91.67%	95.83%	95.83%	95.83%	100.00%
E-Business Central Team Division	93.33%	93.33%	86.67%	86.67%	100.00%	93.33%	100.00%	93.33%	93.33%	100.00%
Employment Division	94.49%	92.91%	92.39%	90.81%	90.55%	91.08%	93.18%	89.76%	90.03%	97.11%
Finance Division	100.00%	100.00%	100.00%	96.00%	96.00%	100.00%	96.00%	96.00%	96.00%	88.00%
Hosted Services Division	100.00%	100.00%	92.31%	92.31%	92.31%	92.31%	84.62%	84.62%	84.62%	92.31%
Laundry Division	86.36%	90.15%	91.67%	88.64%	67.42%	93.94%	93.18%	87.88%	86.36%	85.61%
Legal & Risk Division	96.97%	94.55%	95.76%	92.12%	93.94%	93.94%	96.97%	93.33%	93.94%	95.15%
Medical Examiner Division	90.91%	88.31%	85.71%	76.62%	90.91%	80.52%	84.42%	76.62%	74.03%	85.71%
Medical Workforce Division	78.57%	71.43%	78.57%	78.57%	71.43%	71.43%	71.43%	71.43%	71.43%	85.71%
People & OD Division	97.78%	95.56%	95.56%	95.56%	91.11%	88.89%	95.56%	95.56%	95.56%	95.56%
Pharmacy Technical Services Division	88.00%	92.00%	96.00%	88.00%	92.00%	88.00%	88.00%	88.00%	92.00%	88.00%
Planning, Performance and Informatics Division	97.44%	97.44%	100.00%	97.44%	100.00%	97.44%	100.00%	94.87%	92.31%	100.00%
Primary Care Division	97.95%	96.92%	97.60%	97.26%	96.58%	97.60%	96.92%	95.55%	95.21%	99.32%
Procurement Division	96.25%	94.44%	95.69%	94.03%	92.92%	93.19%	95.56%	95.56%	94.86%	97.50%
Specialist Estates Division	100.00%	100.00%	95.92%	100.00%	97.96%	100.00%	100.00%	97.96%	97.96%	100.00%
Surgical Materials Testing (SMTL) Division	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Welsh Employers Unit Division	71.43%	71.43%	71.43%	71.43%	57.14%	71.43%	71.43%	57.14%	57.14%	85.71%
NHS Wales Shared Services Partnership	95.61%	94.16%	94.99%	93.23%	91.61%	93.01%	95.04%	93.06%	92.71%	96.40%

Source: ESR

Note: compliance excludes Single Lead Employer Division

### **EMPLOYEE VALUE PROPOSITION**

### What we mean by Employee Value Proposition:

"An Employee Value Proposition (EVP) is our core benefits that make up our wider employer brand. It is a promise between us as an employer and a potential applicant; what can NWSSP and our culture offer them, in exchange for their talent, skills, and experience."

In this section we look at key developments and activities in relation to attraction, resourcing and onboarding, including our internal Bank service.

### **Recruitment & Attraction Activity**

### **NWSSP External Webpages**

The working for us section of the NWSSP web page and all the pages built behind this page have been updated and rebranded to ensure consistency. This will continue to develop over the coming months but can be used as a platform to showcase all the great work we all do as an organisation to prospective new candidates looking to join NWSSP. The new page can be seen here Working for us - NHS Wales Shared Services Partnership

Included within this page is all the great work the organisational development team have been doing from a widening aspect perspective <a href="Shaping your NHS Career with NWSSP - NHS Wales Shared Services Partnership">Shared Services Partnership</a>

There is also on-going development work on the New Wellbeing and Belonging pages Well-being and Belonging - NHS Wales Shared Services Partnership

The next stage of this project will see our external internet home page updated in line with the other changes we have made in relation to our branding. The main changes proposed were to ensure consistency in brand and the visual look and ease of use for the web page. Following conversations with the Service Improvement Team, the internet home page will also be updated and incorporate the use of a mix of google analytic based data, to bring the most viewed pages to the forefront of the page making general navigation easier.

### **NWSSP Videos**

### <u>Top Tips - Candidate video</u>

We have now finalised a video to go live on our website and job adverts, to support candidates applying for roles with NWSSP. This is broken down into 8 key steps to try and provide a top tips guide to support candidates when completing their applications with the organisation. The concept behind this will be to help candidates articulate their capabilities and experience when completing applications with us, in turn seeing better quality applications and candidate pools for hiring managers to choose from.

Top Tips 10.08.23.mp4

### Benefits Video

We have also finalised a video to go live onto our intranet, website and job adverts, complimenting the work already completed for the Our Benefits - NHS Wales Shared Services Partnership document. The video links to both our attraction and retention proposition, providing existing employees and potential candidates looking to join NWSSP a visual snapshot of some of the benefits of working for the NHS and NWSSP.

Our Benefits Video 10.08.23.mp4

### **RESOURCE BANK AND AGENCY**

### General Bank – Monthly Use

68.13 WTE actively engaged on the Bank in July 2023, when removing collaborative bank and Corporate reserves. This is down from 96.42 WTE in June

Total spend of £282,169 excluding Corporate Reserves and Collaborative Bank, which compares to £276,340 in June

Large reductions noted in People and Organisational Development and Laundry from month 3

Row Labels	Sum of Current Month Actual	Sum of WTE Actual
Accounts Payable & e-Enablement	122.12	-0.18
Audit & Assurance Services	4,881.03	0.94
Employment Services	32,504.15	9.35
Procurement Services	74,550.59	22.63
Primary Care Services	9,937.69	2.80
Legal & Risk Services	6,604.11	1.56
Finance & Corporate Services	3,088.51	0.57
Planning, Performance & Informatics	8,163.25	1.39
Health Courier Services	58,386.66	18.13
SMTL	4,034.79	0.82
Medical Examiner Service	158.04	0.00
All Wales Collaborative Bank	41,604.41	6.60
All Wales Laundry	21,084.66	5.65
E-Business Central Team Services	2,938.90	1.16
People & Organisational Development	14,110.33	3.31
Pharmacy Technical Services	0.00	0.00
Corporate Reserves	13.07	0.00
GP Training Scheme	-13.07	0.00
Grand Total	282,169.24	74.73

### Agency Spend by Service

Service Area	Sum of July	No. Engagments
Audit	20,304	3
Finance & Corporate	385	3
HCS	12,328	5
Laundry	42,094	17
PS - Local Procurement	2,397	1
PS - Supply Chain		0
PPI	12,057	2
SMTL	0	0
Total	89,564	31

### Agency Use

Spend for July decreased to £89,564 (from £95,820 in June)

31 x staff engaged via Agency in last month

Significant increases seen in Audit & Assurance, Laundry and PPI.

Notable decrease in Finance & Corporate

### Other News

Significant increase seen over the last month for Bank staff requests, with 26 currently outstanding waiting to be filled

54 people being onboarded to the Bank database, with a total of 530 already registered

6 monthly cleanse being completed in August to understand clear view of current bank staff registered with NWSSP

### **EMPLOYEE EXPERIENCE**

### Corporate Engagement

### What we mean by Employee Experience:

"Employee Experience is how we provide personalisation to our staff about their experience with us an organisation. Understanding how we can provide staff with an experience that makes them want to keep working for us or to become advocates of us as an organisation when they leave. A truly positive employee experience is one where the employee feels special and appreciated for their individual contribution and talents, not simply a cog in a machine".

In this section we look at key developments and activities in relation to induction, relationships, recognition, key projects and talent management.

### **People Development**

- Following the approval of NWSSP's Developing People Strategy at Senior Leadership Group in July, the strategy will be launched in September once translated.
- The first Coffee and Conversation session was delivered on the topic of Agile Working. 21 leaders and managers attended the session with positive feedback received.
- The members of the NWSSP Training Network have agreed to establish a working group to look at access to training and other communication to non digital areas. Stakeholders from the relevant areas have been invited and the first meeting will take place in September.
- HEIW confirmed that our new NHS Wales Graduate will join us on 8th September.
- The first cohort of the Leading for Excellence and Innovation Programme concluded with 30 participants have completing the programme. Learning has been assessed via Learning and Reflection questionnaires coupled with 1-1 Developmental meetings. An in-person Celebrating Success day will take place in September. A new cohort will also commence in September. Applications for the forthcoming cohort were lower than Cohort 1 and will run with 10 delegates for the Essential Leadership cohort and 12 delegates for Strategic Leadership Cohort.
- Welsh Government fully funded qualifications were accessed utilising 3 different training providers in the following subject areas: 3 x Leadership and Management; 1 x Accounting, 1 x HR, 2 x Data Analytics.
- 52 members of staff attended in house courses including, Power of Positive Thinking, Welcome Induction Session and Performance Appraisal.

### **Well-being and Inclusion**

- NWSSP are now Menopause Pledged employers and also held the first 'Lunch and Learn' event exploring Menopause in the workplace. More sessions will take place in the coming months.
- The recent Health & Wellbeing survey had 186 responses. Valuable feedback on our current Employee Assistance Programme was received which will inform the tender for a new contract as our contract with Workplace Options comes to an end. Most respondents were aware of NWSSP's provisions and on average 4 out of 5 colleagues felt their health & wellbeing was supported at NWSSP.
- NWSSP attended a Time to Change Wales event in Bridgend College with other pledged employers and will be hosting the next event in Matrix House in September.
- NWSSP attended the LGBTQ+ Action Plan event held by Senedd Insights with other public sector employers and will use this learning to develop relevant actions.

### **Culture and Engagement**

- The new Organisational Development Facilitator for Culture and Engagement commenced in role on 31<sup>st</sup> July and will be operationally leading This is Our NWSSP, the NHS Staff Survey and a review of our appraisal processes.
- The Living the Values Guidance has now been published and more vents to embed the Values across the organisation are being planned with our Culture Change Champions.
- NHS Wales Staff Survey launch date has been delayed until 2nd October. This date is not confirmed as yet and may be further delayed.

### **EMPLOYEE EXPERIENCE CONTINUED**

### **Widening Access**

• Members of People & OD, Finance and Legal & Risk Services attended the Social Mobility Event at the Wales Audit Office in Cardiff during July as part of a week-long event where organisations spoke with school leavers about career opportunities. The day was dedicated to NWSSP and each division presented and showcased jobs and careers within their service. The target audience was school leavers from South Wales areas where social mobility is low and who had expressed an interest in one of the business services or different entry and learning opportunity including apprenticeships, Network 75 and Graduate Schemes.

### Cathays Park 2 (CP2) Update

- The consultation document was sent out to all Companies House staff; it was decided from the outset to extend the 28-day consultation period to 6-weeks to take account of Summer holidays. The consultation will close on 1st September 2023. Staff have been given the opportunity to request 1-2-1 meetings to understand what the move means to them and/or where they believe they will be adversely affected by the move.
- Th Frequently Asked Questions (FAQs) are continually being updated. These will soon be available to all staff on the dedicated web page together with more information about the move, including floor plans and a virtual tour.
- A meeting took place in CP2 and we gained more detail around the Disclosure and Barring Service Checks (DBS) & Security. Any member of our staff requesting a CP2 Staff Pass will need to have a clear certificate following a basic DBS check. Once a clear certificate has been attained, staff will be asked to go to CP2 with address, proof of their address, date of birth and identification. Staff passes will be issued and valid for 3 years, after which time they will expire, and a new basic DBS will need to be carried out. In-house costs for us to carry out DBS checks are £41.82 per person, this price includes the basic check, TRAC ID, update service and an administration fee. We initially propose carrying out DBS checks on staff who will be accessing the building on a regular basis. Other staff that go into the office, less frequently will be classed as visitors and will need to be met by a staff member who can escort them to and from our floor in CP2. We will review this process and amend as required, as well as look at special individual circumstances/requirements on a case-by-case basis. We are looking at Companies House door access data to establish an initial base line cost. We are working with recruitment to put a timeframe and resource in place to support the process. We are also working with Welsh Government to see if there are any exceptions to the rule of having a clear DBS certificate, i.e. traffic offences.
- We are planning to hold an engagement session on 20th September 2023 via Teams Live, in a 'Coffee Morning' forum. We will give staff a short presentation and update on the close of the consultation as well as start the conversations and plans around DBS checks and visitor/staff passes.

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### **Primary Care Services**

• The Organisational Change Process (OCP) for the Document Scanning move and realignment of the Print Room has commenced. We are currently awaiting approval that the infrastructure in Mahmillad can accommodate the additional equipment. Once confirmed one to ones will commence.

### **Medical Examiner Service**

- The Consultation document is currently being drafted which will incorporate the following changes:
  - A new Band 6 posts in each hub,
  - · Additional Medical Examiner sessions for leadership responsibilities,
  - · Changes to working hours and
  - A potential relocation of the Central Team's workforce to IP5

### **Laundry Services**

- Discussions have started to take place about the future of Glangwilli Laundry. Initial meetings have taken place with workforce colleagues in Hywel Dda University Health Board. We are currently awaiting final approval of the approach, before any TUPE discussions take place.
- Work has commenced with OD colleagues on a culture intervention piece in Swansea Laundry to address concerns raised on site by Laundry staff.

### **Procurement**

- The Head of People and Business Partnering and Senior People and Business Partner visited North Wales (Denbigh Stores) at the beginning of August to deliver bespoke policy training and speak with services. Positive feedback was received, and colleagues were asked to deliver more in-person bespoke training across Wales.
- Bespoke In-Person Managing Attendance at Work Training for Health Courier Services Supervisors is scheduled for September.
- Menopause Training is currently being scheduled for Supply Chain Logistics and Transport staff in North and South Wales.



### **AGENDA ITEM:4.3**

**21 September 2023** 

### The report is not Exempt

### Teitl yr Adroddiad/Title of Report

### **Performance Update Report**

ARWEINYDD:	Alison Ramsey, Director of Planning,
LEAD:	Performance, and Informatics
AWDUR:	Richard Phillips, Business and Performance
AUTHOR:	Manager
<b>SWYDDOG ADRODD:</b>	Alison Ramsey, Director of Planning,
REPORTING	Performance, and Informatics
OFFICER:	

### Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this report is to provide the Shared Services Partnership Committee (SSPC) with an update on Key Performance Indicators (KPIs) for April – July 2023.

Llywodraethu	Llywodraethu/Governance						
Amcanion: Objectives:	Value for Money - To develop a highly efficient and effective shared service organisation which delivers real terms savings and service quality benefits to its customers.  Excellence - To develop an organisation that delivers process excellence through a focus on continuous service improvement, automation and the use of technology.  Staff - To have an appropriately skilled, productive, engaged and healthy workforce.						
<b>Tystiolaeth:</b>	NWSSP IMTP 2023-26						
Supporting							
evidence:							

### Ymgynghoriad/Consultation:

Senior Leadership Group

Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$ ):										
DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE √							
Argymhelliad/ Recommendatio	requested to  1. The sig benefits 2023.  2. The perform  3. The req	Services Partnersh NOTE:  nificant level of profes generated by NW rformance against thance indicators to 32 uirement for NWSSP ace Assessments and	ressional influence SSP to 31st July he high-level key Lst July 2023. to complete Policy							

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:						
Cydraddoldeb ac amrywiaeth: Equality and	No direct Impact					
diversity: Cyfreithiol: Legal:	No direct Impact					
Iechyd Poblogaeth: Population Health:	No direct Impact					
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct Impact					
Ariannol: Financial:	Professional Influence Benefits for NHS Wales					
Risg a Aswiriant: Risk and Assurance:	Organisation Performance Assurance					
Safonnau Iechyd a Gofal: Health & Care Standards:	No direct Impact					
Gweithlu: Workforce:	No direct Impact					
Deddf Rhyddid Gwybodaeth/ FOIA	Open					



# NWSSP Performance Information Report

Covering Period April to July 2023

Adding Value Through Partnership, Innovation and Excellence

# **Purpose**

The purpose of this report is to provide the Shared Services Partnership Committee (SSPC) with an update on Key Performance Indicators (KPIs) for April – July 2023.

Health Organisations have received their individual performance reports for Quarter 1 at the end of July 2023 and will receive the Quarter 2 reports at the end of October 2023.

Individual review meetings are scheduled in early November to discuss mid year performance with every organisation.

# Key Messages

The in-month July performance was generally good with 37 KPIs achieving the target against the total of 41 KPIs.

However, 4 KPIs did not achieve the target and are considered Red/Amber. For these indicators where the target was missed there is a brief explanation included.

Professional influence benefits amount to £66M at end of July. This is further broken down on Page 11 of this report.

# Summary Position by exception – 4 KPIs off target



Of the 4 KPIs that did not achieve the targets for July

- 2 are a combination of both External/Internal processes.
- 2 are within our gift to influence as a service provider.

# Summary of Key Performance Indicators – July 23

Summary									
					23,	/24			
KFA	KPIs	Target		April	May	June	July	Trend	
Audit & Assurance									
Our Services	Audit opinions/annual reports on track	Y/N	Monthly	Υ	Y	Y	Y		
Our Services	Audits delivered for each Audit Committee in line with agreed plan	Y/N	Monthly	N	Y	Y	Y		
Our Services	Report turnaround fieldwork to draft reporting [10 days]	95%	Monthly	90%	89%	89%	95%		
Our Services	Report turnaround management response to draft report [15 days]	75%	Monthly	65%	66%	67%	100%		
Our Services	Report turnaround draft response to final reporting [10 days]	95%	Monthly	96%	99%	99%	100%		
	ina repereng [20 daye]		Procur	ement Servi	ces				
Our Value	Procurement savings *Current Year	£8m	Cumulative	Not Available	£6,186,776	£9,807,588	£6,881,935		
			Acco	unts Payabl	е				
Our Value	Savings and Successes		Monthly	£294,853	£149,242	£810,119	£834,303		
Our Services	All Wales PSPP - Non-NHS YTD	95%	Quarterly	Reported Quarterly	Reported Quarterly	96.60%	Reported Quarterly		
Our Services	All Wales PSPP -NHS YTD	95%	Quarterly	Reported Quarterly	Reported Quarterly	87.90%	Reported Quarterly		
Our Services	Accounts Payable % Calls Handled (South)	95%	Monthly	99.20%	99.50%	99.40%	99.60%	<del></del>	
			Emplo	yment Servic	es				
Our Services	Overall Payroll Accuracy	99.60%	Monthly	<b>Payroll</b> 99.71%	99.75%	99.77%	99.78%		
	Payroll % Calls Handled	95%	Monthly	96.77%	97.03%	98.00%	98.23%	<del></del>	
				ecruitment					
	All Wales - % of vacancy creation to			All Wales					
Our Services	unconditional offer within 71 days		Monthly	62.70%	63.50%	59.60%	57.30%		
Our Services	Average Days Vacancy creation to unconditional offer within 71 days		Monthly	70.50	73.90	73.90	78.40		
			Recruitm	ent Respons	ibility				
Our Services	Recruitment - % of Vacancies advertised within 2 working days of receipt	98.00%	Monthly	99.7%	97.0%	97.8%	98.2%		
Our Services	Recruitment - % of conditional offer letters sent within 4 working days	98.00%	Monthly	99.2%	99.1%	99.1%	96.9%		
Our Services	Recruitment % Calls Handled	95%	Monthly	98.8%	98.9%	98.6%	99.1%	48/143	

# Summary of Key Performance Indicators – July 23

-	23/24								
KFA	KPIs	Target		April	May	June	July	Trend	
Student Awards									
Our Services	% of NHS Bursary Applications processed within 20 days	100.00%	Monthly	100.00%	100.00%	100.00%	100.00%		
Our Services	Student Awards % Calls Handled	95%	Monthly	98.11%	95.65%	96.46%	97.62%		
			Pr	imary Care					
Our Services	Primary care payments made in accordance with Statutory deadlines	100%	Monthly	100%	100%	100%	100%	• • • •	
Our Services	Prescription - keying Accuracy rates (Payment Month)	99%	Monthly	99.79%	99.73%	99.73%	99.72%		
Our Services	Urgent medical record transfers actioned within 2 working days	100%	Monthly	100%	100%	100%	100%		
Our Services	Patient assignment actioned within 24 hours of receipt of request	100%	Monthly	100%	100%	100%	100%		
Our Services	Category A Cascade alerts to be issued within 4 hours of receipt	100%	Monthly	100%	100%	100%	100%		
			L	egal & Risk					
Our Value	Savings and Successes	£65m annual target	Monthly	£22,749,462	£4,674,640	£10,736,282	£15,410,344		
Our Services	Timeliness of advice acknowledgement - within 24 hours	90%	Monthly	100%	100%	100%	100%		
Our Services	Timeliness of advice response - within 3 days or agreed timescale	90%	Monthly	100%	100%	100%	100%		
			We	lsh Risk Pool					
Our Services	Time from submission to consideration by the Learning Advisory Panel	95%	Monthly	100%	100%	100%	100%		
Our Services	Time from consideration by the Learning Advisory Panel to presentation to the Welsh Risk Pool Committee	100%	Monthly	100%	100%	100%	100%		
Our Services	Holding sufficient Learning Advisory Panel meetings	90%	Monthly	100%	100%	100%	100%		
	Tanor mesemgs		Specialis	t Estates Ser	vices				
Our Value	Professional Influence	£16m annual	Monthly	£390,824	£272,232	£172,481	£2,067,496		
Our Services	Timeliness of Advice - Initial Business Case Scrutiny	95%	Monthly	Not Applicable	100%	83%	Not Applicable		
Our Services	Issues and Complaints	0	Monthly	0	0	0	0		
				CTES					
Our Services	P1 incidents raised with the Central Team are responded to within 20	80%	Cumulative	100%	100%	100%	100%		
Our Services	BACS Service Point tickets received before 14.00 will be processed the	92%	Monthly	100%	100%	100%	100%	49/143	

# **Summary of Key Performance Indicators – July 23**

		23/24							
KFA	KPIs	Target		April	May	June	July	Trend	
Digital Workforce									
Our Services	DWS % Calls Handled	70%	Monthly	98.10%	98.40%	98.67%	89.40%		
Our Services	Customer Satisfaction	90%	Monthly	94.60%	93.90%	98.00%	80.30%		
				SMTL					
Our Services	% of incident reports sent to manufacturer within 50 days of	90%	Monthly	100%	100%	100%	100%		
Our Services	% delivery of audited reports on time (Commercial)	87%	Monthly	Not Applicable	100%	100%	100%		
Our Services	% delivery of audited reports on time (NHS)	87%	Monthly	Not Applicable	Not Applicable	100%	100%		
Our Services	% delivery of Technical assurance evaluations on time	87%	Monthly	100%	Not Applicable	Not Applicable	100%		
			Pharmacy	Technical Se	ervices				
Our Services	Service Errors	<0.5%	Monthly	2 Errors	0%	2 Errors	0%		
			Medical	Examiners Se	rvice				
Our Services	Deaths Scrutinised	60%	Monthly	100%	100%	100%	100%		
Our Services	Never Events	0	Monthly	0	0	0	0		
			All V	Vales Laundr	У				
Our Services	Orders dispatched meeting customer standing orders	85%	Monthly	Not Available	89%	93%	95%		
Our Services	Delivery's made within 2 hours of agreed deliver	85%	Monthly	Not Available	100%	100%	100%		
Our Services	Microbiological contact failure points	85%	Monthly	Not Available	100%	100%	94%		
Our Services	Inappropriate items returned to the laundry including Clinical waste items	<5	Monthly	Not Available	0	0	0		

### **Pharmacy Technical Services – Service Errors**

The April & June figures have been adjusted retrospectively to what was previously reported as 2 errors were identified in each month since reporting.

Further investigation is being undertaken with the Division to understand the delays in reporting and also the correct classification whether number of instances or percentage of service errors.

# **Procurement Services – Savings**

		/					/	
	23/24							
KFA	KPIs	Target		April	May	June	July	Trend
			Procur	ement Servi	ces			
Our Value	Procurement savings *Current Year	£8m	Cumulative	Not Available	£6,186,776	£9,807,588	£6,881,935	

### What is happening?

The All Wales in-year savings is tracking behind target achieving £6.9m against a target of £8m with BCU, CTM and PHW currently the only organisations behind target. The decrease in recognised saving from June to July was due to savings identified to have materialised in June only however, this was incorrect and has since been adjusted and phased over future months.

### What are we doing about it and when is performance expected to improve?

Savings plans and associated work programmes are under constant review. Procurement colleagues are working closely with the Health org finance and other key staff to develop and identify further savings.

# **Digital Workforce Solutions**

	23/24							
KFA	KPIs	Target		April	May	June	July	Trend
			Digit	al Workforce				
<b>Our Services</b> DW	/S % Calls Handled	70%	Monthly	98.10%	98.40%	98.67%	89.40%	
<b>Our Services</b> Cus	stomer Satisfaction	90%	Monthly	94.60%	93.90%	98.00%	80.30%	

### What is happening?

ESR Support Helpdesk merged with Learning at Wales (L@W) at the beginning July. We have experienced some teething issues which are likely to have been the reason why customer satisfaction has dropped. Further work is planned to investigate the low satisfaction score. The merging of the help desks also had an impact on the number of calls handled which increased in month and has impacted on the performance however, still achieved the target for July.

### What are we doing about it and when is performance expected to improve?

Further investigation is planned to identify that the issues experienced have been resolved for satisfaction to return above target in August.

# **Employment Services – Recruitment**

	23/24								
KFA	KPIs T	arget	April	May	June	July	Trend		
		F	Recruitment All Wales						
Our Services	All Wales - % of vacancy creation to unconditional offer within 71 days	Monthly	62.70%	63.50%	59.60%	57.30%			
Our Services	Average Days Vacancy creation to unconditional offer within 71 days	Monthly	70.50	73.90	73.90	78.40			
	Recruitment Responsibility								
Our Services	Recruitment - % of Vacancies advertised within 2 working days of 98 receipt	8.00% Monthly	99.7%	97.0%	97.8%	98.2%			

### What is happening?

The target of creation to unconditional offer within the 71 days has slightly missed the target with an average of 78 days. 57% of the records were within the 71 days target. The July position was agreed at Senior Leadership Group to be reported as a Red RAG status in line with our escalation process of a measure being on Amber for more than 3 months. The August performance has seen a slight improvement with an average of 76 days.

In broad terms the 71 days can be attributed to as follows:

Responsibility	Days	
NWSSP		14
Organisation (Approval)		10
Recruiting Manager		33
Candidate/Occ Health (These can overlap)		14
		71

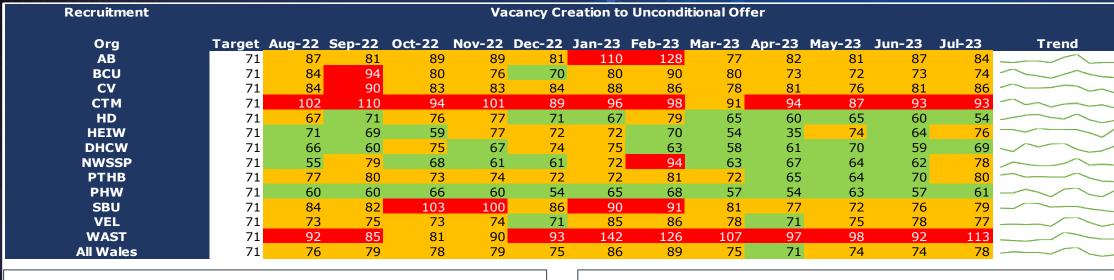
97% of records have the conditional offers sent within the target of 4 days with an average of 3.6 days.

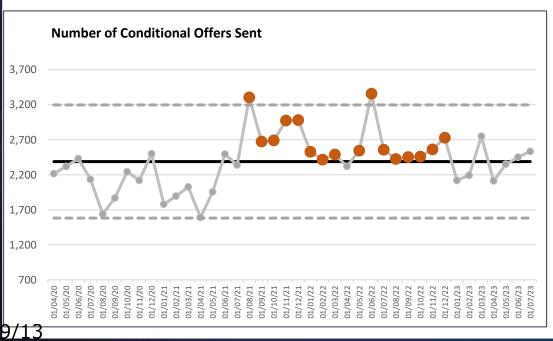
### What are we doing about it and when is performance expected to improve?

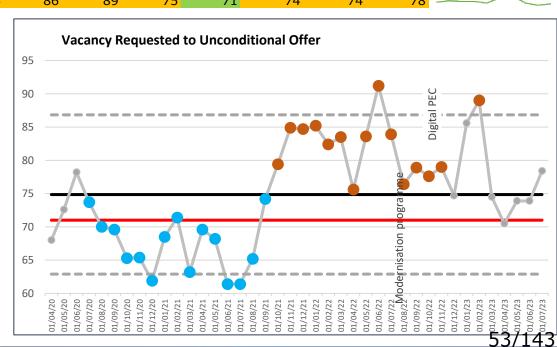
During July there was again a push on actioning outlying applicant journeys. Organisations have agreed to work with recruitment on clearing these records to enable a more accurate reporting position. This in combination with significant TRAC system issues experienced in June has impacted the overall time to hire figure and process stages. A comprehensive report setting out issues and proposed solutions has been shared with committee members.

The following slides highlight the trend of vacancy creation to unconditional offer within 71 days and the variation between health organisations. In addition the following slide highlights the number of conditional offers sent over time.

# **Employment Services – Recruitment**







# **Employment Services – Recruitment**

The Recruitment Modernisation Process changes were implemented for CTM in August 2022 and BCU in September 2022, with implementation for C&V, AB, Vel, VCC, WBS, NWSSP, DHCW and HEIW in October 2022. HD, SB, PHW, WAST and Powys went live in December 2022. The charts below show the Vacancy creation to unconditional offer for the individual organisations January – July 23.



# Professional Influence Benefits

The main financial benefits accruing from NWSSP relate to professional influence benefits derived from NWSSP working in partnership with Health Boards and Trusts. These benefits relate to savings and cost avoidance within the health organisations.

- **Legal Services** Settled Claims savings, damages and cost savings.
- Procurement Services Cost reduction, catalogue management etc. (Heads of Procurement discuss with Director of Finance of Health Orgs)
- Specialist Estates Services Property
  management/lease/rates negotiated reductions and
  Build for Wales framework savings.
- Counter Fraud Services Financial Recoveries.
- Accounts Payable statement reconciliation, priority supplier programme and the prevention of duplicate payments.

The indicative financial benefits across NHS Wales arising in the period April – July 2023 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services	2.9
Procurement Services	6.9
Legal & Risk Services	53.6
Accounts Payable	2.1
Counter Fraud Services*	0.3
Total	65.7

\* Counter Fraud benefits are reported quarterly

## **NHS Wales Performance Framework 2023-24**

To support the performance measures, NHS organisations will also be required to complete Policy Assurance Assessments. These assessments provide further assurance on some of the Ministerial priorities and key Welsh Government strategies and pathways that cannot be monitored via traditional quantitative measurement. The assurance assessments NWSSP are required to complete are as follows and the reporting frequency is a mix between bi-annual and annual. The feedback received from WG will be shared in future reports to the committee.

Quadruple Aim Theme	Policy Assurance Assessment
Effective Services	<ul> <li>k. Qualitative report detailing evidence of NHS Wales advancing its understanding and role within the Foundational Economy via the delivery of the Foundational Economy in Health and Social Services Programme</li> <li>l. Report detailing evidence of NHS Wales embedding Value Based Health and Care within organisational strategic plans and decision-making processes</li> </ul>
Efficient Services	n. Qualitative report detailing progress against the health boards' plans to reduce pathways of care delays  n. Qualitative report detailing the progress of NHS Wales' contribution to decarbonisation as outlined in the organisation's plan
People Centred Care	o. Qualitative report detailing progress against the priority areas to improve the lives of people with learning disabilities

People in Wales have improved health and well-being with better prevention and self-management

People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement

A Healthier Wales Quadruple Aim

The health and social care workforce in Wales is motivated and sustainable

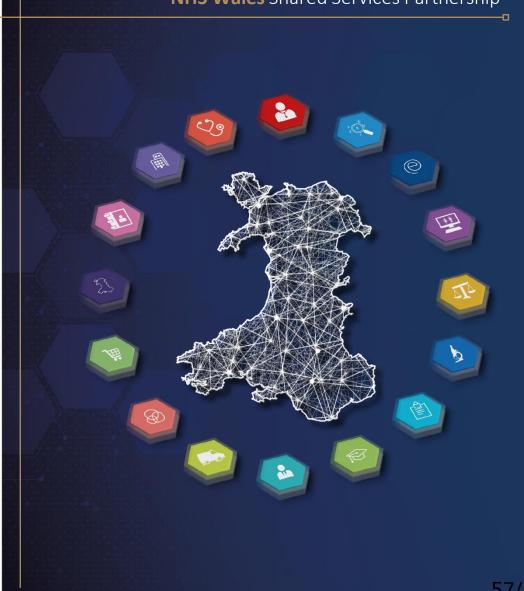
Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes

### **NHS Wales** Shared Services Partnership

# ─ Summary

The Shared Services Partnership Committee is requested to **NOTE**:

- The significant level of professional influence benefits generated by NWSSP to 31st July 2023.
- The performance against the high-level key performance indicators to 31st July 2023.
- The requirement for NWSSP to complete Policy Assurance Assessments and report to WG.





### The report is not Exempt

### Teitl yr Adroddiad/Title of Report

### **Project Management Office Update Report**

ARWEINYDD:	Alison Ramsey, Director of Planning, Performance, and Informatics
LEAD:	
AWDUR:	Ian Rose, Head of Project Management Office & Service Improvement
<b>AUTHOR:</b>	
SWYDDOG	Ian Rose, Head of Project Management Office & Service Improvement
ADRODD:	
REPORTING	
OFFICER:	

### Pwrpas yr Adroddiad:

### **Purpose of the Report:**

The purpose of this report is to provide the Shared Services Partnership Committee with an update on progress with key projects.

# Llywodraethu/Governance

AII	IICc	11119	JII:
OŁ	ie	ctiv	es:

**Value for Money -** To develop a highly efficient and effective shared service organisation which delivers real

terms savings and service quality benefits to its customers.

**Excellence** - To develop an organisation that delivers process excellence through a focus on continuous service improvement, automation and the use of technology.

**Staff** - To have an appropriately skilled, productive, engaged and healthy workforce.

Tystiolaeth:
Supporting
evidence:

NWSSP IMTP 2022-25 approved by SSPC in Jan-22.

### Ymgynghoriad/Consultation:

Senior Leadership Group

Adduned y Pwyllgor/Committee Resolution (insert √):								
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	<b>√</b>	
Argymhelliad/ The Committee is asked to NOTE the progress with key projects.  Recommendation								

Crynodeb Dadansod	Idiad Effaith:						
Summary Impact A	Summary Impact Analysis:						
Cydraddoldeb ac	No direct Impact						
amrywiaeth:							
Equality and							
diversity:							
yfreithiol:	Compliance with procurement regulations where applicable						
Legal:							
Iechyd	No direct Impact						
Poblogaeth:							
<b>Population Health:</b>							
Ansawdd,	No direct Impact						
Diogelwch a							
Profiad y Claf:							
Quality, Safety &							
Patient							
<b>Experience:</b>							

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Ariannol:	Compliance with financial instructions and processes where applicable
Financial:	
Risg a Aswiriant:	
Risk and	
Assurance:	
Safonnau Iechyd a	No direct Impact
Gofal:	
Health & Care	
Standards:	
Gweithlu:	Capacity constraints are highlighted against each project where applicable
Workforce:	
Deddf Rhyddid	Open
Gwybodaeth/	
FOIA	

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# GIG Cymru Partneriaeth Cydwasnaethau NHS Wales Shared Services Partnership PMO Report

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### NWSSP PMO Monthly Update - 05 September 2023 Prepared by Ian Rose

### **Monthly Summary**

The PMO is currently supporting 'number of projects' of varying size, complexity, and providing a range of support from different points within the project lifecycle.

Projects 23
Programmes 2
SI Initiatives 3

The schemes have different SRO/Project Executive Leads across a number of NWSSP directorates and Health boards.

Also, within the schemes the breakdown of Project scheme size and coverage ranges from:

- 52% (12 Schemes) All Wales Typically where the scheme covers multiple health boards, and the schemes seek to implement products utilised on a multi health board or all Wales basis
- 48% (11 Schemes) NWSSP Typically serving internal purpose for one or more NWSSP Divisions

A number of initiatives are in the pipeline for onboarding which will increase the number of ongoing supported activities.

There are specific Programme Board or Steering Group arrangements in place for Laundry, TRAMs and Agile estates, that involve PMs from the PMO but performance is reported separately.

### **SSPC Recommendation**

SSPC are requested to note the contents of this report

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# **Key Trend information and Initiative Overview**

### Initiatives – 23

Scheme Scale	Scheme Scale									
All Wales	SRO	Previous RAG	Current RAG	SIZE	Start Date	Original Completion	Revised Completion	% Completion		
Single Lead Employer Phase 3	Ruth Alcolado	Green	Green	Medium	01/06/2021	11/05/2023	30/09/2023	100%		
Demographic Transformation	Ceri Evans	Green	Green	Large	21/06/2021	31/07/2023	31/07/2024	66%		
Procurement and Implementation of Wales Healthcare Student Hub	Darren Rees	Green	Green	Large	25/11/2019	01/08/2023	01/10/2023	92%		
Medical Examiner	Neil Frow	Green	Green	Medium	31/03/2021	31/10/2023	31/10/2023	95%		
Occupational Health Checks	Rebecca Jarvis	Green	Green	Large	15/11/2021	30/11/2023	N/A	90%		
GS1 Coding Locations	Andy Smallwood	Green	Green	Large	24/08/2022	30/11/2023	N/A	25%		
Expansion of Legal Services to Primary Care	Daniela Mahapatra	Green	Green	Medium	02/02/2023	29/03/2024	N/A	88%		
EPS Reimbursement claims	Andrew Evans	Green	Green	Large	01/10/2022	31/03/2024	N/A	60%		
Primary Care Intelligence System (Including Reporting and Performers List)	Andrew Evans	Green	Green	Medium	13/04/2021	30/06/2024	30/06/2024	68%		
Wales General Ophthalmic Service - Primary Care Contract Reform	Nicola Phillips	Red	Red	LargeXOrg	04/09/2023	30/09/2024	N/A	15%		
Decarbonisation Programme	Stuart Douglas	Amber	Amber	Large	01/04/2022	31/03/2030	N/A	65%		
TRAMS Programme	Neil Frow	Red	Red	LargeXOrg	01/04/2021	31/03/2031	N/A	10%		

NWSSP	SRO	Previous RAG	Current RAG	SIZE	Start Date	Original Completion	Revised Completion	% Completion
Mobile Phones	Mark Roscrow	Green	Green	Small	19/12/2022	30/05/2023	29/09/2023	80%
CAF Remediation	Neil Jenkins	Green	Green	Medium	03/05/2022	31/05/2023	30/09/2023	90%
Medicine Value Unit	Alex Curley	Green	Green	Medium	01/10/2022	30/06/2023	30/09/2023	90%
Patient Medical Records and (Scanning) Service Accommodation Review	Scott Lavender	Red	Red	Large	16/08/2021	31/08/2023	30/08/2024	25%
Low Vision Services Wales	Nicola Phillips	Green	Green	Medium	26/01/2023	31/08/2023	31/09/2023	58%
Customer Contact Centre - Telephony and Contact Centre Solution	Andrew Evans	Green	Green	LargeXOrg	01/06/2021	31/10/2023	31/10/2023	65%
National Stocked Product Range (NSPR) Catalogue Management Project	Sara Taylor	Green	Green	Medium	03/04/2023	31/05/2024	N/A	50%
NWSSP Job Description Modernisation	James Green Abigail Sheppard	Green	Green	Medium	03/07/2023	28/06/2024	N/A	0%
Data Management	Neil Jenkins	Amber	Amber	Large	04/04/2022	30/09/2024	13/09/2024	54%
L&R Case Management System implementation phase	Mark Harris	Green	Green	LargeXOrg	01/09/2020	31/03/2025	31/03/2025	22%
Companies House to Cathays Park	Neil Frow	Green	Green	Medium	01/04/2023	31/03/2024	N/A	30%

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# **Service Improvement Key Trend information and Initiative Overview**

## Initiatives – 3

Scheme Scale							
NWSSP	Sponsor	Previous RAG	Current RAG	DMAIC Stage	Start Date	Original Completion	Revised Completion
Accounts Payable Process	Andrew Butler	Green	Green	Define	22/06/2023	22/09/2023	N/A
Customer Service Excellence	Neil Frow	Green	Green	Single Work Package	26/10/2022	31/10/2023	N/A
Payroll Overpayments	Neil Frow	Green	Blue	Closed	10/04/2023	31/05/2023	N/A

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**Key Individual Project/Programme Updates Project Name Project Manager Project Exec/SRO Patient Medical Records and** Rachel Pember Scott Lavender (Scanning) Service **Accommodation Review** 

Monthly Update (key/issues (blockages)/risks)

Red (Overall) Red (Time) Amber (Cost) **Red** (Quality) <u>Status</u>

**Recent Gateway Review?** No

### **Objective**

The responsibility of the Medical Records Accommodation review Group is to find suitable alternative accommodation for all staff, equipment and medical records currently residing in Brecon House. The scope has been expanded to include the relocation of the Document Scanning Team and equipment based in Companies House.

### **Background**

An initial business case sought funding to secure additional space to expand the Patient Medical Record (PMR) Service to GP Practices across NHS Wales. The business case was submitted and approved by NWSSP Senior Leadership Group in Aug-22 and subsequently Velindre Trust Board. As the investment was to purchase a capital asset, the business case was submitted to Welsh Government for ratification. Welsh Government responded requesting additional information on the fire suppression requirement for the new building. Whilst a report was obtained, a critical issue arose.

The business case was prepared on the basis that Primary Care Services (PCS) would be able to extend the lease of Brecon House, Mamhilad Park Estate. Since then, it was discovered that the building contains Reinforced Autoclaved Aerated Concrete (RAAC) Panels in the roofing Structure. The landlord initiated a monitoring and remedial works program for the RAAC panels but failed to provide a plan, risk assessment or work schedule. Some interventions, such as steel fixings and nettings, have been implemented but only cover a small portion of the necessary actions. As a result, the requirement for an exit strategy and plan to remove items from the affected areas of Brecon House is now crucial and a refresh version of the Business Case was submitted in Apr-23.

In addition, the PCS Document Scanning team (DST) is currently split over two sites: Companies House and Cwmbran House, Mamhilad Estate, Pontypool. Following a review of NWSSP Estates strategy and the decision taken not to renew the Companies House lease, relocation to the CP2 building is not a suitable option for the Document Scanning service and it is prudent to consider merging the Document Scanning team onto one, although other options are being explored.

### **Progress Update**

The revised business case submitted in Apr-23 has been considered but rejected in its current form due to the need for additional funding. An alternative solution has been identified. The costs associated with the revised proposal have been documented in an addendum to the Business Case which will be submitted to Velindre Board in Sept-23 for ratification.

### Main Issues, Risks & Blockers

With the current RAAC issues there are measures in place for the warehouse space within Brecon House to be monitored regularly with any new or worsening areas of damage to be reported via Datix. The landlord, Johnsey's, have appointed contractors to repair current damage and any new damage that may occur.

As an interim measure, it has been agreed that the lease for Brecon House will be renewed to allow sufficient time for records and staff to be relocated but this will be undertaken on a short-term basis with a 3-month break clause that can only be activated by PCS.

The temporary additional storage area, Unit C2, on the Mamhilad Estate leased from 01 June 2022, initially for 12 months has been extended on a rolling 1 month basis to ensure continuity of service.

To mitigate the risk of damage to medical records, PCS have started the process of moving medical records from Brecon House to existing NWSSP sites as a short-term interim measure.

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<b>Project Name</b>	Project Ma	Project Manager		Project Exec/SRO	
TRAMS Programme			Neil Frow		
Monthly Update (key	//issues (blockages)/	risks)			
<u>Status</u>	Red (Overall)	Amber (Time)	Red (Cost)	<b>Green</b> (Quality)	
Recent Gateway Rev	<u>riew?</u> No				
Objective					

To create a leading Medicines Preparation Service, serving patients across Wales, in a way that is safe, high quality, equitable, sustainable and economically efficient.

### **Progress Update**

- Discussions are ongoing with the owners of potential sites in South East Wales.
- Two potentially compliant options are currently being actively costed for an investment decision, while IP5 also remains on the shortlist, subject to resolving open issues related to the roof and power.
- We are closely engaged with the Welsh Government investor to ensure that proposals under development are considered potentially affordable, and fee expenditure on developing the case is aligned with investor expectations.
- Programme Board in June 2023 approved a revised contracting approach in which the NHS will contract directly with the clean room supplier, and the NHS will procure the movable equipment directly.
- Provisional locality selections for South West and North regions have been made by representative scoring panels. The South West selection has been endorsed by Programme Board. The North selection is being reviewed, in the context of emergent changes to the clinical Nuclear Medicine service in BCUHB. The programme has opened an interface with BCUHB to remain sighted on this issue.
- Space has been secured for the TRAMS Quality Control Lab and office space in IP5.
- It is likely that this space will be utilised in the short term to generate early benefits for the service by consolidating outsourced product ordering and distribution to a single location, reducing duplication and relieving pressure on frontline pharmacy departments, and piloting medicines distribution from a hub location to hospitals and clinics.
- The TRAMS Digital Project, to procure and deploy a workflow and stock management application, continues. A Prioritised Requirements List and Conceptual Data Map have been produced. DHCW have now indicated that they will support this service and scoping sessions are being arranged. The NWSSP Chief Digital Officer is sighted.
- Organisational Change Project 1 (OCP1) is now concluded, with 7 staff seconded into their new senior roles on a 1 day per week basis by 1 Sept 2023. Care will be taken not to destabilise the front line service. The actual TUPE transfer will take place only when they move to NWSSP full time. Planning of OCP2 (for around 230 staff) is ongoing, working in partnership with unions and Health Board and Trust workforce colleagues.
- Education and Training Project is successfully delivering new science-based qualifications to the service, in partnership with HEIW, with significant recurring funding for courses and posts being secured for a variety of roles.
- The Clinical Reference Group has been convened with the assistance of the NWSSP Medical Director and meets quarterly, to ensure alignment with ePrescribing and clinical product and protocol standardisation initiatives.
- Finance Subgroup of Health Board and Trust representatives is meeting monthly to work on detailed identification of the revenue budgets that support the existing services and validating capital cost option estimates.
- Engagement with UK peer projects on standardising the product catalogue and commissioning product stability studies is ongoing.

### Main Issues, Risks & Blockers

- Confirming suitable sites that meet both the very demanding needs of the service, and the strategic context of the funding stakeholder.
- Affordability of the Programme as a whole, and availability of investment capital especially in the near years.
- Current staffing pressures throughout the service threaten the ability of Health Boards and Trusts to release staff time to the extent needed to achieve the transformational change. Some Health Boards are known to be revising staffing budgets downward in direct response to unfilled vacancies.

Based on current position, the programme is rated "Red".

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<b>Project Name</b>	Project Man	Project Manager			
Wales General ( Service (WGOS Care Contract R	) - Primary	Abigail Shackson, Bethan Rees		Nicola Phillips	
Monthly Update	e (key/issues (blockages)/ri	sks)			
<u>Status</u>	Red (Overall)	Red (Time)	Green (Cost)	Red (Quality)	
Recent Gateway	y Review? No				

### **Objective**

The project objectives are:

- Fulfil "A Future Approach" aspirations for NHS Wales Eye Health Care through the introduction of
  - Contract reform
  - Provision of additional clinical eye services in Primary Care
- Develop measurable improvements to patients.
- Ensure the evolution of service is a viable, seamless, and positive experience for all parties.

### **Progress Update**

- 1. **PMO** Project Management support has been assigned to this project following a request for support from Primary Care Services, NWSSP. Project documentation is in the process of being developed whilst the project is in delivery. During development of the project plan, the project has switched focus from implementing service improvement elements of the project to focusing solely on the mandatory requirements in order to comply with legislation coming into force on 21 October 2023. The project plan for post October is currently being updated for the next twelve months.
- 2. **Clinical Workstream** The manual for minimum standards of practice in Wales (equivalent to current Eye Health Care Examination Wales (EHEW )accreditation) was approved by the WGOS Implementation Board on 14 August 2023. The final draft is in the process of being updated prior to launch to the profession.
- 3. **Training Modules** Six online training modules have been developed by HEIW and will be available to the profession from the first week of September. All Optometrists in Wales have six weeks in which to complete the mandatory training prior to the legislation coming into force in October.

### Main Issues, Risks & Blockers

### **Risks**

- 1. There is a risk of limited capacity for Clinical Leads. Therefore, this may delay project delivery. To mitigate this risk the team will utilise time effectively and work according to the project plan.
- 2. Estimated project time frames are tight, and there is a risk that the project will not be delivered on time. To mitigate this risk the team will plan milestones and tasks effectively to maximise time. Focus on the mandatory elements of the implementation and move resources accordingly.
- 3. Risk of service not complying with regulations, as project team will not see the full regulations until legislation is laid in September. To mitigate this risk the team will request guidance from Welsh Government to ensure service complies with legislative requirements.
- 4. Risk to project delivery due to limited capacity of Contracts Team to support delivery of legislation in three-week window. To mitigate this risk the team will ensure all staff are available for the three-week window once regulations are laid and have all the information required on time to support this element of project delivery.
  - A high level of risk exists due to a number of uncertainties which remain until Welsh Government share the draft legislations. This would potentially impact business process and funding but will be clearer once all required information has been shared.

### No Issues exist at present.

<b>Project Name</b>	Project Manage	Project Manager P		Project Exec/SRO	
<b>Data Management</b>	Alison Lewis	Alison Lewis		Neil Jenkins	
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u> Ambe	(Overall)	Amber (Time)	Green (Cost)	Green (Quality)	
Recent Gateway Review?	Yes				

### **Objective**

The main project objective is to create solutions that enable data driven service development and performance management and consistent views of Primary Care Services (PCS) data which is accessible through streamlined channels.

This will be achieved by the following project objectives in the discovery phase which will inform the next phases of the project.

### To catalogue: -

- Existing delivery mechanisms and solutions.
- Current arrangements for the supply of regular reports.

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### To review: -

- Data request / response processes including Information Governance (IG) review processes.
- Existing technical infrastructure

### To identify: -

- Opportunities to streamline request / response processes including IG review processes.
- Duplication / inconsistency in the provision of regular reporting.
- Opportunities to drive Statistical Process Control and performance management using existing data sets.
- Opportunities to add value to data provision through the application of domain knowledge.
- Recurring themes in existing data provision and opportunities to consolidate information delivery around these themes.
- Stakeholder groups that have requirements beyond existing information provision
- Inconsistencies in existing data models.
- Potential "quick wins"

### **Progress Update**

Project currently on hold until resources are secured within Primary Care Services (PCS) to proceed with the next phase of the project with no impact on stakeholders.

PCS have reviewed the resource requirements to support the delivery of next phases of the project and have appointed the Business Information role along with two data analysis posts.

A meeting has been scheduled on 11 September 2023 with project representatives to discuss next steps now resource is in place. Once the project resumes the project structure will also be reviewed.

### Main Issues, Risks & Blockers

Project paused until additional specific resource was sourced within PCS. Once resolved, project objectives and plan to be reviewed and updated as appropriate. No impact exists for stakeholders as a result of the pause.

<b>Project Name</b>	Project Mar	ager	Project Exec/SRO			
<b>Decarbonisation</b>	Programme Paul Thomas	, Sarah Ferrier, Claire Powell	Stuart Douglas			
Monthly Update (key/issues (blockages)/risks)						
<u>Status</u>	Amber (Overall)	Amber (Time)	Amber (Cost)	Green (Quality)		
Recent Gateway Review? No						

### **Objective**

The NHS Wales Decarbonisation Strategic Delivery Plan, (Strategic Plan) published in Mar-21, sets out 46 initiatives and targets which will contribute to reducing our impact on the Global Health Emergency. The plan and progress against the plan will be reviewed in 2025 and 2030 alongside the overall carbon reduction targets for these periods (16% reduction by 2025 and 34% reduction by 2030). The Programme is structured into six main activity streams: Carbon Management, Buildings Estates and Planning, Transport, Procurement, Land Use, and Approach to Healthcare.

NWSSP has an essential role at both a national and local level in supporting the delivery of the Strategic Plan. At a local level the programme coordinates the delivery of the actions in the NWSSP Decarbonisation Action Plan, and the NWSSP led national initiatives. The Decarbonisation Programme Board oversee the implementation and progress of these initiatives.

Nationally, the Programme Team act as the Decarbonisation Coordination Reporting Team; and are the formal interface between Welsh Government and all NHS Wales on decarbonisation reporting.

### Progress Update

### **Progress update**

NWSSP Decarbonisation Action Plan Update

- The Quarter 1 reporting shows the NWSSP Decarbonisation Action Plan objectives as 65% completed. (Compared with 33% for Q4).
- Q1 NWSSP progress data has been submitted to the Decarbonisation Coordination Reporting Team, and will be collated into a Highlight Report and Dashboard, along with the rest of NHS Wales for submission to the Health and Social Care Climate Emergency Project and Programme Boards in Oct-23.
- NWSSP reported Quarter 4 data for delivery of the Transport and Procurement initiatives in the Strategic Plan in Jun-23. This data was presented to the Health and Social Care Climate Emergency Programme Board on 13 July 2023. The Programme Board discussed and agreed that all initiatives where the date had passed should have a red RAG Status and include a Confidence in Delivery status. NWSSP have reflected this in future reporting.
- The NWSSP led Transport Task and Finish group, established to target completion of Initiative 17 regarding Electric
   Vehicles, have commented on the draft all Wales Guidance document. The guidance is intended to be signed off in the

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meeting on the 07 September 2023. The group will now discuss facilitating and monitoring Health Boards and Trusts developing their individual approach for EV charging infrastructure.

### All Wales Reporting: Decarbonisation Coordination Reporting Role

- The Decarbonisation Coordination Reporting Team, launched in Mar-23, are working closely with the Health and Social Care Climate Emergency Programme in Welsh Government to deliver all Wales reporting on the Strategic Plan.
- The Team has issued an FAQs and is continuing to engage directly with each of the 13 organisations to facilitate delivery.
- The Q4 Transport and Procurement Workstream all Wales data was collated into a Highlight Report and Dashboard and
  presented to the Health and Social Care Climate Emergency Transport Project and Programme Board in Jul-23. It was well
  received with positive comments, and approval was given to proceed to the next round of quarterly reporting. Direction
  was given by the Programme Board to ensure all initiatives with a date in the past should be red RAG Status with an
  accompanying Confidence in Delivery status.
- Q1 data for all workstreams has been requested from all NHS Wales organisations for submission 31 August 2023. However, several time extensions have been requested due to internal governance sign-off, and other reporting demands. This will not effect the team's ability to meet the Welsh Government reporting deadlines.

### Recruitment

The position of Principal Environmental Facilities Advisor and Decarbonisation Subject Matter Expert remains vacant. Work is continuing to recruit to this post.

### Main Issues, Risks & Blockers

### **Main Risks and Issues & Blockers**

### **NWSSP** Decarbonisation Action Plan

### Main Risks:

- If NHS Wales stakeholders do not engage, NWSSP led initiatives will not be delivered, and carbon emission targets will not be met.
- If financial resources for decarbonisation are not available, NWSSP will not be able to deliver its own, and the initiatives it is leading, and carbon emission targets will not be met.

### Main Issues:

• Due to the delay in recruitment, the Programme start was delayed.

### All Wales Reporting: Decarbonisation Coordination Reporting Role

### Main Risks:

- If dedicated resource in NHS Wales Organisations to monitor and support the delivery of initiatives is not in place, then actions will not have a timely start, be delivered appropriately, and therefore carbon emission targets will not be met.
- NHS Wales Stakeholders not engaging with reporting, and therefore not able to demonstrate delivery against the initiatives.
- Capital funding pressures are limiting available funds to support schemes. If financial resources for decarbonisation are not available to address initiatives, carbon emissions targets will not be met.
- If by 2030 the NHS Wales estate does not meet agreed carbon emission targets, there is a reputational risk for NHS Wales and Welsh Ministers.

### Main Issues:

- Limited specialist resource available within NHS Wales more generally, and in the private sector (decarbonisation) consultancy market.
- Reporting burden for NHS Wales Organisations is high and is a barrier to completing the reporting process.
- Inconsistency in NHS Wales Organisations delivery and reporting methods is affecting the ability to deliver consistent all Wales reporting process.

<b>Project Name</b>	Project Mana	ager	Project Exec/SRO		
<b>Medical Examine</b>	r Bethan Rees	Bethan Rees Neil Frow			
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	

### **Recent Gateway Review?** No

### **Objective**

To create a Medical Examiner Service model for Wales that:

- Is fit for purpose.
- o Complies with standards set by the National Medical Examiner.
- o Is sustainable and resilient.
- o Represents value for money for NHS Wales.
- $_{\circ}$   $\,$  Meets the requirements of the Coroners & Justice Act 2009.
- $_{\circ}$  Provides independence.

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### **Progress Update**

The implementation plan has been developed and approved by the Programme Board to meet full capacity of scrutiny of deaths from Apr-23. The plan includes recruitment of additional Medical Examiners & Medical Examiner Officers to meet the additional capacity required. The recruitment process is currently underway and new staff should be in place over the next few months.

### Main Issues, Risks & Blockers

The main risks are:

The inability to retain staff could jeopardise service continuity.

1. The legislation has been delayed until Autumn 2023, therefore this could impact upon the service and could extend the Implementation phase further.

No issues and blockers have been observed.

<b>Project Name</b>	Project Man	ager	Project Exec/SRO			
<b>Demographic T</b>	ransformation Gill Bailey		Ceri Evans			
Monthly Update	Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)		
Recent Gateway Review? No						

### **Objective**

The existing National Health Application and Infrastructure Services (NHAIS) system is a business-critical system used across NHS England and Wales to manage patients' registrations for primary care, contractor payments including General Medical Services (GMS) practitioners and to deliver screening services. The existing NHAIS and Open Exeter non-core functionality will need to be replaced.

Implementation of replacement functionality such as:

- Use of Welsh Demographic Service provided by Digital Health & Care Wales (DHCW) complete.
- Implement replacement NHAIS local hardware hosting (legacy infrastructure) to ensure continuity of service up to and during transition complete.
- Implementation of alternative data extract provided by DHCW.
- Implementation of in-house application known as 'Notify' that monitors the movement of medical records.
- Implementation of Primary Care Registration Management System (PCRM) provided by NHS England (previously NHS Digital).
- De-commission NHAIS local boxes.

### Progress Update

To note the transition to PCRM is dependent upon the implementation of Cervical Screening Management System (CSMS) in England due to be launched in Nov-23. NHS England (NHSE) have indicated a two-month slippage with a revised date to be confirmed during Quarter 4. Wales is due to transition at the end of a 3-6 month roll out programme; between Mar-24 and Jul-24 however this is expected to change to reflect the reported delay.

NHS England have informed PCS that the Notice of Termination for NAHIS support has been signed-off with an amended end date of 30 June 2024 with an option to extend by two months in light of the above.

Data Feeds: A parallel run has been instigated to compare the data from the existing system (NHAIS) to the new data from the Welsh Demographic Service (WDS) managed by DHCW to ensure data quality. The analysis of the data has noted a reduction in the discrepancies and therefore a closing report has been produced and will be submitted to PCS Senior Management Team for sign off in Sept-23.

Notify: The application (App) development has been completed and released to the test environment. PCS Users have initially reviewed the App with the need for a status field/drop down identified. Some other minor fixes have also been identified by the development team. Discussions are ongoing with DHCW regarding how PCS will receive the data feed. Once these two key actions have been completed, User testing can commence.

Data Retention: A task and finish group consisting of representatives from PCS, NHSE and DHCW has been established to progress with extracting and storing the historical data. From an initial sample data set, data mapping has been completed. The next step is to determine how the data will be stored.

<u>Patient Care Registration Management System:</u> NHSE commenced pilot with Bradford Teaching Hospitals NHS Foundation Trust at the end of Jul-23. Progress is being tracked and monitored by NHSE with only minor issues identified and addressed. Two elaboration sessions organised by NHSE took place during Aug-23 with PCS Subject Matter Experts to run through some initial scenarios. Whilst no gaps were identified, it was noted that the new system does look completely different, and therefore training/management of the change will need to be supported. Two additional sessions are scheduled for Sept-23.

### Main Issues, Risks & Blockers

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As the PCRM solution has been signed off by NHS England, NHS Wales will not be given the opportunity to support the testing/development of PCRM to a level to inform Standard Operating Procedures (SOP) prior to going live. To address this risk, PCS have requested existing Standard Operating Procedure information be shared. The elaboration sessions noted above will also assist with mitigating this risk.

<b>Project Name</b>	Project Manager		Project Exec/SRO	
L&R Case Management System implementation phas	· ·			
Monthly Update (key/issues	blockages)/risks)			
<u>Status</u> Green	(Overall)	Green (Time)	Green (Cost)	Green (Quality)

Recent Gateway Review? No

#### **Objective**

The Legal & Risk Service (L&RS) current case management system is outdated and requires upgrading in tandem with an integrated document storage solution that replaces our current Commercial Off The Shelf (COTS) solution.

Following a tender process, a supplier was awarded a contract to design, create and implement a a Case Management System (CMS), document storage and sharing solution using Microsoft Dynamics 365. Because of the difficult and sensitive nature of some of the content of this document, the name of the supplier has been redacted.

The project has been reverted to Start Up in order to implement a new solution as described above.

### **Progress Update**

Due to the issue with the previously awarded supplier, the project has reverted to start-up phase.

Pre-procurement has begun with market engagement with six suppliers, in order to review what is currently on the market since the previous tender. Legal & Risks Services, Procurement and NWSSP IT have been involved in system demonstrations from said suppliers to aid the review of the tender specification for procurement and to ensure it is up to date with what is available on the market.

A review of the tender specification has commenced, working with Procurement leads, NWSSP IT and DHCW to ensure all elements of the tender specification are covered.

The project team is in the process of establishing indicative costs from each of the engaged suppliers to inform a preferred way forward.

### Main Issues, Risks & Blockers

### Risk

The contract for the current system that is in use is due to expire in Mar-25. There is a risk that the limited timeframe may not allow sufficient time to procure and implement a new system by the required date.

### **Issue**

Discussions are ongoing with current supplier to bring the outstanding contract issues to a close.

<b>Project Name</b>	Project Man	ager	Project Exec/SRO		
Single Lead Employer P	<b>Phase 3</b> Abigail Shack	son	Ruth Alcolado		
Monthly Update (key/is	Monthly Update (key/issues (blockages)/risks)				
<u>Status</u>	Green (Overall)	Amber (Time)	Green (Cost)	Green (Quality)	
Recent Gateway Review	<u>v?</u> No				

### **Objective**

Establish NWSSP as the Single Lead Employer (SLE) for all trainees within NHS Wales by adopting a phased implementation approach. Establish arrangements to manage all trainee rotations whilst employed by NWSSP under the SLE model in partnership with HEIW and the Host Education and training providers (Health Boards). To also review the current processes within the Single Lead Employer Project and highlight key areas of concern and improvement.

### **Progress Update**

The Single Lead Employer (SLE) Improvement Group has been formed. This group will review and update the SLE Improvement tracker which holds all improvements identified from the SLE Review. The SLE Improvement group is made up of individuals from across the tripartite workforce that are the responsible owners for a specific improvement from within tracker.

The SLE Business as Usual Group has also been formed and has now taken over from the SLE Project Group. This group will

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become the forum that allows discussion on SLE updates and will also allow the Improvement Group to feed in their report on the main improvements.

The SLE surveys have been created. The feedback from the surveys will be used as KPI's moving forward, and any issues recorded from the survey feedback will be processed into the improvement tracker if necessary.

The SLE Project Closing document is set to be reviewed and signed in the next SLE BAU meeting in Sept 23.

#### Main Issues, Risks & Blockers

No risks to disclose at present due to the project closing in the coming weeks.

<b>Project Name</b>	Project Mar	Project Manager			
Procurement and Implementation of Ware Healthcare Student H	ales	Bethan Rees		Darren Rees	
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	

#### Recent Gateway Review?

#### **Objective**

- To provide contract continuity in a stable and secure IT environment for the contract extension period.
- To procure a single IT solution for Student Services to:
  - o Deliver the highest quality Bursary & Streamlining Service capable of adapting to changing demand.
  - Comply with standards.
  - Enhance the student journey.
  - Provide a single IT solution that is fit for the future.

No

Comply with IT security & Welsh Government Cloud First Principles.

#### **Progress Update**

#### **Phase One - Student Awards**

• NWSSP IT are in the process of developing the plan to decommission the old Student Awards system, BOSS. The BOSS system is currently hosted by Swansea Bay UHB. and the decommissioning will help terminate the agreement between NWSSP & Swansea Bay UHB

### **Phase Two - Student Streamlining**

- The phase two SSP (Student Streamlining) build of the project has been completed and user acceptance testing carried out between May and August 23. Several issues were raised by the Project Team and rectified by the supplier, GP UK and subsequently re-tested successfully by the Project Team. End to end testing of the Student Hub from Student Awards through to Student Streamlining is scheduled for early October.
- During User Acceptance Testing, several improvements to the Hub were identified for Student Streamlining by the Project Team. The enhancements have been added to the backlog for development and will be scheduled for development during the course of the contract using contract development days.
- The IT Security Penetration Test for the Student Streamlining phase was carried out on 18 July 2023 by an external Penetration Tester, via DHCW. The test report highlighted several recommendations that have been addressed by the supplier, GP UK. Assurance that the recommendations have been fully addressed will be verified through a Vulnerability Test, run by the NWSSP IT Security Manager. The Vulnerability Test is scheduled for early September.
- The SSP phase of the Student Hub will go live for Students in January 2024, for the next cohort of Nurses, Midwives. The Student Hub will benefit the students by providing a seamless student journey from Student Bursary through to Streamlining using the same system. The Student Hub will also provide enhanced reporting for the NWSSP Student Streamlining team, saving valuable time and resources for the service.

### Main Issues, Risks & Blockers

There are currently no major risks at present.

### **Issues**

Groove - the third-party provider of the communication functionality in the solution between the service and students
failed IT security because the data centre is located outside the EU. Consequently, this facet of the solution is not
available and a workaround is currently in place until an alternative solution can be found to replace Groove. The supplier
has proposed a replacement third party product of Zen Desk, which would fit technically with the Student Hub. Internal
investigations are currently underway within NWSSP on the suitability of the use of Zen Desk in the short term until a
more permanent option can be implemented.

Project Name	Project Manager	Project Exec/SRO			
Primary Care Intelligence System (Including Reporting and Performers List)	Alison Lewis	Andrew Evans			
Monthly Update (key/issues (blockages)/risks)					

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<u>Status</u> Green (Overall) Green (Time) Green (Cost) Green (Quality)

**Recent Gateway Review?** Yes

#### **Objective**

To implement a single integrated system for the Performers List and Wales National Workforce Reporting System (WNWRS).

#### **Progress Update**

Procurement have issued the contract, which has been signed with a contract start date of the 01 August 2023.

A draft implantation plan has been agreed with the supplier.

The project initiation stage is near completion with the supplier.

Discovery/Design Phase commences 04 September 2023 with several workshops including project representatives and subject matter experts.

### Main Issues, Risks & Blockers

The revenue shortfall of £10k identified for the electronic signature software which is deemed a "must have" requirement is under review; the supplier has been asked to provide alternative suppliers to reduce the deficit cost to bring to as close to the agreed budget as these costs weren't provided at the time of obtaining funding and subsequent approval.

The Project Board have noted the requirement to obtain approval from Velindre Trust Board for the additional costs once this is confirmed by the supplier and agreed by the Project Board.

Project Name	Project Manager	Project Exec/SRO		
<b>Occupational Health Checks</b>	Rhiann Cooke	Rebecca Jarvis		
Monthly Update (key/issues (blockages)/risks)				
Status Green (	Overall) Amber (Time)	Green (Cost) Green (Quality)		

**Recent Gateway Review?** No

### **Objective**

NWSSP have the responsibility to contract and manage an Occupational Health system on behalf of:

- Aneurin Bevan University Health Board
- Betsi Cadwaladr University Health Board
- Cardiff & Vale University Health Board
- Cwm Taf Morgannwg University Health Board
- Hywel Dda University Health Board
- Swansea Bay University Health Board
- Powys Teaching Health Board
- Welsh Ambulance Service NHS Trust

The system enables Health Boards and Trusts to manage their Occupational Health records. The existing contract that expired on 30 November 2022 has been extended to 30 November 2023 to enable the implementation of the new solution.

- Development of product specification
- Procurement of replacement web-based software solution
- Implementation of procured software solution ensuring a seamless transition with full ongoing support.

### **Progress Update**

The project is in delivery phase. The following actions have been undertaken during this period to ensure the implementation of OPAS-G2, the solution/system, by Civica.

Occupational Health User and System Administration training has been completed across all 8 Health Board and Trusts. Training will be cascaded internally to fully support the Occupational Health function within each organisation.

User acceptance testing identified several issues with the configuration. Urgent issues have been raised individually with a log created and shared with Civica to ensure that all issues are captured and resolved.

Standard Operating Procedures are being developed through the established task and finish groups for each of the modules of the system, except for the Vaccination and Immunisation module. A decision was made at the All Wales Civica Implementation group to develop this later as the module was deemed as the least complex to utilise.

OPAS-G2 has been implemented within the following organisations on revised dates to those originally planned (further details in the issues section):

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- · Swansea Bay University Health Board
- Betsi Cadwaladr University Health Board
- · Cardiff and Vale University Health Board

Go Live Support sessions with Civica have been scheduled for the first 2 days of implementation and a route for support outside of this period established.

Future implementations are planned for the following dates:

Aneurin Bevan University Health Board- 20 September 2023 Cwm Taf Morgannwg University Health Board- 27 September 2023 Welsh Ambulance Service Trust-27 September 2023 Hywel Dda University Health Board- 04 October 2023 Powys Teaching Health Board- Scheduled 04 October 2023.

There will be a delay on the implementation at Powys THB.

Following the completion of the Cyber Security checklist by NWSSP Cyber Security Team, concerns were raised by PTHB that there was no Single Sign On (SS) or Multi-Factor Authentication (MFA) functionality within OPAS-G2 and as such they were unable to sign off the Information Sharing agreement needed to progress data migration from Cority to Civica. Development work is underway with Powys and DHCW with an estimated completion date of 08 September 2023, to enable final sign off of the Information Sharing Agreement. The migration of the data from Cority needs to be rescheduled from the original date. A new, potential date for implementation has been suggested by Civica- 06 November 2023. This date is dependent on the availability of a new date for the provision of the data from Cority to Civica.

The first initial HR Imports have taken place for the 3 live organisations and will continue for the remainder as and when required. Discussions are ongoing to develop a process for the Human Resources Import from ESR into OPAS-G2 including the option to utilise Robotic process automation (RPA) to undertake the migration. A manual process will be adopted until the RPA process is confirmed.

Discussions continue with the NWSSP Welsh Language Service and Civica around the availability of bi-lingual customer facing content. OPAS-G2 is not a customer facing system, however bilingual correspondence is required to be generated by the system. Ongoing discussions will outline inform the position and determine additional cost, outside of the requirement on the specification. Any changes required will be documented through a formal change request.

### Main Issues, Risks & Blockers

A number of issues have been identified over this period:

TRAC/G2 Integration - Many discussions between developers of both systems since the commencement of the contract with Civica had confirmed full integration of the systems for the pre-placement module to increase efficiency and streamline the current, manual process. As well as the 8 health boards and trusts, this integration would also cover organisations who do not have an internal Occupational Health team, therefore utilising multiple Occupational Health providers. These organisations are: DHCW, HEIW, NWSSP, Public Health Wales and Velindre. However, following a detailed discussion with NWSSP Recruitment and a subsequent request for correspondence to detail the process, it was determined that this would not be possible due to a fundamental difference in how the systems are configured. TRAC is configured around Employers and G2 is configured on Clients/Customers. Therefore, when an application is submitted to Trac, it is always associated with an Employer. Trac has configuration at the Employer level to determine the associated G2 Client/Customer. Consequently, when an applicant applies, this will be passed to the G2 system (client) that is associated with the Employer. This confirmation was hugely disappointing to the project team. Further discussions are ongoing within Civica around the possibility of developing a solution with a final decision expected at the end of September 2023. A process has been agreed with NWSSP Recruitment in the interim and a process map has been developed and shared widely with relevant organisations.

Communication - Concerns have been expressed to Civica about the responsiveness to queries and quality of changes made to configuration on an all-Wales basis. Changes had been implemented in the configuration for some organisations, omitting others. This has been mitigated by the establishment of a log to capture all queries related to both the configuration and also findings from user acceptance testing. This is shared with Civica on a regular basis and discussed at a weekly meeting with them.

Go Live - Implementation was delayed at both the first and second sites by 2 working days (SBUHB and BCUHB) due to different issues with data transferring across. Both issues have been rectified and reassurance has been provided by Civica that future implementations will not encounter the same issues.

A further risk to full implementation of OPAS-G2 is the possibility of a delay in the development needed to satisfy Powys THB around their requirement for Single Sign On/MFA functionality. Mitigation for delay is currently being explored.

<b>Project Name</b>	Project Man	ager	Project Exec/SRO		
<b>GS1</b> Coding Lo	cations Will Brown		Andy Smallwood		
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Amber (Time)	Green (Cost)	Green (Quality)	
Recent Gateway Review? No					

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### **Objective**

To support organisations and trusts across NHS Wales, to adopt GS1 standards for location identification. Facilitating the upload of Global Location Numbers (GLNs) to all physical locations within their respective estates management systems. Consequently, allowing identification of a location uniquely and unambiguously, in addition to any pre-existing identifier.

To note, there are five phases:

- Phase 1 Understand unique number of locations across NHS Wales
- Phase 2 Create a standard operating procedure for the allocation and ongoing management of GLNs
- Phase 3 Allocate GLNs to organisations in HBs IMS
- Phase 4 Implementation of GLN barcodes to unique locations
- Phase 5 100% of organisation locations have a compliant barcode label affixed

#### **Progress Update**

Meetings with the Health Board Estates leads continue in order to understand the current position of each Health Board, the specific issues, and frustrations as well as what they may require progressing further continue. The next task remains for all Health Boards to assign the GLN codes within their Estates Management systems, however only two Health Boards have completed this.

This effective engagement with Health Board Estates Leads has led to two Health Boards; Cwm Taff Morgannwg University Health Board (CTMUHB) and Betsi Cadwaladr University Health Board (BCUHB) developing a plan to integrate their GLNs onto their Estates Management Systems (EMS), although different approaches are being taken. There is still apprehension around resourcing, but a willingness to work through options. Other stakeholder meetings have re-engaged other Health Boards with more positivity towards just focusing on Phase 2&3 of the project until resourcing and funding can be acquired.

Work is ongoing to develop a Standard Operating Procedure (SOP) that can be adopted by all Health boards. The Estates lead within BCUHB has been assisting greatly on this work. This is looking into ensuring that there is an appropriate management strategy and documentation in place before a GLN is allocated. Once the SOP has been drafted it will be circulated with the other Health Boards to ensure that all are comfortable with the approach.

Discussions have also been held with stakeholders from DHCW surrounding the GLN codes and specifically the location data. There are aims to have a centralised location information database and the GLN code location information would assist greatly with this. There are potential issues as not all of the GLNs have been mapped by Health Boards and the management and upkeep of this would have to be determined, but discussions with DHCW and GS1 will continue.

### Main Issues, Risks & Blockers

The creation of Global Location Numbers (GLNs) is not progressing as well as hoped. The use of GLNs introduces a common standard of location identification across NHS Wales that would be able to be used by all NHS Systems that require a location identified. The delays are driven by lack of prioritisation within Health Organisations. The reasons are competing workloads with Facilities Departments, lack of resources and in many cases, alternatives are available, although not available for global use and each unique to its use. This part of the programme will be reviewed with Welsh Government at the next Oversight Group on 4th September.

Work to understand the costs associated with the GLN mapping and equipment costs for barcoding continues, with the goal to use this total to assist when any requests for funding for the project.

While phase one of the project is complete for most Health Boards, progressing to phases two and three has become more difficult. The limited Health Board Estates resource to support the implementation is now impacting timescales, therefore affecting the previously suggested implementation timescales. The project time status remains as Amber to reflect the current ongoing issues.

<b>Project Name</b>	<b>Project Manager</b>		Project Exec/SRO		
<b>Customer Contact Centre - Telephony and Contact Centre Solution</b>	Will Brown		Andrew Evans		
Monthly Update (key/issues (b	lockages)/risks)				
Status Green (C	Overall)	Amber (Time)	Amber (Cost)	Green (Quality)	
<b>Recent Gateway Review?</b>	No				
<u>Objective</u>					
Review and improve how our customers interact with NWSSP.					
Progress Update					

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The new telephony and contact centre contract has been awarded to the supplier 8x8. The solution will be implemented sequentially starting with DHCW, then Hywel Dda University Health Board and then NWSSP.

The project delivery activities with the supplier started on 06 July 2023. This solution integrates with Office 365 to help maximise NWSSP's existing technology. This will assist with the NWSSP's continuing move to agile working and help make the organisation more efficient through the modern technology.

The Project Team have worked closely with 8x8 and Softcat to ensure progress is maintained. This work has included network assessments and development of the Build Capture Document (BCD) that the supplier will use to build the test environment and infrastructure. The current aim of the Project Team is to create the test environment as soon as possible and have users trained on the system.

Interactive Voice Response (IVR) menus have been updated and translated to ensure Welsh language compliance. These allow NWSSP to handover the IVR routes to the new supplier to set up and test prior to the system going live. These are currently being inputted into the BCD.

### Main Issues, Risks & Blockers

Licences and equipment risk: The contract is based on paying for licences needed approach. There is a fee per licence and so the organisation must be careful with license allocation to control costs. The organisation also procured licences and equipment based on historic data which means an emergent risk has been identified which may result in an additional licence requirement may be needed and subsequent cost impact but this is being clarified. As a result the Project Team are revisiting the licence data, working with the supplier to understand full functionalities, and are currently reviewing users with the divisions to gain the full number of licences needed.

The work with 8x8 and the BCD will also assist with mitigating this risk by ensuring the test environment is built soon. Users will then be able to try out the system and see how it works which will ultimately help in determining who needs a licence or not.

Timescale risk: There has been some slippage in the project timescale due to a need to confirm full requirements, but this is not deemed to impact the overall timescale of the project. The Project Manager and team and ensuring that tasks are accomplished in time and that progress continues effectively with the supplier.

<b>Project Name</b>	Project Man	ager	Project Exec/SRO		
<b>Medicine Value Unit</b>	Peter Elliott		Alex Curley		
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	
Recent Gateway Review? No					

### **Recent Gateway Review?**

### **Objective**

To establish the Medicines Value Unit as a service hosted within NWSSP, creating innovative contracts for medicines supply incorporating Value-Based payments.

- Dedicated procurement resource within Procurement Services
- Supporting Pharmacy resource hosted within NWSSP.

Open a pipeline of work including input from clinical services within Health Boards and Trusts

### **Progress Update**

Project Board continues to meet monthly to review and control the project.

All of the Pharmacy resources have now been appointed and will be mobilised by Jun-23. Recruitment of the Procurement resources is ongoing, with mobilisation now forecast for Sep-23. Reporting lines are agreed between the NWSSP Directorates involved and these are correctly reflected in the Job Descriptions.

The project has established links with clinical commissioning bodies including The Welsh Health Specialised Services Committee (WHSSC) within Wales to seek to establish a pipeline of work proposals for the new service, with mutual Project Board memberships of key personnel.

A contract for market scoping work has been awarded off framework of a specialist consultancy company, funded by accrued pay budget from the 22/23 financial year. Milestone meeting have been held and progress is good. Both deliverables are planned for completion in Sep-23.

NWSSP Finance are being kept sighted on spending out-turns. There is the opportunity to invest underspend in further interim or permanent roles. A six-month fixed term secondment has now been agreed. This secondment will start from 1 Oct 2023.

The implementation project is expected to close in later Sep-23.

### Main Issues, Risks & Blockers

None

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<b>Project Name</b>	Project Man	ager	Project Exec/SRO		
<b>EPS Reimburse</b>	ment claims Rhiann Cooke	9	Andrew Evans		
Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	
Recent Gateway	y Review? No				

### **Objective**

Digital Health and Care Wales (DHCW) launched the Digital Medicines Transformation Portfolio to deliver a fully digital prescribing approach in all care settings in Wales. The portfolio brings together the programmes and projects to make the prescribing, dispensing and administration of medicines everywhere in Wales easier, safer, more efficient and effective, through digital. Primary Care Electronic Prescription Service (EPS) is a project focusing on implementing the electronic signing and transfer of prescriptions from GPs and non-medical prescribers to the community pharmacy or appliance dispense of a person's choice.

In England, when community pharmacies dispense medicines, EPS-compliant pharmacy systems generate Health Level 7 (HL7) claims messages which are routed via the NHS Spine to NHS Business Services Authority (NHSBSA) for reimbursement, and pharmacies also send paper prescriptions monthly to NHSBSA.

As PCS is the reimbursement agency for NHS Wales, modifications will need to be made to both NHS Spine and NWSSP system to enable the HL7 message to be re-routed to NWSSP for the reimbursement to be processed. PCS were originally tasked with providing Technical Proof of Concept (TPCO) by Mar-23, this was delayed to 22 May 2023. The commencement of TPOC has been delayed further to Jun-23 as some supplier issues were identified.

### **Progress Update**

The percentage completion above reflects both the EPS Project (main activities) and the Smartcards workstream.

The project is in delivery phase. The following actions have been undertaken during this period to facilitate Technical Proof of Concept (TPOC) and plan for national rollout. The programme timelines have changed and are currently planned for the following dates:

- End to End Testing commences- 04 September 2023
- Test in Live commences 05 October 2023
- Live in Live commences- 31 October 2023
- Live in Live completion- 18 December 2023

**Electronic Transfer of Claims (ETC)**: All 3 Band 3 staff have commenced their roles and undertaken a training programme scheduled for completion mid Sept-23.

**Hardware**: Work is nearing completion around business continuity and disaster recovery plans. A meeting has been scheduled for 11 September 2023 to assess any outstanding actions, relevant for this work package to be completed.

**Welsh Pharmacy data**: The content of the Memorandum of Understanding (MOU) between NWSSP and NHS Business Services Authority (BSA), to incorporate EPrescribing is currently subject to final review by Information Governance leads from both organisations. Meetings have been undertaken to clarify queries around the Misdirected Claims Process and Leaked Data. The MOU also covers Changes of Ownership and NHSBSA have sent through some proposed costs which will be discussed at Project Board on 06 September 2023. As reported in the media, several pharmacy closures are anticipated over the coming months (Boots and some instore Supermarket Chemists) the effect that this may have on a Wales-wide basis in terms of the project will need to be considered.

**Dispensing Tokens**: Concerns had been raised around non-compliance to The Welsh Language Standards (No. 8) Regulations 2022 that all the text on the back of the token was not bi-lingual. The back of the token has now been translated, designed, and tested. Some issues were identified, with fitting the additional text and maintaining the standard 5mm margins. Further changes have been made and copies will be produced internally by NWSSP, and testing will recommence 05 September 2023. Xerox will make the amendments agreed to the template and establish the deadline to print test (dust) copies.

**Golden Script (Authorisation process for Pharmacies to be set-up with EPS)**: This work currently awaiting further update from DHCW to progress from an NWSSP perspective. This will be addressed at a weekly testing touchpoint meeting. An initial meeting is planned for 06 September 2023.

**Assurance:** As stated above, a decision has been taken to stand down the fortnightly Assurance meeting and replace this with a weekly testing touchpoint meeting. Invatech data has been sent through, received, and tested. An issue with mis-matched claims was identified and has since been rectified. A further issue has been identified with EMIS (GP system). This was established through NWSSP testing, involving sections capturing the 'message to patient' and 'message to pharmacy' options within the claim. This functionality is available in NHSE, and a decision has been taken by the programme to proceed whilst further exploration to replicate this functionality are ongoing. A mitigation paper, detailing a low clinical risk for TPOC without this functionality has been prepared for EPS Programme Board on 21 September 2023. Work is planned for w/c 11 September to plan NWSSP resources needed for national rollout of EPS. Test in Test will be subject to final sign off by the Welsh Informatics Assurance Group (WIAG) on 25 September 2023. this is needed to progress to the 'Test in Live' stage.

**Communication Strategy:** Concerns were previously raised within the project environment regarding the sight of a communications strategy from DHCW to inform NWSSP's communication plan. Subsequently, a meeting has taken place

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between communication leads and a handbook produced by DHCW is under review (relevant sections) by NWSSP to ensure consistency in approach and information.

**Smart Cards:** Work has progressed around Smartcards processes, including internal NWSSP processes and external processes where stakeholders are engaged.

The Registration Authority Policy is due to go to Velindre Executive Management Board on 31 August 2023 and then to Quality, Safety and Performance Committee on 14 September 2023.

Work to support the initial rollout of Smartcards to the first TPOC sites is continuing, and the team are working with DHCW to ensure that NWSSP has everything in place, which will inform the future rollout plans. Currently organising the recruitment of resources and hardware to aid with the rollout.

### Main Issues, Risks & Blockers

**EPS could impact other NWSSP Processes:** There is a risk that EPS will impact business processes across NWSSP. An assessment will be conducted to understand the impact on existing processes.

<b>Project Name</b>	Project Manager		Project Exec/SRO	
<b>CAF Remediation</b>	Peter Elliott		Neil Jenkins	
Monthly Update (key/issues (blockages)/risks)				
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway R	eview? No			
<u>Objective</u>				

#### OBJECTIVE

To provide remediations to vulnerabilities identified by the organisational Cyber Assessment Framework (CAF), with a particular focus on those risks rated red in the report.

### **Progress Update**

The Project Board has been established and is meeting monthly.

Actions accomplished include:

- Creating NWSSP level workflows for Senior Leadership Group (SLG) and senior manager use during Incident Response and Disaster Recovery.
- Updating the register of System Owners and ensuring that all system owners understand their role.
- DHCW have agreed to support the inclusion of the majority of NWSSP digital assets on their WASP asset management system.
- Devising a methodology for Business Impact Assessments associated with the Service Catalogue. This will allow Service Continuity and Disaster Recovery actions to be prioritised in the event of major incidents.
- Updating the NWSSP Portfolio Management Approach to improve the way we specify and procure digital systems. Work currently ongoing includes:
  - Supporting Divisions and Services to carry out Business Impact Assessments on the new templates. This will be ongoing for the remainder of the financial year.

Many of the issues identified by the CAF are being remediated at a national level.

We continue to align our work with the national actions, to ensure a "Once for Wales" approach is followed.

It is likely that Project Closure and handover of remaining tasks to Business As Usual will be recommended later in Sep-23.

### Main Issues, Risks & Blockers

- Risks of not mitigating our vulnerabilities are
  - o Fines as a % of turnover due to loss of data through hacking which will have financial consequences.
  - Reputational Damage to failure of service from being locked out of our IT systems by ransomware.
- Availability of skilled resource to implement the various actions is under ongoing review. In particular skilled staff time will be needed to:
  - o Manage the Service Catalogue and Business Impact Assessments on an ongoing basis
  - Support Asset Management
  - Contribute to Digital Architecture reviews associated with the procurement of systems
  - Carry out Assurance Reviews on prospective suppliers
- Recruitment and retention of skilled staff to carry out Cyber related tasks remains challenging, with two posts again being put out to advert in Jul-23.
- We have around 200 software applications in NWSSP. Assuming a 5-year lifecycle this means we should be replacing
  around 40 applications per year, nearly 1 per week. The collective resources in certain areas such as Cyber, Procurement,
  Information Governance, PMO and the in-life support services to manage these changes effectively may not currently be
  in place and need to be monitored closely, however recruitment of key roles is in progress to mitigate areas such as Cyber
  and PMO.

Project Name Project Manager Project Exec/SRO



 Mobile Phones
 Abigail Shackson
 Mark Roscrow

 Monthly Update (key/issues (blockages)/risks)

 Status
 Green (Overall)
 Green (Time)
 Green (Cost)
 Green (Quality)

 Recent Gateway Review?
 No

### **Objective**

To review and update the NWSSP Mobile Phone Policy and to establish an agreed Mobile Phone policy which will provide a compliant route that addresses the wider service need (mindful of the All-Wales nature of the organisation) and maximises the flexibility required and to deliver value for money.

### **Progress Update**

**NWSSP Mobile Phone Policy** - The policy has been agreed, however, we are awaiting the completion of the appendix to the process.

**Crown Commercial Services (CCS) Aggregation** - The ratification document has been reviewed and approved from each participating organisation which include NWSSP, Velindre, Hywel Dda and Swansea Bay. The team are currently awaiting final approval from the NWSSP Director before signing the call-off contract and beginning the transition process. BT are being kept informed with status updates and are prepared to commence the transition once final approvals are back and the contract is signed.

**HCS/ MDM**- Meetings are being held between BT/EE and Health Courier Services (HCS) to discuss the possibility of BT/EE providing a similar or improved Mobile Device Management (MDM) service. BT have advised that they may not be able to replicate HCS's MDM service but have taken away a list of main requirements to see if they have a solution. BT are confident they can help and may even come in cheaper than the Vodaphone MDM HCS currently use.

### Main Issues, Risks & Blockers

- Health Courier Services require a similar or improve Mobile Device Management (MDM) service from the winning
  Aggregation providers BT. If this is unachievable, a plan B process must be put into place that would allow HCS to
  manually wipe the current MDM's whilst remaining a 24/7 service. Work is happening in the background to determine
  what this process will look like. If neither of these options are viable, HCS will not be able to aggregate to the new
  contract. This will mean HCS remain as it currently operates until aggregation can be completed later on.
- The call-off contract is awaiting signature and any delay in approval would mean aggregating at a later date, however there would be no interruption to existing arrangements in the meantime.

<b>Project Name</b>	Project Mar	Project Manager			
<b>Expansion of Le Primary Care</b>	egal Services to Gill Bailey	Gill Bailey		Daniela Mahapatra	
<b>Monthly Update</b>	(key/issues (blockages)/r	isks)			
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	

### **Recent Gateway Review?** No

### **Objective**

### Background:

In November 2019, the Solicitors Regulation Authority (SRA) introduced the Standards and Regulations (STARS) which has afforded Legal & Risk Services the opportunity to consider expanding the services they provide to primary care providers eg General Practices. This aligns to the Welsh Government Primary Care sustainability agenda by extending support to GPs for these services. This project will also complement the support already being provided by NWSSP for primary care.

### Objective:

Design and implement a new legal service providing commercial, and employment law advice to GP Practices within NHS Wales.

### **Progress Update**

Initial market research undertaken to gain a better understanding of the current legal provision available to the General Practitioners.

NWSSP Legal & Risk Senior Managers provided a presentation to a multi-disciplinary team from North Cardiff Cluster to test out ideas and appetite for the new service. The information was well received with positive feedback suggesting that the service is needed and would be used.

The project team made up of representatives from NWSSP Legal & Risk Services are in the process of designing the new service based on this initial feedback.

### Main Issues, Risks & Blockers

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### Main risk identified:

Limited appetite from GP Practices to utilise new service could result in reputational damage to NWSSP and waste of investment in resource and time. Market research and stakeholder engagement will mitigate this risk including further engagement with Directors of Primary Care by NWSSP.

Project Name	Project Man	Project Manager			
<b>Low Vision Servi</b>	ces Wales Daniel Sinder	Daniel Sinderby		Nicola Phillips	
Monthly Update (key/issues (blockages)/risks)					
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	

#### **Recent Gateway Review?**

### **Objective**

Welsh Government have requested the transfer of Low Vision Services and staff from Hywel Dda University Health to NWSSP with effect from 01 April 2023 to support NHS Wales General Ophthalmic Services (WGOS) reform.

### **Progress Update**

It was agreed in the previous Project Board meeting to consider moving the project to closure. The bulk of the work remaining on the project are residual tasks that have been identified as operational since the transfer of the Low Vision Service to NWSSP was completed and could be transferred to PCS Business as Usual.

#### **Procurement Contracts:**

It has been agreed that the Procurement work, involving the two contracts, has been moved into business as usual as the Low Vision Service Manager and Clinical Lead have regular meetings with the Procurement lead to progress the following:

- tender for the Electronic Magnifiers contract (which is soon to be released pending sign off from the Low Vision Service)
- specification development on the bigger contract that includes the Service and the Goods

### Development of IT solution:

As the RedCortex development of a new solution was stopped due to issues surrounding the funding and challenge/concerns from the wider field, it has been agreed that NWSSP will not be pursuing the extra funding to complete the development as part of the project environment.

There have however, been discussions internally to build on the current database solution that the Low Vision Service use, making enhancements so that the processes become completely digital. Investigations are underway to consider moving the current database solution from Hywel Dda University Health Board's network to NWSSP's network with NWSSP Informatics taking ownership to complete the tasks.

All documentation, logs and plans will be updated with the final position of the project, outlining exactly the tasks, issues, actions and decisions that will be transferring to business as usual before the project is formally closed.

### Main Issues, Risks & Blockers

### **Issues**

### **IT Solution:**

As the Red Cortex development of a new IT solution has been stopped, issues with the current IT solution are looking to be addressed through NWSSP Informatics as part of Business As Usual.

Project Name	Project Mar	ager	Project Exec/SRO	
National Stocked Pr Range (NSPR) Cata Management Projec	logue		Sara Taylor	
Monthly Update (ke	y/issues (blockages)/r	isks)		
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Re	<u>view?</u> Yes			

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### **Objective**

The project objective is to standardise the National Sales Vocabulary (NSV) stock coding across NHS Wales Shared Services Partnership. The NSV code is a way to identify products. There are currently inconsistent and variable NSV stock codes within NWSSP's three main warehouses as well as inconsistent units of issue, and these will be made consistent where possible.

Standardisation of stock coding across NWSSP is required due to overarching Scan4Safety programme and general efficiency improvements.

#### **Progress Update**

The project objective is to standardise the National Sales Vocabulary (NSV) stock coding across NHS Wales Shared Services Partnership. The NSV code is a way to identify products. There are currently inconsistent and variable NSV stock codes within NWSSP's three main warehouses as well as inconsistent units of issue, and these will be made consistent where possible.

Standardisation of stock coding across NWSSP is required due to overarching Scan4Safety programme and general efficiency improvements.

As part of the project progress an NSV Tracker database has been created which has allowed the team to better identify which items and products have already been completed and which are left to complete. This allows for successful management during this project stage.

From the Tracker database an effective reporting tool has been developed that will allow the Project Board to monitor progress, better estimate timescales. This reporting tool has also allowed the Board to identify which stock commodities to target next, in more of an effective, managed approach. This data is used monthly to assess progress.

The project team has been making good progress and the data has been developing further. The team will assess this data next month to identify whether average figures can be extrapolated to develop a more clearly defined timescale. This would include average number of items aligned per week, for example.

The item alignment process has also been mapped allowing stakeholders to better understand the full extent of the process each item will take, but has allowed for inefficient steps to be rectified and make more streamlined.

Project Stage: Delivery (Start Up previously)

Previous Overall Status: Green Previous Ouality/Scope Status: Green

Previous Percentage Completion: Revised to show overall project completion not just project stage completion.

Previous Time Status: Green

### Main Issues, Risks & Blockers

No risks, issues and blockers identified currently.

<b>Project Name</b>	Project Mana	Project Manager				
<b>NWSSP Job Descri</b> <b>Modernisation</b>	<b>ption</b> Rachel Pembe	r	James Green Abigail Sheppard			
Monthly Update (key/issues (blockages)/risks)						
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)		
Recent Gateway R	eview? No					

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### **Objective**

To undertake a review of all NWSSP Job Descriptions that are over 3 years old in line with Welsh Government Pay Deal 23/24 to ensure that they accurately reflect the role and to transfer the information to new Job Description format.

### **Progress Update**

- Project team established.
- Project and Communication plans are in the process of being completed.
- Job Descriptions have been streamlined into one database.
- Review of process to be undertaken to help support Divisional role out.

#### Main Issues, Risks & Blockers

No risks or issues identified at this time.

Project Name	Project Man	ager	Project Exec/SRC		
Companies House Park			Mark Roscrow		
Monthly Update (	(key/issues (blockages)/ri	sks)			
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)	
Recent Gateway	Review? No				
Objective					

The objective of the project is to move from our current workspace of Companies House levels 3 and 4 to accommodation with Welsh Government at Cathays Park site, King Edward VII Avenue CF10 3NQ.

The opportunity has arisen for NWSSP to scope, plan and complete an organisational move from Companies House to Cathays Park in the centre of Cardiff.

The move provides an affordable opportunity to utilise spare Welsh public sector space and to improve the agile working environment for staff.

### **Progress Update**

- Key information has been received from managers of staff who are moving to Cathays Park (CP2). This information included names of the staff who will require badges for CP2, the frequency of their attendance on site, any specialist equipment required, what storage arrangements are needed, what printing requirements staff have, if they have planned emergency evacuation plans (PEEP) in place and whether the member of staff if a fire marshal or first aider. This information will be used to understand what staff members require DBS checks and badges at CP2.
- Welsh Government representatives from CP2 will now be attending future project board meetings. Two representatives from the facilities team at CP2 attended the monthly project board meeting on 31-August-2023. This allowed for any questions to be answered by Welsh Government in a timely manner.
- A Tenants Handbook has been shared with the project team by Welsh Government. The handbook contains key information on CP2. A question log was created that holds questions and queries from the project team and was presented to Welsh Government in the project board meeting where all questions were then answered.
- The Public Sector Broadband Aggregation (PSBA) has now been ordered.
- Consultations held by NWSSP Workforce have concluded successfully.
- A floor plan has been produced with colour coded zones that allows for a visual representation of the new space at CP2.

### Main Issues, Risks & Blockers

- Too many people arrive on site at once resulting in some not being able to find a desk and not being able to work resulting in wasted trip, time, and cost - This has been mitigated by developing a floorplan with capacity to be flexible in the event of additional staff attending site based on current Companies House attendance rates.
- PSBA connections to the location require a back-up connection to maintain connection in the event of the PSBA not functioning which would remove access to the NHS network and prevent access to 365, and core systems and services. This is mitigated through dual connections being provided and also the use of "public" Wi-Fi within the location.
- Cardiff council will seek to introduce a congestion charge at some point in the distant future and this may mean certain modes of transport incur costs to travel into the city which could make the travel more expensive and increase expense costs to the organisation however this may also impact existing locations so not specific to Cathays Park. Use of transport links which are ideally located can help to reduce this risk.
- PSBA installation required to enable connection to the NHS network as without these connections would be difficult to maintain over a public Wi-Fi. This has been mitigated through the order of two PSBA links.
- Investment in the new location needs to meet the expectation of the new agile working strategy mindset which would encourage use of the new location or risk low attendance and lack of buy in however this needs to be managed in a

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controlled way to avoid unnecessary spending, the impact would be minimal as the location is fully furnished with available communal agile spaces already in place.

- Lack of support and buy in from staff would impact the move but robust communication plans, events and the staff consultation will seek to mitigate any identified issues.
- At risk staff could mean that a small risk is presented to staff who maybe come displaced throughout this process but this will be mitigated through the impact assessment and consultation process.
- DBS Checks will be required for staff attending Cathays Park on a regular basis and is being assessed alongside the consultation process.
- Services currently possess significant amounts of paperwork and other items that require assessment and a confirmation of disposal or movement to a new appropriate location.

### **Service Improvement Initiatives**

nitiative Name Service Improvement Lead		Service Improvement Sponsor		
<b>Customer Service Excellence</b>	Kim Eley	Neil Frow		
Monthly Update (key/issues (blockages)/risks)				
Status Green (	Overall)			

### <u>Status</u>

**Objective** 

The Service Improvement Team have been tasked to create a pathway to an organisational level Customer Service Excellence (CSE) accreditation, and then to manage that through to delivery. Initially, this will be overseen by a project board, before handing over to a newly formed CSE NWSSP Community of Practice group. The Community of Practice group will consist of representatives from all NWSSP Divisions.

#### **Progress Update**

Through July and August, and with the support of the Customer Service Excellence lead, all Divisions have been working hard to submit evidence against all 5 of the customer service standards and this has now been completed. All evidence has been uploaded onto Microsoft lists and is currently being reviewed before being migrated over to the Assessment Services' portal in readiness for the pending assessments.

Once uploaded, the Customer Service Excellence lead will then be guiding NWSSP through a pre-assessment at the end of September 2023, the results of which will be fed back to all relevant divisions and the Customer Service Excellence Community of Practice, with suggested and required improvements being made accordingly.

Following the pre-assessment, NWSSP will be taken through a full assessment in October 2023. This is 5 months earlier than we originally planned; however, good progress has allowed for the assessment to be brought forward and all parties are comfortable with this. There are additional benefits to completing the assessment in October in that it also compliments other standards or accreditations such as Duty of Quality.

Community of Practice (COP) Representatives are required to develop their divisional itineraries for October's assessment and the Customer Service Excellence lead is meeting with the COP representatives on a monthly one to one basis to provide further support.

### Main Issues, Risks & Blockers

Benchmarking against other organisations - A number of CSE elements encourage you to provide evidence to show how you measure your customer service against similar organisations. Due to the nature of a number of the divisions, this is proving difficult to identify therefore this information will be fed back to assessor to identify alternative solutions to meeting the criteria.

CSE Awards - To achieve a CSE award per element (compliance plus, compliance, partial compliance) the majority of the divisions need to show they meet the standards. The compliance awards are scored on an organisational basis instead of division specific awarding. If a division has provided evidence which meets the compliant plus award, this will be celebrated and noted in the report however will not be defined as compliance plus as this is an organisational assessment. Similarly, if one division does not meet the CSE standards, the organisation would not achieve the accreditation. A pre-assessment has been scheduled to highlight any areas requiring improvement before the full assessment (16th October - 20th October)

Initiative Name	Service Improvement Lead	Service Improvement Sponsor		
<b>Accounts Payable Proc</b>	Tim Knight, Niall Quilton	Andrew Butler		
Monthly Update (key/issues (blockages)/risks)				
<u>Status</u>	Green (Overall)			
<u>Objective</u>				

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It is the objective of this project to identify ways of streamlining the Accounts Payable invoicing process and sequentially reduce the number of invoices that are unpaid over 30 days.

In addition, a review of the "No Purchase Order No Pay" invoices being reported will be undertaken, seeking to identify ways of to reduce this figure also. It is hoped that these will reduce naturally as the project looks at the 30 days plus figure, though depending on the data and opportunities identified. An increase to the number/percentage of invoices meeting the requirements of straight through processing metric will be a good indicator of improvement.

#### **Progress Update**

Progress has been maintained working collaboratively with different stakeholders including managers, team members and service desk teams.

As part of the initiative, a number of performance baselines will be established including;

Weekly total volume of Invoices on Hold (IOH) in three categories,

- 0-23 days old
- 24-30 days old
- 30 days plus

A further performance baseline will be established around handling times which relates to how long it takes to clear a specific item. This is currently being established by the Accounts Payable teams support by the Service Improvement Team.

A combination of the two measures mentioned will allow the project to fully understand the process capacity and therefore the ability to reduce invoices on hold.

The project will seek to create a targeted clearance plan and using this data and meetings have been booked with the Project sponsor in Accounts Payable to validate and gain approval to proceed.

Once the approval to proceed has been provided we will look to set up an improvement team in Oct 23 which will operate in two capacities,

- 1. To reduce and clear the "problem" that is invoices on hold over 30 days a
- 2. Implement improvements to the process to reduce the risk of any reoccurrence.

### Main Issues, Risks & Blockers

There is a risk that this initiative will take longer than we expect as the average handling times may not be as accurate as required and the team will work with the Accounts Payable team to manage any queries or data issues should they emerge and factor these into the appropriate targeted clearance plan.

Initiative Name	Service Improvement Lead	Service Improvement Sponsor		
Payroll Overpayments	Tim Knight	Gareth Hardacre		

### Monthly Update (key/issues (blockages)/risks)

Status Blue (Overall)

### <u>Objective</u>

The objective is to review the overpayment process and its performance metrics, whilst identifying any areas for improvement and suggesting ongoing remedial actions.

We will seek to provide assurance to the Managing Director and Sponsor, Director of People & OD and Employment Services, that the right reporting mechanisms are in place, helping them to reduce inefficiency.

### **Progress Update**

The initiative has been closed and handed to back to the service for action.

Following the Define Phase, a Summary was submitted to the project sponsor in July, this contained a list of over 35 suggested improvements. This has been handed to the service to take forward and Payroll, who will now consider their next steps in relation to the reduction of overpayments and improvement of the service.

The Service Improvement Team may be brought back in at a later date if required to review progress.

### Main Issues, Risks & Blockers

None as closed.

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### NON PMO Managed Initiatives

Key Individual Project/Programme UpdatesProject NameProject ManagerProject Exec/SROOnce for Wales Concerns<br/>Management SystemMaria Stolzenberg, Judith LewisJonathan Webb

Monthly Update (key/issues (blockages)/risks)

<u>Status</u> <u>Green</u> (Overall)

Recent Gateway Review? No

#### **Objective**

Using a collaborative approach with all partners, implement, enhance and sustain an effective tool to support Health Bodies to comply with their duties in relation to concerns management and service user experience. To improve consistency and quality of concerns data throughout NHS Wales to facilitate service improvement.

### **Progress Update**

Phase 1 of the programme is fully rolled out across all Organisations. Two products, Datix Cymru and Civica Experience Wales have been procured and established. Over 30 workstreams involving collaboration between Health Bodies have been established, with some stood down when their tasks have been completed. A robust and effective governance structure, with a Chief Executive as SRO, has been put into place. A quarterly cycle for system update releases has been put into place. All Wales IG solutions including a DPIA for each functionality have been established.

Compliance with the duty of candour has been built into the system workflows. Interim solutions following the discontinuation of NRLS have been established. Phase 2 objectives are set for delivery by 31/03/23 with some risks regarding some aspects of functionality.

Phase 3 objectives are being finalised for ratification by the Programme Board for delivery by 31/03/24.

### Main Issues, Risks & Blockers

A risk and issues log is maintained by the Programme Board.

No

Operational pressures across the NHS may impact the availability of key stakeholders. Demands on Organisations is reduced as far as possible.

Some functionality may not be delivered on time by the supplier. Strategic reviews and alternative solutions are sought where possible.

There is a need to migrate to Azure for user authentication, which is currently not possible. The supplier is designing a solution to migrate users and DHCW is addressing authentication errors, which occurred previously.

Integration of Civica with local data systems is delayed in some Organisations. Standard functionality remains available.

Project Name	Project Manager		Project Exec/SRO			
ESR Transformation Programme	Rebecca Jarvis		Gareth Hardacre			
Monthly Update (key/issues (	Monthly Update (key/issues (blockages)/risks)					
Status Green (	Overall)	Green (Time)	Green (Cost)	Green (Quality)		

### <u>Objective</u>

**Recent Gateway Review?** 

Lead on the development and implementation of the Electronic Staff Record (ESR) Transformation Programme for Wales

### **Progress Update**

Work with and support the NHS Business Services Authority (NHSBSA) with the transformation programme. NHSBSA Governance programme established with Engagement and Collaboration Network consisting of key leads from NHS England and Wales.

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The procurement element has been delayed but will shortly be moving to the next stage which is Invite to Submit Initial Tender (ISIT) in July 2023. Evaluation and Moderation will take place from October for a period of 15 weeks. This will then be followed by the Proof of Concept (POC) in February 2024. Discussions have commenced to identify appropriate representation from Wales. Those involved in the SQ element have been invited to continue the procurement element.

Ongoing engagement taking place with our Regional Engagement Lead for Wales attending relevant key stakeholder meetings. New levels of Attainment (LOA) launched in June which will form part of the optimisation. These will be presented to Assistant Directors of Workforce (ADWODs) and the Optimisation group in July. Follow up meetings with organisations will take place August/September where an assessment will be taken against the LOAs and a local action plan developed.

A Wales People Portal Steering Group is currently being agreed with key stakeholders from workforce, digital and finance along with Welsh Government colleagues. Aim for first meeting in September.

### Main Issues, Risks & Blockers

Significant culture and process change

Consideration to existing processes including payroll to ensure no disruption to service

No dedicated resource to deliver the ESR Transformation programme within NWSSP or local organisations however this will be monitored via the risk register. Until we have an indication of suppliers / transition requirements, we are unable to quantify the resource requirements org readiness/proof of concept/migration 2024/2025

<b>Project Name</b>	Project Man	ager	Project Exec/SRO			
Scan 4 Safety	Andrew Smal	lwood	Andy Smallwood	Andy Smallwood		
Monthly Update (key	Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)		
Recent Gateway Rev	iew? No					

#### **Objective**

The Scan for Safety Wales Programme seeks to embed traceability into the NHS in Wales in order to improve patient safety. The combination of an All Wales inventory management system, underpinned by GS1 standards adoption will allow the data linkage of products, patients, locations, procedures and clinicians. The Inventory Management System will provide instant stock visibility, strengthening supply resilience and allow for products to be withdrawn from use swiftly should a Safety Alert be received. The same data linkage will allow Health Organisations across Wales identify patients who may need recalling for review.

### **Progress Update**

Initial Programme delays due to central server implementation and cyber resilience measures have all been addressed now and system testing with Health Boards has been completed.

The team continue the roll-out of the Inventory Management System within Health Boards with 5 organisations live and a further 4 due to begin within the next quarter.

The success with the patient link information feed from Welsh Patient Administration System (WPAS) being able to send information to Omnicell to allow products to be scanned to patients with Hywel Dda University Health Board (HDUHB) has allowed Digital Health and Care Wales (DHCW) to test its extended use to Cwm Taf Morgannwg University Health Board (CTMUHB) and Powys Teaching University Health Board (PTHUHB) and this will go live during the next quarter. DHCW have also begun work regarding BCUHB and it is currently in test. Cardiff and Vale University Health Board (C&VUHB) does not use WPAS and as such a separate feed has been developed with C&VUHB that has passed testing and will be live as C&VUHB implementation commenced during the next quarter.

### Main Issues, Risks & Blockers

The creation of Global Location Numbers (GLNs) is not progressing as well as hoped. The use of GLNs introduces a common standard of location identification across NHS Wales that would be able to be used by all NHS Systems that require a location identified. The delays are driven by lack of prioritisation within Health Organisations. The reasons are competing workloads with Facilities Departments, lack of resources and in many cases alternatives are available, although not available for global use and each unique to its use. This part of the programme will be reviewed with Welsh Government at the next Oversight Group on 4th September.

The Theatre environment in all health organisations remains highly pressured at present with staff sickness compounding preexisting staff shortages. This is being worked around with each organisation based on local pressure, but impacting the speed of rollout.

Whilst the WPAS patient feed introduced successfully for HDUHB allows patient id to be brought up on the SupplyX handset, the lack of compliant barcode for patient NHS Number results in a screen selection from a drop down menu rather that a simple scan. This is therefore not maximising efficiency and the HDUHB team are working on amending the patient identification bracelets.

<b>Project Name</b>	Project Man	ager	Project Exec/SRO			
<b>Health Roster I</b>	mplementation Vicky Harris		Rebecca Jarvis			
<b>Monthly Update</b>	Monthly Update (key/issues (blockages)/risks)					
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)		
Recent Gateway	y Review? No					

<u>Objective</u>

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To implement Health Roster across NWSSP, digitalising rostering and automating variable pay for employees aligned with all NHS Wales organisations. The system will provide quick and easy access for employees and resource efficiencies for the organisation. It provides data quality assurance and interfaces with the existing payroll system (Electronic Staff Record: ESR).

#### **Progress Update**

Now Live to payroll:

- Denbigh stores
- Bridgend stores
- IP5
- Health Courier Service (HCS) Swansea Bay, Powys and Hywel Dda
- Swansea Bay University Health Board laundry transport
- Scan for Safety North Wales
- ESR helpdesk
- BankStaff weekly pay

Data from HCS Wrexham, Betsi Cadwaladr University Health Board (BCUHB) Laundry Transport, HCS Victor Base, HCS Manager North, and HCS Tywyn has been gathered. Roster has been built. Training will commence shortly. Awaiting on confirmation of dates to travel to North Wales to provide training and go live to payroll.

BankStaff – Monthly timesheets will remain with People & OD and the Bank Team will continue to process. All new bank services will now go straight on to the BankStaff system.

Employee Online Accounts – Accounts are continuing to be created for all new employees within live rostered services. We have also created accounts for all NWSSP Bank to monitor their bank hours.

#### Next Steps:

### **Health Roster:**

- Continue consultation with outstanding areas.
- Discussions with Unit Heads of future units to agree timescales in line with the plan.
- Commence discussions and data gathering with HCS Aneurin Bevan & ABU Laundry Transport along with HCS Cwm Taf as these have been on hold due to re-structure.
- Complete data gathering for Bridgend & IP5 Stores Admin Team, build the roster and complete training.
- Commence training for HCS Wrexham, BCU Laundry Transport, HCS Victor Base, HCS Manager North and HCS Tywyn (HCS Denbigh) ahead of live to payroll.
- Create and implement an e-learning package for new and live units.
- Engagement commenced with Recruitment Services. A list of area service leads has been received to complete introduction to Health Roster rollout calls.

### Public Health Wales (PHW) project:

- ESRGo, an additional piece of software/module of ESR that automates and speeds up the transfer between ESR and Health Roster, is now activated for PHW. The first Kick Off meeting has been held with RL Datix and their implementation team to confirm the parameters to use in the build of the system.
- Introduction calls, site visits and data gathering workbooks have been completed with the three early adopters.
- Health Roster Admin workshop has been held with RL Datix.
- Unit rollout workshops are being held from Monday 18/09 for three weeks to complete roster build and training with end
  users.
- One central bank cost centre has been built by PHW.
- Business Process Analysis document has been signed off.
- Project Team is gathering intelligence on areas with enthusiasm to implement complex rotas.
- Majority of Data Privacy Impact Assessment (DPIA) has been completed. Final discussions between Information Governance and RL Datix Programme Manager to be held before sign-off by Project Board
- Ongoing updates to the communication and implementations plan.
- All project team and project board meetings set-up for the next six months

### Main Issues, Risks & Blockers

Medical Examiners are on hold indefinitely.

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AGENDA ITEM: 4.5 21 September 2023

### The report is not Exempt

#### **Teitl yr Adroddiad/Title of Report**

### **NWSSP Corporate Risk Update - September 2023**

ARWEINYDD:	Peter Stephenson		
LEAD:	Head of Finance & Business Development		
AWDUR:	Peter Stephenson		
AUTHOR:	Head of Finance & Business Development		
SWYDDOG ADRODD:	Andy Butler		
REPORTING OFFICER:	Director of Finance & Corporate Services		
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### Pwrpas yr Adroddiad: Purpose of the Report:

To provide the Partnership Committee with an update on the NHS Wales Shared Services Partnership's (NWSSP) Corporate Risk Register.

Llywodraethu	/Governance
Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement
Tystiolaeth: Supporting evidence:	

### Ymgynghoriad/Consultation:

The Senior Leadership Group (SLG) reviews the Corporate Risk Register on a monthly basis. Individual Directorates hold their own Risk Registers, which are reviewed at local directorate and quarterly review meetings.

### Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$ ):

DERBYN/ APPROVE	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	<b>✓</b>
Argymhelliad/ Recommendatio	n The Committe	e is a	sked to <b>NOTE</b>	the r	eport.	

Crynodeb Dadansoddi	Crynodeb Dadansoddiad Effaith:							
<b>Summary Impact Ana</b>	lysis:							
Cydraddoldeb ac	No direct impact							
amrywiaeth:								
Equality and								
diversity:								
Cyfreithiol:	Not applicable							
Legal:								
Iechyd Poblogaeth:	No impact							
Population Health:								
Ansawdd, Diogelwch	This report provides assurance to the Committee							
a Profiad y Claf:	that NWSSP has robust risk management processes							
Quality, Safety &	in place.							
Patient Experience:								
Ariannol:	Not applicable							
Financial:								
Risg a Aswiriant:	This report provides assurance to the Committee							
Risk and Assurance:	that NWSSP has robust risk management processes							
	in place.							
Safonnau Iechyd a	Access to the Standards can be obtained from the							
Gofal:	following link:							
Health & Care	http://www.wales.nhs.uk/sitesplus/documents/106							
Standards:	4/24729 Health%20Standards%20Framework 20							
	15 E1.pdf							
	Standard 1.1 Health Promotion, Protection							
Gweithlu:	and Improvement							
	No impact							
Workforce:	Open The information is disclosed a supply the							
Deddf Rhyddid	Open. The information is disclosable under the Freedom of Information Act 2000.							
Gwybodaeth/ Freedom of	Freedom of Information ACL 2000.							
Information								

### NWSSP CORPORATE RISK REGISTER UPDATE September 2023

#### 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	September 2023
Red Risk	8
Amber Risk	11
Yellow Risk	2
Green Risk	0
Total	21

#### 2.1 Red-rated Risks

The following red risks remain on the Corporate Risk Register:

- The role that NWSSP plays as the lead energy purchaser for the whole of NHS Wales, and the reputational risk that is associated with that role;
- The risk of having insufficient staff resource to meet demand. NWSSP have a lot of staff on bank contracts who help to deliver essential services but for whom we are unable to guarantee security of employment due to Welsh Government not confirming whether these posts beyond 2023/24;
- The contractual dispute affecting the replacement for the Legal & Risk Case Management system. While there are contingency arrangements in place to maintain services, the potential financial loss could be significant;
- The Brecon House roof at Mamhilad where there are serious issues with water ingress and falling masonry, making the building unsafe for staff;
- The adverse publicity arising from the issues discovered at BCUHB;
   and
- The threat to services if a suitable building is not found to house the TRAMs service in South-East Wales.

#### 2.2 New/Deleted Risks

The following risks (both red-rated) have been added to the Risk Register since the last meeting of the Committee:

- The potential for industrial action from Junior Doctors and the resulting impact that this may have on the Single Lead Employer team; and
- The impact of the financial climate across NHS Wales on delivering and developing existing and new services.

#### 3. RISKS FOR MONITORING

There are six risks that have reached their target score, and which are rated as follows:

Current Risk Rating	September 2023
Red Risk	0
Amber Risk	0
Yellow Risk	3
Green Risk	3
Total	6

#### 4. RECOMMENDATION

The Committee is asked to:

• **NOTE** to the Corporate Risk Register as at September 2023.

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					Cor	porat	e Ris	k Reg	ister			
Ref	Risk Summary	Inherent Risk		Risk	Existing Controls & Mitigations		Current Risk		Further Action Required	Progress	Trend since	Target & Date
			Likelihood mpact				mpact Fotal Score				last review	
						Risk	s for A	Action				
A1	Lack of storage space across NWSSP due to increased demands on space linked to COVID and specific requirements for IP5  Strategic Objective - Service Development	4	4	16	IP5 Board Additional facilities secured at Picketston	3	4	12	Lease for Du Pont 1 to be signed with Johnseys (AE 31 August 2023) Plan to reduce costs of moving to be costed and documented (AE 31 Aug 2023)	Agreement given to sign lease on Du Pont 1 and also to utilise space in IP5 and Picketston. Costs of moving are extremely high and need to find ways to reduce these - e.g. through employing staff to move boxes rather than using an external contractor.  Risk Lead: Programme Director	ã	31-aug-23
A2	Suppliers, Staff or the general public committing fraud against NWSSP.	5	3		Dedicated NWSSP LCFS Counter Fraud Service Internal Audit WAO PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	3	3	9	Produce review of 1st year activity for NWSSP LCFS (PS/MW 30 June 2023) - COMPLETE	C&V UHB have given notice to withdraw their 75 days p.a. support due to limited resource.	â	31-jul-23
A3	Risk of cyber attack exacerbated if NWSSP, or other NHS Wales organisations, run unsupported versions of software.	5	5		Cyber Security Action Plan BCP Champions Meeting Information Governance training Mandatory cyber security e-learn Internal Audit review BCP Action Cards CAF completed and report received from CRU CAF remediation project established with support from PMO. 'Exercise in a box' launch event held with SLG (face to face) on 12 May. Phishing testing has been running since February 2022 alongside proactive communications on cyber awareness. Part of All-Wales Cyber Security Network	2	5	10	Complete Impact Assessment of all major systems (Nick Lewis - 31/03/2024)	Risk Lead: Director of Finance & Corporate Services  Heightened state of alert due to war in Ukraine and targeted attacks on public sector bodies. Recent attack on Home Electronics System - although this is not hosted by NWSSP.	â	31-mar-24
A4	Strategic Objective - Service Development  The demand on services within Employment Services as a result of Health Boards taking on substantial numbers of staff to respond to and recover from the pandemic, is unsustainable, leading to sub-optimal levels of performance.	4	4	16	Established working practices governed by Service Level Agreements and measured by reporting of KPIs on monthly basis.	3	4	12	Extend Modernisation Programme to all Health Boards and Trusts (GH 31 July 2023)	Risk Lead: Director of Planning, Performance & Informatics Good progress being made with the early adopters of the Recruitment Modernisation Programme. New systems in place within Student Awards and recent internal audit review awarded substantial assurance.	â	31-jul-23
<b>A</b> 5	Strategic Objective - Customers  The level of stock that we are being asked to hold is likely to mean that some items go out-of-date before being issued for use and need to be written off causing a loss to public funds and possible reputational damage to NWSSP.	5	5	25	Internal Audit Review of Stores Stock Rotation - based on FIFO Donations to India and Namibia	2	3	6	Confirm WG required stock holding for PPE - currently 16 weeks (AB 31 Aug 2023)	Risk Lead: Director of People and OD  SMTL working with DHSC to investigate whether expiry dates can be extended on some PPE equipment Schedules produced and discussed with senior finance officials in WG and Velindre	â	31.07.2023
A6	The increase in energy prices, exacerbated by the war in Ukraine, is likely to lead to significant price increases across the whole range of goods and services resulting in severe cost pressures for NWSSP.  Strategic Objective - Value For Money	5	5	25	Energy Price Risk Management Group Forward purchase of energy Briefings to Welsh Government	2	5	10	Action switch to Crown Commercial Services following Centrica's announcement that it is withdrawing from the market (AB 30 April 2023) - complete Establish new Group structure - Welsh Energy Group and Wesh Energy Operational Group (AB 30 April 2023) - complete	Risk Lead: Director of Finance & Corporate Services  Paper on energy costs to March SSPC, where approval was given for switch to CCS and establishment of the WEG and WEOG.  Risk Lead: Director of Finance & Corporate Services	â	31.07.2023

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	The volatility in the energy market, due to the war in Ukraine, increases the reputational risk to				Energy Price Risk Management Group Forward purchase of energy				Restructure the EMRMG to establish the Welsh Energy Group and the Welsh Energy	Paper on energy costs to March SSPC, where approval was given for switch to CCS and estabishment of the		
A7	NWSSP in its role in securing energy on behalf of NHS Wales.	5	5	25	Briefings to Welsh Government	4	5	20		WEG and WEOG.	â	31.07.2023
	Strategic Objective - Value For Money									Risk Lead: Director of Finance & Corporate Services		
A8	The threat of industrial action by Junior Doctors is likely to have significant implications on workload for the SLE team and on the expectation from Health Boards to help them manage their service delivery.	4	4	16	Single Lead Employer Team	4	4	16			ä	31.07.2023
	Strategic Objective - Staff			_						Risk Lead: Director of People and OD		
А9	Adverse publicity arising from the financial irregularities at BCUHB have a reputational impact on NWSSP.  Strategic Objective - Customers	4	4	16	All requests for information are channelled through a formal Communications route,	4	4	16	Ensure consistent and strategic responses to any information request concerning this issue (SLG - 31/07/23) Review Comms resource in the light of	Number of FoI requests being received. Verbal updates to Audit Committee and SSPC (both July 23)  Risk Lead: Director of People and OD	â	31.03.2024
A10	NWSSP are unable to continue to provide business-critical services due to having insufficient numbers of staff available and able to undertake the work. This is particularly an issue with staff on bank or fixed term contracts where funding from WG is uncertain e.g. COVID-related activity and SLE.  Strategic Objective - Customers	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. IT Update also given to weekly COVID-19 Planning & Response Group.	4	5	20	increased scrutiny (AB - 31/07/23)  Confirm funding for COVID- specific temporary posts from Welsh Government - this has been confrimed for the current financial year (AB - complete)	19.3 WTE staff in Recruitment extended for a further 12 months. In terms of Supply Chain, Logistics and Transport staff, those involved on the mass vaccination programme have also been extended until March 31, 2024, as Welsh Government funding has been confirmed. Confirmation of funding beyond 30 June 2023 now received for staff employed in the provision of PPE  Risk Lead: Director of People and OD	â	31-jul-23
A11	An issue with the supplier of the replacement Legal & Risk Case Management System threatens financial loss and the delivery of the service	4	4	16	Formal project managed through PMO	4	4	16	Project Team to review alternative options (MH 31 Oct 23) Continue negotiations with original supplier for refund of monies paid (MH 31 Oct 23)	The project team has commenced a review of alternative options for the software solution for 25/26 and beyond.  Risk Lead: Director, Legal & Risk Services	â	31.07.2023
A12	Esclalated Divisional Risk  The planned development of the Clinical Pharmacy Service is adversely impacted due to financial and staffing challenges	4	4	16	CIVAS Board National QA Pharmacist	3	4	12	Discussion regarding funding and TUPE of staff from Health Boards (CP 31 July 2023).	Update to July 2023 SSPC  Risk Lead: Service Director	â	31.07.2023
A13	Esclalated Divisional Risk  The unaffordable nature of the laundry transformation programme has led to the development of a short to medium solution, this generates an inherent risk in the form operating ageing equipment / infrastructure and plant for the foreseeable future resulting in increased breakdowns	4	4	16	Tried and tested Business continuity plan for supporting production downtime from local and national stock holdings as well as rerouting production to supporting plan	4	3	12	Further discussion with Welsh Government regarding the availability of the level of funding per year and the development of a plan to align with the phasing of funding	Awaiting the allocation of year by year capital for the implementation of the short to medium term plan  Risk Lead: Director, Procurement Services	â	01.08.2023
A14	Difficulties in recruiting staff leave us unable to meet the expectations of Welsh Government in playing a leading role in delivering the decarbonisation agenda.  Strategic Objective - Service Development	5	5	25	Decarbonisation Programme Board Project Execution Plan PMO Support	3	4	12	Continue to recruit to fill vacant posts (SD - 30/06/2023) - update required	Anticipated that the full team will not be in place until the summer of 2023.  Director, Specialist Estates Services	â	31.08.2023
A15	The move to agile working, and the relatively imminent expiry of a number of our property leases, require urgent agreement of an Accommodation Strategy.  Strategic Objective - Staff	5	4	20	Mark Roscrow tasked with developing Accommodation Strategy. Working Group established to oversee move.	3	4	12	Set up working group to oversee move from Companies House to Cathays Park (MR 31/05/23) - complete	Nantgarw lease renegotiated. Initial meeting of Steering Group held 15 May.  Director. Specialist Estates Services	â	31.12.2023
A16	The presence of Reinforced Autoclaved Aerated Concrete in the Brecon House building in Mamhilad has contributed to the unsafe state of repair of the roof, making the building unsafe for staff, and similarly in the Repository in Companies House.  Esclalated Divisional Risk	5	5	25	Majority of staff working from home. Health & Safety Reviews Structural Engineers appointed	3	5	15	Immediate work being undertaken to make building safe for staff (SD 31/05/2023). Plan to vacate Brecon House asap (AE 31/07/2023) Plan to vacate Companies House by 31/12/2023 - RAAC in self-contained area.	Lease to be signed for Du Pont 1 - allows us to move out of Brecon House Ove Arup in place for monitoring RAAC condition Cook & Arkwright appointed to mobilise contractors to intervene directly if required Update contained in SES report dated May 2023 Director, Primary Care Services	â	31.12.2023
A17	The COVID Planning Inquiry places extreme demands on staff groups, particularly Procurement, and impacts the delivery of business-as-usual services.	5	4	20	Appointment of Legal Counsel Support from Legal & Risk COVID Inquiry Planning Readiness Group	5	2	10	Continue to monitor requests from Inquiry through the Planning Readiness Group (AB 31/07/23)	Risk Rating may be escalated once demands for information start to be received.  Director, Finance & Corporate Services	â	30.09.2023
A18	Strategic Objective - Services  Leaks to the roof at IP5 threaten the operation of services and are extremely expensive to repair.	4	4	16	IP5 Steering Board	3	4	12	Position is monitored through regular meetings of the Steering Board.		â	30.09.2023
	Strategic Objective - Services								l	Director, Specialist Estates Services		

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A19	The continued delay in locating suitable accommodation in South-East Wales for the TRAMS project threatens the supply of critical drugs to cancer patients  Strategic Objective - Services	5	5	25	TRAMs Programme Board Formal project managed by PMO. Use of Outsourced Suppliers Task & Finish Group established. Update to July SSPC.	4	5	20	Chief Pharmacists preparing detailed Risk Assessment (CP - 31 August 23) Development of plan to work on regionalised basis (CP - 30 Sept 23) Update to be provided to September SSPC (CP - 30 Sep 2023)	Two potentially compliant sites shortlisted.  Service Director TRAMs	â	31.03.2024
A20	The financial climate in NHS Wales poses significant threats to the delivery of existing services and the development of new services  Strategic Objective - Services	5	5	25	Monthly Finance Reports to SLG Finance Reports to SSPC and Audit Committee Establishment of Value and Sustainability Group Vacancy Control Arrangements implemented	3	5	15	Monitor progress against savings targets through Value & Sustainability Group (SLG - 31 March 2024)	Value and Sustainability Group established and Vacancy Control arrangements implemented (aug 23)  Director, Finance & Corporate Services	ä	31.03.2024
A21	The transfer of the laundries to NWSSP expose a number of risks including concerns over health and safety and formality of customer relationships.  Strategic Objective - Service Development	4	4	16	All-Wales Programme Business Case Programme Board Regular updates to SLG on progress with Action Plan Draft SLAs approved by SSPC Appointment of Assistant Director for Laundry	2	3	6	Appoint additional H&S resource to address problems and maintain progress in Laundry sites. (AB 30/06/2023)	Transfer has now taken place for all of the 5 laundries, although arrangements are different for Hywel Dda and Cwm Taf. Updates provided to SLG.  IA reviews have provided reasonable assurance.  Risk Lead: Director of Procurement Services	â	30-sep-23
Risks for Monitoring												
M1	Disruption to services and threats to staff due to unauthorised access to NWSSP sites.	5	4	20	Manned Security at Matrix CCTV Locked Gates installed at Matrix. Security Review Undertaken (reported Dec 18) Increased Security Patrols at Matrix. CTSA underake annual reviews of high risk buildings e.g. IP5. Picketston	1	4	4	Review results from security checklists (PS - 31/07/22 - 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	â	

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Key to Impact and Likelihood Scores										
			Impact							
		Insignificant	Minor	Moderate	Major	Catastrophic				
		1	2	3	4	5				
Likelil	hood									
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	Urgent action by senior management to reduce risk							
	Significant	Management act	Management action within 6 months							
	Moderate	Monitoring of ris	Monitoring of risks with reduction within 12 months							
	Low	No action require	ed.		·					

Consequence											
Likelihood	Insignificant	nsignificant Minor Moderate Major Catastroph									
<b>Almost Certain</b>	Yellow 5	Amber 10	Red 15	Red 20	Red 25						
Likely	Yellow 4	Amber 8	Arnber 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											
Ambar Cimificant Management consideration of ricks and raduction within 6 months											

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

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ä	New Risk
ã	Escalated Risk
ä	Downgraded Risk
â	No Trend Change

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# Wales Infected Blood Support Scheme

Annual Report 2022-23



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### Wales Infected Blood Support Scheme (WIBSS)

VELINDRE UNIVERSITY NHS TRUST

THROUGH

NHS WALES SHARED SERVICES PARTNERSHIP (NWSSP)

AND

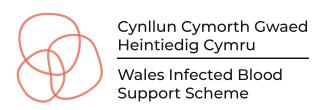
VELINDRE CANCER CENTRE (VCC)

ANNUAL REPORT 2022/2023









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### Introduction

Established in October 2017, the Wales Infected Blood Support Scheme (WIBSS) aims to provide support to people who have been infected with Hepatitis C and/or HIV following treatment with NHS blood, blood products or tissue.

Taking over from the existing UK schemes (Eileen Trust, Macfarlane Trust, MFET Ltd, Skipton Fund and Caxton Foundation), now referred to as the Alliance House Organisations (AHOs), WIBSS aims to provide both a streamlined financial payment service and personalised support for Welsh beneficiaries. WIBSS also offers a dedicated Welfare Rights Service and a Psychology and Well-being Service.

As at 31 March 2023, WIBSS supports 223 beneficiaries, including bereaved spouses and partners. However, the welfare and psychological support is also provided to wider family members of our beneficiaries.

### The Purpose of the Report



To provide an update on the finance and support services during 2022-23 as part of the Wales Infected Blood Support Scheme.



To detail the proactive work carried out by WIBSS during 2022-23.



To look ahead to WIBSS priorities relating to 2023-24.

### Key matters arising during 2022-23

### Service delivery post COVID-19:

The way in which WIBSS services are provided returned to normal during 2022-23 following some required adjustments, resulting from the COVID-19 pandemic. Home visits and face-to-face appointments were reinstated.

### Public Inquiry - The Infected Blood Inquiry

This is an independent public statutory inquiry established to examine the circumstances in which men, women and children treated by the National Health Service in the United Kingdom were given infected blood and infected blood products, since 1970. The Inquiry is Chaired by Sir Brian Langstaff.

### In 2022-2023 we responded to four Rule 9 requests from the Infected **Blood Inquiry.**

- The first request sought information regarding number of beneficiaries registered with the scheme, how they had acquired their infection, the nature of their infection, and how many had been registered with a legacy scheme.
- > The second request concentrated on what services are offered by WIBSS, what help the service provides to support people applying to join the scheme and whether WIBSS had undertaken a customer satisfaction survey.
- > The third request sought information regarding the eligibility criteria for bereaved spouses and partners to join the scheme.
- > The fourth request sought some additional clarification regarding the information supplied in the first request.

WIBSS co-operated fully with the inquiry and responded to all Rule 9 requests within the required timeframe.

On 11 November 2022, Dr Caroline Coffey, WIBSS Consultant Clinical Psychologist appeared before the Inquiry. A copy of the evidence session can be accessed from the Inquiry website.

Transcript - London - Friday 11 November 2022 (Keith Carter and Specialist Psychological Support) | Infected Blood Inquiry.

The Inquiry is now in its last phase, after four and a half years of hearings and evidence gathering. On 3 February the Inquiry Chair closed the Inquiry's public hearings, explaining that he would now be focused on writing his reports, the first being an interim report on compensation which was subsequently published on 5 April 2023. The Inquiry's final report will be published in the autumn of 2023.



### **Interim Compensation Payments**

**In May 2021**, it was announced by UK Government that Sir Robert Francis QC would carry out a study to look at the options for a framework for compensation, and to report back to the Paymaster General with recommendations, before the independent Infected Blood Inquiry reports.

**In June 2022,** the UK Government published the study by Sir Robert Francis QC:

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It makes recommendations for a framework for compensation and redress for the victims of infected blood, which can be ready to be implemented upon the conclusion of the Infected Blood Inquiry, should the Inquiry's findings and recommendations require it.

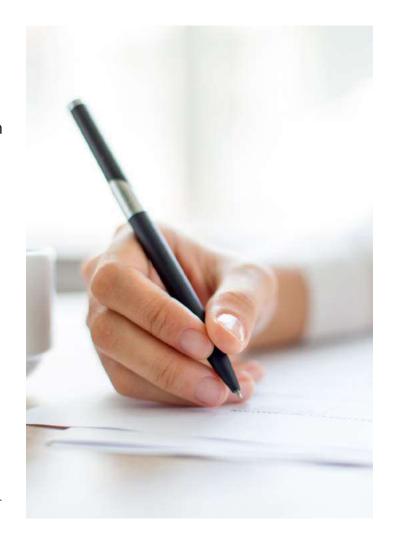
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On 29 July 2022, the Inquiry published its first Interim Report concerning the single issue of interim compensation payments. The Chair welcomed Sir Robert's report and recommended that the UK Government should pay an interim payment of "no less than £100,000" to current beneficiaries and bereaved partners who were in receipt of regular support payments from the 4 UK Infected Blood Support Schemes. A copy of the report can be accessed from the Inquiry Website.

### <u>First Interim Report | Infected Blood Inquiry</u>

**On 17th August,** the UK Government announced that these interim payments would be made to those who had been infected and to be eaved partners by end of October 2022.

<u>Infected Blood victims to receive</u> <u>£100,000 interim compensation payment</u> <u>- GOV.UK (www.gov.uk)</u>



The commitment to pay interim compensation met, in full, the recommendations set out by inquiry chairman Sir Brian Langstaff in his interim report. That report built on the Compensation Framework Study undertaken by Sir Robert Francis QC in his detailed consideration of the issues.

Following the announcement, WIBSS wrote to all our beneficiaries and bereaved partners notifying them of the decision. Welsh Government instructed WIBSS to make the payments to all beneficiaries of the scheme, in receipt of regular payments in October 2022. This was actioned on 27th October 2022. Any beneficiaries joining the scheme, after October 2022, who receive on-going payments, have also subsequently received the payments, in line with government policy.

As a result of the announcement, WIBSS received an increased number of enquiries about registering with the scheme.

There remains one outstanding issue relating to the payment of the interim compensation amount to the estates of beneficiaries who sadly died between the date of the announcement by the Inquiry and the agreement by Governments to make the payment. It continues to be raised, and WIBSS awaits instruction on this matter from the Welsh Government.

**On 5 April 2023,** the Inquiry published its second Interim Report concerning the framework for compensation. A copy of the report is available from the Inquiry website:

#### Second Interim Report | Infected Blood Inquiry

The UK and devolved Governments have acknowledged the report but have yet to decide upon its recommendations at the time of writing.



### Governance Group

The Governance Group monitors the operational management of WIBSS and provides governance, leadership and accountability for the scheme, on behalf of Welsh Government (WG), through Velindre University NHS Trust.

### The WIBSS Governance Group (VCC and NWSSP) is authorised to:

Investigate or have investigated any activity within its Terms of Reference, and in performing these duties, shall have the right, at all reasonable times, to inspect any books, records or documents of the Trust, relevant to the Governance teams' remit, subject to any restrictions imposed by General Data Protection Regulations (GDPR).

It can seek any relevant information it requires from any employee, and all employees are directed to co-operate with any reasonable request made by the Board.

### It is empowered with the responsibility for:

Reviewing and advising on the management of the WIBSS budgets, including running costs, the annual beneficiaries' budgets and provisions.

Advising Welsh Government on rate changes and the potential financial and service implications of policy changes, both within Wales and other areas within the UK.

Implementation of Welsh Government policy.

Ongoing negotiation and partnership with Welsh Government to ensure the smooth running of the service.

### The membership of the WIBSS Governance Group is as follows:



During 2022-23, the Governance Group met four times on 5th April 2022, 11th July 2022, 10th October 2022 and 8th March 2023.



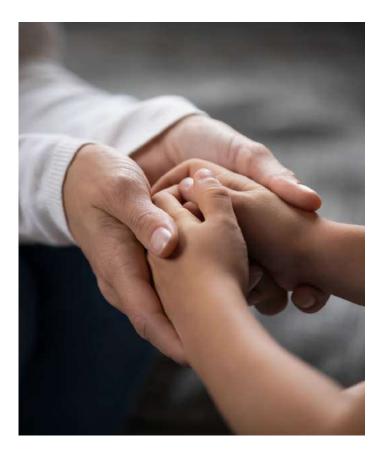
### Financial Support

The scheme recognises that individuals living with hepatitis C and/or HIV face extra costs for things like insurance, travel insurance, care costs and travel costs to attend hospital appointments etc. Financial support is available for:

- New Applicants to the scheme
- Members of previous legacy schemes

There are varying levels of financial support available to beneficiaries of the scheme. These are set out in the Finance Section of this report and are also published on our website.

Home - WIBSS (wales.nhs.uk).



### **Child Payments**

Following receipt of Directions from Welsh Government, at the end of December 2022, child payments were introduced to WIBSS with effect from 1st January 2023.

The payment is intended for the care and support of a child/children, up to the age of 18 or 21, if in full-time education, who are either the biological child or form part of the household of an infected beneficiary.

To date, 18 successful applications have been received for Child payments for a total of 31 children. This equates to a total of £69,600 pa. Payments are being paid monthly /quarterly.



#### **Appeals Process**

If an application to join the scheme is unsuccessful, an applicant can appeal if they disagree with the outcome of their application. Appeals are heard by a panel of independent medical experts with relevant clinical or similar experience in the field.

An appeal will not be considered in cases where it is acknowledged that the applicant is not eligible under the current eligibility criteria, but the applicant disagrees with those criteria (in such cases, the application could only be reconsidered if the Welsh Government agreed to amend the eligibility criteria).

During 2022-23, one appeal was submitted, and an appeals panel was convened in September 2022. The panel considered all the documentation received by WIBSS from the applicant and scrutinised the decision-making process of WIBSS. The panel then considered all the evidence, and upheld the original decision made by WIBSS to reject the application and the appellant was notified of the panel's decision.

The appeals panel process does not cover appeals regarding the Discretionary Small Grants process.

#### Beneficiaries' activity 2022-23

There are 223 beneficiaries & bereaved partners registered for support through the scheme. This is broken down into the following groups. (Valid as at 31st March 2023).

Beneficiary Group	Number of registered Beneficiaries
Hepatitis C Stage 1	43
Hepatitis C Enhanced Stage 1+	77
Hepatitis C Stage 2	41*
HIV	2
HIV & Hep C Stage 1 (Co-infected)	3
HIV & Enhanced Stage 1+ (Co-infected)	11
HIV & Hep C Stage 2	2
Bereaved Spouse/Partner	44*
Child Payments	18

<sup>\*2</sup> beneficiaries are classified as both existing beneficiaries and as bereaved spouse/partners.

<sup>2</sup> beneficiaries passed away during Q4 2022/23. However, they are still included in the above numbers as they continued to receive payments until the end of the quarter in which they died i.e., the 31 March 2023.

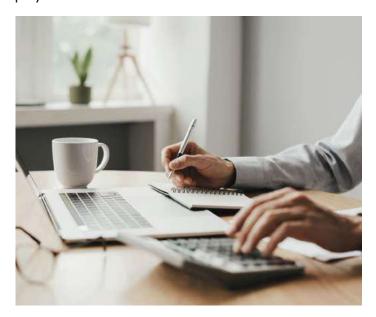
#### **Payment Rates**

The levels of payments available to beneficiaries in 2022/23 are set out in the table below.

Beneficiary Group	<b>Annual Payments</b>
Hepatitis C Stage 1	£19,498
Hepatitis C Enhanced Stage 1+	£29,569
Hepatitis C Stage 2	£29,569
HIV	£29,569
HIV & Hep C Stage 1 (Co-infected)	£40,135
HIV & Enhanced Stage 1+ (Co-infected)	£46,469
HIV & Hep C Stage 2 (Co-infected)	£46,469
Child Payment; 1st Child	£3,000
Child Payment; 2nd & Subsequent Children	£1,200

WIBSS pay annual payments monthly or quarterly, depending on beneficiary preference. Payments are made on the 20th of the month. Where the 20th falls on a bank holiday or weekend, payment will be the nearest working day prior to the 20th.

One-off non-discretionary lump sum payments are also paid to successful new applicants to the scheme. Under Parity, a new applicant who is Hep C Stage 1 would be entitled to a £50,000 lump sum payment.



A beneficiary who moves from Hep C Stage 1 to Hep C Stage 2 would receive an additional £20,000 lump sum payment. A new applicant who has already progressed to Hepatitis C Stage 2 would receive a £70,000 lump sum payment.

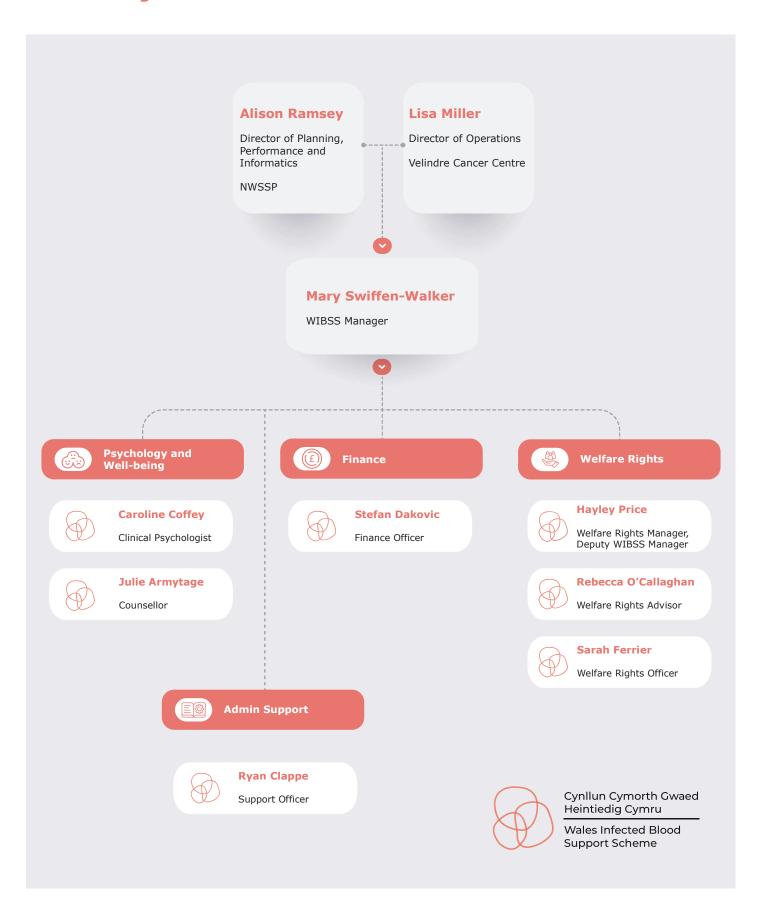
A new applicant who has HIV would be entitled to a lump sum payment of £80,500. If they were co-infected HIV and Hep C Stage 1, the lump sum would be £80,500 + £50,000 = £130,500 and Stage 2 would be £80,500 + £70,000 = £150,500.

A one-off non-discretionary lump sum payment of £10,000 is also paid to the bereaved spouse/partner/dependant relative or estate of a deceased infected beneficiary to assist with funeral costs.

WIBSS also make regular payments to bereaved spouses/partners/dependant relatives, of an infected beneficiary who has passed away. These payments are equal to 100% of the rate the deceased beneficiary was on at time of death for one year and 75% of the rate thereafter.

# WIBSS Structure

The day-to-day WIBSS team consists of eight members of staff, led by the WIBSS Manager.



# Financial Report

The table below summarises the claims expenditure for 2022-23, which includes the Interim Compensation payments processed in October 2022 referred to earlier in this report.

The announcement confirmed that an interim compensation payment of £100,000 would be paid to registered infected and bereaved partner beneficiaries of the UK Infected Blood Support Schemes.

These costs include widows and small grants payments.

WIBSS Claims Expenditure	2022 -23	2021-22 Comparative
No. of Beneficiaries	223	217
Regular Payments	£7,484,327	£7,294,727
Interim Compensation Payments	£22,200,000*	£0
Total Payments to Beneficiaries	£29,684,327	£7,294,727

Please note the figures above have been subject to in year movements i.e., new applications, deaths in year, moves from one stage to another, ad hoc requests etc.

NWSSP provide the Health and Social Services Finance Team within Welsh Government with regular updates on forecasts throughout the year. The administration of the scheme i.e., claims expenditure, is cost neutral to both NWSSP and Velindre Cancer Centre, with Welsh Government funding the scheme in full.

#### **Running Costs for 2022-23**

A summary of the running costs for 2022-23 is set out below with a 2021-22 comparative:

WIBSS Running Costs	2022 -23	2021-22 Comparative
Pay	£244,417*	£215,298*
Expenditure	£11,160	£11,328
Total	£255,577	£226,626

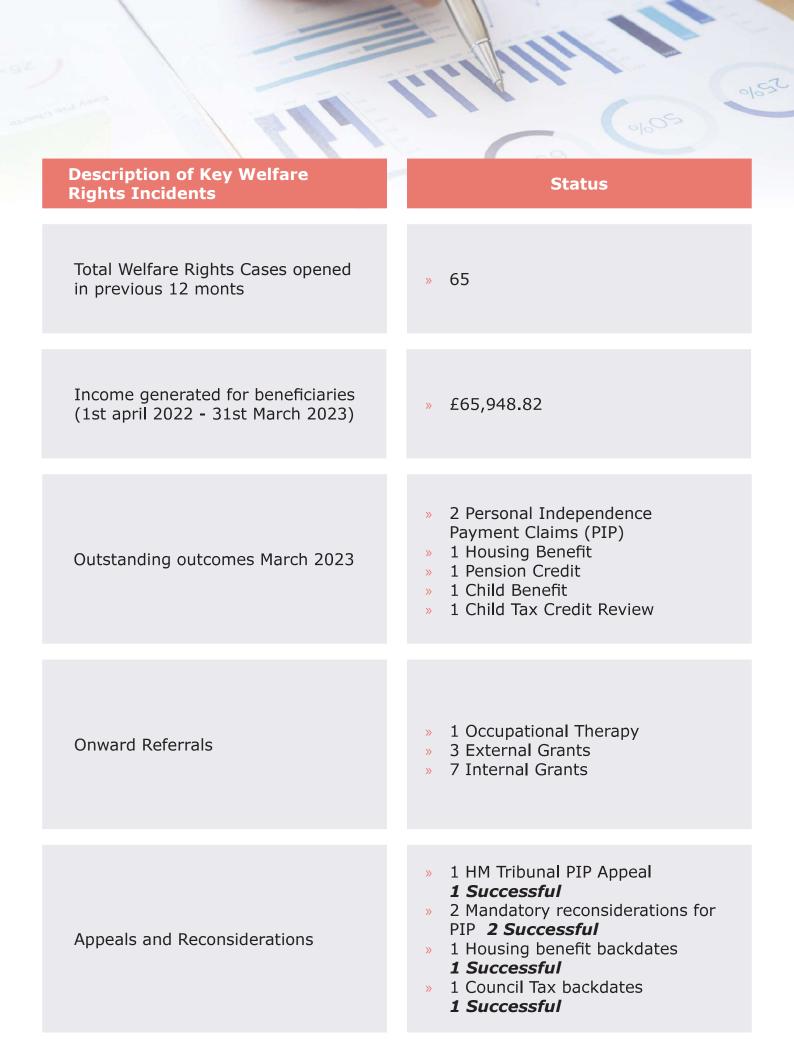
<sup>\*</sup>Note the 2022-23 running cost spend is not a full comparative to 2021-22, the increase in pay is due to the impact of return from maternity leave within the team during the year.



# Performance Report

WIBSS performance against Key Performance Indicators is set out below.

Descriptor of Key Performance Indicator	2022-23 Target	Status
Responding to Correspondence within set time limits	Within 4 working days	100%
Responding to Freedom of Information Requests within required deadlines	In-line with Trust Policy	100%
Dealing with applications within required timescales	Within 28 days from receipt of complete information	100%
Dealing with appeals within set time limits	1 appeal was lodged. The appeal was heard within the required timescale.	100%
Payments made on a timely basis	100% of payments to be made 0-2 days before the due date.	100%



#### **New Applications for Financial Support**

WIBSS received 20 applications in 2022-23.

<b>Application Type</b>	<b>Applications Received</b>	Outcome
Hepatitis C Stage 1	13	9 Accepted, 4 Declined
Hepatitis C Stage 1 (Deceased)	1	Accepted
Hepatitis C Stage 2	3	Accepted
Windows' application	3	2 Accepted, 1 Declined
Total	20	15 Accepted, 5 Declined

Where an application is declined, it will be because it does not meet the criteria set in Wales Infected Blood Support Scheme Directions, or insufficient evidence has been provided to support the application.

To access the Directions, please visit the WIBSS Website:

The announcement regarding the interim compensation payments and the media coverage surrounding it, led to an increase in the number of queries about the service and new beneficiaries, who had been registered with one of the legacy schemes, but had not transferred to WIBSS in 2017 when the scheme was established.

Home - WIBSS (wales.nhs.uk).

#### **Support and Assistance Grants Scheme**

In 2022-23 we received 5 applications for support. This is a decrease of 58% compared with 12 applications from 2021-22.

We believe this decrease may be partly due to the Interim Compensation payments that were paid in October 2022.



# Welfare Rights Service

Our WIBSS welfare rights service is Advice Quality Standard (AQS) accredited and bespoke to the needs of the individual and their family.

Although not exhaustive, below is a list of services we may be able to assist with:

- Liaising with social services to ensure complex beneficiary needs are met, such as support from a social worker/ occupational therapist/ Community Psychiatric Nurse (CPN). This may include help with adaptions to home to ensure our beneficiaries safety or mental health support.
- Signposting free NHS dental care and prescription services for those eligible due to the new benefit entitlement.
- Assisting with applying to join WIBSS including completing paperwork, requesting or chasing medical professionals seeking evidence to support applications to join WIBSS.
- Complete benefit and welfare checks, applying for benefits, debt signposting, budgeting advice, navigating financial products etc.
- Applying for a parking badge (Blue Badge), free bus travel and concessions.
- Accessing health services, such as additional care requirements and health care transportation.
- Advice around external schemessuch as NEST part of Welsh Government's Warm Home Scheme. NEST offers financial support for insulating homes or new boilers to reduce bills and increase energy efficiency.
- SureWater schemes to reduce water bills for those using higher amount of water for medical reasons.



Our welfare rights advisors can also consider the circumstances of family and carers to check their entitlement to benefits. Caring for someone can impact emotionally and financially. We can apply for benefits to support cares if eligible.

There are also other services that family and carers may wish to access, such as psychological support.

A second distinct service which was mentioned in the previous report is key worker support, which we continue to provide. We can provide a higher level of support than most welfare services due to being in-house. This may include things such as:

- Liaising with beneficiaries and wider family members to establish a trusting relationship and provide emotional support, outside of formal psychology and well-being referrals.
- Regular outbound check-ins with beneficiaries considered as vulnerable.
- Completion of paperwork and help to sort affairs for those unable to do so themselves.



#### **Infected Blood Inquiry Calls**

WIBSS experienced an increase in the number of calls from beneficiaries and family members not registered with a UK scheme yet during 2022-23. This followed the publishing of the 2nd Interim Report of the Infected Blood Inquiry (IBI). WIBSS dealt with an additional 45 calls in a 6-week period. Many of these calls were distressing to deal with, due to the highly emotive nature of the subject.



#### **Newsletters**

Newsletters are sent out quarterly to all beneficiaries unless they have opted not to receive them. These are sent out electronically or by post, depending on preference.

They are also available on the WIBSS website.

Home - WIBSS (wales.nhs.uk).

#### **Newsletters this year covered:**

- Parity update
- Interim report updates
- Reminder of the psychology and well-being service
- Uplift information
- Satisfaction survey feedback
- Benefit updates and reminders
- ≥ COVID-Newsletter referring to the financial support available.



Beneficiary A contacted WIBSS about a Personal Independence Payment (PIP) renewal.

We supported the client to complete the PIP renewal form. Beneficiary A was awarded higher rate mobility and lower rate care but only for two years. We submitted a mandatory reconsideration for them to consider a longer award period. As a result, the award was altered to five years. WIBSS also supported the client with a housing benefit and council tax reduction renewal form, which we completed on behalf of the beneficiary. The reduction was awarded. This beneficiary also suffered with anxiety, so a referral was made for the WIBSS Well-being and Psychology Team.



Beneficiary B contacted WIBSS as they were very concerned that they had not notified the Department of Works and Pension (DWP) of their WIBSS payments.

WIBSS sent letters to the DWP and council to notify them of the WIBSS payments and reminding both organisations that the payments should be disregarded when calculating mean tested benefits. We also completed the form for the beneficiary to receive the child payments recently introduced by WIBSS as they were struggling to complete the form. The beneficiary and his wife also wanted to chat about how they were struggling with everything that they had been through. The welfare team provided emotional support and suggested that they should contact the well-being and psychology team.

# Psychology and Emotional Well-being Service

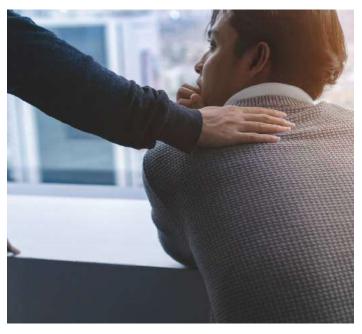
The emotional well-being service has been fully operational since January 2020 and has received a steady level of appropriate referrals for specialist psychological support. Individuals registered with WIBSS, their family members and bereaved family members have been able to access specialist psychological assessment and treatment concerning the emotional difficulties of being given contaminated blood products and living with a diagnosis of Hepatitis C and/or HIV. There have been approximately 80 referrals to the service, and in 2022-23 there was around 40 active cases.

The clinical work is complex, mainly relational and interpersonal in its approach. It can provide short term or longer-term therapeutic intervention, with an initial focus on building rapport and trust.

The service offers individuals, couples and family interventions, based on clinical need. These interventions can be in person appointments, telephone or by video.

There is no cap on the number of appointments available and intervention can be offered as episodes of care. Self-re-referral to the service is encouraged if needed, due to the complexity of the psychological difficulties and the likelihood of such thoughts and feelings being triggered at various life transition points and as a result of media reporting regarding the Infected Blood Inquiry.

The feedback the service has received has been overwhelmingly positive. People have been impressed with the flexibility of the service and have found talking to a therapist who is aware of the specialist context of this work and the specific issues they might face helpful and containing.



In November 2022, Consultant Clinical Psychologist, Dr Caroline Coffey gave evidence at the Infected Blood Inquiry, as part of a panel to discuss the ongoing psychological impact for beneficiaries and the need for specialist services. She has also been regularly meeting with representatives from NHS England and other partnership agencies to help plan and shape the future of the psychology service for EIBSS, as the WIBSS is considered to have many aspects of a Gold Standard service.

<u>Transcript – London – Friday 11 November</u> 2022 (Keith Carter and Specialist <u>Psychological Support) | Infected Blood</u> <u>Inquiry.</u>

Future plans for the service include how to further involve service users, particularly in the ongoing consideration of how to meet the 'community needs' of this population. Themes of loneliness, isolation and entrenched feelings of shame are widely documented and discussed clinically, but how to try and address these on a community or group level are ongoing challenges which WIBSS want to target.

# Things we will do in 2023-24

The workplan for 2023-2024 will include the following:



- Continue to deliver a responsive WIBSS service to existing beneficiaries and those seeking to apply.
- Keep beneficiaries informed of any decisions arising from the Inquiry recommendations that may impact on them.
- Progress the work started by the Psychology and well-being team around focus groups etc.
- Work with the Welsh Government to respond promptly to any future decisions arising from the Inquiry second interim report and anticipated final report.
- ➤ To increase the profile of the Welfare Rights Service to all scheme members. Ensuring everyone is aware how they can access the service.

- We will work on improving the reporting capability of our in-house case management system. This will allow us to transform data into intelligence which we can utilise to ensure our performance meets and exceeds the needs of our beneficiaries.
- To build relationships with key professionals in health settings who support people in the community that could be eligible for the WIBSS Scheme. New applicants have joined the scheme in the current year, indicating the potential that there could still be other people who are yet to apply. We wish to be transparent and ensure that anyone would meets the criteria is aware of the existence of the WIBSS Service. By building relationships with key health professionals should raise the profile and awareness of WIBSS Service.
- Develop the WIBSS Website to continue to ensure the most up to date information is available.



Cynllun Cymorth Gwaed Heintiedig Cymru

Wales Infected Blood Support Scheme

Thank you for reading our Annual Report. If you would like to find out more, please visit our website, our social media channels, or use the contact details provide below:



#### **Email**

wibss@wales.nhs.uk



#### **Phone**

02920 902280

#### **Mary Swiffen-Walker**

07970 601561



#### **Address**

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4th Floor, Companies House, Crown Way, Cardiff CF14 3UB

This document was designed by the NWSSP Communications Team. nwssp.communications@wales.nhs.uk

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# NWSSP SUPPLY CHAIN - PPE REPORT - AS AT 28/08/2023 (Updated 29/08/2023)

Product Type	Units Issued since 09/03/2020 (Inc Social Care)	Units Issued in last 7 days (Inc Social Care)	Units in Stock	Orders Placed (Units)
Aprons	241,792,125	447,850	33,651,075	162,000
Body Bags	15,507	2	11,021	0
Eye Protector	1,645,102	0	596,455	0
Type I & Type II Masks	2,268,250	2,850	142,300	0
Type IIR Masks	274,074,942	215,500	1,616,050	800
FFP2 Masks	127,144	0	2,400	0
FFP3 Masks (3M)	4,817,153	1,040	2,631,099	0
FFP3 Masks (Other)	191,100	0	0	0
Face Visors	7,498,065	514	1,103,573	0
Fit Test Kits & Spares	6,655	0	270	0
Gloves	1,147,698,080	4,268,100	76,863,550	230,257,500
Gloves Cuff	1,822,950	1,150	440,300	0
Gowns (Fluid-Resistant)	4,793,007	7,612	924,591	24,400
Gowns (Other)	1,114,454	2,723	91,377	7,592
Hand Sanitizer	996,575	2,243	201,909	3,528
Wipes (Universal)	116,593,800	1,538,000	13,978,600	21,240,000
Wipes (Other)	120,450,295	247,078	1,270,075	278,400
Respirator Hoods	154	0	445	0
Respirator Filters	35,273	0	42,600	0
Total	1 925 940 631	6 734 665	133 567 690	251 974 220

Key Notes & Assumptions

a) The reported stock holding does not include stock physically held within the receiving organisations.
b) The issues of PPE stock only includes stock issued from hated services, it does not include stock procured directly by NHS or Local Authorities of DT here is no guarantee that the items on order will be delivered -NWSSP is taking every action to ensure delivery
c) There is no guarantee that the items on order will be delivered -NWSSP is taking every action to ensure delivery
c) The reporting of stock is based on individual units, except for.
- Gloves where a unit is reported based on the unit size of a pack (single or pair)
- Hand sanitiser where a unit is a bottle regardless of the size
c) The dishboard output is a sanishot at a point in time of a dynamic position

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# AGENDA ITEM: 5.3 SSPC 21 September 2023

#### The report is not Exempt

#### Teitl yr Adroddiad/Title of Report

#### **NWSSP Audit Committee Assurance Report - July 2023**

ARWEINYDD:	Peter Stephenson	
LEAD:	Head of Finance & Business Development, NWSSP	
AWDUR:	Carly Wilce	
AUTHOR:	Interim Corporate Services Manager, NWSSP	
SWYDDOG ADRODD:	Andy Butler	
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#### Pwrpas yr Adroddiad: Purpose of the Report:

The purpose of this paper is to provide the SSPC with assurance and details of the key issues considered by the NWSSP Audit Committee, at its meeting on 11 July 2023.

#### Llywodraethu/Governance

Amcanion:	Each of the five key Corporate Objectives
Objectives:	
Tystiolaeth:	Individual reports submitted to Audit Committee
Supporting evidence:	

#### Ymgynghoriad/Consultation:

Who has been consulted on the details of the report?

• NWSSP Audit Committee

#### Adduned y Pwyllgor/Committee Resolution (insert $\sqrt{\ }$ ):

DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD, DISCUSS		NODI/ NOTE	<b>✓</b>
Argymhelliad/		Outline the	recomr	nendation o	f the repo	rt	
Recommendation	n	<ul> <li>The (</li> </ul>	Commit	tee is asked	to <b>NOTE</b>	the report	
Crynodeb Dadans Summary Impac							
Cydraddoldeb ac Equality and dive							
Cyfreithiol: Legal:	No direct impact						
Iechyd Poblogae Population Healt			No direct impact				
Ansawdd, Diogel	wch	a Profiad	No dire	ect impact			

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y Clef:

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Quality, Safety & Patient Experience:	
Ariannol: Financial:	No direct impact
Risg a Aswiriant: Risk and Assurance:	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
Dyletswydd Ansawdd/ Duty of Quality:	No direct impact
Gweithlu: Workforce:	No direct impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open

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### VELINDRE UNIVERSITY NHS TRUST AUDIT COMMITTEE FOR NWSSP ASSURANCE REPORT

#### 1. CEFNDIR/BACKGROUND

The Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership (Audit Committee) provides assurance to the Shared Services Partnership Committee (SSPC) on the issues delegated to them through the Trust and NWSSP Standing Orders. A summary of the business matters discussed at the meeting held on 11 July 2023, is outlined below:

ALERT	No matters to alert/escalate.
ADVISE	No matters to advise.
ASSURE	<ul> <li>NWSSP Update</li> <li>The Managing Director presented the committee with an extensive update as to key developments within NWSSP. Main highlights discussed are as follows-</li> <li>Audit &amp; Assurance Services underwent a second external quality assessment. No issues raised and the review was very positive;</li> <li>Accounts Payable continues to experience an exceedingly large volume of invoices to process, with 135,000 invoices received in March 2023;</li> <li>The year-end finances were currently subject to audit but a £12k surplus was noted and £2m was given back to Health Boards and Trusts;</li> <li>Total liabilities for the Welsh Risk Pool are £1.5bn:</li> <li>The lack of capital funding is a major concern impacting a number of significant projects including the Laundry Services Transformation Plan;</li> <li>Securing a building for TrAMS in Southeast Wales was progressing and needs to be complete as soon as possible to protect continuity of services;</li> <li>89% of vehicles available to lease as part of the salary sacrifice scheme are either electric or hybrid, and LED lighting has been installed across the majority of sites;</li> <li>Reinforced Autoclaved Aerated Concrete has been found in both Brecon House and Companies House. NWSSP are looking to permanently exit both sites, but in the meantime control measures are in place to mitigate risks to staff safety; and</li> <li>The move from Companies House to the Welsh Government, Cathays Park 2 building is out for consultation and the move is anticipated to take place in January 2024.</li> </ul>
ASSURE	External Audit Position Statement  Audit Wales provided a detailed update as to current and planned audit work. The audit of NWSSPs finances had thus far produced no issues of significance and the audit should complete by the end of July.
ASSURE	Internal Audit Reports  The following reports were presented to the Committee for consideration:  ICT Follow Up  The follow up review was positive and achieved reasonable assurance, with six priority recommendations for action.  Final Procurement – National Sourcing

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	The audit achieved reasonable assurance with one high, 3 medium and 2 low risks
	recommendations for action.
	<u>Cyber Security</u> The review was very positive and achieved substantial assurance, with one recommendation raised.
	Head of Internal Audit Opinion & Annual Report 2022-23  The Head of Internal Audit presented the 2022-23 Head of Internal Audit Opinion and Annual Report to the Committee, which achieved an overall rating of reasonable assurance. The report was very positive and demonstrated the significant amount of work performed throughout the year. Regular audit progress reports had been submitted to each NWSSP Audit Committee throughout the 2022-23 reporting period. The report summarised key findings and outcomes of systems that NWSSP provided to NHS Wales.
ASSURE	Internal Audit Position Statement
	Head of Internal Audit presented the Position Statement together with an overview of other activity undertaken since the previous meeting. Key points to highlight were:  • The 2022/23 internal audit workplan is complete; and  • The 2023-24 work plan is in progress.
ASSURE	Counter Fraud Annual Report 2022-23
	The 2022-23 Annual Counter Fraud Annual Report was presented to the Committee, which highlighted activities undertaken by NWSSP's Counter Fraud Manager and demonstrated how measures had been delivered to counter fraud, bribery, and corruption during the period. A key point to note is, the Service Level Agreement between NWSSP and Cardiff & Vale for the provision of 75 days of Local Counter Fraud Services from CAVUHB had been withdrawn due to resourcing implications and the agreement terminated on 30 June 2023.
ASSURE	Counter Fraud Position Statement
	The Counter Fraud Position Statement was presented to the Committee, with an overview of other activity. As of 30 June 2023, a total of 49.25 days of Counter Fraud work has been completed against the agreed 242 days as detailed in the Counter Fraud Annual Work-Plan for the 2023/24 financial year. The statement summarised the following activity in the last quarter:
	<ul> <li>Eight fraud awareness sessions have been delivered to 263 NWSSP staff;</li> <li>Seven new fraud referrals have been made;</li> <li>The new e-learning module is now available to all staff on ESR; and</li> <li>No Fraud Prevention Notices (FPN) have been issued by the NHS Counter Fraud Authority.</li> </ul>
ASSURE	Audit Committee Annual Report 2022-23
	The 2022-23 Audit Committee Annual Report reflects the positive work undertaken throughout the period. All meetings were continued to be held virtually via Teams and no meetings were cancelled.
ASSURE	Audit Committee Terms of Reference Review July 2023
	The Audit Committee Terms of Reference paper was presented to committee members. In line with the NWSSP Standing Orders, the Terms of Reference are required to be reviewed annually and approved by the Committee. There were no significant changes to report and the document remained fit for purpose.
ASSURE	Annual Governance Statement (AGS)

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	The Annual Governance Statement was presented to the committee for final approval. The statement was a positive assessment of the governance of NWSSP during 2022/23 financial year and the statement had already been presented to the Senior Leadership Group and the Shared Services Partnership Committee for endorsement.
ASSURE	Governance Matters
	The <b>Governance Matters</b> paper detailed the contracting activity for the last quarter. <b>18</b> contracts had been let for NWSSP and <b>31</b> further contracts for NHS Wales. There have been no further declarations made as to gifts, hospitality or sponsorship since the last meeting and no internal audits reports have received limited or no assurance.
	Of <b>232 audit recommendations</b> , <b>219</b> have been implemented, <b>11</b> are not yet due, <b>1</b> is not in the gift of NWSSP and <b>1</b> is overdue.
	The Corporate Risk Register contains 5 red risks, 12 amber, 2 yellow and no green risks.
ASSURE	Annual Report of Conflict of Interests
	The committee received the Annual Conflicts of Interest report, contained the details of compliance with the annual exercise. Overall compliance was generally good at nearly 80%, but it was noted that some areas do require some attention. These services are hard to reach areas, such as laundry Services. Compliance would continue to be managed and monitored and it was agreed that an update would be brought back to the next Audit Committee in October.
ASSURE	Annual Report on Gifts, Hospitality & Sponsorship 2022-23
	The Annual report for Gifts, Hospitality and Sponsorship for 2022-23 financial period provides a full list of all accepted and/or declined declarations offered to NWSSP staff during the financial period.
ASSURE	Audit Committee Forward Plan
	Members were presented with the Audit Committee forward pan of business for the 2023-24 period. The Quality Assessment of internal Audit had been deferred from the July to the October meeting.
INFORM	Items for Information
	The following items were provided for information:  • Welsh Language Annual Report 2022-23

#### 2. ARGYMHELLIAD/RECOMMENDATION

The Committee is asked to:

• **NOTE** the Assurance Report



# NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 4 – JULY 2023

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for July 2023 and should be read in conjunction with the Monitoring Return tables submitted for Month 4.

Thank you for your email of 1<sup>st</sup> August 2023 responding to the Month 3 monitoring return. The action points raised are addressed within this return and additional information provided where requested.

#### **Overview of Performance and Financial Position**

# 1. Actual Year to Date and Forecast Under/Overspend 2023/24 (Tables A, B, B2 & B3)

NWSSP's financial position for Month 4 is reported at break-even. This is based on the assumptions included in our IMTP which include a number of income streams which are still to be confirmed. This also assumes the recurrent impact of the 1.5% consolidated 2022/23 pay award will be fully funded by Welsh Government in addition to the covid recovery payment and the 5% 2023/24 pay award.

Table A has been populated with the recurring and non-recurring pressures, identified savings, net income generation and Welsh Government funding as detailed in our IMTP submission. The figures have been populated using the profile from our Plan and continue to show a break-even in year and recurrent plan.

Due to the ongoing fluctuation in energy costs since both our IMTP was submitted and the Month 3 submission, there is an amendment to the forecast additional costs we will need to recharge to UHBs for the element relating to the laundries. During 2023/24 UHBs will only recharge us for energy costs based on the historic budget values that were included as part of the laundry transfer agreements. In order to fully reflect the cost of the laundry, we will need to action an adjustment for UHBs to recharge us the full cost of the energy for 2023/24 which will be offset by an increased laundry SLA charge back to UHBs. We are in agreement with the suggestion to address this issue in two six-month periods.

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The value of the anticipated funding shortfall has been amended from £4.079m as included in our IMTP to £2.201m in Month 4 in line with the all Wales hybrid British Gas & CCS forecast received in July – this continues to be a high level estimate given not all energy volumes and prices have been secured for the financial year given the transfer to the CCS framework from 1st October 2023 and the ongoing review of the CCS forecast and assumptions included within it.

Table A has also been populated with the full year updated forecast of Covid expenditure and funding anticipated. This indicates a further reduction against the forecast included within our IMTP as we continue to refine our forecast of expenditure for the financial year. The reduction is primarily due to the falling issues of PPE to Primary & Social Care.

Additional in year savings and income generation of £0.770m are included to Month 4 which are forecast to reach £1.600m in 2023/24 to support the All Wales financial position. These additional savings will be achieved through additional pay and non pay controls this financial year. The £1.600m reconciles to our savings submission which will be submitted on 11<sup>th</sup> August which also includes wider savings opportunities for NHS Wales that NWSSP can support and a return of funding to WG.

The assumption of full funding for Covid expenditure and other anticipated income enables us to continue to report a break-even forecast outturn.

The key points to note within the year to date and forecast position are:

- The full year income forecast for 2023/24 has reduced from £652.692m as forecast in Month 3 to £650.212m. This is due to a further reduction in the forecast of covid expenditure (£1.966m) and the SLE costs in Month 4 being less than forecast (£0.578m)
- The pay expenditure profile increased in June due to the payment of the Covid recovery payment and also in July due to the payment of the 2023/24 5% pay award uplift plus arrears backdated to 1<sup>st</sup> April 2023. We await confirmation of in-year and recurrent funding for both the 1.5% consolidated pay award from 2022/23 and the 5% for 2023/24.
- The SLE pay and non pay forecast totals £235.143m as detailed below.
   This is a slight reduction from the Month 3 forecast due to more trainees completing their training and varying volumes of locum shift payments:

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	18.472	17.452	18.268	18.145	18.605	18.605	18.605	18.605	18.605	18.605	18.605	18.605	221.176
NON PAY	1.080	1.179	1.072	1.045	1.163	1.163	1.163	1.163	1.163	1.163	1.163	1.450	13.967
TOTAL	19.552	18.631	19.341	19.190	19.768	19.768	19.768	19.768	19.768	19.768	19.768	20.055	235.143

An increase in SLE expenditure is forecast following the August intake and rotation and this figure will continue to fluctuate as trainees complete their training and also with the variable locum shifts paid to SLE trainees that we now process centrally for the majority of UHBs.

- The profile of other income and non pay spikes in Month 6, 9 and 12 due to the quarterly pharmacy rebates that are issued a quarter in arrears.
- Forecast non-cash charges of £6.123m have been included which reconcile to our non-cash submission made on 30<sup>th</sup> June 2023. This is a reduction from our IMTP forecast due to the exclusion of unapproved schemes. Amendments to the baseline/strategic rows in the table have been made to reflect our new baseline funding of £3.799m. Due to the issues that Velindre experienced in reconciling the fixed asset register for 2022/23, we await updated depreciation forecasts which may impact the values we have included.
- £11.662m income and expenditure is included to Month 4 in relation to the WRP DEL budget. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts. The full year WRP forecast balances to the £135.929m as included in our IMTP and is phased on a straight-line basis over remaining months. This continues to assume that the risk share agreement will be invoked for £26.494m.

A high level review of our forecast undertaken at the beginning of August has indicated that due to inherent issues and potential delays in the claims process outside of our control, up to £5.200m of claims may not settle as forecast in this financial year. This would represent a non-recurring saving to NHS Wales in 2023/24 and would reduce the element to be funded under the risk share agreement to £21.294m. This is difficult to quantify with any certainty at this early stage of the financial year and we will continue to monitor the forecast on a monthly basis to ensure any reductions in expenditure can be highlighted at the earliest opportunity. In recent years we have 'locked' the risk pool forecast at around Quarter 3 and we would welcomed discussions regarding Welsh Government intentions for this financial year.

- The total energy cost forecast is £4.789m based on the updated All Wales hybrid forecast received from British Gas and CCS in July. Our forecast includes a spike in Months 7 and 12 due to the adjustment we will need to make to reflect the true energy costs of the laundries within 2023/24.
- Explanations for the highlighted variances in Table B1 are:
  - WG Income in month reduction of £6.9m primarily due to the net impact of the Welsh Risk Pool income reducing in month to match

expenditure (it is phased on a straight-line basis and reprofiled to match expenditure during the financial year), recognition of the full year income for the pay award in Month 4 and a reduction of Covid income & expenditure in July.

- WG Income full year forecast reduction of £2.5m primarily due to the reduction in the Covid income forecast in month.
- Pay in month and full year reduction of £0.5m due to the actual SLE costs being less than forecast.
- Non pay £2.7m increase against the prior month forecast due to the NWSSP financial position being brought to zero within the Velindre ledger with the increased expenditure primarily offsetting the recognition of income for the full year pay award in July
- Non pay £1.9m decrease against the prior month full year forecast is due to a reduction in the Covid forecast expenditure
- Losses, Special Payments & Irrecoverable debts in month profile change of £9.2m due to WRP straightline profile forecast being updated to reflect actual expenditure, no impact on full year forecast
- Table B3 details the in month and forecast Covid19 additional expenditure.

The testing, mass vaccination and other covid expenditure sections have been populated based on our current knowledge of what services we need to provide. Other covid expenditure relates to the NWSSP operational support costs (PPE management, storage and distribution) and PPE issues to Primary & Social Care. A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD M4	2023/24
	£m	£m
PPE Operational Costs	1.016	3.742
Social Care/Primary Care PPE	1.389	4.165
Mass Vacc - Pay & Non Pay (non PPE)	0.294	1.075
Lateral Flow Testing	0.045	0.135
TOTAL	2.744	9.116

This is a further reduction from the Month 3 forecast of £11.082m due to the continued lower value of PPE issues to Primary Care & Social Care (Month 5-12 forecast is now based on the average issue values in Month 1-4) and the ongoing revision of forecast costs as we progress through the financial year.

At the end of 2022/23 we accrued a credit note to Welsh Government totalling £17.537m to provide NWSSP with the continued cash coverage for the increased stock balance we hold. We will continue to review this monthly to identify if any further cash can be returned to Welsh Government, although this is dependent upon overall stock balances reducing.

#### 2. Underlying Position (Table A1)

Table A1 has been completed to detail the £1.246m brought forward underlying deficit due to the additional costs we are incurring to support the increased transactional activity as a result of Covid recovery. We have mitigated this pressure in 2023/24 through non-recurrent internal savings within NWSSP. An ongoing assessment of these costs will be undertaken throughout 2023/24 to ascertain if the increased activity is likely to be recurrent or if a reduction can be evidenced and these costs reduced and/or avoided in the longer term.

#### 3. Risk Management (Table A2)

This table has been reviewed and updated to ensure a balanced assessment of risks and opportunities is presented (**Action Point 3.1**). Changes reported since the Month 3 submission are:

- The risk of energy forecasts increasing above assumptions within our IMTP has been reduced to £0.500m given updated forecasts we have received below the IMTP forecast and increasing volumes of secured energy for the remainder of the financial year
- The risk regarding agreeing laundry energy recharges with UHBs has increased to £2.201m following an increase in the All Wales energy forecast received at the end of July.
- The risk of making savings to fund the NWSSP energy pressure has reduced to zero given the overachievement of savings to date and forecast.
- The risk of being unable to agree increased transactional activity costs with UHBs/Trusts has been reduced to zero given our overachievement of savings enabling us to fund this forecast expenditure of £0.605m internally and no recharges will be made to UHBs/Trusts in 2023/24 as part of our contribution to the wider NHS Wales financial position.

- The risk of making savings to fund the NWSSP share of the increased transactional activity costs has been reduced to zero given the overachievement of savings to date and forecast.
- The risk of turnover and vacancy rates being less than budgeted has reduced to zero given the overachievement of pay savings made to date and forecast.
- The risk of income targets not be achieved has been reduced to £0.250m given the overachievement to date.
- The risk for Medical Examiner funding has been reduced to zero given Welsh Government have confirmed costs will be recharged to DHSC as in previous financial years, although the risk remains for future years as we do not have recurrent funding agreed for this service.
- The risk that inflation is more than budgeted has reduced to £0.250m given the overachievement of savings to date, however with upcoming contract renewals, an element of risk does remain.
- The Foundational Economy funding risk has been reduced to £0.200m in line with the funding we are pursuing from Welsh Government.
- The IP5 energy pressure remains at £0.286m whilst we undertake an assessment of the forecast costs under the new energy contract rates for the site which are not part of the All Wales supply.

#### 4. Ring Fenced Allocations (Tables B, N, O & P)

NWSSP does not have any ring fenced allocations to include.

#### 5. Agency/Locum (Premium) Expenditure (Table B2 – Sections B & C)

£0.090m of agency expenditure was reported in Month 4 due to the continued high level of vacancies and recruitment issues we are experiencing. We are forecasting a reduction in this expenditure as one of our initiatives to increase savings in 2023/24.

# 6. Savings (including Accountancy Gains and Income Generation) (Tables C, C1, C2, C3 & C4)

The tracker has been updated to reflect the most recent savings and income generation achievements. This identifies a year to date overachievement of savings and income generation of £0.770m to the end of July 2023, with a forecast overachievement of £1.600m. This aligns with the NWSSP savings returned submitted on 11<sup>th</sup> August that can be achieved within 2023/24. There are also additional NHS Wales wide savings that we can help to facilitate which would be reflected as savings in UHB/Trusts returns.

The overachievement of savings to date and forecast indicates that schemes included as 'amber' are currently being achieved and are on track to turn 'green' in October as forecast.

#### 7. Income Assumptions 2023/24 (Tables D, E & E1)

Table D has been left blank as requested.

Line 1 of Table E1 has been populated with the budgeted income streams by organisation. This includes the forecast income from UHBs/Trusts in respect of stores issues and the SLE recharges based on the agreed SLA values. As these costs are recharged based on actual expenditure incurred, these may be subject to change in future months.

Lines 2-26 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation and these have been updated in month where we have more accurate forecast assessments (Energy, Covid and Foundational Economy) Line 25 for the covid recovery payment and Line 18 for the SLE workforce costs have been reduced to zero now that funding has been agreed and invoices raised. Line 15 has also been reduced to zero now that the increased transactional costs will not be recharged to NHS Wales

The table continues to assume additional income will be received from Welsh Government in respect of IP5 running costs above the recurrent funding allocation which is primarily required due to the loss of two income streams from chargeable leases that were originally included in the funding request.

#### 8. Health Care Agreements and Major Contracts

Not applicable for NWSSP.

# Statement of Financial Position and Aged Welsh NHS Debtors (Tables F & M)

Table F is not completed by NWSSP.

At 31<sup>st</sup> July 2023 there were eleven NHS invoices outstanding over 17 weeks that are recorded in Table M. These have now all either been paid, are on a confirmed payment run or have been credited or had cash allocation issues resolved in early August. (**Action Point 3.3**)

#### 10. Cash Flow Forecast (Table G)

Not required for completion by NWSSP.

#### 11. Public Sector Payment Compliance (Table H)

This table is not required for NWSSP.

#### 12. Capital Schemes and Other Developments (Tables I, J & K)

These tables have been populated to reconcile back to our Capital Expenditure Limit of £2.194m that was issued on 17<sup>th</sup> July 2023.

To Month 4 we have incurred £0.157m capital expenditure and we have plans to ensure all funding is spent in full during the financial year.

We have recently received confirmation of EFAB slippage monies to support progress towards the Laundry modernisation programme and await the issue of a funding letter in due course.

The EFAB slippage monies have been confirmed for 2023/24 and 2024/25, however the combined total of circa £2.200m is not sufficient for us to proceed with the Laundry transformation programme. Recognising that we cannot deliver a discrete tranche of the planned transformation, and cannot assume further funding beyond 2024/25, or transfer of funding from UHBs who previously operated the sites, we have completed a review of the immediate business need

and assembled a plan which is built around meeting two core objectives (i) underpinning service resilience and (ii) addressing estate and/or laundry equipment needs which are rated as 'higher risk', although statutory spend requirements for Glangwili and Church Village have not been included as they are the responsibility of Hywel Dda and Cwm Taf Morgannwg, and ultimately the sites may be released if the transformation proceeds in the future. We are also developing a proposal to close one of the laundries in 2023/24 which would result in revenue savings.

We have amended our discretionary allocation back to £0.528m as we have adjusted the IP5 discretionary allocation down to £0.130m to reflect the £0.090m contribution to the EFAB funding which is now soley being used for the introductory PV solar farm works at IP5.

The risk noted for the TRAMS funding of £0.217m has been reduced to 'low' in month with regard to our ability to utilise these funds during the financial year. A risk regarding the requirement for further funding for salary costs and fees beyond this allocation remains but is dependent upon the various options under consideration. There are no reported medium or high risk schemes (Action Point 3.2)

#### 13. Other Issues

The financial information provided in this return is an accurate assessment of the NWSSP financial position at this point in time and aligns to the details provided in the NWSSP Partnership Committee and Senior Leadership Group reports.

The Shared Services Partnership Committee, will receive the Month 4 Financial Monitoring Return, along with the return for Month 5 at the September meeting.

#### 14. Authorisation of Return

ANDREW BUTLER
DIRECTOR OF FINANCE AND
CORPORATE SERVICES

11<sup>th</sup> August 2023

NEIL FROW MANAGING DIRECTOR NWSSP



# NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 5 – AUGUST 2023

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for August 2023 and should be read in conjunction with the Monitoring Return tables submitted for Month 5.

Thank you for your email of 25<sup>th</sup> August 2023 responding to the Month 4 monitoring return. The action points raised are addressed within this return and additional information provided where requested.

#### **Overview of Performance and Financial Position**

# 1. Actual Year to Date and Forecast Under/Overspend 2023/24 (Tables A, B, B2 & B3)

NWSSP's financial position for Month 5 is reported at break-even. This is based on the assumptions included in our IMTP which include a number of income streams which are still to be confirmed. This also assumes the recurrent impact of the 1.5% consolidated 2022/23 pay award will be fully funded by Welsh Government in addition to the 5% 2023/24 pay award. We await an update on the funding to be provided in respect of these material items.

Table A has been populated with the recurring and non-recurring pressures, identified savings, net income generation and Welsh Government funding as detailed in our IMTP submission. The figures have been populated using the profile from our Plan and continue to show a break-even in year and recurrent plan.

Due to the ongoing fluctuation in energy costs since both our IMTP was submitted and the Month 5 submission, there is an amendment to the forecast additional costs we will need to recharge to UHBs for the element relating to the laundries. During 2023/24 UHBs will only recharge us for energy costs based on the historic budget values that were included as part of the laundry transfer agreements. In order to fully reflect the cost of the laundry, we will need to action an adjustment for UHBs to recharge us the full cost of the energy for 2023/24 which will be offset by an increased laundry SLA charge back to UHBs. We are in agreement with the suggestion to address this issue in two six-month periods

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and aim to review the costs for Months 1-6 in October and Months 7-12, with an element of estimation for March, during Month 12 (Action Point 4.1).

The value of the anticipated funding shortfall for laundries has been amended from £4.079m as included in our IMTP to £2.174m in Month 5 in line with the all Wales hybrid British Gas & CCS forecast received in August – this continues to be a high level estimate given not all energy volumes and prices have been secured for the financial year given the transfer to the CCS framework from 1st October 2023 and the ongoing review of the CCS forecast and assumptions included within it.

Table A has also been populated with the full year updated forecast of Covid expenditure and funding anticipated. This indicates a further reduction against the forecast included within our IMTP as we continue to refine our forecast of expenditure for the financial year. The reduction continues to be due to the ongoing low value of issues of PPE to Primary & Social Care and the ongoing revision of both staff and non staff costs to support PPE management and distribution.

Additional in year savings and income generation of £0.998m are included to Month 5 which are forecast to reach £1.600m in 2023/24 to support the All Wales financial position. These additional savings will be achieved through additional pay and non pay controls this financial year. The £1.600m reconciles to our savings submission made on 11<sup>th</sup> August which also included wider savings opportunities for NHS Wales that NWSSP can support and a return of funding to Welsh Government.

The assumption of full funding for Covid expenditure and other anticipated income enables us to continue to report a break-even forecast outturn.

The key points to note within the year to date and forecast position are:

- The full year income forecast for 2023/24 has increased from £650.212m as forecast in Month 4 to £660.556m in Month 5. This is primarily due to an increase in the SLE forecast following the August intake and rotation (£8.5m), an increase in the forecast value of stores issues (£1m) and the budget transfer of the Low Vision Service that was agreed in August (£0.8m)
- The pay expenditure profile increased in June due to the payment of the Covid recovery payment and also in July due to the payment of the 2023/24 5% pay award uplift plus arrears backdated to 1st April 2023. Pay costs further increased in August due to the junior doctor intake and rotation within SLE which is evidenced within the Medical & Dental pay category.

• The SLE pay and non pay forecast now totals £243.672m (£235.143m Month 4) as detailed below:

	M1	M2	М3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	18.472	17.452	18.268	18.145	19.935	19.605	19.605	19.605	19.605	19.605	19.605	19.605	229.506
NON PAY	1.080	1.179	1.072	1.045	1.362	1.163	1.163	1.163	1.163	1.163	1.163	1.450	14.166
TOTAL	19.552	18.631	19.341	19.190	21.297	20.768	20.768	20.768	20.768	20.768	20.768	21.055	243.672

This forecast will continue to fluctuate as trainees complete their training and also with the variable locum shifts paid to SLE trainees that we now process centrally for the majority of UHBs.

- The profile of other income and non pay spikes in Month 6, 9 and 12 due to the quarterly pharmacy rebates that are issued a quarter in arrears.
- Forecast non-cash charges of £5.972m have been included which reconcile to our August non-cash submission. Due to the issues that Velindre experienced in reconciling the fixed asset register for 2022/23, and ongoing corrections, we await updated depreciation forecasts which may impact the values we have included and which will be amended in the November non-cash forecast if required. IFRS16 ROU depreciation charges are only included for transitioning and approved IFRS16 leases. Unapproved new/renewing leases have been excluded (Action Point 4.4)
- £13.637m income and expenditure is included to Month 5 in relation to the WRP DEL budget. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts. The full year WRP forecast balances to the £135.929m as included in our IMTP and is phased on a straight-line basis over remaining months. This continues to assume that the risk share agreement will be invoked for £26.494m.

A high level review of our forecast undertaken at the beginning of September continues to indicate that due to inherent issues and potential delays in the claims process outside of our control, up to £5.200m of claims may not settle as forecast in this financial year. This would represent a non-recurring saving to NHS Wales in 2023/24 and would reduce the element to be funded under the risk share agreement to £21.294m. This is difficult to quantify with any certainty at this early stage of the financial year and we will continue to monitor the forecast on a monthly basis to ensure any reductions in expenditure can be highlighted at the earliest opportunity. In recent years we have 'locked' the risk pool forecast at around Quarter 3 and we would welcome discussions regarding Welsh Government intentions for this financial year.

- The total energy cost forecast is £4.755m based on the updated All Wales hybrid forecast received from British Gas and CCS in August. Our forecast includes a spike in Months 7 and 12 due to the adjustment we will need to make to reflect the true energy costs of the laundries within 2023/24.
- Explanations for the highlighted variances in Table B1 are:
  - Welsh NHS LHB & Trust income the in month and full year forecast increases are primarily due to the SLE increased recharges to Organisations following the August intake and rotations plus an amendment to the forecast of stores recharges to be made in 2023/24.
  - WG Income the in month reduction is due to the phasing of the income for the WRP to match the DEL expenditure incurred which was lower than forecast in month.
  - WG Income full year forecast increase of £0.8m is due to the transfer of the Low Vision Service that was agreed in August.
  - Pay in month and full year increases are primarily attributable to the increased SLE costs following the August intake and rotation.
  - Non pay the in month and full year forecast increases are primarily due to the increased forecast of stores expenditure.
  - Losses, Special Payments & Irrecoverable debts in month profile change due to WRP straightline profile forecast being updated to reflect actual expenditure, no impact on full year forecast
- Table B3 details the in month and forecast Covid19 additional expenditure.

The testing, mass vaccination and other covid expenditure sections have been populated based on our current knowledge of what services we need to provide. Other covid expenditure relates to the NWSSP operational support costs (PPE management, storage and distribution) and PPE issues to Primary & Social Care. A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD M5	2023/24
	£m	£m
PPE Operational Costs	1.233	3.586
Social Care/Primary Care PPE	1.676	4.021
Mass Vacc - Pay & Non Pay (non PPE)	0.351	1.042
Lateral Flow Testing	0.056	0.135
TOTAL	3.316	8.785

This is a further reduction from the Month 4 forecast due to the continued average lower value of PPE issues to Primary Care & Social Care and the ongoing revision of forecast costs as we progress through the financial year.

At the end of 2022/23 we accrued a credit note to Welsh Government totalling £17.537m to provide NWSSP with the continued cash coverage for the increased stock balance we hold. We will continue to review this monthly to identify if any further cash can be returned to Welsh Government, although this is dependent upon overall stock balances reducing.

#### 2. Underlying Position (Table A1)

Table A1 has been completed to detail the £1.246m brought forward underlying deficit due to the additional costs we are incurring to support the increased transactional activity as a result of Covid recovery. We have mitigated this pressure in 2023/24 through non-recurrent internal savings within NWSSP. An ongoing assessment of these costs will be undertaken throughout 2023/24 to ascertain if the increased activity is likely to be recurrent or if a reduction can be evidenced and these costs reduced and/or avoided in the longer term.

#### 3. Risk Management (Table A2)

This table has been reviewed and updated to ensure a balanced assessment of risks and opportunities is presented. Risks and Opportunities that have been reduced to zero have been removed from the table as requested (Action Point 4.3). Changes reported since the Month 4 submission are:

- The risk regarding agreeing laundry energy recharges with UHBs has reduced to £2.174m following a reduction in the All Wales energy forecast received at the end of August.
- The IP5 energy pressure remains at £0.286m whilst we undertake an assessment of the forecast costs under the new energy contract rates for the site which are not part of the All Wales supply.
- The opportunity that energy costs are less than forecast has been amended to £0.134m in line with the potential savings identified in the hybrid British Gas and CCS forecasts received at the end of August.

• The opportunity that activity may reduce and additional support costs are no longer required has been reduced to £0.321m given we have not seen any reduction in activity to date (Action Point 4.2)

#### 4. Ring Fenced Allocations (Tables B, N, O & P)

NWSSP does not have any ring fenced allocations to include.

#### 5. Agency/Locum (Premium) Expenditure (Table B2 – Sections B & C)

£0.082m of agency expenditure was reported in Month 5 which is a reduction from the Month 4 expenditure. We are forecasting a further reduction in this expenditure as one of our initiatives to increase savings in 2023/24.

# 6. Savings (including Accountancy Gains and Income Generation) (Tables C, C1, C2, C3 & C4)

The tracker has been updated to reflect the most recent savings and income generation achievements. This identifies a year to date overachievement of savings and income generation of £0.998m to the end of August 2023, with a forecast overachievement of £1.600m. This aligns with the NWSSP savings returned submitted on 11<sup>th</sup> August that can be achieved within 2023/24. There are also additional NHS Wales wide savings that we can help to facilitate which would be reflected as savings in UHB/Trusts returns.

The overachievement of savings to date and forecast indicates that schemes included as 'amber' are currently being achieved and as a result have been amended to 'green' this month (Action Point 4.5)

#### 7. Income Assumptions 2023/24 (Tables D, E & E1)

Table D has been left blank as requested.

Line 1 of Table E1 has been populated with the budgeted income streams by organisation. This includes the forecast income from UHBs/Trusts in respect of stores issues and the SLE recharges based on the agreed SLA values. As these

costs are recharged based on actual expenditure incurred, these may be subject to change in future months.

Lines 2-27 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation and these have been updated in month where we have updated forecast assessments (Energy, Depreciation, Covid and Medical Examiner).

The table continues to assume additional income will be received from Welsh Government in respect of IP5 running costs above the recurrent funding allocation which is primarily required due to the loss of two income streams from chargeable leases that were originally included in the funding request.

#### 8. Health Care Agreements and Major Contracts

Not applicable for NWSSP.

# Statement of Financial Position and Aged Welsh NHS Debtors (Tables F & M)

Table F is not completed by NWSSP.

At 31<sup>st</sup> August 2023 there were eighteen NHS invoices outstanding over 17 weeks that are recorded in Table M. Despite best efforts, nine of these remain outstanding at the submission date evidencing the struggles we have faced to chase up payments during the holiday months.

The three invoices with allocation issues have been resolved in August (Action Point 4.6)

#### 10. Cash Flow Forecast (Table G)

Not required for completion by NWSSP.

#### 11. Public Sector Payment Compliance (Table H)

This table is not required for NWSSP.

#### 12. Capital Schemes and Other Developments (Tables I, J & K)

These tables have been populated to reconcile back to our Capital Expenditure Limit of £4.049m that was issued on 5<sup>th</sup> September 2023.

To Month 5 we have incurred £0.666m capital expenditure and we have plans to ensure all funding is spent in full during the financial year.

High level monthly expenditure forecasts have been included and we will continue to refine these as the timing of expenditure is confirmed as we progress throughout the financial year.

The TRAMS funding of £0.217m is sufficient to cover current project team salaries until January 2024. A further application for funding to cover these to the end of the financial year plus any additional fees required for the project dependent upon options to be progressed will also be included.

#### 13. Other Issues

The financial information provided in this return is an accurate assessment of the NWSSP financial position at this point in time and aligns to the details provided in the NWSSP Partnership Committee and Senior Leadership Group reports.

The Shared Services Partnership Committee, will receive the Month 5 Financial Monitoring Return, along with the return for Month 4 at the September meeting.

#### 14. Authorisation of Return

NEIL FROW MANAGING DIRECTOR NWSSP

13th September 2023

LINSAY PAYNE
DEPUTY DIRECTOR OF FINANCE &
CORPORATE SERVICES