

# Shared Services Partnership Committee Part A

Thu 18 January 2024, 10:00 - 12:00

A Teams

## Agenda

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10:00 - 10:10    **1. Agenda**  
10 min

**1.1. Welcome and Introduction**

*Tracy Myhill*

**1.2. Apologies for absence**

*Tracy Myhill*

**1.3. Declarations of Interest**

*Tracy Myhill*


**1.4. Draft Minutes of meeting held on 23rd November 2023**

*Tracy Myhill, Chair*

 NWSSP Partnership Cttee Minutes Part A Nov.pdf (10 pages)

**1.5. Action Log**

*Tracy Myhill*

 1.5 Action Log January 2024.pdf (1 pages)

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10:10 - 10:25    **2. Chair/Managing Director's Reports**  
15 min

**2.1. Chair's Report**

*Tracy Myhill, Chair*

**2.2. Managing Director's Report**

*Neil Frow, Managing Director*

 2.2 SSPC Managing Director Update Jan 24.pdf (5 pages)

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10:25 - 10:55    **3. Items for Approval/Endorsement**  
30 min

**3.1. IMTP**

*Alison Ramsey, Director of Planning, Performance & Informatics*

 3.1 NWSSP IMTP 2023-26 SSPC Cover Paper (1).pdf (3 pages)

 3.1 IMTP 2024-27 SSPC Draft.pdf (69 pages)




### 3.2. Mamhilad Lease Renewal

*Andy Butler, Director of Finance & Corporate Services*

 3.2 SSPC Mamhilad Lease.pdf (3 pages)

### 3.3. All - Wales Overpayments Policy

*Andrew Butler, Director of Finance & Corporate Services*


-  3.3 All Wales Recovery of Overpayments Procedure.pdf (7 pages)
-  3.3 Appendix A - All Wales Overpayments Procedure.pdf (19 pages)
-  3.3 Appendix B - All Wales Recovery of Overpayments Procedure.pdf (5 pages)

10:55 - 11:25  
30 min

## 4. Governance, Performance and Assurance

### 4.1. Finance Report

*Andrew Butler, Director of Finance & Corporate Services*

 4.1 SSPC Finance Report January 2024.pdf (8 pages)



### 4.2. People & OD Update

*Gareth Hardacre, Director of People & Organisation Development*

 4.2 SSPC People and OD Report Dec 2023 (02).pdf (10 pages)

### 4.3. Performance Report

*Alison Ramsey, Director of Planning, Performance & Informatics*

-  4.3 January 24 SSPC Performance Report C. P (1).pdf (2 pages)
-  4.3 SSPC Performance Report January 2024.pdf (12 pages)



### 4.4. PMO Highlight Report

*Alison Ramsey, Director of Planning, Performance & Informatics*

 4.4 PMO Bi Monthly Report with SI Final - SSPC 01.24.pdf (31 pages)

### 4.5. Corporate Risk Register

*Peter Stephenson, Head of Finance & Corporate Services*



-  4.5 Corporate Risk Reg Jan 2024 Cover .pdf (4 pages)
-  4.5 Appendix A Corporate Risk Register.pdf (3 pages)

11:25 - 11:30  
5 min

## 5. Items for Information

### 5.1. Finance Monitoring Returns (Month 8 & 9)

*Andrew Butler, Director of Finance & Corporate Services*

-  5.1 Monitoring Return Commentary Month 8 NWSSP 2023-24.pdf (10 pages)
-  5.1 Monitoring Return Commentary Month 9 NWSSP 2023-24.pdf (9 pages)

11:30 - 11:30  
0 min

## 6. Any Other Business

11:30 - 11:30  
0 min

7. Date and Time of Next Meeting

Thursday, 21st March, 2024 10AM (Teams)

## NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

**MINUTES OF MEETING HELD THURSDAY 23<sup>rd</sup> November 2023**

**09:15 – 10.30**

**Meeting held on TEAMS.**

**Part A - Public**

ATTENDANCE		DESIGNATION	ORGANISATION
<b>MEMBERS:</b>			
Tracy Myhill	(TM)	Chair	NWSSP
Neil Frow	(NF)	Managing Director	NWSSP
Huw Thomas	(HT)	Director of Finance	HDUHB
Claire Osmundsen-Little	(COL)	Director of Finance	DHCW
Glyn Jones	(GJ)	Director of Finance, Planning & Performance	HEIW
Catherine Philips	(CP)	Executive Director of Finance	C&VUHB
Russell Caldicott	(RC)	Interim Director of Finance	BCUHB
Pete Hopgood	(PH)	Director of Finance	PTHB
Steve Ham	(SH)	Chief Executive	Velindre
Matt Denham-Jones	(MDJ)	Deputy Director of Finance	Welsh Government
<b>OTHER ATTENDEES:</b>			
Julie Chappelle	(JC)	Assistant Workforce Director	ABUHB
Natalie Price	(NP)	Assistant Director, Strategic Workforce Planning	CTM UHB
Sarah Jenkins	(SJ)	Assistant Director Workforce & OD	SBUHB
Alison Ramsey	(AR)	Director, Performance, Planning and Information	NWSSP
Andy Butler	(AB)	Director, Finance & Corporate Services	NWSSP
Gareth Hardacre		Director of People and Organisational Development	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
James Quance	(JQ)	Audit & Assurance Services	NWSSP
Anamaria Carvajal-Illanes	(ACI)	Corporate Support Officer - Minutes	NWSSP
<b>PRESENTERS</b>			
Darren Rees	(DR)	Deputy Director of Employment Services	NWSSP
Stephen Withers	(SW)	Assistant Director of Employment Services	NWSSP
Angela Jones	(AJ)	Deputy Director, Digital Workforce Productivity Solutions	NWSSP



Item		Action
<b>1.1</b>	<b>Welcome and Opening Remarks</b>  The Chair welcomed members to the November 2023 Shared Services Partnership Committee meeting.	
<b>1.2</b>	<b>Apologies Received From:</b> <ul style="list-style-type: none"> <li>- Sarah Simmonds - Director of Workforce &amp; OD, ABUHB</li> <li>- Hywel Daniel – Executive Director of People, CTMUHB</li> <li>- Debbie Eyitayo – Director of Workforce &amp; OD, SBUHB</li> <li>- Chris Turley – Director of Finance, WAST</li> <li>- Paul Veysey – Director of Corporate Governance, PHW</li> </ul>	
<b>1.3</b>	<b>Declarations of Interest</b> <ul style="list-style-type: none"> <li>- There were no Declarations of Interest.</li> </ul>	
<b>1.4</b>	<b>Minutes of Previous Meeting</b>  The Minutes of the September meeting of the Committee were <b>REVIEWED</b> and <b>APPROVED</b> as a true and accurate record of the Meeting.	
<b>1.5</b>	<b>Action Log</b>  The one action on the log, relating to the Llais Service Level Agreement, remains outstanding. A meeting with the Llais Chief Executive was held recently but they still have some issues that they needed to seek approval from Welsh Government. TM requested that this action be completed before the January Committee meeting.	
<b>2.</b>	<b>Matters Arising</b>	
<b>2.1</b>	<b>Payroll Modernisation and Overpayments</b>  DR and SW attended the meeting to present an update on the work to modernise the payroll arrangements and to help reduce overpayments across NHS Wales. To provide some context, NWSSP generate 1.7 million payslips per year across monthly, weekly, and supplementary pay runs and the volume has increased significantly over recent years. Despite this increase, accuracy rates remain high at 99.93% (as of September 2023). There has also been added complexity with multiple pay awards, one-off payments, and changes to pension arrangements.  However, the level of overpayments in NHS Wales has doubled. Approximately 90% of overpayments are due to the Health Bodies and the main contributor to this is late notifications from management on leavers and changes to staff hours or bands (including authorising shifts on the e-rostering system). 10% of overpayments are the result of NWSSP payroll staff processing submissions late into ESR and/or manual input error.  To try and reduce the number of overpayments, NWSSP has created an overpayment portal. This identifies staff responsible for the overpayment, so Health bodies can implement retraining/support. Additionally, the portal also ensures a quicker turnaround of the overpayment. Since its introduction, the turnaround time of discovery of overpayment to invoicing for its recovery has improved from 45 to 18 days. However, one area within the portal which needs increased participation from	

Health Boards, is the manager responding to why the overpayment had occurred. Currently we only have 52% completed. SW gave a demonstration to the Committee of how the portal works and the information that can be obtained from it.

Another key focus for the modernisation plan is the Staff Movement Advice. Currently there are two process routes in which the Health Bodies can advise NWSSP Payroll on new starters, staff changes and termination. These are Staff Movement Advice Forms (SMA) and Management Self Service (MSS). The Staff Movement Advice Form was created as a backup to Management Self Service due to lack of coverage across NHS Wales. MSS is the most efficient way for Health Bodies to inform Payroll on new starters, leavers and staff changes due to the direct link with ESR.

Although the specific uptake of ESR was not originally mandated by Welsh Government when it was first launched, the replacement for ESR due in 2026 will require full uptake of MSS. The NHS Business Services Authority who are tasked with developing and deploying the replacement system have requested all NHS Health Bodies in England to significantly increase the digital work skills for all staff, due to the mandatory requirements for MSS in the new system. This approach will need to be replicated in NHS Wales.

A further area for consideration is Payroll frequency. There are currently 159 pay runs annually, comprising weekly, monthly, and supplementary pay. The frequency of pay runs impact significantly on the efficiency and effectiveness of the NWSSP payroll division and administration activity across all Health Bodies. Over the past few years NHS Wales has explored the expansion of Collaborative Bank, several Health Bodies have deployed or are looking to deploy Wagestream, and Welsh Government and Health Bodies are looking at ways in which to reduce agency spend, which may lead to increases in weekly pay activity.

Any reduction in the number of pay runs undertaken each year is both complex and emotive, however with the prospect of increased activity with the Wagestream initiative and the potential expansion of Collaborative Bank, a comprehensive review of pay processing is required. NWSSP is therefore proposing the establishment of an all-Wales task and finish group to explore the use of supplementary and weekly pay runs in conjunction with the increased deployment of Wagestream and potential deployment of an All-Wales Collaborative Bank.

Therefore, to increase the efficiencies and effectiveness of payroll production across NHS Wales the Committee was asked to endorse the following recommendations:

- 1) All Health Bodies Finance and Workforce communities to use the portal to help reduce occurrences of overpayments.
- 2) All Health Bodies to have at least 80% take up of MSS by April 2025.
- 3) Establish a task and finish group with representation across all Health Boards to explore the use of supplementary and weekly pay runs.

The Committee was appreciative of the presentation and supportive of the recommendations. They were particularly keen to ensure that good practice was shared where possible. SW reminded the Committee that all Workforce and Finance Directors would receive a monthly email with a link to the payroll overpayments dashboard so that they can review their own statistics and performance.

TM thanked DR and SW for the presentation and the work undertaken to improve performance. There needs to be a continued focus in this area and particularly in the need to reduce the current level of overpayments.

The Committee **NOTED** the presentation and **ENDORSED** the proposed recommendations.

<b>2.2</b>	<p><b>IMTP</b></p> <p>AR presented an update on progress with the Integrated Medium-Term Plan which will be submitted to the Committee in January for approval.</p> <p>At the date of the Committee, the planning framework guidance for 2024-27 had not yet been published but it was expected imminently. The financial allocation letter is also not expected until just before the Christmas break. We have therefore had to assume that Ministerial priorities are likely to be very similar to those in current year, and our contribution will be to align our plans to support NHS organisations to deliver.</p> <p>Activity to date has included regular consultation with NHS Wales organisations and the Welsh Government. In October we held a World Café event which allowed NWSSP divisions to present their plans to colleagues for critical analysis. Following this Divisions submitted a refreshed plan which formed the basis for discussion at the SSPC Development Day in November. Going forward the IMTP will be subject to further review at the Senior Leadership Group and Local Partnership Forum before coming back to the Committee in January for formal approval.</p> <p>The 2024-27 plan will be underpinned by the overarching principles of doing the basics well, being financially sustainable, embedding the Duty of Quality, and looking after the welfare of our staff. Whilst the financial climate across NHS Wales imposes severe challenges, it may also provide the opportunity for NWSSP to implement measures on an all-Wales basis that give the potential for significant savings.</p> <p>TM thanked AR for the presentation and asked Committee members to review the document and feedback any comments to Alison by the end of December so that they could be incorporated into the final version to be approved at the January Committee meeting.</p> <p>The Committee <b>NOTED</b> the Update.</p>	
<b>3.</b>	<b>Chair/Managing Directors Update</b>	
<b>3.1</b>	<p><b>Chair's Report</b></p> <p>TM gave a verbal report on recent activities including:</p> <ul style="list-style-type: none"> <li>- Attending meetings with Judith Paget which help in both understanding the pressures NHS Wales is currently under and how NWSSP can help to support organisations in responding to these pressures;</li> <li>- Attending the Audit Committee which included a very good Cyber Security presentation;</li> <li>- Participating in the Team Wales event;</li> <li>- Preparation for and attendance at the SSPC Development Day earlier in the month which was held in person;</li> <li>- Participated in and presented to the Health and Wellbeing Conference in NWSSP; and</li> <li>- Chairing the Welsh Risk Pool meeting.</li> </ul> <p>The Committee <b>NOTED</b> the Update.</p>	
<b>3.2</b>	<p><b>Managing Director Update</b></p> <p>NF presented his update report. The main highlights were:</p>	

	<ul style="list-style-type: none"> <li>- Value and Sustainability – NWSSP is involved in a number of workstreams and task and finish groups to support programmes and initiatives across NHS Wales;</li> <li>- Decarbonisation – Similarly NWSSP is continuing to play a key role in the Decarbonisation programme where the current financial position is presenting challenges in progressing initiatives, particularly in areas such as transport and infrastructure;</li> <li>- Laundry Service - Discussions are continuing regarding the closure of the Glangwili site, and also the transfer of staff from the Cwm Taf laundry;</li> <li>- The Medical Examiner Office will achieve a statutory footing in April 2024. NWSSP has assured the Minister that we are in a position to deliver the service but there is still work to do with NHS Wales organisations in accessing relevant clinical notes and attending practitioners in a timely manner to allow the prompt scrutiny of deaths sent to the Coroner and to increase the roll out within Primary Care with an agreement still to be reached with a number of practices on the best way to get timely access to the medical records; and</li> <li>- NWSSP has achieved the Customer Service and Excellence Corporate Standard from the Cabinet Office and won an Evolution Award at the recent UK Shared Services Forum for the Scan for Safety initiative.</li> </ul> <p>The Committee <b>NOTED</b> the Report.</p>	
<b>4.</b>	<b>Items for Approval/Endorsement</b>	
<b>4.1</b>	<p><b>Brecon House Relocation</b></p> <p>AB presented the business case for the relocation of the Patients Medical Records Service from Brecon House to the Dupont building, both of which are on the Mamhilad site.</p> <p>The business case was approved by the Chair and Vice-Chair of the Committee through a Chair's Action on the 11th of October. The Velindre University NHS Trust Board also subsequently confirmed their approval on the 23rd of October. The reason for the Chair's Actions was due to the urgent need to secure the lease for an alternative building on the Mamhilad estate due to the presence of Reinforced Autoclaved Aerated Concrete (RAAC) in Brecon House. The business case had previously been approved by the Committee in July 2022, but the discovery of RAAC, and the updated costs of alternative accommodation provision necessitated some significant changes to the original proposal.</p> <p>The Committee were content to ratify the business case but did ask whether the service could be digitalised to reduce the need for physical storage. AB replied that this is a longer-term aspiration but there are known difficulties with scanning physical records and there are certain records that still need to be held in a physical form.</p> <p>The Committee <b>RATIFIED</b> the business case.</p>	
<b>4.2</b>	<p><b>PCS – Provision of MFD and PPD Contract Renewal</b></p> <p>AB explained that the Scheme of Delegation requires that any revenue contract over £200k needs approval from the Committee and subsequently the Velindre Board. The paper being presented exceeds the £200k limit and relates to a new contract for replacement of the Multi-Functional Devices (MFD's) and Professional Printing Devices (PPD'S) which will be located across NWSSP PCS sites across Wales.</p> <p>The Committee <b>APPROVED</b> the contract.</p>	
<b>4.3</b>	<b>Contract Award – Replacement Leased HGVs</b>	

	<p>Similarly the Committee were asked to approve the contract for the lease of 15 HGVs. The cost of the new vehicles will be approximately £394k p.a. exclusive of VAT which is an increase on the price of the current contract which was negotiated in 2016. This is due to the world-wide pressure on raw materials which has impacted vehicle availability. If the contract runs the maximum possible term of five years, the total contract price would be £1.97m exclusive of VAT and therefore will also need Trust Board and Welsh Government approval.</p> <p>CP requested that it would be helpful for such papers to clearly show the existing contract costs for comparison purposes.</p> <p>The Committee <b>APPROVED</b> the contract.</p>	
<b>4.4</b>	<p><b>Speaking Up Safely</b></p> <p>GH presented the paper. Welsh Government has requested that all NHS Wales organisations sign up to the Speak Up Safely policy. NWSSP has documented how it intends to take this forward. RA added that this will also need to cover Single Lead Employer staff based in a variety of settings across Wales. GH stated that this aspect of implementing the policy will be the most challenging, so a number of conversations had already taken place with workforce colleagues as to how best manage this. The documentation includes the action plan drawn up by NWSSP to take this initiative forward and which requires approval by the Committee. The Chair noted the role required of herself in the action plan and agreed to discuss the expectations for the role outside of the Committee meeting.</p> <p>The Committee <b>APPROVED</b> the Action Plan.</p>	
<b>5.</b>	<b>Items for Noting</b>	
<b>5.1</b>	<p><b>International Recruitment Update</b></p> <p>AJ attended to provide the update.</p> <p>Phase 2 of the commercial agency pipeline commenced in December 2022 with the first cohort of Internationally Educated Nurses (IENs) arriving in March 2023. As at 31st October, a total of 248 IENs have been onboarded. In addition, there are a total of 139 IENs at the pre-landing stage; with 117 candidates undergoing pre-employment compliance checks and 22 who have completed this process and have a confirmed landing date agreed with their health boards and are awaiting deployment.</p> <p>All Health Boards now have a proportion of Phase 2 candidates either arrived or in progress. The variation in the level of progress reflects the differing timescales involved in attaining Board level financial approval in each local organisation, resulting in late receipt of plans &amp; numbers, which often have to be delivered in the same financial year in order to demonstrate in-year financial saving from the associated reduction in temporary staffing and variable pay costs. This continues to pose a significant challenge to the strategic management of the programme, evidencing itself in a "stop-start" approach to recruitment.</p> <p>In addition to the commercial agency route, NWSSP has continued to support the recruitment and onboarding of a direct pipeline of nurses recruited via a partnership with Norka Roots, an agency of the state government of Kerala, India. This has involved developing an end-to-end recruitment and onboarding service for NHS Wales organisations. This direct pipeline displaces the role of commercial agencies and delivers a minimum cost saving of circa £1,650 per candidate.</p>	

	<p>Leading from this an in-country delegation in May 2023 resulted in 29 candidates being onboarded into NHS Wales. Further cohorts are in the process of being scheduled to land an additional seven candidates with all onboarding activity expected to conclude by the end of the current financial year. A second in-country recruitment event took place recently with five NHS Wales organisations participating. This resulted in the recruitment of 96 registered nurses, plus 16 Junior and Senior Clinical Fellows supporting General Medicine and Oncology services.</p> <p>Whilst the involvement of the five organisations is welcomed, several other organisations were unable to commit to the November delegation due to financial concerns. The impact of this is significant as the longer-term sustainability and financial viability of the direct recruitment model is, in part, dependent upon NHS Wales ability to demonstrate a long-term commitment to the Kerala initiative. This risk has been discussed with Welsh Government colleagues who acknowledge that the programme is adding significant value but that a more strategic approach is required. NWSSP has therefore agreed to coordinate with Health Board Workforce Directors and key workforce colleagues to develop three-year recruitment programmes, to include international recruitment.</p> <p>Separately NWSSP is now recognised as a GMC sponsorship organisation which enables international medical recruits to migrate and receive training development in the NHS in Wales, with the ultimate aim of securing training posts and subsequently permanent positions in the NHS. The November visit to Kerala therefore also included recruitment of medical posts for the first time. Over four days, almost 50 doctors were interviewed. In total there were 17 appointable Junior Clinical Fellows (JCF) doctors (surplus of eight) four appointable Senior Clinical Fellows (SCF) doctors (deficit of one) and four appointable oncology SCF doctors (surplus of two). The SCF doctors were required by ABHB. BCU and Velindre agreed to appoint one Oncology SCF doctor each. The eight surplus JCFs who were all appointable, have GMC registration and are therefore available to be offered posts by other NHS Wales organisations.</p> <p>The Committee <b>NOTED</b> the update.</p>	
<b>5.2</b>	<p><b>P2P Update</b></p> <p>AB presented the update.</p> <p>Since 2016, the Finance Academy All-Wales P2P Forum had been successful in the approval and delivery of several P2P initiatives, which were underpinned by the Once-for-Wales principles e.g. No PO No Pay Policy, standardisation of Invoice tolerances in Oracle. However, in recent years, the All-Wales P2P Forum has struggled in agreeing, supporting, and taking forward P2P initiatives. As a consequence, the Finance Academy Board agreed to close the All-Wales P2P Forum in September 2023. There is, however, still a need for a Forum or Committee to provide effective governance covering the P2P arrangements and agree future work plans.</p> <p>Although there are excellent processes in place, as confirmed by recent reviews by both the NHS Benchmarking Network and the Accounts Payable Association, there is scope for further improvement. For example, the Invoice on Hold position is high with 34,022 invoices on hold with a value of £74.9m. The only way to improve the current position is by working in partnership and having a Forum that takes an All-Wales responsibility for P2P initiatives. In addition, there are a number of initiatives that still need to be investigated, that will deliver improved efficiency in the P2P process.</p> <p>The suggestion therefore is for the Committee to provide the governance for the current P2P workplan and future initiatives. The Committee were supportive of this suggestion on the basis that the information reported to it was kept at a strategic level, and that the operational workload was administered through designated work streams.</p>	

	The Committee <b>NOTED</b> the report and <b>ENDORSED</b> the proposed governance and reporting lines.	
<b>5.3</b>	<p><b>Accommodation Proposal</b></p> <p>AB presented the update.</p> <p>NWSSP has officially informed Welsh Government that we have decided against moving to Cathays Park 2 due to concerns over access, car parking and rising costs. However, an alternative building has been identified in the Nantgarw area, which has the capacity to accommodate the staff currently in HQ and Companies House. Negotiations to either lease or buy this building are on-going and making good progress. If we proceed to completing a deal for this building, a paper will be submitted to Committee for approval.</p> <p>The Committee <b>NOTED</b> the Update.</p>	
<b>5.4</b>	<p><b>All-Wales E-Scheduling Procurement</b></p> <p>AJ presented this item. The supporting paper provides an update with progress on the re-tender of the contract for the scheduling software for District Nurses, which now has the option of being extended to cover all domiciliary care settings.</p> <p>The current contract expires at the end of March 2024. The re-tender process is currently on-going with an expected contract award date soon after 1 January 2024. The timing of the expected contract award, and some current uncertainty over when Welsh Government will approve the continuation of the scheme, may result in the need for a Chair's action. Hence, the paper is presented to the Committee now so that they are aware of the scheme.</p> <p>The Committee <b>NOTED</b> the update.</p>	
<b>6.</b>	<b>Governance, Performance &amp; Assurance</b>	
<b>6.1</b>	<p><b>Finance Report</b></p> <p>LP reported a break-even Month 7 financial position with a year-to-date overachievement of non-recurring savings of £1.270m. NWSSP continue to forecast a break-even financial position for 2023/24 dependent upon a number of income assumptions relating to pay award funding, the continued demand for and the costs to support increased transactional activity, IP5 running costs and transitional funding for TRAMS. Confirmation that Welsh Government will fund UHBs for the laundry energy cost pressure in 2023/24 has reduced our risk in respect of this. 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</p> <p>The Committee <b>NOTED</b> the Report.</p>	
<b>6.1.1</b>	<p><b>Audit Wales Management Letter</b></p> <p>AB informed that the NWSSP Management Letter was provided for information, but that Audit Wales had no findings or recommendations relating to NWSSP, which reflects very positively on the organisation.</p> <p>The Committee <b>NOTED</b> the Management Letter.</p>	



<b>6.2</b>	<b>People &amp; OD Report</b>  GH presented the report. Sickness absence remains low and statutory and mandatory performance is good. PADR rates are below target and the position has slightly worsened over recent months.  The Committee <b>NOTED</b> the Report.	
<b>6.3</b>	<b>Performance Report</b>  AR presented the report. The in-month September performance was generally good with 36 KPIs achieving the target against the total of 41 KPIs. However, five KPIs did not achieve the target and are considered Red/Amber. These relate to Recruitment (2), Procurement, Digital Workforce and Student Awards Services. Professional influence benefits amount to £83M at end of September.  The Committee <b>NOTED</b> the Report.	
<b>6.4</b>	<b>IMTP Q2 Progress Report</b>  AR presented the report. 81% (124) of our objectives are on track. 11 objectives are at risk of being off track to complete in 2023-24. All have targeted actions to complete in Quarter 3 and 4 with a view to bringing them back in line. Reporting on objectives remains on a self-assessment basis by the divisional Heads of Service, scrutinised through the Quarterly Review process.  The Committee <b>NOTED</b> the Report.	
<b>6.5</b>	<b>PMO Highlight Report</b>  AR presented the report. There is only one project currently rated as red, relating to the TrAMS project and particularly the affordability of the proposed solution as part of the wider capital programme. This compares with three red-rated projects reported to the last Committee.  The Committee <b>NOTED</b> the Report.	
<b>6.6</b>	<b>Corporate Risk Register</b>  PS presented the report. There are currently five red risks on the Corporate Risk Register, compared with eight reported to the last Committee. These include Brecon House, TrAMs, and the impact on the Single Lead Employer Team of proposed Junior Doctors Industrial action,  The Committee <b>NOTED</b> the Report.	
<b>7.</b>	<b>Items for Information</b>	
	The following items were provided for information only: <ul style="list-style-type: none"> <li>• Audit Committee Assurance Report;</li> <li>• PPE Stock Report; and</li> <li>• Finance Monitoring Returns (Months 6 and 7).</li> </ul>	



<b>8.</b>	<b>Any Other Business</b>	
	N/a	

**DATE OF NEXT MEETING:**  
**Thursday, 18th January 2024 10.00 AM to 12.00**  
**Via Teams**

Item 1.5

**ACTION LOG**

**SHARED SERVICES PARTNERSHIP COMMITTEE**

**UPDATE FOR 18 JANUARY 2024 MEETING**

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS JANUARY 2024
1.	2023/05/2	May 2023	<b>Llais Service Level Agreement</b> The final version of the Service Level Agreement to be brought back to the Committee for final approval.	PS	September 2023  Updated December 2023	<b>In Progress</b> SLA agreed in principle but document is now with Welsh Govt for them to decide whether they are happy to act as the point of escalation in any dispute.

 <b>GIG CYMRU NHS WALES</b>	Partneriaeth Cydwasaethau Shared Services Partnership	<b>AGENDA ITEM:2.2</b>  <b>18 January 2024</b>
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<b><i>The report is not Exempt</i></b>
<b>Teitl yr Adroddiad/Title of Report</b>
<b>Managing Director's Report</b>

<b>ARWEINYDD: LEAD:</b>	Neil Frow – Managing Director
<b>AWDUR: AUTHOR:</b>	Peter Stephenson, Head of Finance & Business Development
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Neil Frow – Managing Director
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	<a href="mailto:Neil.frow@wales.nhs.uk">Neil.frow@wales.nhs.uk</a>

<b>Pwrpas yr Adroddiad: Purpose of the Report:</b>
To provide the Committee with an update on NWSSP activities and issues since the last meeting in November.

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

<b>Ymgynghoriad/Consultation :</b>
Shared Services Partnership Committee

<b>Adduned y Pwyllgor/Committee Resolution (insert ✓):</b>							
<b>DERBYN/ APPROVE</b>		<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>	✓	<b>NODI/ NOTE</b>	✓
<b>Argymhelliad/ Recommendation</b>	The Partnership Committee is to <b>NOTE</b> and <b>DISCUSS</b> the report.						

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact.
<b>Cyfreithiol: Legal:</b>	No direct impact.
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct impact.
<b>Ariannol: Financial:</b>	No direct impact.
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides an assurance that NWSSP risks are being identified and managed effectively.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> .
<b>Gweithlu: Workforce:</b>	No direct impact.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open

## **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 November.

## **Finance**

NWSSP is on track to meet the main financial KPIs and is reporting a break-even outturn position for 2023/24. Our additional savings submission to Welsh Government on 11<sup>th</sup> August identified we would make a £1.6m distribution this financial year. This will be allocated to NHS Wales Organisations and Welsh Government based on the original contribution shares into NWSSP in line with previous financial year distributions. We are however currently reviewing our 2023/24 forecast and are likely to be able to increase the £1.6m distribution further.

Our 2023/24 Welsh Risk Pool forecast was £135.929m which requires £26.494m to be funded under the Risk Share Agreement. There remain a number of relatively high value cases that are due for settlement in Quarter 4 2023/24 and Quarter 1 2024/25. Due to the uncertainty in timings inherent in the claims process, these may settle in 2023/24 or fall into next financial year. Due to this uncertainty, we are forecasting that the WRP will have an outturn of between £132m and £136m.

## **IMTP**

The draft IMTP for the period 2024-27 is a separate agenda item for approval. The IMTP has been developed in collaboration with all our divisions who have written underpinning divisional plans for the next three years. We held individual touch point meetings prior to Christmas with our Divisional Directors and Heads of Services. We used these meetings to confirm digital, financial and workforce planning assumptions and to identify synergies across Divisions to mitigate silo working and maximise efficiencies. The draft IMTP was endorsed by SLG in December 2023, but subject to any changes that would be required by the financial allocation letter that was subsequently issued on 21 December 2023.

## **Joint Executive Team (JET)**

We had a recent JET meeting with Welsh Government colleagues covering performance, governance, quality, and workforce planning. The feedback during the meeting was very positive with Welsh Government acknowledging the role that plays within NHS Wales

## **Industrial Action**

We are heavily involved in the cross-NHS Wales planning for the contingency measures required during the strike action by Junior Doctors commencing on the 15<sup>th</sup> of January.

## **Wagestream**

Wagestream are a private sector organisation who provide services to a number of Health Boards and their staff offering flexibility over employee finances, including the ability for staff to receive an advance on their pay. There is no contractual relationship between NWSSP and Wagestream. On the morning of the 22<sup>nd</sup> December, we received a number of calls, primarily from BCUHB staff, stating that they had not received their pay. Upon urgent investigation of this it transpired that all affected staff had taken out an arrangement with Wagestream for a pay advance, and that in these circumstances NWSSP had correctly and promptly routed their pay to Wagestream. The problem therefore was within Wagestream and they managed to resolve it the same day. We have completed an incident report and the issue is to be discussed at the All-Wales Workforce Directors meeting on the 19<sup>th</sup> of January to ensure that responsibilities for this arrangement are clear.

## **Laundry Service**

The TUPE process for the Cwm Taf laundry staff is underway and we are also supporting Hywel Dda UHB in the 1:1 meetings (first meeting 9<sup>th</sup> January) that they are having with the staff affected by the planned closure of their laundry and the associated creation of a laundry hub.

## **Accommodation Update**

We are now in advanced negotiations with the landlord for the fit-out of the building on the Nantgarw estate that will be used to house staff moving from both Companies House and our current HQ. The expected date for us to move into this accommodation will be in the latter part of 2024.

## **Transforming Access to Medicine**

Following recent discussions at Committee with regards to the provision of the Radiopharmacy service in Southeast Wales, members will be aware that there is a requirement to engage a specialist clean room contractor for a Design, Build & Validation project. This is part of the Transforming Access to Medicines (TRAMS) Project South-East Wales Hub and the proposal for this development is a separate item on the Committee agenda. Due to the urgent need for this facility it is anticipated that the development will commence immediately upon approval.

## **COVID Public Inquiry**

It has now been confirmed that our application for core participant status for Module 5 has been accepted, and we are receiving Rule 9 requests for both this and other modules.

## **Staff Awards**

There has been a very good response rate for the call for nominations for the Staff Awards event due to be held in February. There are some excellent submissions which recognise the commitment and initiative of NWWSP staff across the organisation.

## **Awareness Training**

Daniela Mahapatra, Deputy Director, Legal & Risk Services jointly hosted a training session on Understanding Sexual Safety in the Workplace. This was an on-line event held on the 9<sup>th</sup> of January which was well attended by managers and staff from across NWSSP.

The Informal Senior Leadership Group meeting on the 11<sup>th</sup> of January included a two-hour training session on unconscious bias. This session was also open to Heads of Service and Deputy Directors. A second session on anti-racism is being held on the 15<sup>th</sup> of February.

## **Staffing Update**

The recruitment process to replace the Director of Finance & Corporate Services, and the Director of Primary Care are well underway, with stakeholder panels and interviews being held, or due to be held imminently.

Immediately following the November Committee I was very pleased to attend a presentation to mark 50 years' service by Haydn Davies within our Stores Team.

**Neil Frow OBE,  
Managing Director, NWSSP,  
November 2023**

<b>MEETING</b>	Shared Services Partnership Committee
<b>DATE</b>	18 January 2024
<b>AGENDA ITEM</b>	3.1
<b>PREPARED BY</b>	Helen Wilkinson Planning and Change Manager
<b>PRESENTED BY</b>	Alison Ramsey Director of Planning, Performance and Informatics
<b>RESPONSIBLE HEAD OF SERVICE</b>	Alison Ramsey Director of Planning, Performance and Informatics

**TITLE OF REPORT**

NWSSP Integrated Medium Term Plan (IMTP) 2024-2027

**PURPOSE OF REPORT**

SSPC are asked to approve the NWSSP IMTP 2024-27.

**1. BACKGROUND**

The Welsh Government require NHS organisations to prepare an IMTP for 2024-27 in line with the NHS Wales Planning Framework published in late December 2023.

The Ministerial Priorities for 2024-25 were targeted primarily at clinical services delivered by Health Boards. However, the Framework required NWSSP to demonstrate how we align our plan to support Health Boards to deliver their services.

The financial allocation letter for 2024-2027 was published by the Welsh Government in late December and our financial plan has been revised to reflect this.



The draft IMTP was endorsed by SLG in December 2023, subject to any changes required by the anticipated financial allocation letter.

## **Approach**

Our IMTP has been developed in collaboration with all our divisions who have written underpinning divisional plans for the next three years.

We held individual touch point meetings prior to Christmas with our Divisional Directors and Heads of Services. We used these meetings to confirm digital, financial and workforce planning assumptions. And, to identify synergies across Divisions to mitigate silo working and maximise efficiencies.

In line with the direction from the Minister for Health and Social Care, we too recognise the need to focus on a smaller number of priorities for 2024-25. We have therefore agreed as an SLG that our key organisational priorities will be:

- Doing the basics well
- Financial sustainability
- Duty of Quality
- Staff Wellbeing

We are submitting a balanced financial plan for 2024-27. However, this will be challenging and there are several significant financial risks to be managed to achieve this aim.

## **Duty of Quality**

We have a section focused on our commitment to the Duty of Quality (DoQ) in 2023-24 and how we are planning to drive forward quality driven decision making, quality management systems and reporting into 2024-25 and beyond. We have mapped throughout the document, utilising the DoQ Health Standards icons, where the standards fit across our plan.

## **Equality Impact Assessment**

An Equality Impact Assessment has been completed alongside the development of the IMTP. The planning team have worked closely with divisions to provide a comprehensive assessment that has been approved by the NWSSP EQIIA Panel.

## **Current position**

Our IMTP is substantially complete and a copy of the provisional IMTP is enclosed as **Appendix A**.

## **Next steps**

- Touch point meeting with Welsh Government Planning team - date to be confirmed.
- Touchpoint meeting with NHS Executive Finance team is 7 February 2024.
- NWSSP Communications team is finalising design of the IMTP.
- Submission to Welsh Government if there are no significant changes.
- Translation to Welsh and publication.

## **2. RECOMMENDATION**

Committee Members are asked to:

- Approve the NWSSP IMTP for 2024-27 subject to the touchpoint meetings with Welsh Government and NHS Executive teams.
- Agree for the IMTP to be submitted to Welsh Government as soon as practicable following the touchpoints meetings if there are no significant changes required.

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DRAFT

## Message from the Chair and Managing Director

Welcome to our 2024-25 Integrated Medium-Term Plan (IMTP) for the NHS Wales Partnership. This plan sets out our key operational priorities for the year ahead 2024-25 and provides an indicative roadmap of future work planned over the next three years.

This plan describes who we are, what we do and how we are going to support the NHS in Wales by ***Delivering Value, Innovation and Excellence through Partnership.***

Looking back at 2023-24, NWSSP has remained on target with most of the agreed objectives within our IMTP. And in response to the call to action from the Welsh Government we have identified £1.6M savings in year to contribute to the overall financial challenge facing the NHS in Wales.

We will continue to play a key role in the Value and Sustainability arrangements already put in place by the Welsh Government, leading on several initiatives:

- Procurement and non-pay expenditure across NHS Wales; looking at reducing unwarranted variation, in addition to targeting saving opportunities alongside supporting growth in the foundational economy.
- Medicines management and more effective purchasing of drugs for use in the treatment of patients within Wales.
- Effective NHS workforce arrangements through our payroll and recruitment services and taking a lead on international recruitment activity.

We have also implemented the Duty of Quality which came into force from 1 April 2023. Our continued focus will be on developing our Always On reporting arrangements. We have identified several areas of good practice, and we will be providing our partners with assurance on how we meet the requirements of this new legislation which captures non-clinical services.

We have continued to grow our range of services incorporating the Low Vision Service for Wales in the last year and preparatory work for the General Ophthalmic Service changes and roll out of the e-prescribing service in Wales. We will be ready for the statutory launch of the Medical Examiner Service anticipated to commence in Spring 2024.

Our core customers are the Welsh Government and NHS partner organisations in Wales. And we recognise that the wider impact of how well we deliver our services is felt by all NHS staff, our suppliers, independent contractors, patients and future generations living in Wales. The quality of our services is a critical part of the measure of our performance as an organisation. We were therefore delighted to become the first NHS organisation in Wales to achieve the Customer Service Excellence accreditation in 2023-24 at a corporate level, across all our service areas and Divisions. This was an independent validation of achievement across a range of core customer service competencies. We will continue to use this as a driver of continuous improvement and as a skills development tool for our staff to further develop customer focus and customer engagement.

Looking forward to 2024-25, the financial challenges facing the NHS in Wales cannot be ignored. Whilst we are working to deliver once again a balanced budget, that will require scrutiny of our improvement plans and careful management of identified risks. We have a proven track record of converting challenges into opportunities, to implement change, to do things differently to build resilience and improve service quality and where possible reduce waste and reduce cost. We want to continue to

maximise opportunities to adopt good practice consistently across NHS Wales, standardise and reduce unwarranted variation in our own services.

We must be proactive in evidencing the value of the work we do for NHS Wales. We must maximise the return on investments made in new digital systems, as the availability of additional capital investment is likely to be very limited. We will also need to measure and report the benefits realisation of the changes we have made to service models and underlying processes to improve quality and address increasing activity or complexity.

We need to maintain the momentum on implementing the Duty of Quality and prioritise the wellbeing of our staff who continue to go the extra mile for us. We also need to address our own workforce requirements including those areas where we can struggle to recruit and retain people. And we want to expand the diversity of our workforce, so it is more representative of our communities across Wales.

NWSSP was created in 2011 to deliver a range of professional, technical, and administrative services to our partners across the NHS in Wales. Since then, we have grown both in scope and in confidence, securing a good reputation for delivering on time, within budget and to a high quality. We bring a positive 'can do' approach to address the challenges faced by our NHS partners and wider priorities faced by Welsh Ministers. Our leadership team and staff will need to draw on these core strengths as we head into 2024-25, and this plan sets out our key areas of focus.

## Executive Summary

### Delivery Value, Innovation and Excellence through Partnership

NHS Wales Shared Services Partnership (NWSSP) delivers a wide range of high quality, professional, technical and administrative services to NHS Wales working with wider public services, including the Welsh Government.

NWSSP is an integral part of the NHS Wales family supporting delivery of services to the staff and patients of Health Boards, Trusts, Special Health Authorities in Wales. We also provide a range of services to primary care: GP practices, dentists, opticians and community pharmacies and from 1 April 2023 we started to provide services to the Citizens Voice Body, Llais, via a service level agreement.

As a hosted organisation we operate under the legal framework of Velindre University NHS Trust. Our Managing Director Neil Frow is accountable to other NHS organisations through the Shared Services Partnership Committee (the partnership committee) which is comprised of representatives from the NHS Organisations that use our services and the Welsh government. The Partnership Committee is chaired by Tracy Myhill and meets bimonthly. We also have several subcommittees and advisory groups.

Underpinning this three-year Integrated Medium Term Plan (IMTP) are more detailed delivery plans for every division and area of service. Progress against our plan is reported quarterly to the partnership committee and a copy of this report is also shared with the Welsh Government. Quarterly performance reviews with each area of service are held during the year. These review meetings are an opportunity to mitigate risk to delivery, approved changes to the Divisional plans and adopt the plans to changing demands and emerging priorities.

During the year we also have at least two scrutiny meetings with Judith Paget, the Chief Executive of NHS Wales, and members of the senior team in Welsh Government. The purpose of these meetings is to discuss performance against our plan and to consider risks and opportunities we have identified.

Our IMTP outlines ***Delivering Value, Innovation and Excellence through Partnership*** across all our services, incorporating key policy requirements for NHS Wales. This includes embedding principles from **A Healthier Wales** and the **Well-being of Future Generations (Wales) Act 2015**, additionally we take a lead role in adding professional influence to address decarbonisation and climate change within the NHS in Wales.

As an organisation that works at both a national and local level across Wales, we regularly engage with Health Education and Improvement Wales (HEIW) and Digital Health and Care Wales (DHCW) with an aim to align our respective plans and identify opportunities for collaborative efforts towards our shared goals.

We understand that the immediate focus is on the overall NHS Wales financial position and therefore our plans have been developed to ensure we have a sharp focus on financial sustainability. Alongside this we are continuing to strengthen our All-Wales programmes of work to minimise waste, reduce variation and increase efficiency. In addition, we recognise the critical role we play within the Value and Sustainability programme at a national level.

At a local level, this also involves focusing on our own workforce planning assumptions and overheads, including accommodation requirements, outcomes and capturing the impact of our work. This aids prioritisation of resources, making informed decisions and maximising opportunities to adopt good practice. Furthermore, our commitment extends to standardising and reducing variation across NHS Wales in the services we provide.

Turning challenges into opportunities aligns with NWSSP strengths in supporting NHS Wales. We have a number of key opportunities which include:

- Increasing the uptake of self-service functionality with support from our expert users.
- Reducing unwarranted variation and moving towards common operating models and standardisation.
- Implementing several key policy initiatives including Anti-Racist Wales action plan, Diversity and Inclusion action plan and Speaking Up Safety arrangements, alongside the Duty of Quality.
- Adopting agile working principles to employ people from across Wales within their communities.
- Maximising the return on investment made in new digital systems and applications.

We have therefore agreed with our partnership Committee the following overarching principles for the next 12 months, which form the basis of Year 1 of the three-year IMTP.

## Overarching Principles for 2024-25

### 1. Doing the basics well

NWSSP is committed to provide a robust foundation for the Welsh NHS, by providing reliable services to our partners. A focus on excellence is integral to the overall success of our IMTP and we understand the impact this has on healthcare delivery across Wales. In 2023 NWSSP attained corporate accreditation for Customer Service Excellence, highlighting our dedication to ensuring excellence is at the heart of our services.

## 2. Financial Sustainability

We remain committed to a balanced budget, compliance with our break-even duty and a targeted reinvestment plan for those NWSSP services that directly support Ministerial Priorities. Within the Value and Sustainability work streams we are taking the lead in three areas: workforce, medicines and prescribing, and non-pay and procurement. Additionally, we are assessing the impact of unwarranted variation on our own services.

## 3. Duty of Quality

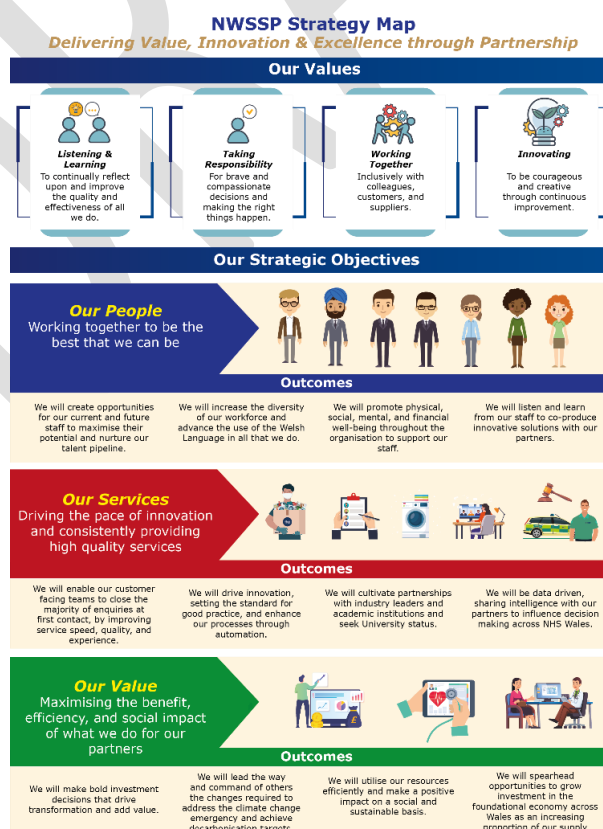
This is a key priority for NWSSP as it aligns with our overarching goal of **Delivering Value, Innovation and Excellence through Partnership**. We understand the crucial role we play in supporting various aspects of healthcare delivery, including procurement, pharmacy and workforce services. Our alignment with the Duty of Quality reinforces our dedication to enhancing the overall quality and effectiveness of our services across Wales.

## 4. Staff Wellbeing

We will continue to provide support to all our staff to promote physical, mental and financial well-being. We will maintain the strong partnership approach we have been building with our trade unions as we navigate ongoing change, ensuring that the voices of our staff are not only heard but also addressed.

We are committed to maximising opportunities to enhance and further improve our standards of quality, reduce waste, and minimise variation to ensure consistency across all our services. Delivery of the plan poses challenges given the ongoing uncertainty in the broader economic landscape and associated risks to our financial assumptions, however, we believe in the plans inherent strength to drive innovation and excellence in the services we provide.

## Strategy Map



## Achievements, Innovation and Case Studies

- Innovation Hub
- Customer Service Excellence Accreditation
- Scan for Safety – Evolution Award / Endoscopy?
- Specialist Estates Service Network 75 Programme
- Delivery of the Electronic Prescription Service in Wales
- ISO2000-1 Service Management
- Payroll Modernisation
- Future Generations Group
- NHS Wales Fraud Awareness e-learning
- Internal Audit knowledge sharing
- GP Payment System – working with Northern Ireland
- Data Sharing in Legal and Risk
- International Recruitment

## Key Figures

With a budget of over **£677.425m** and **5,777 people** in 2023\* we were able to:

- Achieve **£166m** in professional influence savings.
- Send **18,000** conditional recruitment offers.
- Handle over **15m** items of laundry.
- Process more than **43m** prescriptions.
- Save circa 810,000g/kmg of CO<sup>2</sup> by increasing our electric fleet vehicles.
- Process more than **1.5m** invoices.
- Process over **1.2m** payslips.
- **470** international registered nurses registered.
- **62,592,436** prescription forms scanned.
- **6182** ready to use injectable medicines prepared for critical care and cancer services.
- **£140k** saved in once for Wales medicines purchasing and distribution of Apixaban.

Since March 2020 we have:

- Delivered more than **2.2b** *<to be updated to November 2023 figure>* items of personal protective equipment.
- Delivered 6.9m Vaccine doses to over 110 locations.

**\*as at 30 November 2023**

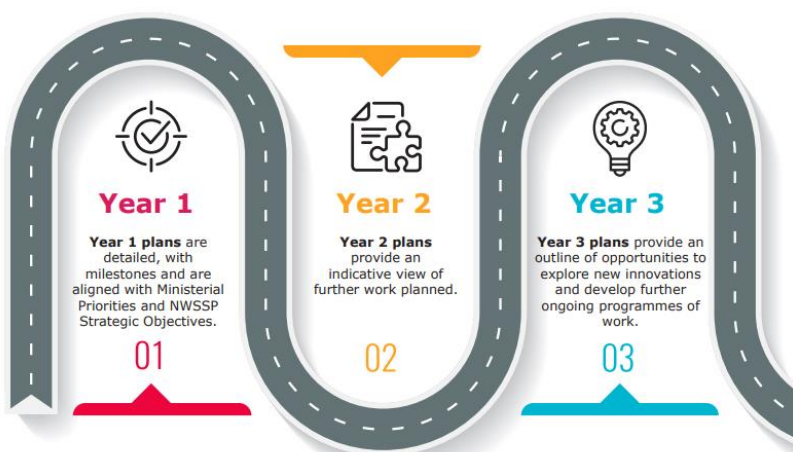
## Our IMTP Approach

We worked with our partners to develop forward thinking IMTP plans for 2024-2027 in response to the rapidly changing environment, including collaboration with HEIW and DHCW and through our Partnership Committee.





All our divisions have developed a three-year plan for their respective service areas, aligning it with the road map below. These plans will be presented as Divisional Plans on a Page, forming section two of our published IMTP, demonstrating their alignment with our overarching strategic objectives.



Our year one plan for 2024-25 has been condensed into a Plan on a Page summary, located on **page 8** of this document, emphasizing crucial components aligned with both strategic objectives and Ministerial Priorities. This plan will steer the pace of change and set the capacity for subsequent year two and three plans, summarised in **Appendix G**.

Supplementary details supporting the contents of our plans can be found in the appendices:

- Appendix A Our Digital Plan – Digital as an enabler
- Appendix B Our Financial Plan
- Appendix C Our People Plan - This is Our NWSSP
- Appendix D Key Performance Measures
- Appendix E Outcome Measures
- Appendix F Duty of Quality
- Appendix G Year 2 and Year 3 plans

### Monitoring progress against our plan

NWSSP has a Quarterly Performance Review process in place that is the main mechanism by which we monitor our organisation's performance, in line with our Performance Management Framework. We provide progress reports on our IMTP to the Partnership Committee and Welsh Government.

Quarterly Review meetings with divisions are used to assess our progress against the IMTP divisional objectives, performance measures, risk registers and both workforce and financial performance. They are also an opportunity to review proactive work relating to supporting and developing our people by division.

NWSSP have reinitiated one to one organisational performance meetings on a regular basis. The purpose of these meetings is to discuss the current performance of the services we provide and also delve into national initiatives while understanding local challenges where NWSSP may be able to offer support.

Our divisional IMTP plans continue to be monitored utilising a live tracking tool, Microsoft Lists. This provides a consistency in our approach to monitoring as well as realising the return on investment in Microsoft Office 365. This information is fed into our Quarterly Performance Review process which supports our ability to report, adapt to changing demands and apply flexibility across all Divisions.

In developing our plans for 2024-27 we have been establishing performance measures that support the outcomes within our Strategy Map. These measures are set around the three key themes of savings, quality and end user experiences. The outcomes measures have been developed through the Performance and Outcomes Group (POG) and sessions with NWSSP Senior Leadership Group (SLG). From April 2024 both Outcomes measures and existing performance measures will be reported as part of NWSSP's reporting structure.

Our performance measures are reviewed as part of the Quarterly Review process to ensure that they are relevant, ambitious yet achievable, and measurable for any new objectives identified. As part of this process, we also identify lead measures for each of our divisions and services to provide a high-level summary of our performance.

A summary of our current Key Performance measures can be found in **Appendix D** and Outcome Measures in **Appendix E**.

[Year One Plan on a Page](#)

*<TBC – Year One Plan on a Page to be inserted here>*

## Our Strategic Objectives for 2024-27

Our key focus areas for the next three years are encompassed within our strategic objectives. We continue to incorporate them within our divisional plans aligning them with Ministerial Priorities and the wider programme for government, also addressing the requirements of our customers and partners.

This section highlights key activity within our plans and how they align to our strategic objectives and outcomes, emphasising the positive impact on our customers and partners across NHS Wales.

### Value – Maximising the benefit, efficiency, and social impact of what we do for our partners.

We will optimise resource utilisation, through reducing waste and variation with a view to increase capacity, time, and money, to support our partners to improve patient care. We understand the key role we play in the Value and Sustainability agenda and are striving to strengthen our All-Wales programmes and maximise opportunities to achieve greater consistency with our partners.

Outlined below are key examples planned as part of our IMTP, highlighting the breadth of activities we will engage into accomplish our objectives, along with activity from 2023-24 that underpins and supports these objectives.

#### Service improvement and benefits realisation

We are in the process of embedding benefits realisation through clearly defining desired benefits of any project or change initiative, setting measurable targets, regular monitoring and reporting. This will be achieved through co-production and collaborative working between the Planning, Performance, and Informatics Division and divisional service teams.

In January 2023, the Service Improvement Team was fully established within Planning, Performance and Informatics Division. They developed a range of tools and good practice such as DMAIC and Six Sigma techniques and other widely used methods.

The team supported the delivery of key organisations initiatives such as Customer Service Excellence and also supported other key initiatives with services including:

- Payroll
- Accounts Payable
- Primary Care

Moving in to 2024-25 we will:

- continue to apply global good practice to support service transformation and redesign and seek to improve the range of tools available for the organisation.
- work with services to identify and realise benefits where we can be smarter and more efficient, with increased focus on quality but also using resources in a more effective way which will also support people development.

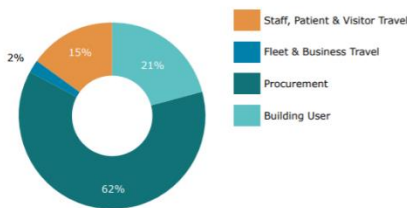
#### Decarbonisation

**What will this mean to our customers? We are supporting our partners to reduce their carbon emissions and deliver on their local Decarbonisation Action Plans.**

The NHS Wales Decarbonisation Strategic Delivery Plan 2021-2030 (the 'Plan') was developed to drive a reduction in carbon emissions from NHS Wales's operations. The Plan identifies five workstreams: Carbon Management; Buildings; Transportation and Procurement; Estate Planning and Land Use; and Approach to healthcare, with a detailed road map for NHS Wales, built around 46 initiatives which help facilitate or directly reduce carbon emissions. All NHS organisations in Wales have developed individual Decarbonisation Action Plans detailing their response to the Plan and the 46 initiatives.

NWSSP plays a critical role in supporting the delivery of the Plan and Welsh Government's ambition of a net zero public sector by 2030, at both a national and local level. This is best illustrated by the following graph, noting that NWSSP is responsible for all NHS procurement and has a substantial influence on areas such as transportation and the built environment.

**NHS Wales Carbon Footprint by Category 2018/2019**



**Source:** NHS Wales Decarbonisation Strategic Delivery Plan 2021-2030

NWSSP leads on 36 tasks in the Plan including all the procurement initiatives, many of the transport initiatives and several initiatives distributed across the remaining work streams. Specific examples of NWSSP led initiatives include the development of carbon management best practice guidance, the formation and integration into the design and build process of a net zero building standard and developing an NHS-wide system to standardise fleet practices.

### *NWSSP Procurement*

In parallel with the prioritisation of financial efficiency, the procurement service continues to work on the delivery of the NHS Wales Decarbonisation Strategy Delivery Plan in relation to identifying and reducing carbon emissions associated with procurement activity. The teams across Wales are undertaking a targeted approach on the national procurements that have the most potential to impact on reducing the carbon footprint either by changing the source of manufacture, the type of product or take measures to reduce consumption and demand.

NWSSP procurement activity includes 8 specific initiatives as set out in the Plan. Procurement is actively transitioning to a market-based approach for supply chain emission accounting. A template has been issued to the circa 3000 suppliers to establish their carbon emissions, with a due diligence process in place to monitor supplier carbon emission calculations. Additional training for procurement staff is being provided across Wales to embed a framework for assessing the sustainability credentials of suppliers.

The Foundational Economy, Circular Economy and Well Being Impact opportunities are also key areas for NWSSP, maximising value to the local supply chain, where possible, whilst maintaining high standards for goods and services. NWSSP continue to collaborate with stakeholders and work with procurement teams, and individual Health Organisations, to meet the decarbonisation targets as set out in the Plan and embed NHS Wales decarbonisation ambitions into procurement procedures across Wales.

### *Transport Task and Finish Group*

NWSSP chairs and facilitates the All-Wales Transport Task and Finish Group. The group has focused on All-Wales solutions for initiative 17 in the Plan, working with Health Organisations to develop the best practice approach for Electric Vehicle charging technology, procurement, and car park space planning. The group has published an All-Wales guidance document and will now focus on facilitating Health Organisations developing their individual approach for Electric Vehicle charging infrastructure.

### *NWSSP Carbon Footprint*

In addition to the national initiatives, NWSSP has its own local Decarbonisation Action Plan, which has an internal focus aimed at decarbonising our own facilities and activities. Key actions include reducing the impact of our buildings, fleet and All-Wales Laundry Service, as well as working with staff to help raise the profile of decarbonisation across the organisation. Our Decarbonisation Action Plan is being refreshed to be published in March 2024 with an ambitious delivery map, which is fully aligned to the Plan.

### *ISO14001 Environmental Management Standard*

We are highly committed to maintaining the ISO14001 standard and as a result annual surveillance audits are undertaken to assess continued compliance with the standard.

NWSSP is committed to environmental improvement and operate a comprehensive environmental management system to facilitate and achieve the environmental policy. Moving into our 2024-27 IMTP our future focus needs to:

- Demonstrate a holistic approach to the standard giving consideration as to how far we invest under section 6 of the Environment (Wales) Act 2016.
- All our services need to nominate dedicated 'green team' champions to foster greater engagement across the organisation.
- A management reporting schedule to be developed for Procurement Sites' carbon footprint reporting to ensure that this is monitored monthly, including waste streams.
- Services are to ensure that the green team are involved when procuring new sites or relocating to enable the proactive capture of environmental considerations.

Some key NWSSP decarbonisation successes include:

- The rollout of electric vehicles, now totalling 34, has generated a large saving of diesel vehicle miles per annum.
- NWSSP administer the Lease Car Salary Sacrifice scheme for most Health Organisations and have recently reduced the CO<sup>2</sup> limit for available cars, so all new cars ordered are either Electric or Hybrid.
- We have acquired responsibility for operating the NHS Wales Laundry and Linen services. As part of this programme there is a major plan to modernise the laundry facilities across Wales following the low carbon design aims within the Plan.
- There is a 'Green Team' within NWSSP comprising representatives from each directorate and the main sites. The role of this group includes sustaining wider staff engagement in delivery of the NWSSP Decarbonisation Action Plan.
- NWSSP has implemented vehicle tracking and analysis of vehicle routine schedules, which informs optimal use of Electric Vehicle fleet.
- We have completed full LED light provision at IP5 Distribution and Warehouse centre in Newport.
- NWSSP have commenced work on the design and tendering of works to provide a Photo Voltaic array and Electric Vehicle charging infrastructure at the IP5 site.

#### *Climate Change Adaptation*

The Welsh Government's 5-year plan; A Climate Conscious Wales, sets out a national adaptation programme to respond to climate impacts. It shares a vision for a 2030 Wales which has the resources, is prepared, has the knowledge to understand the risk and challenges ahead, and has the capacity to adapt to the impact of climate change. The Climate Change Committee published a report in June 2023 which assessed the progress of delivering this adaptation plan. The report set out recommendations for the Health and Social Care sector which included developing a long-term cross sector approach to address risks, developing a Health and Social Care indicator suite, and ensuring a joined-up approach between mitigation and adaptation.

Local Partnerships (LLP) has been appointed to by the Health and Social Care Climate Emergency Adaptation Project Board to work with NHS organisations to deliver these recommendations. They are assessing cross-sector readiness across the NHS, with the aim to embed climate risk assessment and adaptation planning into the delivery of health care, and for the improvement of health outcomes. They expect to make these tools available in 2024.

NWSSP are supporting and facilitating the work of the above review by sharing our own approach to adaptation and utilising our established network of customers and partners to facilitate engagement.

NWSSP understands the need for NHS Wales to be well-adapted to climate change requires the direct impacts of climate change on people's health to be minimised, and for the delivery of health care to not be disrupted by weather extremes. We also recognise the actions taken for decarbonisation and adaptation are connected and have potential co-benefits. For example, Special Estates Services are already working to support the review of *Health Memorandum- Making Energy Work in Health Care* to develop best practice guidance for NHS Wales, which includes recommendations to improvement the fabric efficiency of buildings which can also make them more resilient to future changes in climate.

Our activities to address climate change adaptation include:

- Continuing to report adaptation activities and progress through the NWSSP Decarbonisation Programme Board.
- Reviewing our action plan to establish where planned decarbonisation activities also support adaptation.
- Developing and supporting an approach working with the Welsh Government Health and Social Care Climate Emergency Programme to support the management of our risks, and those of our partners and customers.
- Prioritising identifying the data and skills we need, ensuring appropriate governance is in place, educating and engaging with our workforce, and identifying the funding necessary to deliver the activities required.

#### Foundational Economy and Wellbeing Impacts

**What will this mean to our customers? Our aim is to increase resilience in the supply chain and increase the expenditure and contracts awarded to Welsh Suppliers.**

NWSSP recognises that our procurement services have an obligation to provide patients and the community with the best quality service, ensuring the right product, provision or service has been sourced and supplied efficiently and at the right price for All-Wales.

Our commitment as a service is to source, supply and deliver the best value products and services through collaboration with our customers and partners across Wales in the challenging times ahead, both economically and financially, and to provide reinvestment into the Welsh economy.

Our procurement strategy embraces the Wales first principles of nurturing local supply chains and providing opportunities via competitive tendering to promote economic regeneration, by ensuring equal opportunities via local, regional, and national strategies on all contracts for goods and services.

The Sustainability Team remains committed to advancing the four principal workstreams outlined below, as well as a newly introduced objective focused on promoting the circular economy to minimise waste generation and necessity for new purchases.

- Foundational economy training and support to the buying and sourcing procurement teams.
- Engagement and direct support to Welsh suppliers.
- Improvements to Procurement Services' data and reporting.
- Ambitions to drive innovation and best practice.
- Introducing circular economy principles into procurement processes and across the broader NHS.

The Sustainability Team maintains its close collaboration with procurement to actively promote change and contribute further to the Welsh Economy. Considering recent cost pressures experienced within each of the Health Boards, there is a growing need for generating cash-saving initiatives. This presents a challenge when striving to uphold the principles of the Foundational Economy and Social Value. Consequently, we have been exploring prospects for implementing Circular Economy projects, which



will not only result in cost savings but also foster social value and support the Foundational Economy. These projects encompass a range of initiatives, including the reutilisation of nurses' uniforms, walking aids, nappy recycling scheme, remanufactured medical devices, and repurposing cardboard waste, among others.

Within the scope of our ongoing operations, we have consistently awarded contracts to local suppliers. This approach has yielded multiple advantages for the Welsh economy. We utilise a Social Value Qualitative approach, which is integrated organisation-wide and assigns a mandated 15% weighting for the total award criteria in our tendering activities.

As we align ourselves with the broader Welsh Public Sector, a new term is emerging to enhance the promotion of the **Well-being of Future Generations (Wales) Act 2015** (WBFGA). From now on, we will use the term "Well-Being Impacts" to describe what was previously referred to as "Social Value." This term is defined as follows: "Well-being Impacts describe the positive contribution our commercial activity can have on the economic, social, environmental and cultural well-being of Wales in a way that accords with the sustainable development principle, as articulated in the **Well-being of Future Generations Act.**"

The incorporation of this element and the collaboration with the broader Public Sector signifies NHS Wales's commitment to aligning with the WBFGA, recognising this Act as a key legislative driver, alongside the future Social Partnership and Public Procurement (Wales) Bill (SPPP). Over the next year, we will closely collaborate with procurement teams and suppliers to conduct a pilot program aimed at identifying measures that will exert the most significant influence on the Welsh Economy. The outcomes of these pilot initiatives will be consolidated to formulate the mandatory reporting criteria outlined within the SPPP.

In order to sustain the well-being of the Welsh economy during the COVID-19 recovery and in light of the cost of living challenges, it is essential to prioritise the expansion of the Foundational Economy. This will help secure jobs and economic resources within Wales.

The focus on Foundational Economy has supported procurement teams across NHS Wales in awarding approximately £16m worth of NHS Wales contracts to suppliers based in Wales in 2022-23 and £9.8m in Quarter 2 (Q2) 2023-24. These contracts, combined with agreements secured in previous years, and other activities, concentrated on improving procurement's Foundational Economy outcomes and have all helped direct over £490m (Q2 2023-24) of NHS Wales's non-pay expenditure to suppliers based in Wales. On this performance, NHS Wales will continue to achieve high levels of investment in the Foundational Economy in 2023-24, delivering much-needed funding to Wales-based businesses as they support our national recovery and support against the cost-of-living crisis.

To address queries regarding the foundational economy and spend in Wales received from recent 1 to 1 organisational performance meetings, NWSSP is exploring the development of enhanced reporting at a more regional level within Wales.

Moving in to 2024-25 and beyond we will be looking at the following:

- Current Contract Wellbeing Impacts Review - Using well-being Impacts aligned to the Well-being of Future Generations Act we will be contacting all Welsh suppliers to gain an understanding of the value delivered from contracting with them. This will be started in 2023-24 but will not be complete till 2024-25. The aim is to gain an understanding of Welsh landscape and then to devise a strategy to increase on its delivery.
- Welsh Life Science Mapping - Mapping current supply to Welsh Suppliers to ascertain potential product switches.
- Review of plastic waste that can be recycled to be sold into the Welsh Injection Moulding Industry.

- Contract Pipeline Review to be published to include Foundational Economy opportunities and potential for Wellbeing Impact opportunities.

## Procurement

**What will this mean to our customers? Supporting our customers to realise cost efficiencies and save staff time enabling a focus on patient care.**

### *Savings and Financial Efficiency*

NWSSP Procurement Services is committed to delivering £40 million cash releasing savings for NHS Wales organisations in the 2023-24 financial year. This target is composed of local, regional and national savings plans developed by the teams across Wales for a range of goods and services. In the context of the very challenging financial environment facing NHS Wales and the need to facilitate further savings opportunities, the service is providing advice to the NHS Wales Value and Sustainability Board identifying areas where senior Board Executive and Welsh Government support will be required to address clinical preference and unlock the full potential of the additional savings pipeline.

In some areas of medical and clinical non-pay expenditure, variation in the use of manufacturers' brands across Wales has created price variations between Health Boards which need to be challenged and wherever possible a standardised product range agreed for future use which maximises the potential of a national approach to procurement.

Moving into 2024-25 we will be developing an agreed national, local, financial and non-financial savings and reporting strategy.

**<Targets available end of January/February 2024 currently being discussed - to be added before submission to WG.>**

### *Legislative Changes*

The legislative framework within which the Procurement Service operates is also changing significantly over the next 12 months with the introduction of the **Social Partnership and Public Procurement (Wales) Act 2023** and the **Procurement Act 2023**.

The Procurement Act 2023 will replace in its entirety the current, European Union derived, public procurement regime for the UK following Brexit. The changes are designed to increase flexibility for buyers when engaging with the market and improve transparency in decision making. **The Social Partnership and Public Procurement (Wales) Act 2023** will cover some of the areas within the **Procurement Act 2023** but focus more specifically on issues relating to social value through partnership, socially responsible procurement, fair work and sustainable development. The introduction of these pieces of legislation will require significant training and awareness for procurement practitioners, stakeholders and suppliers within the market.

## Recruitment Modernisation

**What will this mean to our customers? A modernised and efficient recruitment service that meets the needs of our customers.**

### *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 several changes and improvements have been made to processes, education and technology.



Key process changes that have been implemented include:

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

Moving into 2024-25 we will be:

- Reviewing 'owning the journey' progress across NHS Organisations and evaluating the benefits.
- Exploring ideas through consulting with other Organisations and recruiting managers.
- Carrying out a 'back to basics' review to ensure all implemented changes are effective.
- Utilising digital technology available to support further reductions in 'time to hire'.

#### *Digital Identity Checks - Improvements*

The implementation of Trust ID in October 2022 has also seen a positive impact on the time taken to complete identity checks, with over 50% of applicants now completing their identity check within three days of receiving their offer letter, compared to 30% prior to implementation. The main driver of this improvement being the applicant's ability to access this system 24 hours a day, 7 days a week at their convenience.

#### *Reducing Time to Hire – Owning the Recruitment Journey*

Whilst the changes to process and implementation of Digital Identity validation software is showing positive results, there is additional activity NHS organisations, and recruiting managers can do to support a reduction in the time to hire, including planning recruitment activities in advance and streamlining the number of vacancy approvals required. These activities form phase two of the Recruitment Modernisation Programme and have been supported by our Partnership Committee.

The Recruitment Service have developed and shared a suite of known issues within the Recruitment Process that are owned by NHS Organisations, with proposed solutions, including the sharing of performance reports and holding regular engagement sessions across Wales with recruiting Managers. The Recruitment Service will continue to hold engagement sessions with recruiting managers on the Recruitment Modernisation Programme, including communicating tips to reduce the time to hire to support organisations through phase two of the programme. A key component to the recruitment process is managers participation. Managers are advised to keep in touch with their appointee and review the Trac recruitment system regularly to reduce delays.

#### *Payroll Modernisation*

**What will this mean to our customers? A reduction in overpayments and associated process and an increase in Management Self Service, resulting in increased payroll accuracy.**

Our Employment Services team have developed a payroll overpayments portal to support NHS Organisations to reduce the frequency of these payments, as over 90% of overpayments are generated by the employing organisations through late or incorrect submissions. The portal enables organisations to target managers who may require retraining and additional support.

Additionally, the portal is being further developed to capture information on the recovery element on each overpayment, which is activity undertaken by each Health Board finance team. Therefore, the overpayments portal will have a complete history on every overpayment from discovery to recovery.

The adoption of Management Self Service (MSS) by all Health Boards and their applicable manager, will eliminate the use of Staff Movement Advice (SMA) forms across NHS Wales. As there will be only one system (MSS) open to management to supply information to payroll on starters, leavers and staff changes into ESR.

By only having one system (MSS), this should reduce delays in notifications which lead to overpayments, as the managers will become more familiar with the MSS system and as it's a direct feed into ESR, which will reduce double handling from an administrative perspective.

Moving into 2024-25 we will be:

- Supporting digital skills across NHS Wales through the development of training videos to support staff to increase self-service skills with an aim to reduce overpayments.
- Encourage Health Boards who have not already implemented Manager Self Service to adopt it, highlighting the benefits of the system.

#### Welsh Risk Pool

**What will this mean to our customers? A trained workforce across Wales with a network that supports achieving excellence and consistency aimed at reducing the risk of litigation.**

Welsh Risk Pool (WRP) is part of the NWSSP Legal and Risk Service. Responsible for the reimbursement of expenditure for claims and redress cases incurred by all organisations. The role of the WRP is to have an integrated approach to risk assessment, claims management, reimbursement and learning to improve. The team work across Wales to promote and facilitate opportunities to implement learning from events, reduce the risk of litigation and support the development and implementation of improvements to enhance patient safety and outcomes.

Key areas of work include:

- Consent to Examination and treatment to enhance processes across NHS Wales. A national review has been undertaken and WRP have supported Health Bodies in measuring their performance against standards in this topic. The team have developed and successfully launched a Wales-specific e-learning package which supports all staff involved in taking and recording consent and supporting a national pilot of digital consent technology.
- Support for all organisation to enhance their application of the Putting Things Right complaints process. A series of assessments have been undertaken and all organisations have developed action plans towards continued improvement. The team are working closely with colleagues from Welsh Government as part of the update to the legislation in this area.
- Enhancing Learning Organisations is a short-term programme aimed at improving the quality of learning and actions taken following an incident or claim. The team are supporting organisations to produce an All-Wales Model Policy and key metrics to enable local measurement of the performance of learning.

Further focused areas of work are highlighted below.

#### *PRactical Obstetric Multi-Professional Training (PROMPT) Wales*

PROMPT is maternity safety programme funded by WRP and supported by the PROMPT Maternity Foundation and has been embedded since 2019. Community PROMPT Wales was developed in 2020 to provide bespoke training for community midwifery teams, based on PROMPT methodology.



The key aims of this programme is:

- To reduce variation in training and practice across NHS Wales.
- To improve safe outcome for babies and families
- To reduce claims profile in maternity and neonatal services.

#### *Intrapartum Fetal Surveillance Wales*

Fetal monitoring has been identified as a critical contributory factor in cases where improvements in care may have prevented a poor outcome. Our team are working with national bodies to reduce variation.

- A standardised, All Wales training programme in Intrapartum Fetal Surveillance (IFS).
- Faculty trained and programme ready to be piloted within all maternity services.
- It is anticipated that all midwives and obstetric doctors will attend annually.



#### *Neonatal Multiprofessional Training Wales*

The team are currently in scoping phase of this programme of work. The Neonatal Multiprofessional Training (NMT) Programme will provide a bespoke and standardised training experience for neonatal teams across NHS Wales.

It will be designed to complement existing 'clinical skills' training, bringing both clinical and human factors training to the clinical setting, and enabling all members of the team to participate.



#### *Duty of Quality*

**What will this mean to our customers? A focus on quality, reliable, safe, and effective services in line with standards and regulations as appropriate, supporting the overall health system.**

#### *The Health and Care Standards*

In the first year since the launch of the Duty of Quality (DoQ) we have concentrated on embedding the knowledge of the 12 Health and Care standards across the organisation. The interpretation and application of the 12 Health and Care standards for non-clinical as well as clinical services is an exciting opportunity for NWSSP.



Quality standards	Quality enablers
Safe	Leadership
Timely	Culture
Effective	Workforce
Efficient	Information
Person Centred	Improvement
Equitable	Whole system

Evidence that demonstrates our commitment to quality in 2023-24 include:

Achievement	Division	Quality Domains	Quality Enablers
Decision to seek and achievement of NWSSP wide customer service excellence accreditation.	<ul style="list-style-type: none"> <li>NWSSP wide</li> </ul>	<ul style="list-style-type: none"> <li>Equitable</li> <li>Person centred</li> </ul>	<ul style="list-style-type: none"> <li>Leadership</li> <li>Culture</li> <li>Information</li> </ul>
Award for Scan for Safety roll out work.	<ul style="list-style-type: none"> <li>Procurement</li> </ul>	<ul style="list-style-type: none"> <li>Person Centred</li> <li>Efficient</li> </ul>	<ul style="list-style-type: none"> <li>Innovation</li> <li>Whole system</li> </ul>
PROMPT training awards, development of new courses and spread and scale of existing training.	<ul style="list-style-type: none"> <li>Legal and Risk</li> </ul>	<ul style="list-style-type: none"> <li>Person Centred Safe</li> <li>Effective</li> </ul>	<ul style="list-style-type: none"> <li>Learning &amp; improvement</li> <li>Leadership</li> <li>Culture</li> <li>Whole System</li> </ul>
Payroll modernisation.	<ul style="list-style-type: none"> <li>Workforce</li> </ul>	<ul style="list-style-type: none"> <li>Effective</li> <li>Efficient</li> <li>Equitable</li> <li>Timely</li> </ul>	<ul style="list-style-type: none"> <li>Leadership</li> <li>Innovation</li> <li>Whole System</li> </ul>
Medical Examiners Quarterly reports to Health Boards/Trusts – Health Board referrals structured against the standards.	<ul style="list-style-type: none"> <li>Primary Care</li> </ul>	<ul style="list-style-type: none"> <li>Safe</li> <li>Effective</li> </ul>	<ul style="list-style-type: none"> <li>Culture</li> <li>Whole system</li> </ul>
Introduction of new product lines in TRAMs.	<ul style="list-style-type: none"> <li>Pharmacy Services</li> </ul>	<ul style="list-style-type: none"> <li>Effective</li> <li>Efficient</li> <li>Safe</li> </ul>	<ul style="list-style-type: none"> <li>Whole system</li> <li>Innovation</li> </ul>

NWSSP has also supported the production of an All-Wales Duty of Quality e-learning module, launching in December 2023. We will be championing the use of the module internally, through the Duty of Quality Implementation group, which is made up of representatives from each of the NWSSP Divisions.

*Quality Driven Decision making*

A Quality Impact Assessment of the 2024-27 IMTP which can be found in **Appendix F**, demonstrates the importance we place on assessing quality at the strategic planning level. We have also mapped the standards through the document utilising the relevant icons, where they apply.

Embedding the 12 Health and Care standards as more formal considerations in our day-to-day decision making, as well as writing in quality metrics for commissioned and procured services is a task we will continue to pursue through the coming year.

### Quality Management Systems

Each of our divisions have a Quality Management System (QMS) tailored to the very different needs of each division, ranging from a clinically based QMS in our Pharmacy Services and Surgical Materials Testing Laboratory to the largely non-clinical Procurement and Workforce Divisions. Sharing of best practice across divisions is a key element of our ongoing quality improvement strategy.

### Reporting

Monthly 'always on' reporting began in 2023 with divisions preparing presentations demonstrating how they embed quality across their service. These presentations are hosted on the NWSSP SharePoint site, which also serves as a learning resource across the organisation.

Moving into 2024-25, monthly reporting will increase with all divisions highlighting how they integrate quality into their services, this will provide us with a comprehensive overview of our organisational approach to DoQ.

### Our people- Working together to be the best that we can be.

We recognize that providing fulfilling employment and career opportunities will positively impact the Population of Wales. Our People Plan set out in **Appendix C**, continues to be developed with the health and well-being of our people at the heart and builds upon the strong foundations we have already created.

### Anti Racist Wales Action plans



**What will this mean to our customers? A commitment to promote diversity, equity and fairness.**

Through the development of our recently published Diversity and Inclusion Action Plan, we have identified several opportunities to increase the diversity of the organisation to better reflect the communities we serve. Alongside this we are committed to providing an inclusive workplace into which we can attract and retain talent, where people feel welcomed, safe, and that they belong.

In response to the publication of the Anti-racist Wales Action Plan in June 2022, we have additionally developed NWSSP's Anti-Racist Wales Action Plan. This focusses specifically on the following goals:

- The NHS in Wales will be anti-racist and will not accept any form of discrimination or inequality for employees or service users.
- Staff will work in safe, inclusive environments, built on good anti-racist leadership and allyship, supported to reach their full potential, and ethnic minority staff and allies; both be empowered to identify and address racist practice.

To this end we have committed to a series of actions in 2024-25 which include the following:

- Appointment of an Equality, Diversity and Inclusion Director Sponsor.
- Appointment of a Culture Change Director Sponsor.
- The recruitment of Diversity and Inclusion Ambassadors to support colleagues.
- Creation of employee networks that will have access to senior leaders and sponsors.
- Establishing a race equality network that can support an audit.
- A reverse mentoring scheme for senior colleagues to learn from those with lived experience.
- Education of our senior leaders in unconscious bias and anti-racism.
- Increased opportunities for learning, awareness and open conversations to support development of all colleagues.

## Health and Well-being

**What will this mean to our customers? A commitment to promote and support a healthy and engaged workforce.**

Great strides have been made in 2023-24 in the development of our Health and Well-being offering at NWSSP. Developments include the implementation of a Health and Well-being Framework with our Health and Well-being champions. We have also supported our staff with menopause awareness, physical fitness sessions, stress awareness workshops and enhanced our mental health support provision through collaborative working with partners such as Mind, Silver Cloud, Time to Change Wales and Headspace.

Moving into 2024-25 we will:

- Further our support of a healthy and engaged workforce ensuring people have a voice and that we listen to that voice in conjunction with other activities within this is our NWSSP.
- Review our Health and Well-being framework with the Health Well-being Champions.
- Provide further development of financial well-being provision.
- Provide in-house accredited training via our accredited training centre for Mental Health First Aid to increase the number of Mental Health First Aiders to support our staff

## Accommodation Strategy in an agile work environment

**What will this mean to our customers? We are driving efficiencies across our organisation and promoting a culture of open communication.**

During 2023 we have started to undertake a strategic evaluation of our Estate: owned, leased and occupied properties. The aim of this evaluation is to reduce costs and align the use of space with our values and objectives, through maximising benefit and efficiencies. An estates rationalisation programme will support us to streamline our portfolio to better meet the needs of the organisation.

We understand that implementing an accommodation strategy within the agile work environment of NWSSP requires flexibility and collaboration. We are continuing to promote a culture of open communication and empowerment to encourage staff to embrace our agile practises contributing to dynamic and responsive services.

Building on the existing agile practices in 2425 NWSSP is seeking too:

- Consolidate our Southeast locations in Companies House and Charnwood Court into a new Headquarters potentially in the Nantgarw area.
- Increase the potential availability of other hot desk facilities in other locations such as IP5, Matrix House and potentially use of other NHS organisations.

## Single Lead Employer

**What will this mean to our customers? Improved medical, dental and pharmacy trainee experience leading to improved retention across Wales.**

The Single Lead Employer (SLE) is an arrangement that was put in place to manage and support all Medical and Dental trainees across Wales in collaboration with Health Education Improvement Wales (HEIW). The roll out of the model to the remaining trainees has now been completed and business as usual arrangements are now in place with Health Boards. With the introduction of a Trainee Hub and Mobile App in 2023 the focus remains on continually improving the service we provide to trainees.



With ongoing engagement with trainees, staff representatives, HEIW and host organisations, we will continue to focus on improving and streamlining the Single Lead Employer model by implementing the following key actions that emerged from stakeholder feedback and an internal service review:

- Improved trainee on boarding/customer experience.
- Improved support arrangements for overseas trainees.
- Reduced waste and duplication of transactional activities.
- Working with partners to reduce the late notification of pay impacting information to payroll, resulting in a significant reduction in overpayments.
- Regular trainee surveys to continuously monitor trainee satisfaction with the SLE Model.

Key Performance Indicators have been agreed with partners (NWSSP, HEIW and NHS host organisations) and 2024-25 will focus on automating and embedding these into a monthly reporting process for stakeholders.

### Growing our future workforce

**What will this mean to our customers? The provision of resilient, futureproofed services alongside employment opportunities within our local communities.**

NWSSP is committed to the widening access agenda and to ensure that we provide opportunities for employment and growth to those in the communities we serve. In 2023-24 we focussed on growing the Welsh Language skills of our substantive workforce to ensure we are representative of the communities in which we work and developing access to NWSSP through Career Entry Routes.

We promoted employment opportunities through career events in partnership with education and other organisations including charities and agencies who support access to inclusive work placements. Increased promotional activity saw us recruiting more Network 75 trainees than in previous years with 10 students joining us across 6 of our professional service areas.

In 2024-25 we are committed to the further development of our Widening Access approach, focussing on:

- Increasing the numbers of staff that join us with protected characteristics
- Continuing to grow the Welsh Language skills of our substantive workforce to ensure we are representative of the communities in which we work
- Further developing access to NWSSP through Career Entry Routes specifically focussing on increasing our apprenticeship routes and exploring other opportunities such as internships.
- Further promotion of opportunities through Career events in partnership with education and other organisations including charities and agencies who support access to inclusive work placements.

### Services- Driving the pace of innovation and consistently providing high quality services.

We recognise the transformative impact of data and outcome driven services and how they contribute to improving experiences for Welsh NHS patients and the broader population. Our case studies, achievements and innovations on **page 5** highlight how we are working towards this objective, incorporating the use of technology, our innovation hub and partnership working.

### Future NHS Workforce Solution Programme

**What will this mean to our customers? A flexible, agile Human Management system that is more responsive to the needs of NHS Wales which interfaces seamlessly to other NHS Wales e-systems.**

We are working closely with NHS Business Service Authority (NHSBSA) to lead on behalf of NHS Wales the development and implementation of the Future NHS Workforce Solution, which will subsequently replace the current Electronic Staff Record (ESR). This will be one of the biggest digital transformation programmes NHS Wales staff will experience for some time and will run throughout the three-year term of this IMTP.

The contract with the current service provider ends in 2025 and the Oracle e-business suite on which ESR is built moves to 'end of support' in 2033. Procurement activities are underway and will continue throughout year one of our IMTP. Contract award will take place in 2025. During this period, we will be supporting NHS Wales organisations to get ready for the future solution, through optimisation and readiness activities. Following the contract award, all NHS Wales organisations will migrate to the new solution by 2030. This transformation programme will provide a robust, intuitive, agile workforce system that meets the evolving needs of NHS Wales.

We anticipate that in year 2 of our IMTP, and post contract award, build and migration work will commence with early adoption organisations agreed. We on behalf on NHS Wales are keen to capitalise on the benefits provided by the Future Workforce Solution and are working on plans to ensure NHS Wales are in the best position to be an early adopter. In Year 3, our ambition is to be one of those early adopters and commence the transfer of NHS Wales users to the new platform. We will continue to engage with NHS Wales Colleagues and strategic leads through newly established governance structures.

#### Medical Examiner Service



**What will this mean to our customers? Independent scrutiny of all deaths not investigated by the coroner.**

In April 2023, the UK Government set out the next steps towards the creation of a statutory Medical Examiner System from April 2024. Relevant provisions of the Coroners and Justice Act 2009 and Health and Care Act 2022 commenced in autumn 2023, setting out the requirements of local health systems to prepare for the statutory introduction of Medical Examiners, to become operational from April 2024.

The purpose of the medical examiner system is to:

- Provide greater safeguards for the public by ensuring independent scrutiny of all non-coronial deaths.
- Ensure the appropriate direction of deaths to the coroner.
- Provide a better service for the bereaved, and an opportunity for them to raise any concerns to a doctor not involved in the care of the deceased.
- Improve the quality of death certification.
- Improve the quality of mortality data.

In Wales, NWSSP provides this function through the Medical Examiner Service for Wales. This Service employs medical examiners, who are all senior doctors and medical examiner officers, who support medical examiners in the discharge of their duties and together they provide high quality, consistent and independent scrutiny of all deaths not referred directly to a coroner.

#### Customer Service Excellence Accreditation



**What will this mean to our customers? Demonstrating our competence, customer focus and commitment to continuous improvement.**



In 2023, with the support of our Service Improvement Team, NWSSP successfully achieved the Customer Service Excellence (CSE) Accreditation at a corporate level, highlighting the range of core customer service competencies across the organisation. We achieved:

- 12 Compliance Pluses (Exceeded the standards required)
- 33 Compliances (Met the standard required)
- 2 Partial Compliances (Areas of Improvement)

Moving into 2024-25 we will:

- Develop and monitor Divisional action plans focussing on the areas identified for improvement in the CSE Assessment.
- Facilitate cross divisional collaboration and sharing of good practice to deliver improved customer satisfaction.
- Support Divisions to maintain the accreditation and work towards the 2024 assessment.

### COVID-19 Public Inquiry and litigation

**What will this mean to our customers? Receipt of expert legal advice which supports careful decision-making and legal and risk management.**

Our Legal and Risk teams will continue to support NHS organisations in Wales in relation to litigation arising from the COVID-19 pandemic. This includes legal claims, concerns investigated under the Putting Things Right Regulations and the UK COVID-19 public inquiry. We are very mindful of the financial burden the COVID-19 public inquiry is placing on the NHS in Wales, the cost in terms of staff time, and the emotional impact on those staff involved. We will continue to work together with every NHS organisation across Wales to share learning and minimise the impact on NHS staff and patients.

### Low Vision Service

**What will this mean to our customers? A modernised service that is embracing opportunities to adapt and become more streamline.**

The Low Vision Service Wales (LVSU) was successfully transferred from Hywel Dda University Health Board to Primary Care, Professional and Clinical Services on 1 June 2023. This transfer was underpinned by Transfer of Undertakings Protection of Employment rights (TUPE) principles.

#### *Continued service development*

An initial review of systems and processes has presented opportunities for service modernisation. We have supported the profession with the decommissioning of fax machines, affording us an opportunity to move to secure file sharing arrangements, whilst enhancing compliance in respect of Information Governance and General Data Protection Regulations (GDPR).

We continue to work with procurement colleagues to ensure that the service is supported with an appropriate supplier contract and our timetable for contract award is in Quarter 1, 2024. The two initiatives above will remove service risks identified during the transfer period.

#### *Staff development*

With the introduction of the Ophthalmic contract, we continue to seek opportunities to further modernise the existing Low Vision arrangements whilst also embracing opportunities to adapt and streamline to meet legislative changes.

We are currently working with the LVSW team to further embed them within the wider transactional based services. Offering additional opportunities to our LVSW colleagues to support their training and development pathway, whilst building resilience within the existing team.

## Pharmacy Services

### Medicines Unit

#### **What will this mean to our customers? Supporting local aseptic, cancer and critical care services within our partner Health Boards.**

Our Pharmacy Medicines unit is a Medicines and Healthcare products Regulatory Agency (MHRA) Licenced “Specials” Manufacturer and Wholesale Dealer facility focussed on the preparation of high-risk/high-cost medicines for NHS Wales.

The facility can supply “Specials” Medicines (products specially manufactured for the treatment of individual patients) under its licence by utilising semi-automated technologies that are advancing the quality, safety, and value of medicines by reducing costs and environmental impacts. The unit works with partners across Health Boards in Wales to identify opportunities to support local aseptic services with capacity or financial challenges, including the implementation of national recommendations such as the management of systemic anti-cancer therapy service capacity.

Under the Wholesale Dealer licence, the Pharmacy Unit continues to purchase targeted medicines on an All-Wales basis to improve supply resilience, service agility and drive reductions in medicines expenditure. The Wholesale Dealer activities also allow NWSSP to supply the COVID-19 vaccines to both primary and secondary care sites across NHS Wales.

Service developments encompass the provision of NHS Wales Medical Gas testing services, cost reduction through decreased reliance on commercial suppliers and decontamination support to partner Health Boards with innovative disinfection techniques developed within NWSSP.

### Transforming Access to Medicines (TrAMS)

#### **What will this mean to our customers? Establishing cost-effective resilience in our medicines supply, improving the patient experience through the provision of high quality medicines and services.**

We are continuing to lead on this comprehensive programme of people, process and capital investment to reconfigure Pharmacy Technical Services across NHS Wales into a single shared service.

This transformation will demonstrate improvements in quality, safety and regulatory compliance ultimately ensuring equitable access to patients across Wales to medicine and associated cost recharges.

TrAMS Programme is referenced in the Wales Cancer Action Plan as a key enabler for securing supply of Systemic Anti- Cancer Therapies. During 2023 the programme was able to complete the Organisational Change Phase 1 process and recruitment of the national leadership structure.

Work planned for 2024 – 2027 will include:

- Building three regional medicine preparation hubs, selecting the preferred localities for them, progress design work, and preparing Business Cases to support investment decisions. The status of the plan depends on the availability of capital funding and is expected to be as follows:

- 2024-25 will see the development of a South-East Wales Radiopharmacy service based within IP5. (Radiopharmacy involves preparing radioactive injectable medicines, mostly in support of diagnostic scanning.)
- 2025-26 - South East Wales Systemic Anti-Cancer Therapy (SACT – injectable chemotherapy) suite.
- 2026-27 – Central IntraVenous Additives (CIVA – injectable medicines) Suite
- Supporting and stabilising legacy services across Wales in the face of facilities and workforce capacity issues.
- Working in partnership with Health Education and Improvement Wales to develop a training programme to develop and expand the current workforce.
- Continuing the organisational change processes with full staff engagement.
- Working in partnership with Digital Health and Care Wales, development, and deployment of digital and stock control systems.
- Ongoing clinical engagement to standardise practice and remove unwarranted variation across NHS Wales
- Working in partnership with the other UK Nations on standardisation of the product catalogue, stability research, and sharing best practice.

#### Medicines Value Unit

**What will this mean to our customers? We are enhancing value and optimising resources efficiently to the benefit of our partners and patients.**

The Medicines Value Unit, after completion of the staff recruitment phase, is now undertaking a programme of targeted commercial procurement activity aimed at securing new and innovative pharmaceuticals and therapies for NHS Wales and the patient population adding value and efficient resource utilisation. The activity will be clinically led and grounded in evidence-based approaches to secure outcomes that matter to patients.

The current programme of work within the Medicines Value Unit is focussed on several key activities:

- Targeting of unlicensed medicines contracting by developing nationally standardised product specifications and undertaking market engagement to bring 30% of Wales's unlicensed medicines off-contract expenditure under once-for-Wales contract agreements.
- The unit is currently undertaking a national review process in relation to Homecare Medicines to understand the opportunities for an All-Wales approach to provision of homecare medicines whilst also supporting NHS Wales with the implementation of efficiency opportunities arising from medicines where there is loss of exclusivity. This work is undertaken with key stakeholders such as the All-Wales Medicines Strategy Group and All-Wales Therapeutics and Toxicology Centre.

## Ministerial Priorities

Whilst the Ministerial Priorities in the 2024-27 Planning Framework are primarily directed at local Health Boards, we have considered how our plans will contribute and provide support to these priorities through the work we have already highlighted as part of achieving NWSSP's Strategic Objectives. Further work includes the following areas:

### Speaking up Safely

NWSSP is as committed as ever to work towards positive change. Through our 'This is Our NWSSP' culture change programme we have ensured that colleagues have a voice in shaping the way we work

and we have taken their views forward. We recognise that not all colleagues feel safe to have a voice in the organisation and that when things sometimes go wrong, it is vital that colleagues can raise concerns, feel safe in doing so, have confidence that they will be treated with respect and empathy, and that concerns will be addressed.

To support colleagues in this NWSSP is making several commitments which include the following:

- Creation of an NWSSP Policy and Procedure for Speaking up safely which will address the complexities of the organisation whose employees are positioned within our own sites but also with other NHS organisation. The latter is particularly relevant regarding employees of the Single Lead Employer service. This will include a mechanism to ensure concerns raised are captured and themes are reported within agreed timescales.
- The appointment of a Speaking up Safely lead who will focus on the implementation of the policy and facilitation of the process.
- Education for all the organisations' ambassadors and champions who may be approached in confidence or in a position to hear from colleagues who wish to raise concerns including Culture Change Champions, health and well-being champions and Diversity and Inclusion Ambassadors.
- Awareness training for all colleagues to ensure they are aware of the process and how they will be supported.

We will develop a culture where our Single Lead Employee Trainees are encouraged to speak up about concerns and feel able and safe to do this. We will develop systems that ensure that concerns raised are investigated thoroughly and impartially and that lessons learnt are openly discussed and fed back to all stakeholders involved. We will ensure that when a trainee (s) speaks up they suffer no detriment. Finally, we give a commitment that concerns relating to misogyny will be independently investigated and acted upon.

### International Recruitment

**What will this mean to our customers? Strengthening clinical services across NHS Wales to address long-term workforce challenges.**

Established in 2021 the All-Wales International Recruitment Programme has facilitated the safe and ethical recruitment of International Healthcare Professionals into the NHS Wales workforce; thus reducing vacancies and supporting the delivery of front-line patient care. Over the past two years, NWSSP has now provided over 700 internationally educated registered nurses with offers of employment within NHS Wales, contributing to strengthening the Health Care Workforce in line with A Healthier Wales.

During 2023-24 the programme expanded to include the recruitment of doctors. In November 23, the first cohort of International Medical Graduates were offered positions in NHS Wales including 9 Junior Clinical Fellows and 4 Senior Clinical Fellows in General Medicine; plus 3 Oncology Senior Clinical Fellows. NWSSP has also been added to the ethical recruiters list and awarded GMC accreditation as a sponsorship organisation for the whole of NHS Wales.

NWSSP continue to onboard candidates into Health Boards whilst also scoping alternative recruitment models to drive efficiency. We have completed Phase 2 of the International Recruitment which has provided opportunities for transition of some of the programme delivery to business as usual.

Moving into 2024-25, NWSSP will work with Welsh Government to develop a Business Case to increase funding for the All-Wales International Recruitment Programme, to ensure all organisations can participate. The work programme will also include:

- Initiation of Phase 3 international nurse recruitment.
- Implementation of supplier performance monitoring framework underpinned by defined Key Performance Indicators within an agreed Service Level Agreement.
- Further explore the opportunities of virtual recruitment models.
- Expand the international recruitment programme to other hard to fill specialities such as Allied Health Professionals within NHS Wales Organisations.

### National Ophthalmic Contract for Wales

**What will this mean to our customer? Enhanced eye care services available within the Primary Care setting.**

Regulations came into force on 20 October 2023, supporting mandatory Welsh General Ophthalmic Service (WGOS) level 1, holistic eye health care and level 2, mandatory Eye Health Examination Wales (EHEW). We continue to work in partnership with Health Education and improvement Wales (HEIW) to ensure the profession has accessed and completed the necessary training to enable compliance with these new arrangements. We continue to lead on the introduction of new service pathways during this transitional period (October to March 2024), to ensure all contract arrangements are live and operational by the end of March 2024.

The implementation continues to build on the direction outlined in A Healthier Wales and the progress already made since the launch of the together for Health-Eye care. As a key stakeholder and lead on this programme, NWSSP continue to ensure all decisions made follow the key principles of NHS Wales Eye Health Care-Future Approach for Optometry Services.

The implementation of new service pathways has begun and we are working closely with Health Board colleagues to enable operational change to support these new pathways. The changes and introduction of new pathways will support improvements to enable the monitoring, management and treatment of more patients in primary care. Over time we will evidence the reducing demand in secondary care and improved access for patients.

The Implementation Board continues to approve and oversee the delivery of all key objectives in preparation for contract implementation by April 2024. The Implementation board is now complimented by NWSSP Project Management Office arrangements who have supported Primary Care Services with enabling this change.

Moving into 2024-25 we will be:

- Acting as a Strategic Partner for Welsh Government leading the introduction of the National Ophthalmic contract for Wales.
- Supporting the establishment of a new service management board arrangement within NHS Wales.
- Reviewing key deliverables to take forward into 2024-25 and agreeing milestones with the service board.

### Electronic Prescribing Service

**What will this mean to our customers? A reduction/elimination of paper prescriptions making it more convenient for staff and patients. Efficiencies in dispensing reimbursement and information services supporting sustainable service delivery within community pharmacy.**

The development of an Electronic Prescribing Service (EPS) in Wales and its introduction will mean that the system is no longer reliant on paper prescriptions moving between the prescriber and the dispenser, with the consequent link to NWSSP for re-imbursement. As an integral part of this wider system, NWSSP will be working closely with Digital Health and Care Wales (DHCW) to deliver these changes in line with their EPS Programme timetable.

Primary Care Services have contributed to the EPS handbook (v.1 for use at the first site only) and the handbook will be adapted as the programme continues to be rolled out. Collaborative working arrangements between NWSSP and DHCW communication teams will ensure this joint working arrangement is maintained.

Continued input and discussions with NWSSP Welsh Language Team is ensuring the EPS roll out within Wales is fully compliant with the Welsh Language standards and obligations.

The project is now in a live test phase which commenced mid November 2023 and will continue into December 2023, with a GP practice and Pharmacy enabled to support this live testing. The introduction of this system will make the prescribing and dispensing process safer, more efficient and convenient for patients and NHS staff.

Moving in 2024-25 we will be implementing the NWSSP components of the national e-Prescribing Programme with DHCW, which means we are:

- Continuing with the planned roll out as driven by the programme.
- Reviewing system rules to maximise benefits.
- Reviewing resource requirements.
- Developing and deploying system change to increase automation.

## Core Supporting Functions

### Digital Priorities

We understand and recognise the importance of digital systems that support our customers, user experience and staff and how they enhance efficiency and performance across NHS Wales.

Moving into 2024-25 we have prioritised a number of digital areas that will support our customers and partners in driving efficiencies across NHS Wales. These priorities are:

- Fully maximising the return on investment made in new digital systems.
- Transforming Access to Medicines: Sourcing of a digital solution to support medicines manufacturing service.
- Replacement of the Electronic Staff Record in collaboration with NHS Business Services Authority in 2025.
- Migration of Oracle finance and reporting from Cardiff and Vale University Health Board hosting to Oracle cloud in 2024.
- Scan for Safety: Automated medicinal product/medical device tracking. Continued roll out according to Health Board Plans.
- Electronic Prescription Service: Contractor payment integration and smart card provision. The pilot commenced in November 2023.
- Patient Registration: National Health Application Infrastructure Service (NHAIS) Primary Care patient registration replacement in 2024
- Workforce Intelligence System: Replacement of (Primary Care) Welsh National Workforce Reporting System and Performers List Solutions in 2024.



Financial Sustainability

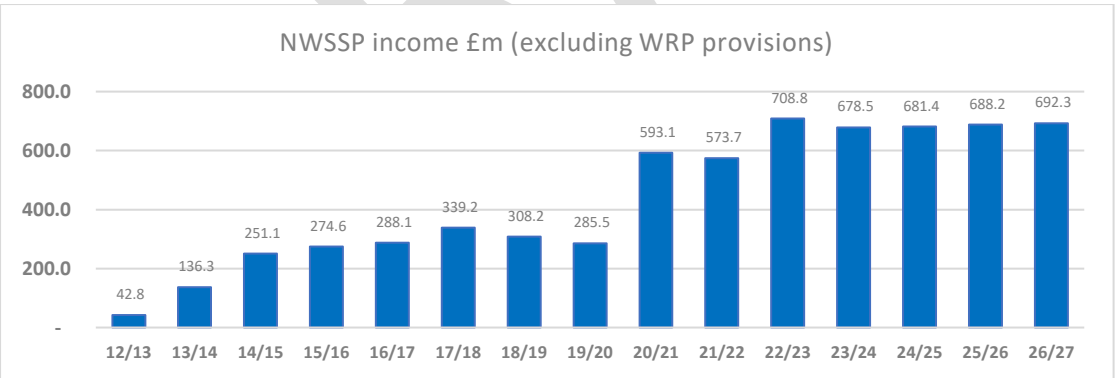
The financial outlook for NWSSP is very challenging and the financial plan, whilst balanced, contains several significant risks and income assumptions. Identified pressures and priorities of £9.157m for 2024-25 will be met from additional income generation, cash releasing savings, efficiency savings and Welsh Government income.

	£m
Priorities	1.227
Pressures	2.976
Service Development	3.163
Legacy Covid Costs	0.791
Energy - laundries	1.000
TOTAL	9.157

Key pressures within our plan relate to inflationary costs as contracts are renewed together with expansion of our services and ongoing increased demand, including the sustained increase in activity that continues to be processed by our transactional Services including Payroll, Recruitment and Accounts Payable. Welsh Government have provided recurrent funding to University Health Boards for the laundry energy pressure we are recognising.

We will invest in a number of priority areas including the Foundational economy, decarbonisation and our digital strategy. We will also invest in the expansion of a number of our services to meet increasing demand including legal services, salary sacrifice and our supply chain and logistics division. Such investment will improve the quality and efficiency of the services provided to NHS Wales. In addition, funds have been earmarked to respond to the Covid-19 Public Inquiry and implement Phase 1 of our estates rationalisation strategy.

Income streams will be in excess of £681m for 2024-25 rising to £692m by 2026-27.



The Single Lead Employment arrangements materially impact our income streams, with £266m income of our total £681m income attributable from this service alone in 2024-25. Continued income growth across several Service areas is forecast through to 2026-27.

The Welsh Risk Pool claims settlements of £139.913m in 2024-25 will require a risk share contribution of £30.478m from Health Boards and Trusts.

Capital investment of £125m is required for the five-year period to 2028-29. Major capital investments are included for the Radiopharmacy and Pharmacy Technical Services projects and vehicle replacements.

## People

We are committed to enable our people to feel engaged, to be connected to and share in our purpose; to feel enriched, empowered, and inspired; and to feel they are supported and valued so that they are enabled to make a difference for the people of Wales.

We are also committed to the principles of the Foundational Economy and as such, our widening access agenda focusses on growing our future workforce from within the communities we serve across Wales.

Our aim is to make NWSSP a great place to work and to support the Health and Wellbeing of our staff in line with the plan for **A Healthier Wales**. As such, our seven strategic priorities within People and Organisational Development remain:

- Organisational Design
- Organisational Development
- Resourcing
- People Analytics
- Employee Relations
- Welsh Language
- People and OD Excellence

During 2023-24 we continued to focus on several programmes of work that were established in 2022-23 to ensure that our people can be the best that they can be. Within each of our strategic priorities, we have aligned our planned work to the Ministerial priorities and wider programme of the Welsh Government. We will build on this in 2024-25.

## Risk

Risks and opportunities that have the potential to impact the planned delivery of our IMTP are actively managed through review at each of the monthly Senior Leadership Group meetings. Additionally, the bi-monthly meetings of the Partnership Committee and the quarterly meetings of the Audit Committee receive an update on our key corporate risks. Divisional risks are monitored through the series of Performance Management Framework Quarterly Reviews, which provide the opportunity for risks to be escalated to the Corporate Risk Register as necessary.

In 2022, we undertook an extensive consultation exercise with members of the Partnership Committee to review our risk appetite. This led to significant changes in our approach to risk, with Committee members keen for NWSSP to take more risk. NWSSP can take a lead role to drive through change and to identify unwarranted variation and reduce waste through informed analysis of the data we hold on the services we provide. This will help to make services across NHS Wales more efficient, and thereby support NHS organisations in the delivery of their plans. Achieving these goals and implementing necessary change at pace, requires engagement and buy-in from other Health Organisations within NHS Wales.

## Our Key Corporate Risks

Our Key Corporate Risks are set out in our Risk Register. The Risk Register plays a pivotal role in shaping our Internal Audit Programme. Our internal auditors make clear reference to our Risk Register throughout their programme of work and ensure a thorough and aligned assessment of our organisational risk landscape. During 2022-23 the Head of Internal Audit recorded an opinion of reasonable assurance for NWSSP and our Audit Wales Management letter for 2022-23 identified no issues or recommendations.



Key Corporate risks going into 2024-25 include:

#### Continuing to deliver for NHS Wales in a challenging financial climate

The current financial climate and particularly the lack of capital, poses significant threats to the delivery of existing services and the development of new services.

We have a strong track record of robust financial control and ability to generate savings whilst also achieving service excellence and adapt to change with a positive and 'can do' attitude.

To mitigate some of the risk we are providing regular finance reports to the Senior Leadership Group, to our Partnership Committee and Audit Committee. We have established a Value and Sustainability Group to monitor our work to support the national programme but also to agree the implementation of required changes within NWSSP. We have already commenced with putting enhanced vacancy control arrangement in place and reviewing the use of variable pay across the organisation.

#### Balancing competing priorities in a challenging financial climate

We continue to promote and support the twin aims of growing the Foundational Economy through sourcing goods and services within Wales where possible and promoting the Decarbonisation agenda to help achieve the Welsh Government's goal of being carbon-neutral by 2030.

There is, in the current financial climate, a difficult balance to strike between sourcing products locally, thereby providing employment for the local economy at the same time as achieving value for money and living within the constraints of the NHS budgetary envelope. This competing priority to do the right thing for the longer term and balance the budget in the immediate term applies also to our desire to make greater progress against our decarbonisation action plans.

We will continue to explore a range of options to deliver on Ministerial and organisational priorities and be open and transparent in our discussions and considered in our decision-making processes.

#### Addressing Reinforced Autoclaved Aerated Concrete (RAAC) on our sites

The discovery of the presence of RAAC in two NWSSP premises which are leased, required us to take prompt action.

We appointed a specialist structural engineer to provide advice on the structural condition and mitigation measures required. Health and safety reviews have been carried out with appropriate temporary safety measures put in place. This has included staff working from home where possible and provision of supports and safety netting. We have also developed Business Case for relocation of services out of these locations to alternative premises, which was approved in November 2023 and work is underway.

#### Transformation of Laundry Services

The constraints on the NHS Wales capital budget required us to review and amend our transformation plans for Laundry Services. The original plans offered the potential for significant improvements to ensure legislative compliance but required substantial capital investment. The challenge now is to achieve as many of the benefits for NHS Wales as is possible, on a much-reduced scale in terms of investment.

Consequently, we have decided to close one of the five existing laundry sites, and this carefully managed process is underway with the aim to be completed by 31 March 2024. We also intend to progress plans to transfer over the staff in the remaining laundry site that are not currently employed by NWSSP during 2024. We are working closely with our Trade unions and workforce colleagues within

the affected Health Boards to provide timely and accurate information to the staff impacted by the changes.

#### Development of the Transforming Access to Medicines Service (TrAMS)

The constraints on the NHS Wales capital budget have also impacted on our transformation plans for Pharmacy Technical Services. The TrAMS service will deliver substantial potential savings across the whole of NHS Wales but requires significant upfront capital investment to develop the service.

The continued delay in locating suitable accommodation in South-East Wales for the TrAMS project threatens the supply of critical drugs to cancer patients. We have received an element of funding for our TrAMS Service to enable us to investigate the establishment of a Radiopharmacy Unit in IP5. This work is planned to be accelerated during 2024-25.

We are mitigating risk through our TrAMS Programme Board, robust project management approach, outsourced suppliers and the implementation of a task and finish group. We have strong engagement and buy-in from the Chief Pharmacist group, on the need for prompt action and further investment.

#### Managing staff capacity and ensuring Fair Work for our workforce

Whilst we have continued to adapt to meet the growth in our services, we anticipate further demand from our customers, which in turn will place further demands on our staff. Like many other NHS organisations, we have some challenges in recruiting staff, especially to more specialist professional roles.

We have refreshed our Employee Value Proposition offering and changed our approach to recruiting staff to come and work in NWSSP, with more innovative adverts and more targeted use of social media and professional networks. We are already seeing that this is generating a wider range of applicants and an increased number of strong applications. More work is planned for 2024-25 as set out in Our People Plan.

We are also reviewing our current use of variable pay across the organisation, looking at our use of agency, overtime, and Bank (flexible working arrangements). We are unlikely to reduce the use of variable pay mechanisms to zero but want to see an appropriate range of solutions being adopted that demonstrated value for money and Fair Work being offered to our workforce.

Our People Plan also sets out several actions targeting improvements in staff physical and mental health well-being, diversity and inclusion.

## Appendix A – Our Digital Plan: Digital as an enabler

### Our Digital Plan – Enabling a Digital Organisation

Digital technology plays a pivotal role in achieving our corporate objectives and delivering value to our customers. We are putting our focus on “digital as an enabler”, emphasising business change as the driver for digital solutions.

### Digital Strategy and Target Operating Model

#### What we delivered in 2023-24

In 2023-24 we published our Digital Strategy outlining our digital goals within three key themes and our path to a new Target Operating Model.

#### Digital Goals

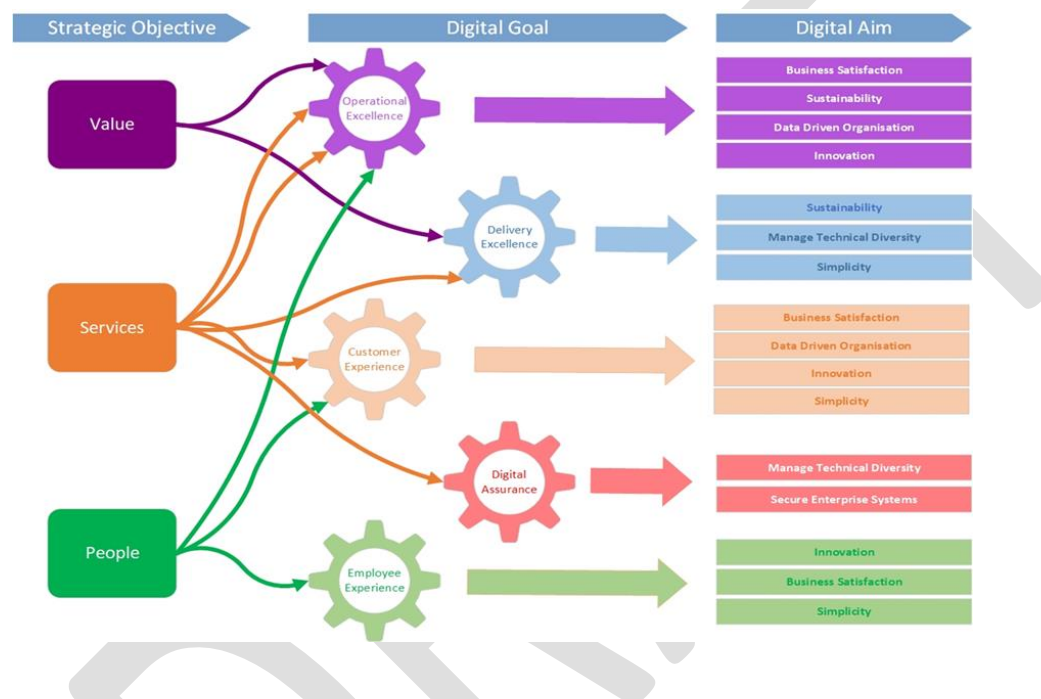


Fig. 1- Strategy map

#### Key Themes



We began our journey to a new Target Operating Model by delivering projects within a programme of work that fit broadly into three categories: -

- **Stabilisation** – shorter-term activities to designed to address gaps or risks in the existing model.
- **Optimisation** – medium-term activities designed to realise the Target Operating Model and design process to deliver a continuous cycle of service improvement.

- **Sustainability** – longer-term activities designed to ensure that we have a clearly defined model to support continuous improvement cycles and provide a targeted set of digital solutions that are robust and secure.

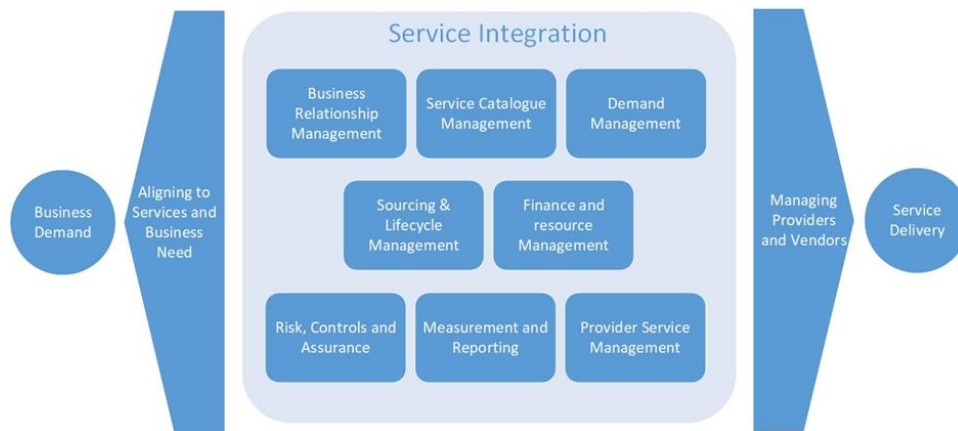


Figure 2 – Target Operating Model

Delivery on **stabilisation** included: -

- Migration of our on-premises hosting platform to the national data centre
- Development of a business case to provide a long-term robust hosting environment for our bespoke solutions.
- Provision of a robust and comprehensive digital asset and configuration management solution.
- Completion of a project to deliver remedial actions identified in the NWSSP Cyber Assessment Framework report.
- Recruitment to address capacity and capability gaps cyber assurance.

Delivery on **optimisation** included: -

- Development of the digital gateway process to underpin the Enhance, Buy, Build strategy to move towards the delivery of streamlined, enterprise level solutions.
- Establishment of new Design, Change and Service Management boards to underpin the digital gateway process.
- Streamlining of operational processes in collaboration with partners to remove any legacy reliance on NWSSP staff for change, release, problem and availability management.
- Establishment of our relationship with the M365 Centre of Excellence that has enabled our business teams to leverage the benefits of the Power Platform.
- Establishment of an all-Wales cyber assurance package to support national framework procurement of digital solutions.

Enablement activities for **business change underpinned by digital solutions**:

- Strategic support for the implementation of NWSSP's component of the Electronic Prescription Service.
- All-Wales cyber assurance packages for: -
  - Scan for Safety
  - eScheduling
- Design and assurance support for the sourcing of solutions: -
  - Workforce Intelligence System

- Microsoft 365 Integrated Telephony and Contact Centre solution.
- Student Bursary System

## What we are aiming to do during 2024-27

### Stabilisation

- Seek funding for our hosting environment business case to deliver a long-term robust hosting environment for our bespoke solutions.
- Recruitment to address capacity and capability gaps in solution sourcing.

### Optimisation

- Enhancement of the service catalogue to provide a holistic, service-based view
- Expansion of the agreements with partners to release NWSSP to support the business partner model.
- Resourcing plan and recruitment to embed support for service leads to enact business change underpinned by digital solutions through the business partner model.
- Roll out and embed the digital gateway process.
- Provision of enhanced flexibility in the hosting environment leveraging cloud first principles.
- Further development of Microsoft Power Platform strategy and resource plan for organisation level solution development.



Figure 3 – Solution Delivery Model

### Sustainability

- Expansion of agreements with partners to deliver enterprise and data architecture services.
- Development of a core data analytics service underpinned by solutions to support enterprise and data architecture services.
- Development of partnership arrangements to deliver bespoke development and legacy application support.
- Recruitment to fully support business change delivered through the business partner model.
- Review of document management strategy including digitisation and retrieval of records.

## Enablement activities for **business change underpinned by digital solutions**:

- Strategic support for
  - the implementation of NWSSP's component of the eye-care digital strategy in primary care.
  - Electronic Staff Record replacement.
- All-Wales cyber assurance packages for: -
  - Oracle FMS cloud migration
  - Electronic Staff Record replacement.

- Design, implementation and assurance support for the sourcing of solutions: -
  - Trams digital solutions and workforce transition
  - Estates strategy and agile working
  - NHAIS primary care patient registration replacement
  - Legal and Risk Case Management solution

### Customer focus and operational excellence

We will empower our customers through self-service capabilities and omni channels.



We will implement secure customer-centric solutions, leverage data and provide actionable insights / timely access to information, where and when required.

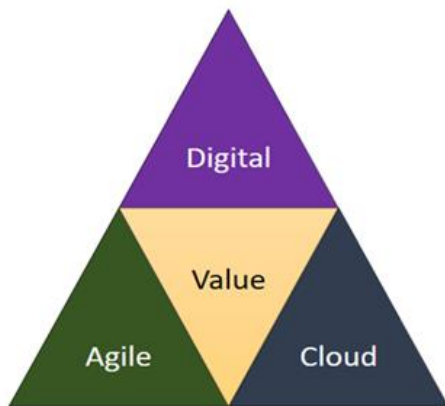
We will improve operational excellence by working with stakeholders to develop efficient, streamlined, and cost-effective systems and services.

### Partnerships and collaboration

We will build on our partnership and collaborative work with the Welsh Government, DHCW and NHS Wales Health Boards and Trusts. Working with Health and Care partners (including social care), wider public sector and industry partners, we will leverage opportunities to co-create value and harness the benefits of new technologies and digital solutions.

### Value For Money and Return on Investment

Having delivered foundational building blocks of Microsoft 365, we will build organisational capability to harness further benefits including the use of Power Platform, Dynamics 365 and SharePoint Online.



As NWSSP continues to adopt new digital services, in-house expertise will need to be developed, in partnership with DHCW, to reduce consultancy costs in the longer term.

### Staff development and succession planning

We will upskill our staff to support new digital technologies and build capability to harness the benefits of new technologies across NWSSP. We will be working closely with HEIW as they develop further the All-Wales Digital Skills Framework. We will identify capacity gaps and invest in staff development opportunities, succession planning and ensure

that we have the right number of people with the right skills to support organisational objectives.

In 2024-25 we will re-invigorate our Microsoft 365 digital champions programme to ensure that our workforce leverages the benefits of the toolset through engagement across the organisation, with the national digital champions network and the Digital Health and Care Wales Microsoft 365 Centre of Excellence.

### Process Automation

Robotic Process Automation (RPA) principles are about using suitable tools that can replicate and automate repeatable human tasks performed on systems to assist staff, freeing them to undertake more value-added duties. We have invested in RPA for several years and continue to do. We will revisit our process automation strategy to encompass the use of bespoke robotic process automation tools whilst appropriately leveraging the capabilities of the Microsoft Power Platform.



Processes developed in the last year include: -

- Data transfer from New Appointment Forms for Single Lead Employer Rotational Hires.
- Recruitment vacancy processing, archiving and monthly reporting.
- ESR start date booking.
- Collaborative Bank Reporting
- Invoice On Hold invoice disputes.
- Automatic invoice releasing
- Employment contract creation and dispatch by email
- Creation of the “Personal file” for new starters
- Decarbonisation Reporting
- IMTP dashboard

The plan for next year is to continue to support Live processes and to identify automation opportunities and deploy solutions in the following areas: -

- Dispensing Patient list cleansing.
- Automated Establishment Control process.
- Development of GP Dispensing codes.
- Automated manager override in ESR.
- Adjust the existing New Appointment Form process to accommodate transition to the new Staff Movement Advice solution.
- Updating oracle-based processing to accommodate migration to Oracle cloud.
- Conduct a review of potential benefits offered by Blue Prism Cloud and a review of existing licence to leverage potential cost savings.

### Cyber Resilience

The threat of cyber security attacks is recognised as a key corporate risk that we actively manage. We remain vigilant and continue to review and enhance our Information and Communications Technology (ICT) infrastructure to ensure that it remains robust in the context of the ever-changing threats we face.

In response to the recommendations in our Cyber Assessment Framework (CAF) report, we developed a programme of work which aims to deliver enhanced assurance in four categories. We will be subject to a follow up assessment in early 2024. Our initial response project has now delivered our remediation actions. We will deliver a similar response to the re-assessment and will continue to develop and embed the following principles into our culture and business as usual activities:

**People** – ensuring that our staff are fully aware of their responsibilities around cyber assurance and are appropriately trained including: -

- Clear definition of responsibilities and accountability for roles that have “enhanced” levels of impact on cyber assurance
- Suitable accreditation for staff in “sensitive” roles
- Continuous training and education for all staff

**Processes** – ensuring that are processes are continually improved to deliver business and cyber resilience including: -

- Asset management
- Business impact assessment
- Business continuity, disaster recovery and IT continuity

- Security monitoring, investigation, forensics and threat management capability
- Embedding cyber assurance into system lifecycle management from sourcing and procurement through to decommissioning

**Technology** – ensuring that optimal cyber technical solutions are in place to support our processes including: -

- Network monitoring
- Security incident and event monitoring
- Firewall enhancement

Accreditation – as well as ensuring continuing compliance with the Cyber Assessment Framework, we will assess the value of accrediting our organisation to industry standards, which may include: -

- The IASME Cyber Essentials scheme
- ISO27001

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## Appendix B- Our Financial Plan

The financial plan sets out our financial strategy, which enables and aligns with the delivery of the service development strategy outlined in this IMTP. In the current challenging financial environment, NWSSP, in line with NHS Wales, continues to face significant challenges to enable major service changes to be delivered within our financial resources whilst continuing to ensure that high quality services are provided. We have a key supporting role to play to enable NHS Wales to deliver their plans and initiatives and our financial plan aims to reflect this. The delivery of the plan is very challenging in the current high inflation environment together with continued significant increases in the volume of transactions we are processing across NWSSP. Investment in our services will lead to improved efficiencies and quality that will benefit NHS Wales Organisations.

The financial plan for 2024-2027 is balanced, there are however several significant risks and income and savings assumptions included within our plan. There are also a number of areas we would like to invest in to achieve additional benefits and efficiencies which we may not be able to progress in the current financial climate.

The financial plan comprises our three key areas:

- NWSSP Core Services
- All Wales Risk Pool
- Capital

### NWSSP Core Revenue Budgets

2023-24 saw several developments and changes to Services provided within NWSSP including:

- Refinement of options to provide TRAMS in the South East region, including the potential for a Radiopharmacy unit to be progressed at pace
- Capital investment in our laundries to enable production to be rationalised from 5 to 4 sites from 2024/25
- Significant and continued increases in demand and transaction volumes in Payroll, Recruitment and Accounts Payable services
- The transfer of the management of the All Wales medicines stockpile

Once again NWSSP has enabled significant change during 2023-24, through the planned reinvestment of funds within Service priority areas to provide greater capacity to support, enable and accelerate the delivery of change across NHS Wales.

Looking ahead, 2024-25 will see business cases for TRAMS progressed, the rationalisation of the laundry service production over 4 sites and implementation of phase 1 of our estates rationalisation strategy. Ongoing support for PPE management and vaccine preparation and distribution across NHS Wales will continue throughout 2024-27. This has now been recurrently funded through the 2024-25 allocation, however the service providing PPE to Primary & Social Care is planned to end on 31<sup>st</sup> March 2024 per Welsh Government communication.

The table below summarises the revenue income requirement for 2024-27 to enable the priorities identified within Service delivery plans.

<b>NWSSP Revenue Position</b>	<b>2024/25 £m</b>	<b>2025/26 £m</b>	<b>2026/27 £m</b>
<b>WG Allocation</b>			
NWSSP Core Services	88.621	88.621	88.621
Welsh Risk Pool Service (incl. Redress)	109.435	109.435	109.435
<b>TOTAL ALLOCATION</b>	<b>198.056</b>	<b>198.056</b>	<b>198.056</b>
Other Core invoiced income	452.907	458.156	460.993
WRP risk sharing agreement income	30.478	31.946	33.214
<b>TOTAL INCOME</b>	<b>681.441</b>	<b>688.158</b>	<b>692.263</b>

### NWSSP Core Services

This area incorporates the income and expenditure budgets associated with the running of the main services we provide. An element of this income is received through our top-slice funding allocation with Welsh Government, with the remainder generated through invoicing which is detailed in the table below.

<b>NWSSP Core Revenue Position</b>	<b>2024/25 £m</b>	<b>2025/26 £m</b>	<b>2026/27 £m</b>
WG Core Allocation	<b>88.621</b>	<b>88.621</b>	<b>88.621</b>
<b>Other Core Invoiced Income</b>			
Single Lead Employer	266.366	266.366	266.366
Stores recharges	54.645	54.645	54.645
Pharmacy Rebate Scheme	55.100	55.100	55.100
All Wales Laundry	12.091	12.091	12.091
All Wales System Recharges	10.435	10.727	10.176
Health Courier Service	7.987	7.987	7.987
WIBSS Claims	7.579	7.882	8.118
GP Indemnity FLS & ELS Claims	4.664	4.540	3.811
Depreciation	7.111	9.756	11.619
Legal & Risk Charging	6.501	7.001	7.501
Medical Examiner	4.332	4.332	4.332
Medicines Unit/TRAMS	4.753	5.999	7.267
International Recruitment	2.000	2.000	2.000
All Wales Relocation Expenses	1.150	1.150	1.150
Energy (Laundries)	1.000	1.000	1.000
All Wales Collaborative Bank	0.750	1.000	1.250
Increased transactional activity	0.605	0.605	0.605
SMTL	0.446	0.583	0.583
Other Core Income	5.392	5.392	5.392
<b>Total Invoiced Income</b>	<b>452.907</b>	<b>458.156</b>	<b>460.993</b>
<b>TOTAL CORE INCOME</b>	<b>541.528</b>	<b>546.777</b>	<b>549.614</b>

The Welsh Government allocation has been taken from the 2024-25 Health Board Revenue Allocation (Table 3 – Shared Services Funding top-slice). Per Welsh Government guidance we have not assumed any income or expenditure estimate for pay awards within our plan on the basis that once agreed this will be fully funded by Welsh Government. Recurrent pay award funding for 2022-23 and 2023-24 was

not included as part of the 2024-25 allocation so estimates of funding to be received for these pay awards remain a risk within our plan.

It has been assumed that Welsh Government will continue to pay the additional 6.3% superannuation charges centrally during 2024-25. We have assumed all our SLAs and NHS chargeable income will be uplifted by the 3.67% core uplift funding provided to UHBs and DHCW as part of the pass through of funding expectation.

Funding for energy pressures has been included in the funding allocation for 2024-25. Welsh Government have confirmed that UHBs have been funded for the energy pressure relating to laundries which we estimate at £1.000m per annum based on 2023-24 energy prices. We will continue to recharge these costs to the relevant UHBs as part of the Laundry recharge arrangements and this income has been anticipated within our financial plan.

The funding allocation provided for PPE & vaccination support services is based on the following assumptions for 2024-2027 and in accordance with our PPE strategy:

- stores issues of PPE will continue to be delivered and charged to NHS Wales,
- the current level of support to the mass vaccination programme will continue,
- we will not supply PPE to primary and social care after 31<sup>st</sup> March 2024
- we will continue to incur increased operational costs for the storage, distribution and management of the PPE stockpile.

We are forecasting that we will continue to incur legacy covid costs of £0.791m in 2024-25 to support the ongoing activity above pre-covid baselines that continues to be processed through our Transactional Services including Payroll, Recruitment and Accounts Payable. Due to efficiencies in our processes and savings we are proposing, this is less than the £1.246m identified in previous plans. This cost pressure continues to be due to the significant additional activity that arose from the Covid recovery response which has exacerbated the demand on these Services across NHS Wales. Our plan assumes costs of £0.605m will be recharged to UHBs/Trusts if the high activity levels continue which is in line with our planning assumptions from 2023-24.

In setting budgets for 2024-27 we will generate efficiencies and savings and absorb several cost pressures and make investments in relation to cost growth, demand/service growth and local cost pressures as identified in our delivery plans. These are summarised in the table below, together with a summary of how these will be funded.

<b>PRESSURES</b>	<b>2024/25 £m</b>	<b>2025/26 £m</b>	<b>2026/27 £m</b>
B/f Deficit	0.605	0.000	0.000
Pay	0.919	0.100	0.100
Non Pay	0.728	0.300	0.300
Demand/Service Growth	4.949	1.705	1.310
Energy	1.000	1.000	1.000
Local/Service	0.956	0.315	0.160
<b>TOTAL PRESSURES</b>	<b>9.157</b>	<b>3.420</b>	<b>2.870</b>
<b>FUNDED BY:</b>			
Income Generation	-4.590	-1.859	-1.688
WG Funding	-0.571	-0.275	-0.275
Savings	-3.996	-1.286	-0.907
<b>NET PRESSURES</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>

Identified saving schemes are attributable to both pay savings from the review of posts as we refine structures and greater utilise technology, and non-pay savings resulting from a review of budgets and accommodation costs. We have established an internal re-investment reserve within NWSSP to facilitate investments in our key priorities. The savings requirement equates to **4.5%** of our core allocation for 2024-25.

The Welsh Government funding assumptions are detailed in the table below.

<b>WG Funding Assumptions</b>	<b>2024/25 £m</b>	<b>2025/26 £m</b>	<b>2026/27 £m</b>
<b>RECURRENT:</b>			
Core Uplift	-	-	-
IP5 Funding Shortfall	0.056		
Influenza support	0.240		
<b>NON-RECURRENT/IN YEAR ALLOCATION:</b>			
Storage costs - retention of records	0.103	0.103	0.103
TRAMS Transitional Funding	0.172	0.172	0.172
<b>TOTAL</b>	<b>0.571</b>	<b>0.275</b>	<b>0.275</b>

The £9.157m of pressures and investments for 2024-25 identified within the financial plan align to the key priorities detailed within service plans and can be summarised as:

<b>2024/25 SUMMARY</b>	<b>PRIORITIES</b>	<b>PRESSURES</b>	<b>SERVICE DEVELOPMENT</b>	<b>LEGACY COVID</b>	<b>ENERGY</b>	<b>TOTAL</b>
Estates Rationalisation Transitional costs & Development	0.200	-	0.238	-	-	0.438
Covid Inquiry Legal & Support Costs	-	0.150	-	-	-	0.150
Additional Decarbonisation initiatives	0.081	-	-	-	-	0.081
Double running costs (accommodation & NHAIS)	-	0.298	-	-	-	0.298
Energy - Laundries	-	-	-	-	1.000	1.000
Non Pay Inflation	-	0.590	-	-	-	0.590
Digital - inflation, growth and investment	0.454	0.224	-	-	-	0.678
Increased transactional activity	-	-	-	0.791	-	0.791
Reduction in chargeable income	-	0.222	-	-	-	0.222
Legal Services demand	-	0.336	1.418	-	-	1.754
Surgical Materials Commercial Testing	-	-	0.143	-	-	0.143
Supply Chain & Logistics	-	0.456	-	-	-	0.456
Service Growth (Salary sacrifice, WRP, GMPi)	-	-	0.771	-	-	0.771
Project Support (Medicines, ESR, Speaking up Safely)	0.110	-	0.437	-	-	0.547
Structure Resilience	0.129	-	0.156	-	-	0.285
Staffing - increments/structure changes	-	0.700	-	-	-	0.700
Talent Pipeline - Network 75/Apprentices	0.219	-	-	-	-	0.219
Additional Training & Development	0.034	-	-	-	-	0.034
<b>TOTAL £m</b>	<b>1.227</b>	<b>2.976</b>	<b>3.163</b>	<b>0.791</b>	<b>1.000</b>	<b>9.157</b>

Other notable risks within our plan relate to the new Pharmacy Technical Service and the need for non-recurrent investment in the transition years on the assumption that these costs will be funded from budgets when services transfer to NWSSP. Investment in this priority area will be the first call on any additional savings as previously agreed by the Shared Services Partnership Committee to support the longer-term vision for the Transforming Access to Medicines programme of which the new Pharmacy Technical Services is a key element. Other notable pressures within the plan relate to additional revenue costs we are incurring from cloud-based IT system replacements.

There is no planned distribution included in our IMTP, however if any additional savings are achieved these will be repatriated to individual NHS bodies in line with the allocation contribution formula summarised in the table below:

Health Board /Trust	%
Aneurin Bevan	9.85
Swansea Bay	8.80
Betsi Cadwaladr	11.98
Cardiff and Vale	10.49
Cwm Taf Morgannwg	10.60
Hywel Dda	7.77
Powys	1.95
Velindre	1.17
Welsh Ambulance	1.28
Public Health Wales	0.87
Welsh Government	35.25
<b>Total</b>	<b>100.00</b>

### All Wales Risk Pool

The All Wales Risk Pool Service manages the process of reimbursement of payments made by NHS Wales in respect of successful claims for compensation. The Welsh Risk Pool (WRP) reimburses NHS organisations for claims paid after applying an excess of £25,000.

The Welsh Government provides NWSSP with two distinct funding streams in respect of the WRPS:

- i. **Departmental Expenditure Limit** (the DEL) to meet in year costs associated with settled claims arising within Health Boards (HBs) and Trusts e.g., a lump sum or periodic payment order.
- ii. **Annually Managed Expenditure** (the AME) to meet the costs of accounting for the long-term liabilities of claims i.e., the provision for the future costs of claims.

If the annual revenue allocation from the Welsh Government is not sufficient to meet the value of forecast in year expenditure i.e., the DEL, then the service bears the risk of any variation from the estimate and the excess will be subject to an agreed risk sharing agreement with the NHS Wales member organisations.

The WRPS receives a core annual allocation (DEL) to fund cases settled during the financial year. Expenditure above this resource limit will be recovered via the Risk Share mechanism.

The cost of clinical negligence is forecast to continue to rise over the next three years. It is anticipated that the risk-sharing agreement will be invoked in each year relating to core claims growth and the increasing average cost per case. The forecast has been compiled based on the current claims values and estimated settlement dates in our database. This is sensitive to a variety of factors and changing assumptions as cases progress to settlement and is reviewed on a monthly basis.

The table below identifies the 2024-2027 high level forecast position at December 2023 for annual expenditure with the forecast outturn for 2023-24:

	23/24	24/25	25/26	26/27
	£m	£m	£m	£m
Welsh Risk Pool Services - core allocation from Welsh Government	109.435	109.435	109.435	109.435
Risk Sharing Agreement income - member NHS Organisations	26.494	30.478	31.946	33.214
<b>TOTAL WRP INCOME</b>	<b>135.929</b>	<b>139.913</b>	<b>141.381</b>	<b>142.649</b>

The risk share model will be applied to any in-year expenditure above the level of the indicative Welsh Government allocation. The indicative apportionment between NHS organisation members based on the current risk sharing agreement are shown below:

	Risk Share	23/24	24/25	25/26	26/27
		£m	£m	£m	£m
Aneurin Bevan	18.08%	4.790	5.511	5.776	6.005
Swansea Bay	13.45%	3.562	4.098	4.295	4.466
Betsi Cadwaladr	18.56%	4.916	5.655	5.928	6.163
Cardiff & Vale	16.03%	4.247	4.886	5.121	5.324
Cwm Taf Morgannwg	15.12%	4.006	4.608	4.830	5.022
Hywel Dda	10.45%	2.769	3.186	3.339	3.472
Powys	4.13%	1.095	1.260	1.321	1.373
Public Health Wales	1.16%	0.309	0.355	0.372	0.387
Velindre	1.09%	0.288	0.331	0.347	0.361
Welsh Ambulance Service	1.93%	0.511	0.588	0.616	0.641
Digital Health & Care Wales	0.00%	-	-	-	-
Health Education & Improvement Wales	0.00%	-	-	-	-
	<b>100.00%</b>	<b>26.494</b>	<b>30.478</b>	<b>31.946</b>	<b>33.214</b>

These indicative figures are currently based on 2022-23 cost drivers pending full year data for 2023-24. Based on 2022-23 data, DHCW and HEIW do not currently trigger any apportionment of the risk share, however this could change if any new cases are received during the period of the IMTP.

The apportionment of the total risk share quantum will change in 2024-25 following a refresh of the cost drivers in the risk share agreement. The updated apportionments will be recalculated once the final 2023-24 information is available in September 2024.

### Asset and Capital expenditure plan

Our plan identifies a capital investment requirement of £124.948m over the 5-year period 2024-2029. The majority of this expenditure relates to the major transformation Pharmacy Technical Services. The projections included for the Pharmacy Technical Services hubs are based on preliminary high-level costings of potential options under consideration. The detailed projections will be developed as part of the Outline Business Cases.

Several service development and strategic projects are also identified that will not only ensure business continuity for the services that we provide to NHS Wales but will enable modernisation, automation, resilience and decarbonisation to facilitate the achievement of a number of key priorities within our plan.

The service development projects are major investments which cannot be covered by our discretionary capital allocation.

As the major projects set out above become operational, there will be additional requirements for discretionary capital. We cannot currently quantify these, and we will need to review and discuss further with Welsh Government.

Discussions are being held with Welsh Government in respect of our future capital requirements. The future funding required during the plan period is as follows:

	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL
	£m	£m	£m	£m	£m	£m
Discretionary	0.528	0.528	0.528	0.528	0.528	2.640
Additional Discretionary	0.200	0.200	0.200	0.200	0.200	1.000
IP5 Discretionary	0.250	0.250	0.250	0.250	0.250	1.250
<b>TOTAL DISCRETIONARY</b>	<b>0.978</b>	<b>0.978</b>	<b>0.978</b>	<b>0.978</b>	<b>0.978</b>	<b>4.890</b>
Service Development Projects	33.883	21.000	16.723	23.218	25.234	120.058
<b>TOTAL CAPITAL FUNDING REQUIREMENT</b>	<b>34.861</b>	<b>21.978</b>	<b>17.701</b>	<b>24.196</b>	<b>26.212</b>	<b>124.948</b>

	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL
	£m	£m	£m	£m	£m	£m
Radiopharmacy	6.322	3.161	-	-	-	9.483
Pharmacy Technical Services - South East	-	4.322	12.333	7.379	-	24.034
Pharmacy Technical Services - South West & North	-	-	-	11.172	22.344	33.516
Vehicle Replacement Programme	2.987	4.978	2.701	3.428	1.851	15.945
Warehousing additional storage	12.324	-	-	-	-	12.324
All Wales Laundry Reconfiguration	0.713	7.000	-	-	-	7.713
Laundry Decarbonisation	0.636	-	-	-	-	0.636
IP5 Solar Farm/Roof Overlay	4.308	0.789	0.889	0.889	0.889	7.764
South East Regional Hub & Headquarters	3.000	-	-	-	-	3.000
IT Refresh	0.200	0.600	0.650	0.200	-	1.650
EV Charging infrastructure	1.556	-	-	-	-	1.556
Case Management Software	0.250	0.150	0.150	0.150	0.150	0.850
Workforce software replacement	0.700	-	-	-	-	0.700
Server Replacement	0.375	-	-	-	-	0.375
Warehouse racking/generators	0.220	-	-	-	-	0.220
Medicines Unit Equipment	0.112	-	-	-	-	0.112
Estates improvements	0.180	-	-	-	-	0.180
<b>TOTAL</b>	<b>33.883</b>	<b>21.000</b>	<b>16.723</b>	<b>23.218</b>	<b>25.234</b>	<b>120.058</b>

Capital investment is a key enabler for the delivery of improved efficiency and service improvement. All capital schemes will deliver revenue benefits in terms of cash releasing savings, cost avoidance, reduced carbon emissions, improved quality and/or health and safety developments.

In addition to the transformational capital projects, a key risk for the IMTP relates to server replacement required in 2024-25 and large volumes of IT that we estimate will need replacing on a phased basis from the end of 2024-25. The funding required for the vehicle replacement strategy also poses a risk regarding increased maintenance and/or lease costs and business continuity if funding for new vehicles cannot be approved.

We will continue to produce business cases for large specific projects as well as continuing to review the potential alternative sources of funding for example Invest to Save. These management actions would mitigate but not remove the impact of increased capital funding not being available.

It should be noted that we have limited funding for depreciation and additional non-cash funding will be required from Welsh Government over and above the baseline funding if capital funding is approved.



## Appendix C – Our People Plan

### Our People Plan

We are committed to enable our people to feel engaged, to be connected to and share in our purpose; to feel enriched, empowered, and inspired; and to feel they are supported and valued so that they are enabled to make a difference for the people of Wales. We are also committed to the principles of the Foundational Economy and as such, our widening access agenda focusses on growing our future workforce from within the communities we serve across Wales. Our aim is to make NWSSP a great place to work and to support the Health and Wellbeing of our staff in line with the plan for A Healthier Wales.

As such, our seven strategic priorities within People and Organisational Development (People and OD) remain:

- Organisational Design
- Organisational Development
- Resourcing
- People Analytics
- Employee Relations
- Welsh Language
- People and OD Excellence

During 2023-24 we continued to focus on several programmes of work that were established in 2022-23 to ensure that our people can be the best that they can be. Within each of our strategic priorities, we have aligned our planned work to the Ministerial priorities and wider programme of the Welsh Government. We will build on this in 2024-25.

### Organisational Design

During 2023-24 we continued to embrace the principles of agile working and role agility. We have introduced a Coffee and Conversation session to support managers understand our approach to Agile Working and have run dedicated sessions within Divisions. An E-Learning package called “Managing Remote Teams” has also been made available on ESR to support managers navigate this ever-changing landscape. We continue to see favourable levels of productivity along with service growth and our absence levels remain well below our target a of 3.3% as well as below last year’s percentage rate, as of 31 October 2023.

We have also introduced a robust streamlined job description refinement process, aligned to the All-Wales approach and have built a job description library to allow easy access to job descriptions that could enable role agility. We have seen immediate success in this process, with 16% of job descriptions being sent for refinement in 2022 compared with 55% in the same period in 2023.

During 2023-24 we also initiated a PADR review and engaged with the whole organisation to understand how we can more effectively support staff to consider their own performance and development and support role agility.

As an organisation, we continue to embrace the principles of business agility and during 2024-25 we will therefore focus on:

- Working towards the introduction of a short-term work placement programme for substantive staff to “try out” and contribute to the work of alternative divisions, as well as a



work experience programme for colleagues to experience a different team or service and learn about the work they do.

- Introduce a process to implement the non-pay elements of the 2023 pay award in partnership with our Trade Union colleagues, ensuring all Job Descriptions more than three years old are reviewed with their post-holders.
- Introduce a new PADR process that complements the approach to role agility.

### Organisational Development

During 2023-24 we had the opportunity to further engage with colleagues and deliver some key areas of our This is Our NWSSP action plan. The aims of this programme are to:

- Develop a positive culture in NWSSP.
- Embed a collective and compassionate approach for the development of a leadership strategy and associated projects.
- Promote and support collective leadership to enable NWSSP to:
  - Support a healthy and engaged workforce.
  - Enable staff to show compassion; to speak up; to continuously improve; and to learn.
  - Develop appropriate individual and collective competence.
  - Recognise individual differences and needs to increase autonomy and create a clearer sense of belonging.
  - Deliver high quality services and value for money.

We have further increased the number of Culture Change Champions from across the organisation to support the implementation of the programme and to be ambassadors for compassionate and inclusive leadership approaches. During the Discovery Phase, the Champions were instrumental in facilitating focus groups and interviewing our senior leaders, before analysing the data that they gathered. Now that an action plan has been developed the Champions have been consulted on new leadership and management learning materials and resources, contributed to an appreciative enquiry exercise on the ways in which we engage with our colleagues, and worked with the People and OD Team on the development of a behaviour framework that is aligned to the organisation's values. The Culture Change Champions are active in their services, speaking to senior leadership teams and colleagues alike to update them on the programme and to hear their views. To support them we have established a development programme for all champions to further enable and empower them in their role.

Following insights gained from the Discovery Phase of the programme in 2022-23, the following achievements have been gained in 2023-24:

- A series of engagement events took place to involve the organisation through a "You Said, Together We did" piece of work. This involved an online Coffee Morning led by the Director of People and OD and the Director sponsor for Cultural Change. It was recorded and made available for staff. In addition, stands were set up at events and roadshows to share the work with colleagues in a face-to-face environment, including those in laundries and stores.
- We further developed our leadership programmes providing 60 places on our Leading for Excellence and Innovation Programme, as well as launching a series of webinars and developing a Leadership Hub which provides access to many leadership development opportunities.
- NWSSP's Innovation Network was launched by the Service Improvement Team to foster learning and collaboration. This was done with the input of People and OD and the Culture Change Champions.

- A Leaders of the Future programme was scoped out in readiness for launch in 2024.
- Development of 'Living the Values' guidance to support the Values Behaviour Framework in collaboration with NWSSP's Culture Change Champions.

During 2024-25 this programme will focus on the following:

- Mapping the staff survey results to the themes already identified during the Discovery phase of This is Our NWSSP to identify overlaps and look for opportunities for further improvements.
- Develop an action plan to enable colleagues to see positive change which can be shared with the 2024 staff survey.
- Further embedding of the Values Behaviour Framework throughout NWSSP's sites and services.
- Publishing of case studies to demonstrate good practice in compassionate leadership and living the values.

### **Support a Healthy and Engaged Workforce (People Centred)**

Great strides have been made over the last year in the development of our Health and Wellbeing offering, including:

- Implementation of our Health and Wellbeing framework with our Health and Wellbeing Champions.
- The signing of the Menopause Pledge to demonstrate support to colleagues who are directly or indirectly affected by effects of the menopause, as well as the delivery of menopause awareness training.
- Delivered a series of online physical fitness sessions for colleagues to join in real time or via recordings.
- Continued support for staff through wellbeing awareness and stress awareness workshops.
- Developed an accredited training centre for Mental Health First Aid to ensure the provision of ongoing expertise and support to the organisation's trained and practicing mental health first aiders.
- Continue to enhance our Mental Health support provisions through collaborative working with partners such as Mind, Silver Cloud, Time to Change Wales, and Headspace, among others.

In 2024-25, we will further our support of a healthy and engaged workforce, ensuring our people have a voice and that we listen to that voice. In conjunction with other activities within the 'This is Our NWSSP' and Agile Working programmes, we will provide a working environment that enables our people to thrive. With this in mind, we will:

- Review our Health and Wellbeing framework with our Health and Wellbeing Champions.
- Provide further development of financial well-being provision.
- Provide in-house accredited training via our accredited training centre for Mental Health First Aid to increase the number of Mental Health First Aiders to support our staff.

### **Recognise Individual Differences and Need to Increase Autonomy, and Create a Clearer Sense of Belonging**

Embedding diversity and inclusiveness into our culture and thinking, and empowering our people to thrive, forms an essential component of the 'This is our NWSSP' programme.

- It is our continuing aim to develop a programme of activity that offers opportunities to groups within the population who are under-represented in NWSSP, raising the profile of our organisation in the wider community, and ensuring that all are welcomed and encouraged to consider a career with us.

During 2023-24 we have:

- Recruited an Organisational Development Manager who focusses specifically and Diversity, Well-being and Inclusion to drive forward our action plans and support NWSSP to embrace activities in line with national priorities such as the Anti Racist Wales Action Plan as well as employee driven priorities.
- Published a Diversity and Inclusion Action Plan which focusses on the following areas:
  - Attraction
  - Development
  - Engagement
  - Employment Practices
  - Leadership
- Provided a suite of learning and development opportunities for staff and management in Diversity and Inclusion incorporating bespoke face to face and virtual sessions, an additional Inclusive Leadership module in the organisation's leadership programme, access to an Inclusive Leadership eLearning module, a Coffee and Conversations session for managers to enable them to discuss how they lead in alignment with inclusive practices, and a webinar for colleagues to access at their convenience.

In 2024-25 we will:

- Implement action plans with specific focus on:
  - Develop more employee networks.
  - Recruit Diversity and Inclusion Ambassadors.
  - Ensure our learning and development opportunities are inclusive.
  - Commence a campaign for safe inclusivity so that colleagues feel safe to ask questions and engage in conversations to support learning.
- Provide learning in Equality and Diversity, in inclusive practices including recruitment and line management, in Unconscious Bias and Anti Racism, and ensure that all our colleagues have access to online webinars, videos, podcasts and e-learning to support this as well as increasing our face-to-face learning opportunities.

### **Develop Appropriate Individual and Collective Competence**

Finally, we will continue to ensure our people have the knowledge, skills, and experience to fulfil their individual needs and aspirations; as well as those of the organisation.

During 2023-24 we:

- Published a People Learning and Development Strategy to support continued development and performance excellence.
- Developed a People Development Hub where colleagues can access an increased range of learning opportunities to support their personal and professional growth.
- Established a Non-Digital Working Group to review and improve access to learning and development support for colleagues in non-digital roles.

- Developed learning materials for carbon literacy awareness training and commenced delivery to key groups.
- Engaged colleagues in the Digital Capability Framework as a first step to identifying knowledge and skills gaps which will enable us to provide targeted support.
- Engaged with the organisation and scoped a new Leaders of the Future talent programme to be rolled out in 2024-5.
- Worked in partnership with Trade Union colleagues and access the Wales Union Learning Fund to support learning in and awareness in neurodiversity.

To further support this we will:

- Further implement NWSSP's Learning and Development Strategy in a phased approach ensuring that colleagues have access to flexible, accessible and collaborative development opportunities.
- Increase provision in access to learning for colleagues in non-digital roles.
- Work in partnership with Trade Union colleagues and access the Wales Union Learning Fund to support the development of essential skills including literacy and digital inclusion.
- Use the outcomes from the Digital capability Framework and associated work to develop digital capability to support access to systems and learning opportunities as well as online resources.

### Resourcing

Similarly to 2022-23, we continue to find ourselves challenged by the offerings of competing with private and public sector organisations for the best talent, especially in our professional services and the volume of vacancies in today's labour market continues to see recruitment becoming more and more challenging and we still find ourselves in a candidate's market.

In 2023-2024 we focussed on our Employee Value Proposition (EVP) i.e., the core benefits that make up our wider employer brand, focussing on what NWSSP can offer a potential candidate in exchange for their talent, skills and experience. We also focussed on establishing the future skills required for the organisation and how we can bring these into NWSSP, including the use of our temporary workforce and appropriate workforce planning tools. As such, in partnership with our Trade Union colleagues, we introduced:

- Four discreet training modules on recruitment and selection: Preparing to Recruit, Inclusive Recruitment, Selection and Interview and Welcome to NWSSP which looks at the induction experience.
- A Recruitment and Retention subgroup attached to the Local Partnership Forum to ensure our staff are consulted and engaged about things that matter to them.
- Flexible Recruitment Principles to ensure we supported staff to migrate between bank, fixed term, secondment and acting up roles into more permanent arrangements.
- Vacancy control and bank and agency scrutiny panels, to focus on establishment control, support re-deployment and role agility across the organisation and to ensure divisions were engaging with the most effective use of bank and agency, all aligned to our objective to reduce agency spend by 15%.
- Launched a "Working for Us" page on the staff Intranet which is the creation of a dedicated recruitment site and benefits portal to showcase NWSSP at its best.
- A Workforce Planning Microsite incorporating NWSSP's Workforce Planning Strategy and accompanying Toolkit to enable divisions to effectively workforce plan and provides access to

the five Power Business Intelligence (BI) dashboards to help divisions understand their staff demographics in order to workforce plan:

- Leavers Exit Interview Analysis
- Welsh Language Skills Analysis
- Workforce Age Profile Analysis
- Staff Movements Analysis
- Inclusivity Profile Analysis

To further strengthen our EVP and effective workforce planning in 2024-25 we plan to:

- Work with all Divisions to enable them to use the Workforce Planning microsite effectively and consider different ways to fill vacancies.
- Increase the number of managers who attend the recruitment training, thus ensuring we get recruitment and selection right at source.
- Embed the use of the dedicated “Working for Us” site so that staff can access important information about working for NWSSP easily.
- Further focus on our external brand, ensuring potential candidates understand who we are and the expectations of the advertised roles.

### **Widening Access**

NWSSP is committed to the widening access agenda and to ensure that we provide opportunities for employment and growth to those in the communities we serve. In 2023-4 we focussed on the following:

- Growing the Welsh Language skills of our substantive workforce to ensure we are representative of the communities in which we work.
- Further developing access to NWSSP through Career Entry Routes. The increased promotional activity saw us recruiting more Network 75 trainees than in previous years with 10 students joining us across 6 professions.
- Promotion of opportunities through Career events in partnership with education and other organisations including charities and agencies who support access to inclusive work placements.

In 2024-25 we are committed to the further development of our Widening Access approach, focussing on:

- Increasing the numbers of staff that join us with protected characteristics.
- Continuing to grow the Welsh Language skills of our substantive workforce to ensure we are representative of the communities in which we work.
- Further developing access to NWSSP through Career Entry Routes specifically focussing on increasing our apprenticeship routes and exploring other opportunities such as internships.
- Further promotion of opportunities through Career events in partnership with education and other organisations including charities and agencies who support access to inclusive work placements.

### **People Analytics**

People analytics enables us to measure and report key workforce concepts, such as performance, well-being, productivity, innovation, and alignment, in turn enabling more effective evidence-based decisions to inform our future planning and modernisation and transformation plans.

Following the positive feedback received regarding the changes to the revised People and OD reports to all Divisional Senior Management Teams, focussing on the 'Moments that Matter' i.e. moments that are more likely to have a significant impact on the employment relationship and the overall employee satisfaction with NWSSP, we have continued to review how we analyse and publish our data.

In 2023-24 we launched the E-Learning modules on Business Intelligence training for People Managers, with supplementary user guides as part of a dedicated page on the staff intranet. Views to the page have steadily increased and we will continue to monitor the training to determine whether there is an associated reduction in requests for data from the team. In 2023-24, the People Analytics team have also focussed on the creation of the dashboards contained within the Workforce Planning microsite alongside the creation and testing of several streamlined workflows using Microsoft Forms.

In 2024-25, People Analytics will further support the organisation by providing detailed analysis in relation to our Power BI dashboards. This will enable the organisation to understand the narrative regarding people leaving our organisation as well as what we need to consider in relation to our staff demographic in comparison to census data regarding the communities we work within. There will also be a continued focus on streamlined workflows to reduce manually intensive processes such as annual leave carry forward and incremental credit awards.

### Employee Relations

We continue to work with our people managers to ensure they are applying the principles of a just and learning culture, focussing on restorative justice and compassionate leadership. In 2023-24 we continued to listen to all perspectives on our employee relations processes and as a result have continued to introduce new ways of working following the conversations to ensure our staff, regardless of role, are at the heart of our approach.

To this end we have continued to focus on individual and collective relationships in the workplace, working in partnership with our Trade Union colleagues. Specifically, during 2023-24 we have:

- Maintained positive, trust-based relationships with our local Trade Union colleagues at the NWSSP Local Partnership Forum (LPF), against the backdrop of a difficult industrial relations climate.
- Maintained a positive relationship with the Welsh Partnership Forum
- Introduced a People and OD Policy subgroup attached to the Local Partnership Forum to ensure our staff are consulted and engaged about things that matter to them.
- Reviewed our whole approach to employee relations to reduce harm to those involved, piloting new approaches in certain cases, whilst keeping the organisation safe from a statutory perspective.
- Introduced a Healthy Working Relationships webinar, highlighting the importance of resolving issues informally.

In 2024-25 we will further strengthen work in this area by:

- Working with HEIW following the research and learning from Aneurin Bevan University Health Board, to embed a new approach to Employee Relations whereby our employees are at the centre of the approach and employee harm is avoided where possible.
- Introducing discreet training modules in relation to Disciplinarys, Respect and Resolution and Capability. Ensuring the training is available to everyone to develop competence and capability in this area.

- Introduce the use of Bank Investigating Officers, hopefully to further reduce the time taken to undertake an employee relations investigation.
- Review pastoral support available to all staff through NWSSP and Trade Union membership.

### Welsh Language

The Welsh Language Unit continues to be within the People and Organisational Development Division in NWSSP, and provides support, guidance and clear direction to all other divisions within NWSSP to deliver quality bilingual services. We currently employ a Welsh Language Services Manager, 2 Translation Managers and 5 translators. We also have an established bank of translators that we call on during peak times.

During 2023-24 our main areas of work have been:

- Offering a Welsh language training and learning programme to staff and managers.
- Outreach at careers fairs, schools, and colleges.
- Advertising and recruiting.
- Determining Welsh language skills for posts and vacancies.
- Audit and Review of our telephone services in line with a new telephone system.
- Translation and technology translation support services.

### Training and Learning:

We have continued to deliver opportunities for staff to learn Welsh during 2023-24. We are currently offering 3 Entry Level 1 courses and we have 47 members of staff learning Welsh at this level, 1 Entry Level 2 course with 8 members of staff attending this course. We also have a Foundation Level 1 course for staff and there are 12 members of staff on this course. We have 67 members of staff in total on our workplace specific courses. We also fund staff to attend mainstream courses during working hours across Foundation Level 2, Intermediate Level 2 and Advanced Level 2, there are 12 members of staff attending these courses.

We have promoted participation and completion of the More Than Just Words Welsh Language Awareness Module throughout NWSSP and completion for 2023-24 our compliance is at 85%. We are currently exploring how we make the content of this module available to members of staff who do not have access to a digital platform to complete the module.

Our focus on the use of the Welsh language in the workplace takes priority. NWSSP is currently in discussions with the Welsh Language Policy Unit at Welsh Government and Learn Welsh Centre about creating a “Croeso Cymraeg” module of up to 5 hours for staff with 0 skills on ESR to complete. The module will be available on-line and will be mandatory.

We also recognise the need to support staff who may be less confident in their use of the Welsh language to be offered less formal learning avenues to practice their Welsh language skills in a safe and constructive environment with more confidence. Early discussions have taken place during 2023-24 with the Welsh Language Policy Unit at Welsh Government and Learn Welsh Centre, and those discussions are ongoing with a view to introduce the programme to our learning offer in 2024-25.

We promote a variety of online taught courses to staff through our People and Organisational Development newsletter that is issued at the beginning of each calendar month.

## **Outreach**

During 2023-24 the Welsh Language Unit has engaged with over 600 students through career events at Ysgol Bro Morgannwg, Barry; Cardiff and Vale College, Ysgol Bro Eder, Ysgol Glan Taf, Ysgol Plas Mawr to raise awareness of careers gateways into NHS Wales Shared Services Partnership as an employer of choice. The Welsh Language Services Manager attended a Welsh Language Recruitment Day in Barry Library in April 2023. We will identify other opportunities to work with local communities near or around all NWSSP's operational locations across Wales for 2024-25.

## **Advertising and Recruitment**

The protocol for recruiting managers to advertise vacancies bilingually has been fully integrated into our recruitment process, and all job descriptions are available in both Welsh and English.

A vacancy control panel has been established to scrutinise role requirements and Welsh language skills for vacancies. There are key vacancies such as Receptionist roles, call handling staff who work on our main telephone numbers, helpline numbers and contact centres that are now identified as Welsh Essential or where Welsh language skills need to be learnt.

## **Translation and Translation Technology Support Services:**

We continue to provide translation services and 2023-24 will see our highest translation figure yet. Our projections indicate that we will have translated and processed over 7.5million words during 2023-24 by supporting:

- All NWSSP Divisions and hosted services
- Public Health Wales NHS Trust
- Digital Health and Care Wales
- Velindre University NHS Trust

We have initiated a pilot where we bring all organisations who have a Service Level Agreement with NWSSP to use the same translation memory software, as outlined in the More Than Just Words Strategy. This is enabling all organisations to plan for 2024-25 more prudently in terms of what they will require in translation and technology provision. In order to support this, we are renewing our contract with Phrase under procurement rules and regulations.

In the medium and longer term, the Welsh Language Unit and the Project Management Office in line with the More Than Just Words Strategy and our NWSSP Digital Strategy will undertake a feasibility study and a scoping exercise to determine what the requirements for translation services will be by Health Boards and Trusts. The demand for translation services across the whole of NHS Wales increases annually and the shortage of qualified and experienced translators is presenting to be a challenge. During 2024-25 we will collaborate with Health Boards and Trusts to scope the needs and demands across NHS Wales with a view to procure an All-Wales translation memory software to help manage the demand by 2026-27.

## **Telephone Services:**

We have undertaken a detailed analysis of our telephone services during 2023-24 and have audited, reviewed and re-recorded all messages across the business in order to ensure that the information available to our callers is current and accurate and that they meet the requirements of the Welsh language standards. To support this, standard operating procedures have been updated and circulated and more training is being provided in terms of raising awareness of compliance with the standards, learning key phrases for staff to be able to handle calls in Welsh and putting more robust



procedures in place to be able to offer Welsh language services on our main telephone numbers, helpline numbers and contact centres.

### People and OD Excellence

The People and OD Team must be seen as a credible, trusted partner to our internal and external customers. To measure this, we need to listen our customers regularly.

As an internally facing corporate service, we commit to putting people at the heart of our operations and we commit to upholding our professional values; putting our customers first, working collaboratively, providing expert advice and opinion, being impactful and being innovative in our approach.

In 2023-24 the People and OD team continued to work on our service excellence by listening to staff feedback following the launch of a dedicated People and OD Customer Service and inviting staff and managers to attend our team meetings and provide direct feedback about their experiences with us.

During 2023-24 the People and OD team took part in the Customer Service Excellence (CSE) Accreditation. NWSSP was successful in the accreditation and therefore in 2024-25 we intend to continue to work towards being an employer of choice through responding to the CSE feedback and amending our approach and processes as appropriate, rather than applying for an individual accreditation such as Investors in People, or 'The Best Companies' award.

## Appendix D – Key Performance Measures

### Monitoring

We continue to align our performance measures to our Strategic Objectives and we regularly report divisional Key Performance Indicators (KPIs) to the Partnership Committee, Welsh Government, and our customers through our quarterly performance reporting. Our performance measures are reviewed as part of the Quarterly Review process to ensure that they are relevant, ambitious yet achievable and measurable.

Quarterly Review meetings with divisions are used to assess our progress against the IMTP divisional objectives, performance measures, risk registers and both workforce and financial performance.

We also produce reports for scrutiny monthly by Senior Leadership Group (SLG), bi-monthly by Shared Services Partnership Committee (SSPC) and quarterly on an organisational basis.

We have recently recommenced the bi-annual performance meetings on a 1:1 basis with the health organisations with representatives including the Director of People & OD and Director of Finance.

Joint Executive Team (JET) meetings are held twice a year which are an important part of the formal accountability relationship between Welsh Government and our organisation. The review agenda broadly is set around the themes of finance, performance and our delivery against objectives in the current IMTP.

### Outcomes

In developing our plans for 2024-27 we have been establishing performance measures that support the outcomes within our Strategy Map. These measures are set around the three key themes of savings, quality and end user experiences.

The outcomes measures have been developed through the Performance and Outcomes Group (POG) which meet on a quarterly basis with representatives from each of the divisions. The group was set up with the aim of identifying common overarching outcome measures and the sharing and learning of performance reporting.

In addition to discussions in the POG group, sessions with NWSSP SLG and SSPC have supported the development of our outcome measures. These measures which will remain under development are highlighted in Appendix E.

From April 2024 both Outcome measures and existing performance measures (Annex D) which have tended to be more process measures will be reported as part of NWSSP's reporting structure. The Outcome reporting is envisaged to stimulate more focussed discussion in SLG and SSPC on quality and the impact of the work we do with NWSSP.

### Developments

The key performance measures have been revised as part of our regular review and broadly remain the same however, with additions to the commitment of organisational achievement to Customer Service Excellence and a new measure of Accounts Payable straight through processing. Targets have also been revised for future years.

We also measure and report to Welsh Government on a number of policy areas on a bi-annual and annual basis by policy assurance assessments on the following:

- Foundational Economy
- Learning Disabilities

- Value Based Health and Care, and;
- Decarbonisation.

This year we have introduced a Managing Director dashboard to summarise key areas of the organisation around performance, Finance, People & OD, Risk and Key developments against our plan.

Set out below are our Key Performance measures for 2024-25 and where applicable proposed targets for 2024-27.

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Division	Strategic Objective	Lead Indicators	Description of Key Performance Measure	Responsibility	Frequency	2024-25 Target	2025-26 Target	2026-27 Target
NWSSP	Our Services		Customer Service Excellence (CSE) Accreditation	NWSSP	Annual	Achieve	Achieve	Achieve
NWSSP	Our Value		Financial Position	NWSSP	Monthly	Breakeven	Breakeven	Breakeven
NWSSP	Our Value		Adding Value (Professional Influence Benefits)	Both	Annual	£110m	£110m	£110m
NWSSP	Our Services		Customer Satisfaction - How satisfied are you with the quality of service?	NWSSP	Annual	Continued Improvement within Services	Continued Improvement within Services	Continued Improvement within Services
NWSSP	Our Services		Customer Satisfaction - How Satisfied are you with the response times from [Directorate]?	NWSSP	Annual	Continued Improvement within Services	Continued Improvement within Services	Continued Improvement within Services
NWSSP	Our Services		- I found the staff professional and courteous?	NWSSP	Annual	Continued Improvement within Services	Continued Improvement within Services	Continued Improvement within Services
NWSSP	Our Services		Customer Satisfaction - How easy did you find it to contact the [Directorate]?	NWSSP	Annual	Continued Improvement within Services	Continued Improvement within Services	Continued Improvement within Services
NWSSP	Our Services		Customer Satisfaction - If you've ever raised a concern/query/problem with [Directorate] about the service they provide, how satisfied were you with how it was resolved?	NWSSP	Annual	Continued Improvement within Services	Continued Improvement within Services	Continued Improvement within Services
Accounts Payable	Our Services		Public Sector Pay Performance – Non NHS	Both	Monthly	95%	95%	95%
Accounts Payable	Our Services		Straight through processing	Both	Monthly	TBC	TBC	TBC
Audit & Assurance	Our Services		Audit plans agreed/in draft by 31 March	NWSSP	Annual	100%	100%	100%
Audit & Assurance	Our Services		Audit opinions delivered by 31 May	NWSSP	Annual	100%	100%	100%
Audit & Assurance	Our Services		Audits reported vs. total planned audits	NWSSP	Monthly	> 95%	> 95%	>95%
Audit & Assurance	Our Services		Audits delivered for each Audit Committee in line with agreed plan	Both	Each Committee	80%	80%	80%
Audit & Assurance	Our People		% of recommendations implemented and their impact	Both	Annual	In Head of Internal Audit Annual Opinion & Report	In Head of Internal Audit Annual Opinion & Report	In Head of Internal Audit Annual Opinion and Report
Counter Fraud	Our Value		Increase in financial recoveries for NHS Wales via CFS Wales and LCFS consistent application of enhanced AFI financial recoveries	NWSSP	Quarterly	Ongoing – increased referrals and recoveries	Ongoing - increased referrals and recoveries	Ongoing – increased referrals and recoveries
Central Team	Our Services		Achieve a customer satisfaction index of satisfied (85%) or better on an annual basis.	NWSSP	Annual	85%	90%	92%
Central Team	Our Services		All incidents (except P1) raised with the Central Team are responded to within 2 hours between the times of 9am-5pm	NWSSP	Monthly	94%	94%	94%
Central Team	Our Services		P1 incidents raised with the Central Team are responded to within 20 minutes between the times of 9am-5pm	NWSSP	Monthly	90%	90%	92%

Division	Strategic Objective	Lead Indicators	Description of Key Performance Measure	Responsibility	Frequency	2024-25 Target	2025-26 Target	2026-27 Target
Central Team	Our Services		P1 incidents raised with the Central Team are resolved within 8 hours between the time of 9am-5pm, within capability	NWSSP	Monthly	95%	95%	95%
Central Team	Our Services		BACS Service Point tickets received before 14.00 will be processed the same working day unless issues are identified and the requestor is not available to address them. The remaining tickets will be processed the next working day.	NWSSP	Monthly	95%	95%	95%
Digital Workforce	Our Services		% of Calls Answered	NWSSP	Monthly	85%	85%	85%
Digital Workforce	Our Services		% of live chat responses	NWSSP	Monthly	90%	90%	90%
Digital Workforce	Our Services		% customer satisfaction year on year	NWSSP	Monthly	90%	90%	90%
Employment Services	Our Services		Vacancy Creation to start date request (used to be unconditional offer)	Both	Monthly	71 days	71 days	71 days
Employment Services	Our Services		% of Vacancies advertised within 2 working days of receipt	NWSSP	Monthly	98%	98%	98%
Employment Services	Our Services		Vacancies advertised within 2 working days of receipt	NWSSP	Monthly	2 Days	2 Days	2 Days
Employment Services	Our Services		% of conditional offer letters sent within 4 working days	NWSSP	Monthly	98%	98%	98%
Employment Services	Our Services		conditional offer letters sent within 4 working days	NWSSP	Monthly	4 Days	4 Days	4 Days
Employment Services	Our Services		% of calls answered - Recruitment	NWSSP	Monthly	95%	95%	95%
Employment Services	Our Services		% of calls answered - Payroll	NWSSP	Monthly	95%	95%	95%
Employment Services	Our Services		% of calls answered - Student Award	NWSSP	Monthly	95%	95%	95%
Employment Services	Our Services		NWSSP % of pay accuracy in pay period	NWSSP	Monthly	99.60%	99.60%	99.60%
Employment Services	Our Services		Overall % Pay Accuracy	Both	Monthly	99.60%	99.60%	99.60%
Employment Services	Our Services		% of NHS Bursary Applications processed within 20 days	NWSSP	Monthly	100%	100%	100%
Laundry	Our Services		Orders dispatched meeting customer standing orders	NWSSP	Weekly	85%	85%	85%
Laundry	Our Services		Delivery's made within 2 hours of agreed delivery time	NWSSP	Weekly	100%	100%	100%

Division	Strategic Objective	Lead Indicators	Description of Key Performance Measure	Responsibility	Frequency	2024-25 Target	2025-26 Target	2026-27 Target
Laundry	Our Services		Microbiological contact failure points	NWSSP	Weekly	85%	85%	85%
Laundry	Our Services		Inappropriate items returned to the laundry including Clinical waste items	Customer	Weekly	<5	<5	<5
Legal and Risk	Our Services		Timeliness of preliminary advice – within 3 business days	NWSSP	Monthly	95%	95%	95%
Legal and Risk	Our Services		Case Closure Client Satisfaction response	NWSSP	Monthly	95%	95%	95%
Legal and Risk	Our Services		Annual Client Satisfaction Questionnaire response	NWSSP	Annually	Positive narrative responses	Positive narrative responses	Positive narrative responses
Legal and Risk	Our Services		Achieved successful Lexcel Accreditation	NWSSP	Annually	Achieve	Achieve	Achieve
Legal and Risk	Our People		Meeting with the staff engagement group every month and produce newsletters following the outcome of the meetings.	NWSSP	Monthly	100%	100%	100%
Legal and Risk	Our Services		Time from consideration by the Learning Advisory Panel to presentation to the Welsh Risk Pool Committee	NWSSP	Monthly	95%	95%	95%
Medical Examiner	Our Services		Total number of cases referred into MES	Both	Monthly	2500 - 3000	2500 - 3000	2500 - 3000
Medical Examiner	Our Services		Prevented Events	NWSSP	Monthly	0	0	0
Pharmacy Services	Our Services		Service Complaints	Both	Monthly	Zero complaints	Zero complaints	Zero complaints
Primary Care	Our Value/Our Services		KPI 1 - Primary Care Payment files sent to Accounts Payable within 5 working days of payments being made	NWSSP	Monthly	100%	100%	100%
Primary Care	Our Services		KPI 2 - Patient assignment actioned within 24 hours of receipt of request	NWSSP	Monthly	100%	100%	100%
Primary Care	Our Services		KPI 4 - Urgent medical record transfers actioned within 2 working days	NWSSP	Monthly	100%	100%	100%
Primary Care	Our Services		KPI 12 - Prescription Accuracy Rates compliant with SLA (99%)	NWSSP	Monthly	99%	99%	99%
Procurement	Our Value		Savings against Plan	Both	Monthly	£40m	£50m	
Procurement	Our Value		Value of additional NHS Wales expenditure within the Foundational Economy*	Both	Monthly	tbc	tbc	
Procurement	Our Services		Volume of transactions captured through Scan4Safety implementation	Both	Monthly	1,000,000	1,500,000	2,000,000
Procurement	Our Services		Number of nationally stocked product lines	NWSSP	Monthly	250 additional lines	tbc	

Division	Strategic Objective	Lead Indicators	Description of Key Performance Measure	Responsibility	Frequency	2024-25 Target	2025-26 Target	2026-27 Target
SLE	Our Services		Queries resolved within 3 working days	NWSSP	Monthly	85%	85%	85%
SLE	Our Services		Queries resolved within 10 working days	NWSSP	Monthly	95%	95%	95%
SMTL	Our Services		% of Lab Investigation reports completed within 40 days from receipt into the laboratory	NWSSP	Monthly	90.00%	91.00%	92.00%
SMTL	Our Services		% delivery of audited reports on time (Commercial)	NWSSP	Monthly	91.00%	92.00%	93.00%
SMTL	Our Services		% delivery of audited reports on time (NHS)	NWSSP	Monthly	91.00%	92.00%	93.00%
SMTL	Our Services		Annual UKAS accreditation	NWSSP	Annual	Attained	Attained	Attained
SMTL	Our Services		UKAS findings addressed on time (Annual)	NWSSP	Annual	Completed	Completed	Completed
Specialist Estates	Our Services		Timeliness of advice	NWSSP	Monthly	95% of initial business case scrutiny responses returned to WG by the agreed date.	95% of initial business case scrutiny responses returned to WG by the agreed date.	95% of initial business case scrutiny responses returned to WG by the agreed date.
Specialist Estates	Our Services		Customer Satisfaction: % of customer satisfaction based on survey information	NWSSP	Annual	95% satisfaction Survey to be completed November 2025.	95% satisfaction Survey to be completed November 2026.	95% satisfaction Survey to be completed November 2027.
Specialist Estates	Our Services		Issues and Complaints – deal with the same in line with the requirements of the Issues and Complaints Management Protocol (number of complaints)	NWSSP	Monthly	0 complaints.	0 complaints.	0 complaints.







## Appendix E – Outcome Measures







Strategic Objective	Outcome	Measure
Our People	We will create opportunities for our current and future staff to maximise their potential and nurture our talent pipeline	Internal Promotion Rate
		Diversity Stats
		Reason for Leaving
		Sickness
		Staff Award Submissions
		Website Hits
		N75/apprenticeship/graduate Staff
	We will listen and learn from our staff to co-produce innovative solutions with our partners	Innovative Ideas
		Turnover
		Uptake of Welsh Language Training
		Average Tenure - Talent retention
		360 day Quit Rate
		Applicants to Vacancy Rate
	We will increase the diversity of our workforce and advance the use of the Welsh Language in all that we do	Staff Survey - I have had a PADR in the 12 Months that has supported my Development
		Staff Survey - I am proud to tell people I work for NWSSP
		I get recognition for good work.
		The organisation values my work.
		There are opportunities for me to develop my career in this organisation.
		I have opportunities to improve my knowledge and skills.
		Staff Survey - I am able to make improvements in my area of work
	We will promote physical, social, mental, and financial well-being throughout the organisation to support our staff	Staff Survey - We are empowered and supported to enact change
		There are frequent opportunities for me to show initiative in my role.
		I have a choice in deciding how to do my work.
		My organisation takes positive action on health and wellbeing.
		In the last 12 months, have you experienced musculoskeletal problems (MSK) as a result of work activities? Yes/No
		During the last 12 months have you felt unwell as a result of work-related stress? Yes/No















Strategic Objective	Outcome	Measure
		In the last three months have you ever come to work despite not feeling well enough to perform your duties? Yes/No
Our Services	We will enable our customer facing teams to close majority of enquiries at first contact, by improving service speed, quality, and experience	Calls Answered
		Tasks Automated
		Website Hits
	We will drive innovation, setting the standard for good practice, and enhance our processes through automation	Number of innovative ideas generated by employees
		Accreditations e.g CSE
	We will be data driven, sharing intelligence with our partners to influence decision making across NHS Wales	How satisfied are you with the quality of service?
		How Satisfied are you with the response times from [Directorate]?
		I found the staff professional and courteous?
	We will cultivate partnerships with industry leaders and academic institutions and seek University status	How easy did you find it to contact the [Directorate]?
		If you've ever raised a concern/query/problem with [Directorate] about the service they provide, how satisfied were you with how it was resolved?
Our Value	We will lead the way and command of others the changes required to address the climate change emergency and achieve decarbonisation targets	EV Vehicles Mileage
		Carbon emissions – Co2e
		Transport Costs - Business Miles
	We will spearhead opportunities to grow investment in the foundational economy across Wales as an increasing proportion of our supply chain	Plastic Use
		Spend in Wales
	We will make bold investment decisions that drive transformation and add value	EV Vehicles Mileage – Supply Chain and Logistics
		Qualitative report detailing the progress of NHS Wales' contribution to decarbonisation as outlined in the organisation's plan
		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
	We will utilise our resources efficiently and make a positive impact on a social and sustainable basis	Professional Influence Benefits







## Appendix F – Duty of Quality

Workforce	Culture	Information	Learning, Improvement and Research	Whole system approach	Leadership
					
<b>Audit and Assurance:</b> <i>Development of a staff pipeline programme, inclusive of new trainees and apprentices.</i> Ensuring there are quality candidates, who are ready to meet the future needs of the service.	<b>Single Lead Employer:</b> Provide support and assistance to trainees with protected characteristics. This will ensure every individual is treated fairly and they are not disadvantaged due to their characteristic, which will enable them to progress and develop their careers in Wales.	<b>Legal and Risk:</b> Develop a travel app to monitor expenses and carbon footprint. The data gathered from this app will support the divisions in reducing costs in travel expenses and carbon footprint.	<b>Digital Workforce Solutions:</b> Improve the quality of workforce data in line with National Workforce Datasets (NWD). This will provide workforce data quality to enable improved workforce reporting, workforce planning and establishment control.	<b>Employment Services:</b> Evaluate the Recruitment Modernisation Programme, to identify further streamlining opportunities and ways to reduce the time to hire. This will provide an efficient recruitment service that meets the needs of customers.	<b>People and Organisational Development:</b> Implement a Learning and Development Strategy to address the learning needs of staff across the organisation. Focusing on growing our leadership and people management capabilities.
<b>Specialist Estates Services:</b> Continued recruitment and training development programme for Network 75 students. This will improve the quality of team capacity and resilience.	<b>People and Organisational Development</b> Continue to create a positive culture across NWSSP, that embeds healthy working relationships, collective and compassionate leadership approaches to enable staff to show compassion; to speak up; to continuously improve; and to learn.	<b>Legal and Risk:</b> Develop further methods of data sharing with the client health bodies to better support improved decision making. The information provided will identify pressure areas, allowing the service to allocate resources appropriately.	<b>Digital Workforce Solutions:</b> Implementing a Digital Workforce Quality Improvement Programme. The information gathered will encourage the sharing of innovative solutions, as well as improvements and developments implemented where possible.	<b>Digital Workforce Solutions:</b> Continue to maintain the continued supply of Agency Nurses to NHS Wales organisations via the provision of an All-Wales Nursing Agency Contract.	<b>People and Organisational Development:</b> Run a Leading for Excellence and Innovation Programme. The programme welcomes all leaders to develop their knowledge and skills to be confident, effective and inspiring leader within NWSSP.
<b>Procurement Services:</b> Develop workforce capabilities and capacity to meet the changing needs of the organisation. The team are looking at the workforce approaching retirement age and may pose skills gaps. It will ensure that there is capable and experienced workforce.	<b>People and Organisational Development:</b> Develop a programme of activity that offers opportunities to under-represented groups in NWSSP to support an inclusive culture. Through providing a positive working environment for all staff will enable employees to thrive as a healthy and engaged workforce.	<b>Pharmacy Services:</b> Quantify volume and complexity of medicines shortages and supply chain issues within primary and secondary care. Consolidated data will facilitate NWSSP support to Health Boards in the management of supply chain issues and understand local capacity impact when managing these challenges.	<b>Single Lead Employer:</b> Assessing trainee experience by using surveys from February/March 2024 during the onboarding Process. The learning from these surveys will highlight any arising issues for improvement in time for August and September onboarding.	<b>Employment Services:</b> Evaluate the payroll/recruitment Modernisation Programme to identify further streamlining opportunities. This will provide a modern and efficient payroll service that meets the needs of customers.	<b>Digital Workforce Solutions:</b> Lead the development and Implementation of the People Portal Transformation Programme – This division is taking the lead on this programme, showcasing leadership in creating a flexible and agile system.
<b>People and Organisational Development:</b> Launching and embedding a	<b>Specialist Estates Services:</b> Promote a mentoring service to Health Boards and Trusts to support	<b>NHS Counter Fraud Services:</b> Maintain focus on data analysis – This objective aims to identify new service streams in	<b>Central Team eBusiness Service:</b> Continually auditing its service. The information is used to gain accreditation and service improvements.	<b>Central Team eBusiness Service:</b> Developing a new Financial Management System (FMS) Service Recharge	

Workforce	Culture	Information	Learning, Improvement and Research	Whole system approach	Leadership
					
<b>workforce planning strategy and accompanying toolkit.</b> This will ensure the learning needs of staff across the organisation are met and that we are developing a capable workforce.	<b>development of estates and professionals –</b> Indicates further a collaborative culture, emphasising NWSSP value of working together to increase confidence in staff, which subsequently shapes customer/patient experience.	Primary Care that are suitable for data analysis. The division is also seeking to liaise with data analytical team in Primary Care Services, to retrieve crucial information on optical claims.		<b>Model.</b> This model will be the best fit for NHS Wales.	
<b>Digital Workforce Solutions: All- Wales Recruitment Programme.</b> This will continue to deliver an ethical, sustainable supply of healthcare professionals into the NHS Wales workforce.	<b>Service Improvement Team: Achieving the Customer Service Excellence Accreditation across NWSSP.</b> Embedding customer service excellence as part of our people values.	<b>Central Team eBusiness Service: Business Intelligence (BI) review of all systems, tools, and reports.</b> The reports utilise information to identify any gaps or duplication in the tools being used.	<b>Legal and Risk: Work with NHS bodies to embed a culture of improved learning –</b> how to prioritise improved learning as a long-term outlook and ways this this can be applied within an All-Wales approach.	<b>Specialist Estates Services and the Decarbonisation Team: Deliver enhanced services to Welsh Government and NHS Health Organisations to support decarbonisation agendas:</b> Collaborating and reviewing progress with Welsh Government to support the strategic and local Action Plan.	
<b>Audit and Assurance: Embed training strategy within the division, including alignment of Personal Appraisal and Development Reviews (PADR) –</b> The PADR will identify additional and common training needs to improve competency of workforce.			<b>Accounts Payable: Support and implement any Procure 2 Pay (P2P) initiatives that emerge from the action plan –</b> utilising and learning new initiatives to support various actions such as reducing number of invoices going into dispute.	<b>Service Improvement Team: Achieving the Customer Service Excellence Accreditation across NWSSP.</b> This provides assurance to our customers that we provide excellent quality of service.	
<b>Digital Workforce Solutions: Support the National Medical Workforce and Productivity agenda –</b> Using the National Medical Workforce Group to review strategic objectives that can improve the workforce.					

Workforce	Culture	Information	Learning, Improvement and Research	Whole system approach	Leadership
					
<p><b>Employment Services:</b> Support staff with new digital skills and compassionate management – As roles are being redesigned and more digital support offered, this will reflect on how the workforce progresses and enables staff to feel more confident and skilled to deliver effective work.</p>					
<p><b>Pharmacy Services:</b> Increase the skills and resilience within the Welsh Technical Services Workforce. The training programmes intends to upskill existing workforce and allow them to carry out further tasks and projects.</p>					

Safe	Timely	Effective	Efficient	Equitable	Person Centred
					
<b>Pharmacy Services:</b> Maintain regulatory and professional licences and registrations. This will provide a safe high quality regulated medicines service across NWSSP.	<b>Digital Workforce Solutions:</b> Support continued implementation of Establishment Control – Implementation of Establishment Control will be carried out according to needs of each organisation in a timely manner, ensuring to work in accordance with local priorities.	<b>Procurement Services:</b> Modernising National Distribution Centre warehousing, hospital inventory management and Transport & Logistics Model for NHS Wales which will support. This will reduce the risk to patient services from potential shortages in critical products.	<b>Central Team eBusiness Service:</b> Free up resources by applying automated technology. Focuses on optimising use of resources, including staff time to achieve better outcomes without compromising quality.	<b>Single Lead Employer:</b> Provide dedicated tailored support to overseas trainees new to the United Kingdom to assist them to settle into their post in Wales. This ensures that all trainees have the required support so that they have an equal opportunity within their new roles.	<b>People and Organisational Development:</b> Embed a new approach to employee relations whereby our people are at the centre of everything we do, aiming to reduce harm caused to staff, witnesses and investigators when dealing with employee investigations.
<b>Specialist Estates Services:</b> Complete the Fire Safety Improvement Programme. This will provide a modern and reliable fire safety platform.	<b>Employment Services:</b> Evaluation of Recruitment Modernisation Programme, streamlining opportunities and ways to reduce hire time – By reviewing the technology used in recruitment programmes, this will identify how best to reduce the time to hire, and reduce prolonging recruitment processes unnecessarily.	<b>Procurement Services:</b> Improving Supply Chain, Logistics and Transport operations and infrastructure at all sites to reduce carbon emissions. This will contribute towards the NHS Wales Decarbonisation strategy measures.	<b>Pharmacy Services:</b> Identify unlicensed medicines routinely used across Wales and specifications of medicines that are routinely being purchased and are suitable to be outsourced. This will be efficient in reducing variation in spend of medicines across Wales.	<b>Medical Examiner Services:</b> Meet all legislative requirements, i.e., 100% of deaths not referred directly to coroner, scrutinised in a timely manner – By implementing this scrutiny process, it acknowledges that there are contrasting religious requirements for burials, thus making the process fairer.	<b>Employment Services:</b> Advancing workforce sustainability/transformation strategies, by providing more understanding of the roles of staff working in the community – As these influences directly how care is delivered in the community, this objective is centred around people, and how to support decision making between staff in how best to prioritise patient care and needs.
<b>Surgical Materials Testing Laboratory:</b> Establish testing procedures for the effect of Air Scrubbers (removes contaminants from the air) within clinical settings. This will improve the safety of patients by providing patients with cleaner air which will reduce airborne bacteria.	<b>Single Lead Employer:</b> Ensure Trainees are onboarded correctly, and contracts are issues on or before commencement date – Ensures that trainees are correctly remunerated in their first month of employment, and there are no untimely delays.	<b>Procurement Services:</b> Refreshed Standard Operating Procedures will seek to standardise practice across Wales.	<b>All-Wales Laundry Service:</b> Rolling out an energy efficiency dashboard, which will look at wastewater heat recovery systems and steam recovery systems. This will increase efficiency across the service.	<b>Single Lead Employer:</b> Provide Trainees with protected characteristics the required support – Ensures that all Trainees are treated in a fair and impartial manner, and no individuals are disadvantaged. Ensures that all trainees experience a positive and encouraging work environment.	<b>People and Organisational Development:</b> Health and wellbeing embedded into our culture, systems and processes: Our staff health and wellbeing are integral to everything we do across the organisation.
<b>Pharmacy Services:</b> Review Development of new products from the NWSSP Medicines Unit – Supporting partner Health Boards with safe local aseptic, cancer and critical care services	<b>Central Team eBusiness Service:</b> Continue to roll out and develop the All-Wales QlikView replacement reporting tool. This will reduce time spent reworking financial figures for multiple reporting purposes.	<b>Legal and Risk and Welsh Risk Pool:</b> Long term document and case management solution in prioritised phases – Creating a more effective way to provide customers with a secure, effective, and efficient legal service.	<b>Digital Workforce Solutions:</b> Lead the development and Implementation of the People Portal Transformation Programme – enhance the way work is carried out in the NHS by ensuring organisational readiness, by tracking	<b>All-Wales Laundry Service:</b> Develop multilingual training – Contributing to making the division an equitable workspace, by acknowledging how there are a wide range of nationalities in Laundries, and addressing how to better support them in	<b>Service Improvement Team:</b> Achieving the Customer Service Excellence Accreditation across NWSSP. Placing our customers at the forefront through demonstrating our commitment to Customer Service Excellence.

Safe	Timely	Effective	Efficient	Equitable	Person Centred
					
			progress against local action plans.	training, and provide more ease of accessibility.	
			<b>Employment Services:</b> Advance service efficiency through digital automation – by utilising new digital resources, and automating processes, this can support staff in completing tasks more efficiently and in a smoother manner.		

## Appendix G – Year 2 and Year 3 Plans on a Page

**<TBC – Summary of Divisional Plans for Year 2 and 3 will be added in here>**

DRAFT

 <b>GIG CYMRU NHS WALES</b>	Partneriaeth Cydwasaethau Shared Services Partnership	<b>AGENDA ITEM: 3.2</b> <b>18 January 2024</b>
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<b><i>The report is not Exempt</i></b>
<b>Teitl yr Adroddiad/Title of Report</b>
<b>Renewal of Mamhilad House Lease</b>

<b>ARWEINYDD: LEAD:</b>	Andy Nash, Principal Property Surveyor
<b>AWDUR: AUTHOR:</b>	Peter Stephenson, Head of Finance & Business Development
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Andy Butler, Director of Finance & Corporate Services
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	Andrew.nash@wales.nhs.uk

<b>Pwrpas yr Adroddiad: Purpose of the Report:</b>
For the Committee to approve the renewal of the Mamhilad Lease for the Counter Fraud Services, Wales team.

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

<b>Ymgynghoriad/Consultation :</b>

<b>Adduned y Pwyllgor/Committee Resolution (insert ✓):</b>							
<b>DERBYN/ APPROVE</b>	✓	<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	
<b>Argymhelliad/</b>							



<b>Recommendation</b>	The Committee is asked to <b>APPROVE</b> the renewal of the lease for Part 1 <sup>st</sup> Floor, Block B South, Mamhilad House.
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<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact.
<b>Cyfreithiol: Legal:</b>	The legal implications of the lease have been covered through the contract negotiation.
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct impact.
<b>Ariannol: Financial:</b>	The financial implications of the lease are covered in the detail of this paper.
<b>Risg a Aswiriant: Risk and Assurance:</b>	All relevant risks have been considered.
<b>Dyletswydd Ansawdd / Duty of Quality:</b>	No direct impact.
<b>Gweithlu: Workforce:</b>	The renewal of the lease provides continuity of arrangements for the Counter Fraud Service Wales staff.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open.

## 1. BACKGROUND

The Counter Fraud Service Wales Team occupy part of the 1<sup>st</sup> Floor in Block B South, Mamhilad House, on the Mamhilad Estate. The lease for this accommodation expired on the 7<sup>th</sup> October 2023, and we have negotiated with the landlord for renewal of a further 10-year lease with a break clause at the end of Year 5. The new lease will be £21,576 p.a. which is an increase on the current figure of £16,182. The new lease is based upon a charge of £12 per square foot which is in line with the rents being currently charged elsewhere on the estate. The nature of the work undertaken by the Counter Fraud team, and particularly the

requirement to conduct formal interviews which may lead to criminal investigations, requires the team to be based in a self-contained space.

## **2. RECOMMENDATION**

The Committee is asked to **APPROVE** the renewal of the lease for Part 1<sup>st</sup> Floor, Block B South, Mamhilad House. Subsequent approval will also be required from the Velindre University NHS Trust Board.

 <b>GIG CYMRU NHS WALES</b>	Partneriaeth Cydwasaethau Shared Services Partnership	<b>AGENDA ITEM:3.3</b>  <b>18<sup>th</sup> January 2024</b>
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***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**All Wales Recovery of Overpayments Procedure**

<b>ARWEINYDD: LEAD:</b>	Andy Butler, Director of Finance & Corporate Services
<b>AWDUR: AUTHOR:</b>	Linsay Payne, Deputy Director of Finance & Corporate Services
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Andy Butler, Director of Finance & Corporate Services

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

The purpose of this report is to seek Committee approval for the All-Wales Recovery of Overpayments procedure for implementation within Payroll Services from April 2024.

**Llywodraethu/Governance**

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

**Ymgynghoriad/Consultation :**

Directors & Deputy Directors of Finance  
Directors of Workforce & OD

UNISON Trade Union Representatives NHS Wales Finance/Workforce teams						
<b>Adduned y Pwyllgor/Committee Resolution (insert √):</b>						
<b>DERBYN/ APPROVE</b>	√	<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>
<b>Argymhelliad/ Recommendation</b>	The Committee is asked to <b>APPROVE</b> the All-Wales Recovery of Overpayments procedure.					

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct Impact
<b>Cyfreithiol: Legal:</b>	No direct Impact
<b>Iechyd Poblogaeth: Population Health:</b>	No direct Impact
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct Impact
<b>Ariannol: Financial:</b>	Risk of non-recovery of overpayments and cash flow impact
<b>Risg a Aswariant: Risk and Assurance:</b>	Consolidation of Financial Risk
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	No direct Impact
<b>Gweithlu: Workforce:</b>	Process control issues leading to overpayments
<b>Deddf Rhyddid Gwybodaeth/ FOIA</b>	Open

## **1.0 INTRODUCTION**

The issue of salary overpayments has been raised increasingly within a number of forums over the last 12-24 months including:

- NWSSP Audit reports – with the recommendation that an All-Wales overpayments process would ensure consistency across Wales and support the management and control of overpayments through payroll
- Payroll Customer Relationship meetings
- Directors of Finance
- Deputy Directors of Finance
- Counter Fraud Teams.

In 2022/23 there were more than 6,100 overpayments across NHS Wales with a total value of more than £12 million. The need was identified for an All Wales procedure to support the recovery of these overpayments. Whilst it was recognised that the introduction of a procedure wouldn't stop the overpayments occurring, it should aim to ensure that once an overpayment is identified that it is managed in a swift, streamlined and consistent way across all NHS Wales organisations.

Following an audit recommendation, a draft All-Wales Overpayments procedure was compiled by payroll colleagues several years ago with reference to the various overpayments policies in existence across NHS Wales organisations. In the absence of a suitable All-Wales review forum, the draft policy was shared with organisations across NHS Wales who were part of the Financial Control Procedure review group, which also included Counter Fraud colleagues.

A number of significant comments on the procedure were received indicating the need for a more detailed review of the content and a rewrite of the procedure. The need was also identified for a task and finish group to be established to take this forward with representatives from all NHS Wales organisations from Finance, Payroll, Counter Fraud and Audit.

## **2.0 OVERPAYMENTS TASK AND FINISH GROUP**

Further to the identification of the need for an All-Wales group, Deputy Directors of Finance were asked to identify an individual from each Organisation to attend the task and finish group once established. Representatives were also sought from Payroll, Counter Fraud and Audit and the group membership was as follows:

Organisation	Finance	Counter Fraud	Workforce
AB	Heulwen Griffiths		
SBU	Liz Gunn		
BCU	Michelle Jones		
C&V	Rebecca Holliday	Gareth Lavington	
C&V	Katie Callow	Henry Bales	
CTM	Owen James		
HD	Rhian Davies		
HD	Lynne Jones		
Powys	Sarah Pritchard		
PHW	Jane Matthews		
WAST	Olaide Kazeem	Carl Window	Anna Stein
WAST	Gareth Taylor	Lynne Haddow	
DHCW	Ian Taylor		
HEW	Lynda Phillips		
NWSSP	Linsay Payne (Chair)	Mark Weston	
NWSSP		Graham Dainty	
NWSSP		Cheryl Hill	
NWSSP	Olivia Angille	Emily Thompson	
Velindre	Tracy Hughes		
Payroll	Stephen Withers		
Payroll	Christine Richards		
Payroll	Gareth Thomas		
Payroll	Janet Carsley		
Payroll	Wendy Hughes		
Payroll	Joanna Stephenson		
Internal Audit	Gareth Heaven		

The group undertook a detailed review of the draft procedure, discussing key points and streamlining the process following the identification of an overpayment. The group received a presentation of the functionality of the new overpayments dashboard from payroll to ensure this was incorporated appropriately into the procedure.

Meetings were held between May and November 2023 and updated versions of the procedure were circulated for comments across Organisations (Finance, Workforce & Counter Fraud). Responses received were then reviewed and incorporated into subsequent versions of the procedure.

The procedure was presented to Deputy Directors of Finance and Directors of Workforce in November 2023 with feedback requested.

The procedure is now at version 9, which is included in Appendix A. The detailed feedback received from Workforce Directors, together with comments on how this feedback has been built into the most recent version of the procedure, is included in Appendix B.

The procedure has been shared with Trade Union representatives and feedback recently received in January 2024. This is being reviewed and if required revisions will be made to the procedure.

### **3.0 KEY PRINCIPLES OF THE ALL WALES RECOVERY OF OVERPAYMENTS PROCEDURE**

- One procedure for Payroll to adhere to when an overpayment has been identified.
- Definition of roles & responsibilities – payroll, line manager, employee, finance – process streamlined.
- Overpayment definitions simplified.
- Automatic recovery of overpayment due to late submission of a change/termination form where impact is less than 1 month.
- Option for pay elements to be suspended where an employee self declares an overpayment to prevent further overpayments.
- Initial and follow up payroll overpayment letters reworded, and a contact name included.
- Inclusion of a hardship assessment for consideration of extended repayment terms where Organisation wish to use this.
- Counter fraud initial assessment only if 3 criteria met (no contact from employee and occurred for > 3months and > £5,000).
- Generic principles of recovery periods included (over same period overpayment occurred to a maximum of 12 month), noting that the debts and the ultimate recovery arrangements are local UHB/Trust/SHA decisions and extended terms may wish to be agreed dependent upon the circumstances.

### **4.0 SUMMARY**

The procedure has been widely circulated across Organisation and a large volume of comments received. These have been incorporated into subsequent versions of the procedure.

### **5.0 RECOMMENDATION**

Committee members are asked to **APPROVE** the All-Wales Recovery of Overpayments procedure for implementation within Payroll Services from April 2024.





# PROCEDURE FOR THE RECOVERY OF OVERPAYMENTS – Salary & Expenses

DRAFT

Procedure Status: DRAFT V9  
Procedure Issued: TBC  
Review Date: TBC

# Procedure for the Recovery of Overpayments

## Index

1. Introduction
2. Procedure Statement
3. Aims
4. Equality
5. Objectives
6. Scope
7. Overpayment Recovery Process
8. Roles and Responsibilities
9. Dispute Resolution
10. Training and Awareness
11. GDPR
12. Freedom of Information Act
13. Records Management

Appendix A – Reasons overpayments occur

Appendix B – Counter Fraud Referral form

Appendix C - Overpayments Process Map

Appendix D – Overpayment 1st Letter

Appendix E – Overpayment Letter to Line Manager

Appendix F – Overpayment 2nd Letter

Appendix G – Salary Deduction Authorisation

Appendix H – Income & Expenditure Template

Appendix J - Roles & Responsibilities

## **1. Introduction**

For the purposes of this All-Wales Procedure for the Recovery of Overpayments, an overpayment is defined as any monies incorrectly paid to a current or former employee/worker through the payroll system. This Procedure has been drafted to replace the different local overpayment procedures in existence across NHS Wales to ensure a single standardised procedure can be applied consistently by NHS Wales Shared Services Partnership Payroll Services and NHS Wales Organisations upon the identification of an overpayment.

## **2. Procedure Statement**

The procedure statement sets out a fair process so that all employees/ex-employees/workers are treated equitably in a situation where an overpayment has occurred. Everyone involved in the application of the procedure will be treated with respect and dignity throughout the process.

NHS Wales has a legal right to recover any overpayment that has arisen from a mistake of fact. Whenever monies are to be recovered, NHS Wales Organisations will aim to do so in a fair and reasonable manner. Salary and expense payments are made in good faith and are deemed to be correct at the time of payment. Mistakes of fact are where a payment was inconsistent with the facts e.g., through clerical error, computer input, or procedural error. Money paid out under a mistake of fact is recoverable in law.

In accordance with this procedure statement and Welsh Government guidance, NHS Wales Organisations must pursue the recovery of all overpayments.

## **3. Aims**

- To standardise the recovery of overpayments process to ensure consistency in application across NHS Wales Organisations.
- To ensure all overpayments are recovered as quickly as possible without imposing undue hardship and to ensure that employees, ex-employees and workers are treated fairly and consistently without any undue stress or worry.

## **4. Equality**

NHS Wales recognises the diversity of the local community and those in its employment. NHS Wales aims to provide a safe environment free from discrimination and a place where all individuals are treated fairly, with dignity and appropriately to their need. It is recognised that equality impacts on all aspects of day-to-day operations and all policies and procedures have an Equality Impact Assessment undertaken.

## 5. Objectives

This procedure details the process to follow to recover overpayments when they arise which is fair and takes due consideration to personal financial circumstances of employees/workers when this presents difficulties in prompt repayment.

It clearly sets out the role of Employees/workers, Payroll Services, NHS Wales Finance/Accounts Receivable teams, Line Managers, Workforce/People departments and the Counter Fraud departments who may all be involved in the process.

Overpayments occur for a number of reasons – these are outlined in Appendix A and can be used for educational purposes to avoid overpayments occurring.

## 6. Scope

This procedure relates to employees, ex-employees and workers of NHS Wales Organisations. The scope of this procedure covers both manual and electronic systems utilised across NHS Wales.

Where NHS Organisations have rolled out Manager Self Service (MSS) in the Electronic Staff Record (ESR), the Line Manager should utilise MSS to update employees' assignments. If MSS is not fully rolled out, information should be communicated to Payroll Services using the forms available on the link below.

This link also details Payroll Services contact information: [Payroll Services \(sharepoint.com\)](#)

## 7. Overpayment Recovery Process

**ALL overpayments regardless of fault must be recovered. Overpayments are incurred using public funds and NHS Wales Organisations have a duty to recover them.**

Where an overpayment has occurred:

- (i) due to the late notification of changes, termination, sickness, absence, or unpaid leave **and**
- (ii) the change/termination should have been actioned one month or less before the notification was received by Payroll Services, then the overpayment will automatically be recovered where possible from the next salary payment or final salary payment (if applicable).

If this action is taken, Payroll Services will write to the overpaid employee/worker to inform them of the automatic recovery of the overpayment. Payroll Services will contact an Organisations Finance team in the first instance, if they identify the automatic recovery would leave an employee/worker with no pay or more than a 50% reduction in monthly pay, to request advice before automatically recovering the overpayment.

In the event of an overpayment being identified or reported after continuing for more than one month after the effective change date (in which case automatic deduction from salary will not occur), or automatic deduction from the next salary payment is not possible, Payroll Services will make an assessment of whether the overpayment requires an initial review by Counter Fraud Services to assess whether any dishonest retention of the overpayment has occurred.

An initial review by Counter Fraud Services will be requested if **all three** of the criteria below are met:

1. The employee/ex-employee/worker has not notified the Organisation/Line Manager/Payroll Services of the overpayment; **and**
2. The overpayment has occurred for more than 3 months; **and**
3. The overpayment value is estimated at more than £5,000

If these three criteria are met, Payroll Services will send a notification to the relevant Local Counter Fraud team providing the necessary information noted in Appendix B to enable an initial review of the overpayment to be undertaken.

Local Counter Fraud teams will make an initial assessment and advise within 5 working days if further investigation is required, or if the overpayment recovery can continue with the usual recovery procedure.

If Counter Fraud identify that further investigation is required, the overpayment recovery will be placed on hold by Payroll Services until further advice/update is received from the Local Counter Fraud team.

**To ensure any potential criminal investigations are not compromised, it is important that no contact is made with any overpaid employees/ex-employees/workers until the Local Counter Fraud team has confirmed they do not need to investigate the matter further.**

If no response is received from the Local Counter Fraud team within 5 working days, Payroll Services will re-request final confirmation to continue to progress recovery of the overpayment in line with the process below.

Any overpayments under review by Local Counter Fraud teams are included under the Counter Fraud section of the overpayments dashboard. Senior Workforce/People and Finance colleagues within Organisations have access to this to review as required.

If the three criteria are not met, or the Local Counter Fraud team confirms no further investigation is required, the overpayment recovery process will continue as outlined below and summarised in Appendix C.

1. Payroll Services will issue **Overpayment Letter 1** to the employee/ex-employee /worker when they are made aware of a potential overpayment. The letter will advise that a potential overpayment has occurred, detail the reason for the overpayment and the period it relates to (if known) and reference that a follow up letter (**Overpayment Letter 2**) will be sent with the detailed overpayment calculation once available. (Appendix D).
2. Payroll Services will issue a letter via email to the Line manager informing them of the potential overpayment (Appendix E). Where required, the email will include a MS Forms link to provide details/reasons for why and how the overpayment may have occurred and a video link demonstrating how to ensure overpayments do not occur in future.

3. Once the overpayment has been calculated, Payroll Services will issue **Overpayment Letter 2** to the employee/ex-employee/worker and Line Manager detailing the overpayment calculation (Appendix F).

***(a) Where the employee/worker remains in post:***

**Overpayment Letter 2** will detail the value and calculation of the overpayment. It will note that in line with this procedure, the overpayment needs to be repaid in full. It will also note that as a current employee/worker they have the option to repay the invoice in full or to arrange a repayment plan through salary deductions. The letter will note that any repayment plans should aim to fully repay the overpayment over the same duration that it was incurred. The letter will note that an invoice will follow which will include details on who to contact to agree a repayment plan via salary deduction.

This letter will be copied to the Finance Department who will raise an invoice to be sent to the employee/worker. The Finance Department will note the overpayment relates to a current employee/worker who may request to repay the invoice via salary deductions. A copy of the salary deduction request proforma is included in Appendix G to be issued to the employee/worker if requested.

***(b) Where the employee/worker has terminated employment:***

Overpayment Letter 2 will detail the value and calculation of the overpayment. It will note that in line with this procedure, the overpayment needs to be repaid in full and an invoice will be issued.

This letter will be copied to the Finance department of the Organisation where the overpayment was incurred who will raise the invoice and send it to the ex-employee/worker. The Finance Department will progress debt collection procedures to ensure the invoice is paid in full.

The debt collection process is within the scope of individual Organisation's policies, however as a general principle Organisations should seek to recover overpayments over the same time period the overpayment occurred, up to a maximum of a 12 month recovery period.

***Inability to meet proposed repayment terms***

If in exceptional circumstances any overpaid employees/ex-employees/workers believe they are unable to afford repayments over a 12 month period, quoting hardship as the reason, proof will be required for assessment by the Organisation's senior Finance staff or through independent validation of their personal financial circumstances offered by debt collection firms. A sample income and expenditure template is provided in Appendix H which can be used to make this assessment. Any extension of repayment terms above 12 months will need to be agreed if deemed necessary by the Director of Finance and/or Director of Workforce/People or their nominated deputies.

**Organisations must ensure they have the sufficient level of Financial Conduct Authority authorisation to undertake regulated activities such as extended repayment periods or use an authorised debt collection agent to facilitate this.**

## 8. Roles and Responsibilities

Overpayments will be minimised if all parties undertake their required roles and responsibilities to ensure prompt and accurate completion and submission of employment related data including new starters, changes, terminations, and employee/worker absence.

Untimely submission of payroll documentation/Manager Self Service updates can cause significant inconvenience and anxiety for staff and unnecessary additional administration for NWSSP Payroll Services. It can in addition lead to complexities for affected employees/ex-employees/workers in respect of tax and universal credit issues.

The roles and responsibilities of all parties detailed in this procedure are outlined in Appendix K.

## 9. Dispute Resolution

Where the All Wales Recovery of Overpayments procedure has been applied and the employee/worker refuses to consent to the recovery of the overpayment, and where discussions between the Line Manager, the Finance Team, Payroll Services and the employee/worker have been exhausted, the matter will be referred to the Director of Workforce/People or their nominated deputy to arrange a meeting with the employee/worker and their trade union representative or workplace colleague. Finance team, Payroll Services representatives and the Line Manager/Budget Holder may also be requested to attend this meeting with the aim of mutual resolution and recovery of the overpayment to be agreed. There is no automatic right to raise a grievance/respect and resolution concern due to an overpayment, as this meeting aims to discuss and confirm the overpayment and how it has arisen. Only in extenuating circumstances will Organisations accept that an overpayment may require progressing via the grievance/respect and resolution process.

## 10. Training and Awareness

NHS Organisations should make employees/workers and managers aware of this procedure on commencement. A copy of the procedure should be available on the NHS Organisation's Intranet Site and referenced in any induction and/or new manager training.

## 11. UK General Data Protection (UK GDPR) Compliance

Everyone responsible for using personal data has to follow strict rules called 'data protection principles'. The UK GDPR is the UK's Data Protection Act and has 7 guiding principles. These are:

**Accountability:** We are committed to the principles of the GDPR by adopting the concept of 'data privacy by design' within our operational model, this is a standard that is adopted across all areas of NHS Wales. We remain accountable by having detailed protocols, policies and systems in place as well as someone responsible to oversee our overall compliance to confidentiality legislation. Our policies are regularly reviewed and updated, and our staff are periodically trained on Data Protection and security throughout the year.

**Transparency, Fairness and Lawfulness:** We process data with data subjects' interests in mind and ensure that we approach processing activities with transparency to maintain fairness in what we do.



This way we can be sure that we are processing data lawfully. We have a robust process in place to allow us to deal efficiently with any access requests we may receive. This includes ensuring that individual's rights are considered with Privacy Notices / Policies in place to ensure that all service users/data subjects are aware of how information entrusted to the organisation is used, processed, shared and stored.

**Data Integrity and Confidentiality:** We hold data on secure systems, and we work within compliance and regulations including ISO27001 and cyber essentials. Information security and integrity is key to our smooth operation, and we have dedicated cyber security team who protect our systems. We also have an Incident Response Team on hand to support us in the event data may have become compromised.

**Data Minimisation and Data Storage:** We will not keep data for longer than is necessary and only keep data if there is a lawful basis which allows fair retention. When we do need to remove data from our possession, we do so by using industry approved standards so the disposal or anonymisation is thoroughly compliant.

**Data Accuracy:** Keeping data accurate is very important to us and we train our staff to ensure they are maintaining data to a high quality and with all the facts available. There are dedicated protocols and practices in place to ensure that staff are aware of their responsibilities.

The UK Data Protection Act 2018 protects identifiable data (personal or patient information) which includes information about any living person (to include employees/workers, patients, and service users).

The NHS relies on maintaining the confidentiality and integrity of its data to maintain the trust of the community. Unlawful or unfair processing of personal data may result in the Trust being in breach of its Data Protection obligations. There is a comprehensive breach reporting protocol in place which ensures that the organisation is proactive in reporting concerns with 72 hours and actions are taken to minimise the effect of breach and disruption and mitigated to reduce the likelihood of breach in the future.

## 12. Freedom of Information Act (2000)

The NHS in Wales supports the principles of openness and transparency and welcomes the rights of access to information that the Freedom of Information Act (2000) provides. All NHS Wales organisations seek to create a climate of openness and transparency with any decisions made and by providing improved access to information about the organisation will facilitate the development of such an environment.

With this in mind, any information that belongs to Public Authorities (including those within NHS Wales) may be subject to disclosure under the Freedom of Information Act 2000. From the 1 January 2005, the Freedom of Information Act 2000 allows anyone, anywhere to ask for information held by NHS Wales Organisations to be disclosed (subject to limited exemptions). There are supporting policies and processes in place to support the work around Freedom of Information.

The Act refers to all publicly releasable information that NHS Wales organisations departments hold regardless of how it was created or received. It applies no matter what media the information is stored in and whether the information is current or archived and held on paper or electronic.

Publicly releasable information relates to information that is not personal or patient identifiable and through scrutiny, commercial data that is not deemed to be sensitive in its nature. However, all requests are dealt with on a case-by-case basis.

### 13. Records Management

NHS Wales recognises that records are a vital component within the organisation and that records should be organised. All NHS Wales organisations have guidelines on good records management practices, which are adopted by all staff who deal with any type of record within their respective department. This includes any rights of the individual in line with individual's rights (deletion, erasure, correction, subject access or data portability).

Records Management protocols apply to all records that NHS Wales organisations, its services, and associated organisations, hold regardless of how these are used, accessed, created, handled, received, communicated and/or stored. It applies no matter what media the information is stored in, communicated and whether the information is current or archived.

Records are created or received in the conduct of the business activities of NHS Organisations and provide evidence and information about these activities. All records are also corporate assets as they hold the corporate knowledge about the NHS organisation. NHS organisations have a Records Management Strategic Framework and a Records Management Policy for dealing with records management that are: -

- a) Managing health and social care records: code of practice 2022.  
<https://www.gov.wales/managing-health-and-social-care-records-code-practice-2022>
- b) The Lord Chancellor's Code of Practice on the Management of Records under Section 46 of the Freedom of Information Act 2000 (November 2002)

Compliance with and the application of this procedure will ensure that NHS organisation records are complete, accurate and provide evidence of and information about the Trust's/Health Boards' activities for as long as is required.

## APPENDIX A

### Reasons for Overpayments

It is important that all information relating to employee/worker appointments, changes and terminations are completed promptly and accurately by the Line Manager. Forms must be submitted to NWSSP Payroll Services or updated on ESR via Manager Self Serve (MSS) immediately after they have been agreed.

#### Please note that:

- **Employees/workers will continue to be paid per the details held in ESR until Payroll Services are instructed to do otherwise (i.e. via change form or termination form)**
- **For changes to be reflected in the next monthly salary, any changes must be notified to Payroll Services by the last day of the current month (i.e. changes to be reflected in the April salary must be notified to Payroll Services by 31st March).**
- **monthly salary payments cover the period to the end of the month and not only up to the pay date.**
- **If an employee/worker self-declares an overpayment of salary, with their agreement in writing, Payroll Services will look to suspend the relevant overpaid element of their pay to prevent any further overpayments occurring while the issue is investigated and relevant documentation is requested.**

**Prevention of an overpayment occurring is paramount. NHS Wales Organisations must ensure that managers are adhering to policies and procedures that minimise the potential for overpayments.**

The most frequent reasons for overpayments are: -

- Late Termination Notification – A termination form/update via MSS must be actioned as soon as termination of an employee/worker is known, i.e. at the point of resignation or dismissal. Consideration must be given to whether the employee/worker has overtaken annual leave and if the employee/worker is not working additional hours to repay the overtaken annual leave, this must be reported to NWSSP Payroll Services as soon as possible before the termination date to action a recovery from final salary. The submission of termination forms should not be delayed due to concerns that annual leave booked may be cancelled prior to the termination date. Any annual leave outstanding on termination can be paid in arrears if required.

- Late and inaccurate update of employee/worker contractual hours – these should be communicated via MSS or an employee change form as soon as agreed and prior to the date the employee/worker commences working the new hours.
- Late and inaccurate update of an employee/worker absence (sickness, maternity, unpaid leave etc) – this includes sickness reported on commencement of an employee/worker absence and monitored for the duration of the absence period. Managers must ensure that any absences are closed immediately at the point the employee reports fit for duty. Please note, NWSSP Payroll Services on behalf of NHS Organisations, include payment of 'average sick pay' based on open sickness absence periods. Where an employee/worker absence is left open in error, the employee/worker will be included for payment of 'average sick pay' to which there would be no entitlement.
- Late and inaccurate reporting of enhancements, overtime, on call, start date, salary, banding etc – the responsibility for accurate and prompt submission of this information lies with the manager/supervisor. Communication of this information must be received in sufficient time for Payroll Services to process.

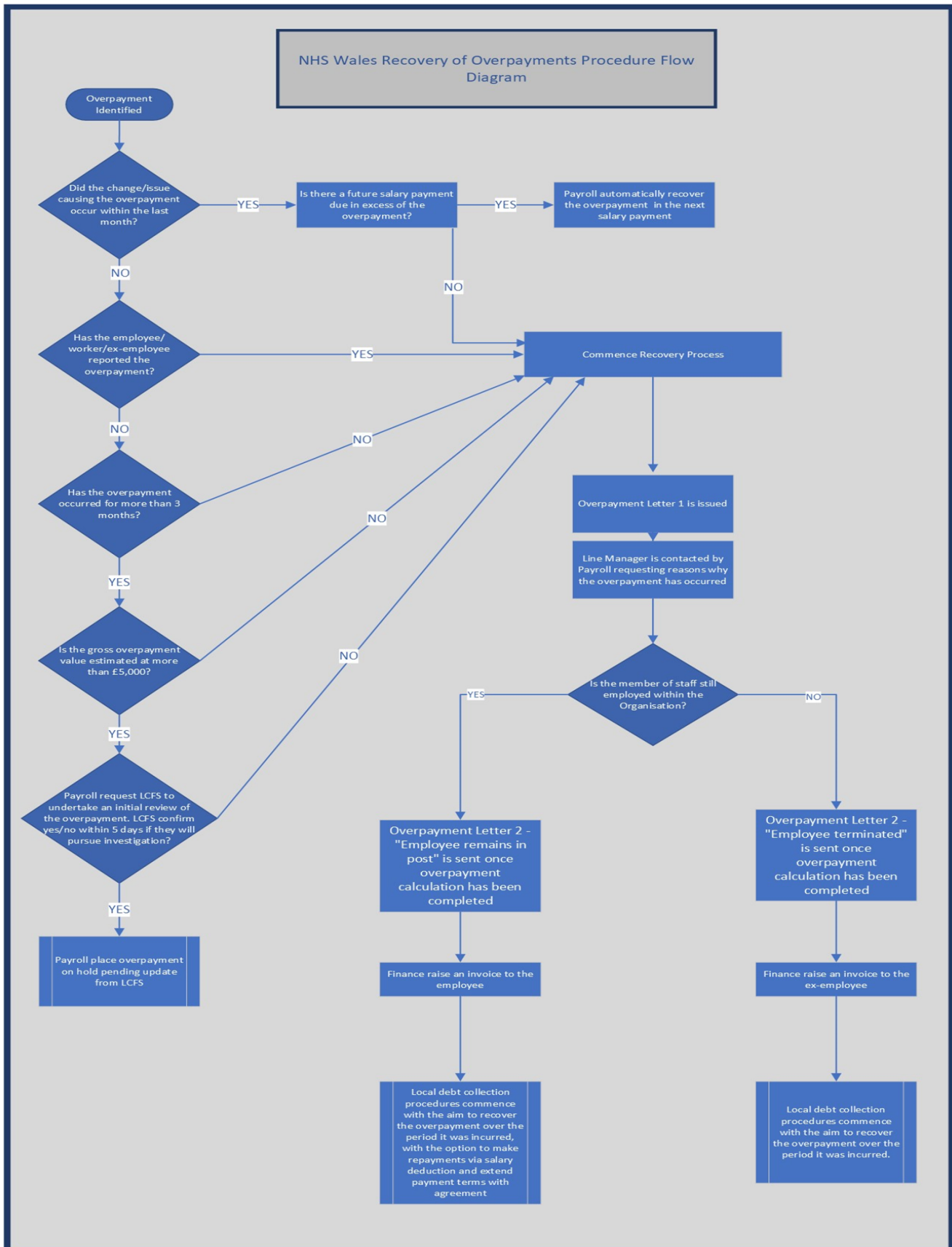
In addition, system errors can occur which may result in incorrect payments to employees/workers. These can include ESR, E-roster and E-Expenses. While such instances are minimal, once a system error is identified, remedial action will be taken as quickly as possible to minimise incorrect payments.

NWSSP Payroll Services will endeavour to keep errors to a minimum, however human error can occur due to inaccurate calculation or misinterpretation of information.

## APPENDIX B – COUNTER FRAUD REVIEW INFORMATION REQUIRED

Employee/worker Name		
Pay Group / Pay Number		
NHS Organisation		
Job Title		
Pay Grade /Hours	Grade	Hours
Full/Time Part time		
Workplace / Location		
Value of Overpayment Please attach O/P Breakdown	Gross	Net
Period of Overpayment	Date From	Date to
Reason for overpayment		
Dept / Manager contact name and details		
Payroll Services Contact details		
Salary Overpayment contact details		
Please confirm what checks have been made to verify whether the employee/worker has contacted Payroll Services	Checks made by:  Date:	
<b>FURTHER EMPLOYEE/WORKER DETAILS:</b>		
Address		
Date of Birth		
NI Number		
Bank A/C details		
Form Completed by:	Date:	
Please add any further details which may assist the Local Counter Fraud Team with their review:  <b>Please do not contact employee/ex-employee/worker without consulting your LCFS.</b>  <b>Please report any further contact to or from the employee /ex-employee/worker to the Local Counter Fraud team immediately.</b>		

## APPENDIX C – OVERPAYMENTS PROCESS DIAGRAM



## APPENDIX D – OVERPAYMENT LETTER 1



FINAL%20OP%20LETTER%201.docx

## APPENDIX E – LINE MANAGER LETTER



FINAL%20-%20OP%20Manager%20Letter.docx

## APPENDIX F - OVERPAYMENT LETTER 2

### Employee/worker remains in post



FINAL%20OP%20LETTER%20-%20E.docx

### Employee/worker terminated



FINAL%20OP%20LETTER%20-%20E.docx

## APPENDIX G – SALARY OVERPAYMENT DEDUCTION

### Deduction direct from Salary Payment – Authorisation Form

<b>Name:</b>	
<b>Assignment Number:</b>	
<b>Health Board/Trust/SHA:</b>	
<b>Department:</b>	

I hereby authorise NHS Wales Shared Services Partnership Payroll Services to deduct the sum of £ \_\_\_\_\_ direct from my Salary, I understand that this will be deducted as a Gross payment and that this deduction will continue until such time as the overpayment £ \_\_\_\_\_ has been repaid in full.

I give my full consent for this deduction.

I further understand that this payment can be taken from any salary payments due to me including any final payments due upon termination of my employment. If my employment comes to an end I agree that any outstanding deductions to repay the overpayment can be taken from my final salary and any balance that cannot be deducted will be due for repayment within 14 calendar days.

Signed \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_ Date: \_\_\_\_\_

**Once completed, please email to Payroll Services Department:**

[NWSSP.AllWalesOverpayments@wales.nhs.uk](mailto:NWSSP.AllWalesOverpayments@wales.nhs.uk) and **[Organisations to insert their debtors teams email]**



## APPENDIX H – INCOME & EXPENDITURE TEMPLATE



Income%20and%20  
Expenditure%20Sun

## APPENDIX J

Key responsibilities in respect of the overpayments process can be summarised as:

### **NHS Wales Shared Services Partnership Payroll Services will: -**

- Pay staff correctly and on time in accordance with employee/worker data held on ESR at the point of payrolls being run.
- Make an itemised payslip available to the employee/worker. This will be an electronic payslip where MyESR (Employee Self Service) is in use.
- Inform relevant staff regarding cut-off dates for submission of Electronic Paperwork for example starters, changes, terminations, and variable pay data [Payroll Services \(sharepoint.com\)](#).
- Correct identified errors.
- Undertake an assessment of overpayments against the three criteria to establish if a review by Local Counter Fraud Services is required
- Rectify any identified overpayment in line with this procedure for the recovery of overpayments of salary. This will include writing to the employees/ex-employees/workers, providing them with a detailed explanation of the overpayment.
- Inform the Line Manager that an overpayment has occurred and issue a MS Forms link for them to complete an overpayment report, which will request detail on why the overpayment has occurred and what remedial action has been taken to prevent future reoccurrence.
- Maintain a register of overpayments to share monthly/bi-monthly with nominated representatives from each Organisation. NWSSP will inform the NHS Organisation of overpayments, the reasons for them and if there is a recurrence of the manager not complying with processes and procedures relating to employee/worker data.
- Review the register of overpayments with NHS Organisations in the regular Payroll Customer Relationship Manager meetings

- Liaise with local trade union representatives where appropriate.
- Deduct monies from the employees'/workers salary in line with the agreed repayment schedule where appropriate.
- Upon termination, deduct any outstanding overpayments, including salary sacrifice arrangements from the final salary where possible.
- Upon termination, submit the employees/workers final payslip directly to their home address together with the P45.

### **Employee/Ex-employee/Worker Responsibility:-**

Employees/Ex-employees/Workers must:

- Verify basic pay, contracted hours and other regular payments included in their payslip to ensure they are in line with their contract.
- Where applicable, verify variable hours are correct on e-roster systems before rosters are finalised.
- Raise any payslip queries with their Line Manager in the first instance. This may be in respect of incorrect contracted salary, hours, regular payments, incorrect receipt of variable hours or receipt of any unexpected monies.
- Seek clarification from Payroll Services if their Line Manager cannot resolve any queries on their payslip.
- Immediately inform Payroll Services if an overpayment is identified so that recovery can begin. Any employee ex-employee or worker that knowingly or willingly fails to advise Payroll Services of an overpayment may be subject to referral to the Local Counter Fraud team and if necessary the Police.
- Agree terms of repayment and ensure full repayment of any overpayments.
- Be aware of payroll cut-off dates to know when to reasonably expect payment of travel, subsistence claims, shifts on e-roster systems or variable pay elements.
- Submit expense claims and additional hours worked claims for payment within 3 months. Please note that any claims older than 3 months will not be processed for payment.
- Ensure the NHS Organisation is aware of any change of address and contact details to be updated via MyESR (Employee Self Service).
- Access support and advice from trade union representatives where applicable.

## **Line Managers:**

Line Managers must notify Payroll Services of any pay impacting changes as soon as they become aware of them and their responsibilities include:

- To complete the employee change notifications and submit to Payroll Services prior to employees/workers commencing new position/hours/base.
- To complete the employee termination process at the point of the employees/workers resignation.
- For employees/workers accessing NHS Pension - in line with NHS Organisations Retirement Policy a termination form must be completed a minimum of 4 months prior to termination.
- To resolve any initial queries received from employees/workers regarding variable hours paid in month or receipt of unexpected payments, advising them they must report any suspected overpayments to Payroll Services without delay.
- To open and close employee/worker sickness absence on their ESR record at the point of notification.
- To notify Payroll Services of any unpaid leave.
- To submit authorised notification of Maternity/Paternity/Adoption/Career Break. Application forms for payment under these policies must be completed and submitted to Payroll Services prior to the date the employee/worker commences the period of leave.
- To verify an employee's/worker's contract details via Manager Self Service and monthly budgets and advise Payroll Services immediately where an employee's/worker's contractual details are incorrect.
- To ensure the employee/worker rotas (where applicable) are correct in accordance with E-roster systems. Discrepancies should immediately be brought to the attention to Organisational E-Systems Teams.
- To ensure payroll workbooks (where applicable) are completed accurately in accordance with the employees/workers working pattern.

## **The Workforce/People Department will: -**

- Act as a link between NWSSP Payroll Services, the Line Manager, the Finance team and the employee/worker where required.
- Ensure that managers are aware of their requirements to submit payroll data including employee/worker change notifications, termination forms and e-rostering data in line with published payroll submission deadlines.
- Ensure that managers are aware of the potential for overpayments and their requirement to

see that such instances are kept to a minimum.

- Ensure that managers are aware of the Recovery of Overpayments Procedure through the inclusion on induction and Manager training programmes.
- Review overpayment data on a regular basis to identify key themes and any areas where overpayments are a regular occurrence bringing it to the attention of the respective Managers to escalate.
- In conjunction with Senior Finance staff, review and jointly agree any hardship applications with regard to extended repayment periods where Organisations are authorised to agree these.

**Finance/Accounts Receivable Teams will: -**

- Be responsible for issuing invoices to individuals to recover overpayments.
- Agree repayment terms in line with this procedure.
- Progress debt collection procedures where recovery of overpayments is not forthcoming.

**Local Counter Fraud Teams will: -**

- Undertake an initial assessment of any overpayments referred to them by NWSSP Payroll Services that meet the three referral criteria
- Respond to any referrals within 5 working days and confirm to Payroll Services whether normal recovery proceedings can commence or if further investigation is required.

Directors of Workforce & OD Comments - All Wales Recovery of Overpayments Procedure (Version 7 & 8)

Organisation	Comments	Response
AB	<b>Section 8</b> - The procedure doesn't take into account that even where a one month overpayment this still may cause staff financial hardship and this needs to be considered before automatic recovery	This was considered as part of the development of the procedure and due to the fact that an employee would only recently have had a change of circumstances (reduced hours, band, termination) it was considered acceptable that they should be expecting their pay to be amended following a previous incorrect payment in the previous month. The procedure has been amended to note that all employees will be contacted to inform them of the automatic recovery of the overpayment to give early warning of this. Payroll Services will contact Organisations Finance teams if they identify the automatic recovery would leave an employee with no pay or a considerable reduction in monthly pay to request advice before automatically recovering the overpayment.
AB	<b>Section 8</b> - suggests that payroll will make an assessment of whether to refer to Counter Fraud. This section then sets out the criteria for Counter Fraud to investigate. Please can we be clear on the basis for payroll referring to Counter Fraud – e.g. will they only refer if the criteria is met? Or will they refer any case they feel may include dishonesty? In all cases would suggest that this is in conjunction with a discussion with a Senior Manager from Workforce and OD and Senior Manager from service area.	Payroll will only ask Counter Fraud to initially review the overpayment if all 3 defined criteria are met. Counter Fraud will then advise if they suspect any cause for concern and if they need to investigate further or whether the overpayment can follow the usual recovery procedure. Payroll will put the overpayment on hold whilst Counter Fraud investigate so that no communications are made to the overpaid member of staff as this can compromise any criminal investigation if one is required. Senior Finance & Workforce colleagues are able to see the cases that are under review by Local Counter Fraud Teams in the overpayment dashboard - the procedure has been amended to note this.
AB	<b>Section 8</b> - Timelines seem short e.g. does counter fraud have capacity to turn around in 5 working days? Will this cause capacity issues and procedural fault?	The 5 days was agreed by Counter Fraud colleagues - if they do not respond or are unable to respond within the 5 days, reminders are issued to ensure a response before the overpayment is progressed further
AB	<b>Section 8</b> - Sending notification to the manager is positive (point 2 at bottom of page 6) but also needs advise on what the manager should do, e.g. discuss with staff member, refer to Workforce & OD where they have a concern/issue?	The letter to the line manager notes "As the manager, you are required to discuss the overpayment with the employee and ensure they understand the need to make the repayment, noting that all overpayments regardless of fault are repayable". The letter also provides details of who to contact for any queries/dispute on the overpayment and also includes a video link to advise on how to avoid overpayments occurring in future to educate staff.
AB	<b>Section 8</b> - Point 3 (a) needs to be noted that in (a) there may be financial hardship also	This has been amended in Version 8 so that there is a new section heading "inability to meet proposed repayment terms" which applies to both sections (a) and (b) that precede this.
AB	<b>Section 10</b> - Our current appeals process is managed by finance teams with divisional involvement as budget holders- in my view it is key that budget holders are involved in some way especially if the decision is not to reclaim given that they will hold accountability for the budget	Inclusion of Line Manager/Budget Holder in the procedure as potential attendees at the resolution meeting to enable involvement if required
AB	<b>Section 10</b> - Currently our finance team run this process with Workforce involvement and I believe this should remain the case. Suggest it is reworded to: <i>Where the All Wales Recovery of Overpayments procedure has been applied and the employee refuses to consent to the recovery of the overpayment and where discussions between Payroll Services, the Line Manager, the Finance team and the employee have been exhausted, the matter will be referred to the Director of Workforce or nominated deputy to arrange a meeting with the employee and their trade union representative or workplace colleague. Finance team, Payroll Services representatives and the Line Manager/Budget Holder may also be requested to attend this meeting with the aim of mutual resolution and recovery of the overpayment to be agreed. There is no automatic right to raise a grievance/respect and resolution concern due to an overpayment as this meeting aims to discuss and confirm the overpayment and how it has arisen. Only in extenuating circumstances will organisations accept that an overpayment may require progressing via the grievance/respect and resolution process.</i>	Suggested wording has been included in Version 8, with the addition of finance & the line manager to the initial discussions
AB	It would be useful to see the DoF responses	Procedure to be shared with DoFs for comment in December
CTM	It is CTM's view that this procedure is fair and balanced against the need to recover overpayments and supporting those employees who may experience financial hardship as a result. Good to see some organisational discretion to extend payment plans to avoid employee's experiencing financial hardship. Concern however, are all NHS organisations currently registered with FCA to enable them to apply such discretion.	The query has been raised as to whether registration is actually required to agree repayment plans - NWSSP Legal & Risk Services are providing advice in respect of this which will be shared with Organisations and the procedure updated to reflect the advice

CTM	Suggested changes to wording included in draft returned	Amendments included in Version 8
CTM	Happy with the referral to LCFT referral process which is based on a clear criteria.	
CTM	Overall a good robust policy.	
BCU	With regard to the language used in the correspondence with employees and ex-employees, historically these have been very threatening and cold. It is felt the letters need to be more compassionate. Also, on occasions when staff have informed payroll they have been over paid, they still receive letters threatening them with counter fraud etc, therefore it would be helpful to introduce a process to avoid such action, when staff have made the initial contact with payroll to resolve the overpayment.	The letters in the new procedure are intended to be more compassionate. The new proposed process aims to streamline communications to avoid confusion, duplication and chasing of overpayments which are already being repaid and clearly identify what is required of Payroll Services, the employee/ex-employee, the Line Manager, Organisations Finance teams and Workforce/People departments.
BCU	Query need to inform Workforce regarding any reviews by Local Counter Fraud	Senior Finance & Workforce colleagues are able to see the cases that are under review by Local Counter Fraud Teams in the overpayment dashboard - the procedure has been amended to note this.
BCU	Shouldn't we discuss the overpayment with staff before sending a letter, even if it is to give brief information so they don't get a letter cold. I think this is a manager's responsibility, especially as many overpayments are due to late form submission etc.	The initial overpayment letter informing of a potential overpayment (rather than delaying informing employees until the overpayment is confirmed) is issued the same time as the letter to the line manager so that they are able to contact the employee/ex-employee straightaway to support them if required. Due to the aim of streamlining the process, remove duplication and speed up the recovery process we have issued the letters together, however the letter to the line manager is emailed and the letter to the employee/ex-employee is sent via post so the line manager will receive their letter in advance of the employee enabling them to contact them in advance of them receiving their letter.
BCU	Should the letter to the Line Manager come before Overpayment letter 1 is sent if the letter is to advise how the overpayment has been made?	The intention of Overpayment letter 1 is to give early warning of a potential overpayment. The reason for this may be known at this stage (i.e. due to the late submission of a form) in which case it will be noted on the letter. The letter to the Line Manager collates information to support the dashboard reporting on overpayments but also serves to remind Managers that overpayments are potentially down to their late action to inform payroll of any staff changes to hopefully educate and avoid future overpayments.
BCU	Do we need to note on overpayment letter 2 that the overpayment should be repaid over the same duration it occurred up to a maximum of 12 months	This hasn't been included as an initial offer as we should aim to recover the debt as soon as possible on a reasonable basis. We believe the majority of staff will opt for a 12 month repayment period if this is initially offered even if payment over a shorter period is feasible, hence the initial request for a shorter repayment period that can be extended rather than initially offering a longer repayment period (with more risk of non-recovering or defaulting on payments)
BCU	Need to separate the paragraph regarding consideration of exceptional circumstances from section 8b	New heading of section has been included in Version 8 to reflect this
BCU	Appendix G - Key responsibilities - think this should be at the beginning of the policy rather than in an appendix	This was initially part of the main procedure, however due to comments received about the detail and length it was moved to the Appendix
C&V	Re references to MSS – although MSS is fully rolled out, I understand that in CAV we discourage managers from using MSS for terminations because it doesn't not allow them to inform payroll of outstanding AL to be paid in the final salary	Payroll Services have advised that MSS can be used for terminations and the free text box used on the MSS termination section to advise of any outstanding or overtaken Annual Leave to be adjusted for in the final salary.
C&V	It would be our preference that when counter-fraud are contacted, Peoples Services/HR are also made aware	Senior Finance & Workforce colleagues are able to see the cases that are under review by Local Counter Fraud Teams in the overpayment dashboard - the procedure has been amended to note this.
HD	The procedure needs to be consistent – starts with talking about employees and workers and then reverts quite quickly to just being about employees/ex-employees.	References changed to also include worker in Version 9
HD	The policy is still too long and there are lots of things in here that are not about a procedure – these can be added as separate appendices rather than in the procedure itself – individuals want to be able to get to the crux of the procedure being applied to them quickly not have to read through 5 pages before they get to the start of the process.	Reasons for overpayments has been moved to Appendix A in Version 9 - prior to the section on the recovery process there are 2 pages for the cover and content plus the standard introduction/procedure statement/aims/equality/objectives/scope that we need to include at the beginning of the procedure.

HD	Late termination notification -page 5 – it talks about the individual working it back – this needs explaining as most staff/managers will not know how this works.	This is now in the appendix and the wording has been amended to "Consideration must be given to whether the employee/worker has overtaken annual leave <b>and if the employee/worker is not working additional hours to repay the overtaken annual leave</b> , this must be reported to NWSSP Payroll Services as soon as possible before the termination date to action a recovery from final salary"
HD	Page 6 – S8 – it states unequivocally that all overpayments will be recovered whereas it's not quite as simple as that as legal considerations will apply.	Version 9 wording has been amended to 'must be recovered'
HD	<p>The emphasis now seems to be on Shared Services and Finance Teams – if there is a legal challenge on recovery then it will be the HB that is named as the Respondent – that could mean that Finance will be the main respondent for each HB.</p> <p>Page 6 – <i>"If this action is taken, Payroll Services will write to the overpaid employee to inform them of the automatic recovery of the overpayment. Payroll Services will contact an Organisations Finance team in the first instance, if they identify the automatic recovery would leave an employee with no pay or a considerable reduction in monthly pay, to request advice before automatically recovering the overpayment."</i></p> <p>The above is a lift from the procedure – not necessarily for changing but Workforce would like to know what process finance will be taking on receiving such a notification and how they determine what action to take – again its not their employee and the line manager isnt involved and know their staff better – are we leaving it for Shared Services to determine what a considerable reduction is to monthly pay without any parameters – we have previously defined this in our policy.</p>	This has been amended in Version 9 to note "more than a 50% reduction in pay", to ensure consistent application by Payroll Services but the % can be amended if considered appropriate - this would only apply where a change/termination form has less than a one month delay in being processed so the employee/worker should be expecting this
HD	The approach advocated does not involve the line manager sufficiently – as the main employer they should be involved in any decision before standard letters are issued to their staff. It does make reference to the line manager further down in the procedure but the process for doing so is unclear and only looks to be piecemeal and not as a formal stage in consideration.	Version 8 includes a letter to the Line Manager which is sent at the same time the first overpayment letter is sent to the employee so that they are involved in the process. We are trying to balance the procedure to streamline the process and minimise delays.
HD	Page 6 – there is an inconsistency in what is said before the three numbered points – it talks about a one month review but then the three points cover off 3 months – the review would not happen after one month by default if one of the criteria is always 3 months.	The one month refers to the fact that we won't automatically recover an overpayment if the effective change date is more than one month prior. The CFS review criteria relates if the overpayment occurred for more than 3 months - additional wording has been included in Version 9 to make this clearer.
HD	Page 7 – HDda has not agreed to bullet point one being turned on due to the impact this had on staff when it was inadvertently turned on – we do not want this position to change.	This has been discussed at length and the wording of the letter aims to give early warning that a potential overpayment has occurred to make staff aware that this is being looked into - this is something new which hasn't been part of the procedure before and also increases the chance of recovery if employees are made aware that they have been overpaid at the earliest possible opportunity.
HD	Page 7 point 2 – why is the manager justifying the reason for an overpayment to shared services – this is outside their remit – it may be better to use an alternative word to justification – it also reads as punitive to the manager before it has been established that an overpayment has actually occurred. The theme throughout in the language used still feels punitive and as we know – managers account for most of the overpayments not an employee.	This is requested because Payroll Services have created an overpayments dashboard which automatically requests feedback from managers for reasons overpayments occurred to support reporting on overpayments and also seeks to educate managers to aim to reduce overpayments occurring in future. The word justification has been changed to details/reasons and more reference to how an overpayment pay have occurred rather than accusing a manager has been updated in Version 9
HD	Page 8 – is there any requirement for the up to 12 months to be in line with the budget year or not.	No - this is regardless of financial year
HD	Also the last para in "inability to meet proposed repayment terms" should come first. There is no point an employee filling out the appendix if the organisation isn't authorised.	We need the procedure to outline the process and repayment options before we can consider inability to pay. The employee would only fill out the salary deduction appendices after repayment terms have been agreed.
HD	Page 8 – dispute resolution – if it gets to this point it is also unlikely the employee will agree just because workforce are now in the meeting – if agreement is not reached what is the potential next step – its not covered.	This would be for Organisations to determine locally.
HD	Manager overpayment letter – Would also like to see a chronology from identification of an error with dates up to next pay period – not sure that with a 14 day window that there is time to do this and write out to an employee and give them time to respond before it comes out of their next pay – which would then be without their consent.	This letter is only sent where automatic recovery from salary is not actioned so no unauthorised deductions.

HD	Overpayment letter 2 – there is no mention of hardship in this letter or services to support with anxiety or distress caused. Same for ex-employee letter.	This letter seeks to detail the overpayment and note an invoice will be raised. Local Organisations will offer repayment plans if appropriate and investigate hardship issues once the invoice has been raised. <b>A reference to services to support with anxiety or distress could be included in this letter if details of these can be provided.</b>
HD	App F – suggests that on termination of employment – an employee could be left with little or no pay – is this correct – this will undoubtedly cause hardship and potentially incur bank charges. What will be done to remind employee should this be the case before they leave so they know what their final pay could look like.	For salary sacrifice arrangements that are taken out of a final salary, the employee will have authorised this when applying for the salary sacrifice arrangement. For overpayments where employees have expressly authorised salary deductions, given they have completed the applications it would not seem unreasonable that they keep track of their repayments and the balance outstanding.
HD	App G – could have formulas to work out the balances.	Formulas are included in the Excel spreadsheet
HD	App H – most people would not understand this section as the language is technical and there is no plain English explanation e.g. what is a green deal plan, staff will not see themselves as borrowers etc.	This has been removed from Version 9
HD	App G – has already been said in the procedure – suggest it only appears here for reasons previously stated.	Appendix G refers to the Income & Expenditure template - potentially the wrong Appendix reference has been included in the comments
HD	App I – should shared services be liaising with local trade unions without recourse or advance knowledge by local workforce team. Upon termination again suggests could leave individual with no or little pay. Also – here is the first time that disciplinary action is mentioned – is that appropriate when it is not in the procedure itself and is a matter for the organisation – not necessarily with payroll knowing about it either. Workforce section – should reference be here to the authorisation being already in place to agree beyond 12 months requirement first as we wont have authority to do so without that.	The appendix notes that Payroll Services will "Liaise with local trade union representatives where appropriate" - this would only be where they have been asked to do this rather than approaching them directly. Reference to disciplinary action has been removed from Version 9. Reference has been made in Version 9 to agreeing extended payment terms where Organisations are authorised to do so.
HD	On the legal advice – have we had a response from Sammie Morris to complete the position, notwithstanding its not as simple as one might think to rely solely on the express contractual term alone to enable recovery to automatically take place.	The automatic recovery will only occur where a change/termination form has been submitted late and with less than one month impact to salary that should only have been submitted after agreement with the employee so they should be expecting an adjustment to their pay.
HD	As for implementation date, unless this procedure is adopted by the HB then it cannot be applied to our employees as we have an agreed overpayments and underpayments policy and unless that is withdrawn by our People Committee it remains in force. We also then have an issue with missing half a policy and we need time to decide what we do with that simultaneously – we don't meet for PODCC until 15 Feb but it has to go to our local PF meetings – which are in January and SPF which is 6 Feb. So it could be mid April before we have this approved for use in HDda – if we adopt it.	We are aiming for approval by the Shared Services Partnership Committee in March 2024
Dec WOD comments	<p>Some concern was expressed with regard to the threshold for payroll engaging with counter fraud colleagues as laid out below:-</p> <p>“In the event of an overpayment being identified or reported after continuing for more than one month after the effective change date, or automatic deduction from the next salary payment is not possible, the Payroll department will make an assessment of whether the overpayment requires an initial review by Counter Fraud Services to assess whether any dishonest retention of the overpayment has occurred.</p> <p>An initial review by Counter Fraud Services will be requested if all three of the criteria below are met:</p> <ol style="list-style-type: none"> <li>1. The employee/ex-employee has not notified the Organisation/Line Manager/Payroll of the overpayment; and</li> <li>2. The overpayment has occurred for more than 3 months; and</li> <li>3. The overpayment value is estimated at more than £5,000”</li> </ol> <p>W&amp;OD Director colleagues' main concern is with regard to the 3-month timeframe and felt colleagues whose pay fluctuates from month to month, e.g. some junior medics, may not be aware of the overpayment after this short period of time.</p> <p>Colleagues felt that it would be better for payroll colleagues to consider on a case by case basis, and work with W&amp;OD teams at the respective organisations, in using their judgment with regard to the individual circumstances rather than requesting a counter fraud review straight away.</p>	<p>Given the volume of overpayments, payroll colleagues need criteria to consistently apply across NHS Wales to reduce the risk of inconsistent application if treating each overpayment on an individual basis. This is only asking CFS to undertake a preliminary review of the overpayment case at this stage - this is not a formal referral for CFS investigation. Once the initial review is undertaken by CFS colleagues, they will take into account whether it was reasonable for an employee/ex-employee to have known within the 3 month period that they had been overpaid and will link in with UHB/Trust Finance &amp; Workforce colleagues as required (or would not progress the review further if it is clear that the overpayment could not have been seen due to fluctuating pay). We need to balance the 3 month period to give a reasonable time for employees/ex-employees to realise an overpayment has occurred and inform us of this with the risk of the longer an overpayment is left the lesser chance of recovery.</p>



They also asked me to check whether the threshold/criteria are underpinned by any other financial procedures/instructions/legal advice.

Response from CFS: The 3 point criteria was proposed on the basis of reasonableness and not underpinned by any other financial procedures/instructions/legal advice. It is acknowledged that in some instances a fraud case may not follow and it is simply for initial review. This is particularly the case with Junior medics who continue to be employed by the same organisation, and entirely agree the most appropriate way forward in that scenario would be to arrange recovery via Payroll/Finance. However we felt it important to set criteria and a threshold to ensure a consistent approach which was previously absent.



# NWSSP Finance Report January 2024





As at 31<sup>st</sup> December 2023

*Adding Value  
Through Partnership,  
Innovation and Excellence*

Financial Position and Key Targets

KPI	Target	2022/23				2023/24										Trend
		December	January	February	March	April	May	June	July	August	September	October	November	December		
Financial Position – Forecast Outturn	Break even	Monthly	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	Breakeven	
Capital financial position	Within CEL	Monthly	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	
Distribution		0 Annually	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	£1.6m	£1.6m	£1.6m	£1.6m	
% of Non NHS Invoices paid within 30 days (In Month)		95% Monthly	93.91%	89.64%	100.07%	98.06%	98.24%	98.87%	96.55%	97.51%	97.14%	98.57%	96.72%	98.10%	97.87%	
% of Non NHS Invoices paid within 30 days (Cumulative)		95% Monthly	95.51%	94.90%	95.50%	95.71%	98.24%	98.56%	97.84%	97.76%	97.57%	97.78%	97.61%	97.68%	97.70%	
% of NHS Invoices paid within 30 days (In Month)		95% Monthly	76.29%	85.83%	91.73%	87.38%	98.76%	95.00%	99.17%	94.64%	94.50%	95.10%	71.72%	87.78%	97.06%	
% of NHS Invoices paid within 30 days (Cumulative)		95% Monthly	86.96%	86.79%	87.50%	86.44%	98.76%	97.32%	97.89%	97.15%	96.67%	96.45%	92.23%	91.81%	92.47%	

Corporate

		2022/23				2023/24										Trend
KPI	Target	December	January	February	March	April	May	June	July	August	September	October	November	December		
NHS Debts in excess of 17 weeks - number of invoices	0 Monthly	12	5	11	0	0	2	12	11	18	6	0	3	4		
Variable Pay – Overtime	<£100k Monthly	£120k	£104k	£108k	£106k	£120k	£136k	£109k	£105k	£122k	£100k	£102k	120k	£74k		
Agency % to date	<0.8% Cumulative	0.29%	0.31%	0.32%	0.29%	0.28%	0.30%	0.32%	0.33%	0.32%	0.32%	0.30%	0.31%	0.31%		
Agency % Adjusted to exclude SLE	<1% Cumulative	1.04%	1.10%	1.16%	1.03%	1.01%	1.08%	1.03%	1.02%	1.03%	1.07%	1.04%	1.06%	1.07%		

# Financial Position Update to 31<sup>st</sup> December 2023

	Annual Budget £'000	YTD Budget £'000	YTD Expend £'000	YTD Variance £'000
Income	-678,545	-464,416	-465,064	-648
Pay	342,187	255,526	252,223	-3,303
Non Pay	200,428	144,042	146,291	2,249
WRP – DEL	135,929	64,848	64,848	0
Year to date underspend	0	0	1,702	1,702
	0	0	0	0

NWSSP reported a break-even Month 9 financial position with a year to date overachievement of non-recurring savings of £1.702m.

Covid Costs	YTD	23/24 Forecast
	£m	£m
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay	0.600	0.833
Social/Primary Care PPE	2.998	3.997
PPE delivery/warehousing/testing	1.762	2.384
Medicines Stockpile	0.221	0.294
Lateral Flow Tests	0.102	0.136
TOTAL FUNDING	5.683	7.644

£5.683m of Covid funded expenditure has been incurred in the financial year to 31<sup>st</sup> December 2023 with a full year forecast of £7.644m.

The provision of PPE to Primary & Social Care will cease from 31<sup>st</sup> March 2024. We have received recurrent funding for the other Covid support items in the 2024/25 Welsh Government funding allocation.

Our additional savings submission to Welsh Government on 11<sup>th</sup> August identified we would make a £1.600m distribution this financial year. This will be repatriated to NHS Wales Organisations and Welsh Government based on the original contribution shares into NWSSP in line with previous financial year distributions.

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

We are currently reviewing our 2023/24 forecast and are likely to be able to increase the £1.600m distribution further.

We await confirmation of pay award funding allocations for 2022/23 and 2023/24 before confirming the increased distribution value which will be repatriated on the same percentage basis as noted above.

# Welsh Risk Pool

Month 9 2023/24	£000s
Actual spend to December 2023	64,848
Settled cases – awaiting payment	21,472
Joint Settlement/Round Table Meeting/Offer	22,478
Periodical Payment Orders to March 2024	510
Sub Total	109,308
Future Estimated Settlements	22,692
Minimum 2023/24 DEL Forecast	132,000
IMTP DEL Forecast 2023/24	135,929

DEL expenditure to Month 9 is **£64.848m**.

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

There remain a number of relatively high value cases that are due for settlement in Quarter 4 2023/24 and Quarter 1 2024/25. Due to the uncertainty in timings inherent in the claims process, these may settle in 2023/24 or fall into next financial year. Due to this uncertainty, we are forecasting that the WRP will have an outturn of between **£132.000m** and **£135.929m**.

WRP Creditor balances have reduced significantly since the beginning of the financial year although remain high at **£122.380m**

	Movement on Creditors		
	2022/23 – M12	2023/24 – M9	Movement
	£M	£M	£M
SWANSEA BAY	20.163	14.540	(5.623)
ANEURIN BEVAN	29.277	30.749	1.472
BETSI CADWALADR	26.696	23.582	(3.114)
CARDIFF & VALE	19.738	19.672	(0.066)
CWM TAF MORGANNWG	12.988	9.906	(3.082)
HYWEL DDA	19.132	20.449	1.317
POWYS	0.767	0.624	(0.143)
PHW	0.877	0.779	(0.098)
WAST	2.202	2.079	(0.123)
VELINDRE	0.057	0.000	(0.057)
	131.897	122.380	(9.517)

The 5 year DEL Forecast update has been completed following returns from Health Organisations in Month 7. The tables reflect the updated forecasts and element to be funded under the risk share agreement. The apportionment of the forecast risk share funding requirement by Organisation is detailed for IMTP planning purposes and will be shared as part of the NWSSP financial planning assumptions in January.

	2024/25	2025/26	2026/27	2027/28	2028/29
DEL Forecast	139.913	141.381	142.649	143.926	145.211
WG Allocation	109.435	109.435	109.435	109.435	109.435
Risk Share	30.478	31.946	33.214	34.491	35.776

	2023/24 RSA %	2023/24	2024/25	2025/26	2026/27
Aneurin Bevan Health Board	18.08%	4,790,198	5,510,518	5,775,937	6,005,195
Swansea Bay University Health Board	13.45%	3,562,369	4,098,055	4,295,442	4,465,937
Betsi Cadwaladr Health Board	18.56%	4,916,201	5,655,469	5,927,869	6,163,158
Cardiff & Vale University Health Board	16.03%	4,246,968	4,885,601	5,120,920	5,324,179
Cwm Taf Health Board	15.12%	4,005,958	4,608,349	4,830,314	5,022,039
Hywel Dda Health Board	10.45%	2,769,214	3,185,631	3,339,070	3,471,604
Powys NHS Trust	4.13%	1,095,377	1,260,092	1,320,786	1,373,211
Public Health Wales NHS Trust	1.16%	308,635	355,046	372,147	386,918
Velindre NHS Trust	1.09%	287,799	331,076	347,022	360,796
Welsh Ambulance Service NHS Trust	1.93%	511,281	588,164	616,493	640,963
NHS Wales Shared Services Partnership	0.00%	-	-	-	-
DHCW	0.00%	-	-	-	-
HEIW	0.00%	-	-	-	-
TOTAL RISK SHARE FUNDING REQUIREMENT	100.00%	26,494,000	30,478,000	31,946,000	33,214,000

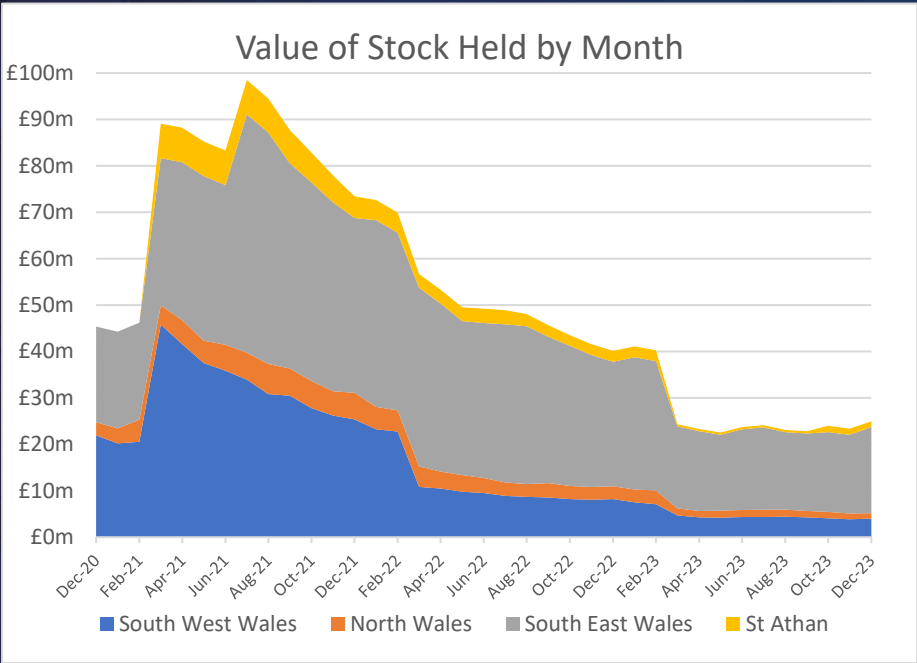


# Capital & Stock

Scheme	Allocation	YTD Spend	Balance Outstanding
	£000	£000	£000
Telephony & Contact Centre	91	91	0
Balance from 2022/23 schemes	4	4	0
Decontamination Equipment	10	0	-10
Cwmbran House racking & LED Lights	24	0	-24
SMTL equipment	49	0	-49
Unallocated	350	0	-350
<b>Discretionary Capital Total</b>	<b>528</b>	<b>95</b>	<b>-433</b>
IP5 discretionary	130	72	-58
Scan for Safety	69	44	-25
Laundry Services	1,856	-50	-1,906
TRAMS	217	198	-19
EFAB - decarbonisation	300	29	-271
Primary Care Services	558	558	0
Cyber security	11	0	-11
Radiopharmacy	500	0	-500
Denbigh racking / Dupont storage	402	21	-381
Glidescopes transfers	-56	-56	0
<b>Additional Capital Total</b>	<b>3,987</b>	<b>816</b>	<b>-3,171</b>
Estates	375	375	0
SMTL	16	16	0
<b>IFRS16 Capital</b>	<b>391</b>	<b>391</b>	<b>0</b>
<b>TOTAL CAPITAL ALLOCATION</b>	<b>4,906</b>	<b>1,302</b>	<b>-3,604</b>

Our most recent Capital Expenditure Limit for 2023/24 totals **£4.906m** of which **£1.302m** was spent to 31<sup>st</sup> December 2023. We received confirmation of funding for racking in Brecon House and Denbigh stores and the Radiopharmacy business case in December. We have plans in place to spend all funding allocated in 2023/24.

We have submitted a year end funding request to Welsh Government for any capital slippage monies and await the outcome.



The value of stock held in Stores at 31<sup>st</sup> December 2023 was £25m. We continue to maintain the 16 week PPE stock holding as requested by Welsh Government. We await confirmation of a workshop date with Welsh Government regarding the levels of stocks that we need to continue to hold in the longer term.

# Energy

## SUPPLY

The All Wales energy contract transferred to the Crown Commercial Services (CCS) Framework from 1<sup>st</sup> October 2023. We reported in November that the energy forecast range was **£95m - £104m** and that we were working with CCS and the energy suppliers, and also reviewing the first energy invoices received from the new suppliers, to validate the forecast.

Following the review of invoiced charges and confirmation of the billable rates from the energy suppliers, this forecast range has reduced to **£96m-98m**. The £2m potential opportunity relates to electricity invoices where we await an update on forecast costs from EDF.

	BRITISH GAS & CCS	BRITISH GAS & CCS/BRITISH GAS	OPPORTUNITY	UPDATED FORECAST	MOVEMENT FROM PREVIOUS FORECAST	POTENTIAL FURTHER OPPORTUNITY
	£m	£m	£m	£m	£m	£m
BCU	22.699	20.417	2.282	21.233	- 1.467	0.623
C&V	18.269	16.584	1.685	17.064	- 1.206	0.253
AB	18.038	16.781	1.257	17.177	- 0.861	0.192
CTM	13.124	11.854	1.270	12.364	- 0.760	0.335
SBU	14.172	13.222	0.950	13.738	- 0.434	0.218
HD	10.976	9.906	1.070	10.301	- 0.676	0.316
VELINDRE	2.000	1.889	0.111	1.931	- 0.070	0.035
POWYS	2.255	2.058	0.197	2.115	- 0.140	0.032
DHCW	0.175	0.164	0.011	0.169	- 0.006	0.005
WAST	1.112	1.060	0.052	1.071	- 0.041	0.017
PHW	0.291	0.258	0.033	0.274	- 0.018	0.015
HEIW	0.142	0.129	0.013	0.135	- 0.007	0.005
NWSSP	0.478	0.358	0.120	0.377	- 0.102	0.047
TOTAL	103.731	94.680	9.051	97.945	- 5.786	2.089

## SELLBACK

Following the decision to transfer our utility supplies to the CCS Framework from 1<sup>st</sup> October, this gave rise to the opportunity to sell back some small quantities of energy that we had secured the right to forward purchase at lower than current market rates for 2024/25 and 2025/26. These tranches of energy have now been sold back to British Gas with a net **£2.520m** one-off windfall gain to NHS Wales to be accounted for in the 2023/24 financial year. We have progressed conversations with Audit Wales regarding the accounting treatment of this in the current financial year and they are supportive of this approach.

We will receive the cash settlement from British Gas in the middle of March 2024. We will request invoices to be raised by Organisations in mid-February to repatriate their share of the gain. We will aim to make payment of these invoices prior to the last NHS payment date of the financial year once we have confirmed remittance of the cash payment from British Gas. The shares have been determined based on the percentage split of energy volumes that are forecast by Organisation with a nominal £5,000 for smaller NHS Organisations.

Organisation	Volume kWh	% Breakdown	Sell Back Value to date 12.06.2023
Betsi	122650537	21.388%	£ 534,709.41
Cardiff & Vale	121409206	21.171%	£ 529,297.69
Aneurin Bevan	97129621	16.937%	£ 423,447.99
Swansea Bay	89841575	15.666%	£ 391,674.89
Cwm Taf Morgannwg UHB	65960925	11.502%	£ 287,564.40
Hywel Dda	55062596	9.602%	£ 240,051.85
Powys	13914315	2.426%	£ 60,661.09
Velindre NHS Trust	4193267	0.731%	£ 18,281.04
Welsh Ambulance	3301582	0.576%	£ 14,393.64
NHS Wales Shared Services Partnership	767,893		£ 5,000.00
Public Health	481,825		£ 5,000.00
Health Education	422,061		£ 5,000.00
Digital Health and Care Wales	89,263		£ 5,000.00
TOTAL	573,463,626	100%	£ 2,520,082.00

## Recommendations

The Shared Services Partnership Committee is asked to note:

1. Achievement against key financial targets
2. The financial position to 31<sup>st</sup> December 2023
3. The 2023/24 savings distribution
4. The WRP forecast position and risk share apportionments for 2023/24 and future years
5. The 2023/24 energy update
6. The content of this update and seek further information if required.





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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	11 <sup>th</sup> January 2024
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	
<p>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 30<sup>th</sup> November 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 December 2023.</p> <p>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.</p>	

## Full Dashboard

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

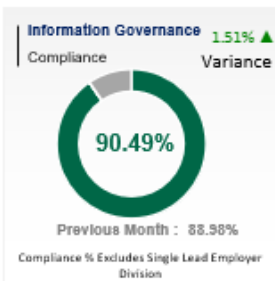
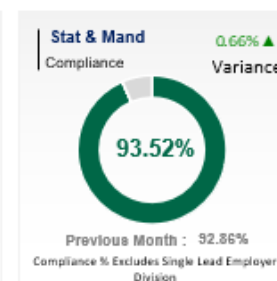
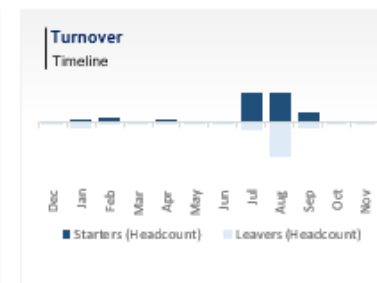
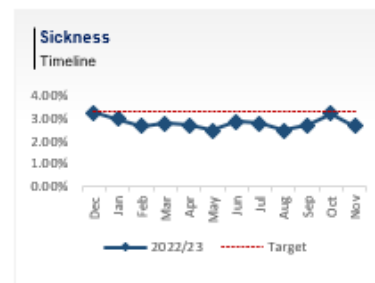
### Top 3 reasons for absence by FTE days Lost

1. Anxiety/stress/depression/other psychiatric illness
2. Cold, cough, Flu – influenza
3. Gastrointestinal problems

### Welsh Language Awareness

A continued increase in compliance for Welsh Language Awareness can be seen in November at **91.26%** when excluding Single Lead Employer Division.

Including Single Lead Employer Division compliance decreases to **45.87%**



#### Key

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

### Headcount

The increase in headcount for July is predominantly due to the onboarding of new F1 trainees.

The decrease in headcount seen in August is due to the completion of training for SLE trainees

**November** has seen a slight decrease in headcount compared to October but is higher than for the same period last year

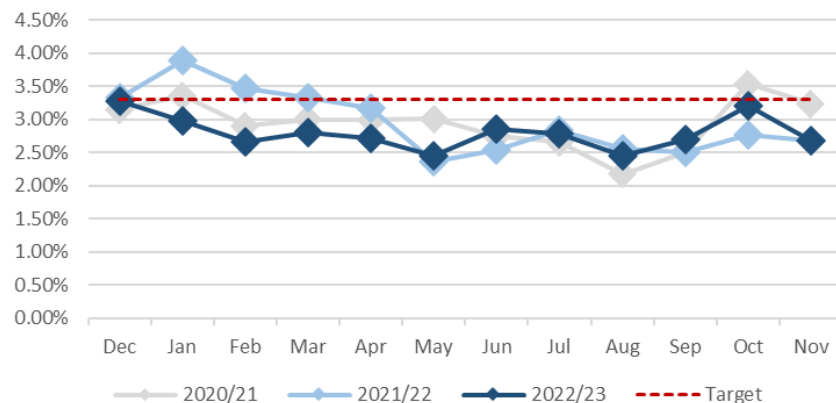
### Turnover

Including Single Lead Employer Division Turnover is at **23.82%** which has decreased by 0.49% when compared against the same period last year.

Excluding Single Lead Employer Division turnover is at **12.72%** which has reduced from **14.12%** for the same period last year

## FURTHER DETAIL

NWSSP Overall Sickness Absence % Monthly Comparison over 3 Years



Data Source: ESR

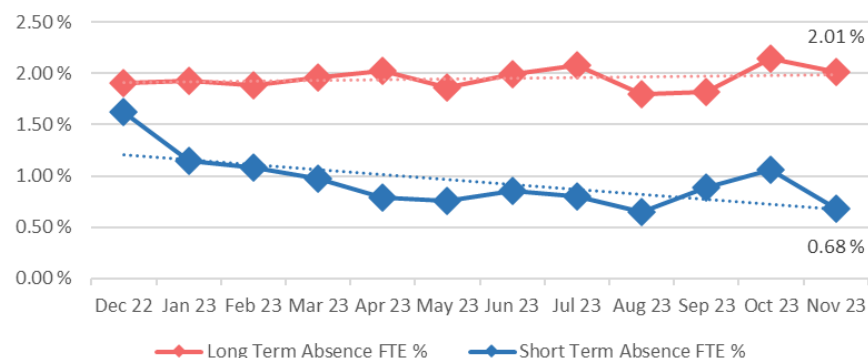
### Long Term Vs Short Term Absence

Long term absence has reduced from last month and is at 2.01% compared with 2.15% in October.

Short term absence has increased during September and October. The overall trend has seen a decrease over the 12-month period.

The top reason for short term absence being **Cold, cough, flu - influenza**

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



Data Source: ESR

### In Month Sickness Absence Percentage by Division

Division	Oct-23	Nov-23	Change
Accounts Payable Division	2.31%	2.41%	0.10% ▲
Audit & Assurance Division	3.46%	5.14%	1.68% ▲
Corporate Division	5.14%	3.58%	-1.56% ▼
Counter Fraud Division	2.30%	0.00%	-2.30% ▼
Digital Workforce Division	6.06%	7.14%	1.08% ▲
E-Business Central Team Division	0.41%	3.54%	3.13% ▲
Employment Division	5.87%	4.86%	-1.01% ▼
Finance Division	2.11%	0.26%	-1.85% ▼
Hosted Services Division	0.28%	0.00%	-0.28% ▼
Laundry Division	8.98%	11.94%	2.96% ▲
Legal & Risk Division	3.29%	2.74%	-0.55% ▼
Medical Examiner Division	2.92%	4.64%	1.72% ▲
Medical Workforce Division	1.16%	0.99%	-0.17% ▼
People & OD Division	2.53%	3.96%	1.43% ▲
Pharmacy Technical Services Division	2.89%	6.72%	3.83% ▲
Planning, Performance and Informatics Division	0.85%	2.36%	1.51% ▲
Primary Care Division	6.02%	4.08%	-1.94% ▼
Procurement Division	6.08%	5.86%	-0.22% ▼
Single Lead Employer Division	2.03%	1.33%	-0.70% ▼
Specialist Estates Division	2.09%	0.59%	-1.50% ▼
Surgical Materials Testing (SMTL) Division	0.81%	0.95%	0.14% ▲
Welsh Employers Unit Division	15.95%	1.88%	-14.07% ▼
<b>Grand Total</b>	<b>3.21%</b>	<b>2.69%</b>	<b>-0.52% ▼</b>

Source: ESR

In month sickness has decreased from the October 23 position and is now **2.69%** which is below the target of 3.30%

Welsh Employers Unit Division has the highest in month sickness percentage for October at **15.95%** but this has reduced during November.

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	98.63%	95.89%	98.63%	95.89%	94.52%	97.26%	97.95%	95.21%	94.52%	100.00%
Audit & Assurance Division	92.31%	90.38%	90.38%	92.31%	88.46%	88.46%	96.15%	92.31%	94.23%	100.00%
Corporate Division	88.89%	85.19%	92.59%	85.19%	85.19%	88.89%	88.89%	81.48%	81.48%	96.30%
Counter Fraud Division	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Digital Workforce Division	92.31%	96.15%	96.15%	96.15%	88.46%	84.62%	96.15%	100.00%	100.00%	100.00%
E-Business Central Team Division	100.00%	93.75%	93.75%	100.00%	93.75%	87.50%	100.00%	87.50%	87.50%	100.00%
Employment Division	96.23%	96.23%	95.96%	93.26%	94.07%	95.42%	95.96%	93.26%	93.53%	98.11%
Finance Division	88.46%	88.46%	88.46%	88.46%	88.46%	88.46%	92.31%	88.46%	88.46%	92.31%
Hosted Services Division	100.00%	100.00%	91.67%	91.67%	91.67%	100.00%	100.00%	91.67%	91.67%	100.00%
Laundry Division	86.05%	89.92%	90.70%	88.37%	66.67%	79.84%	90.70%	86.05%	84.50%	86.05%
Legal & Risk Division	93.98%	90.36%	93.37%	92.17%	92.17%	90.96%	95.18%	92.17%	90.96%	95.78%
Medical Examiner Division	96.47%	91.76%	94.12%	83.53%	92.94%	88.24%	85.88%	78.82%	77.65%	92.94%
Medical Workforce Division	88.24%	76.47%	94.12%	82.35%	76.47%	82.35%	76.47%	70.59%	70.59%	88.24%
People & OD Division	95.56%	95.56%	95.56%	97.78%	86.67%	93.33%	95.56%	95.56%	95.56%	93.33%
Pharmacy Technical Services Division	85.19%	88.89%	92.59%	88.89%	88.89%	85.19%	85.19%	85.19%	88.89%	88.89%
Planning, Performance and Informatics Division	97.67%	100.00%	97.67%	97.67%	97.67%	97.67%	100.00%	97.67%	97.67%	100.00%
Primary Care Division	96.97%	95.96%	97.98%	93.94%	94.28%	96.63%	97.31%	94.61%	94.61%	97.98%
Procurement Division	95.47%	92.63%	95.47%	93.06%	90.23%	91.22%	95.04%	94.05%	93.20%	96.88%
Specialist Estates Division	94.23%	92.31%	96.15%	96.15%	94.23%	92.31%	98.08%	94.23%	94.23%	98.08%
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	66.67%	66.67%	50.00%	66.67%	33.33%	50.00%	66.67%	50.00%	50.00%	83.33%
NHS Wales Shared Services Partnership	95.00%	93.47%	95.31%	92.77%	90.49%	92.11%	95.00%	92.46%	92.07%	96.54%

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

#### Social Media Strategy

Following some of the good success we have seen with our freshly branded advertising strategy on X (Twitter) and LinkedIn, discussions have been held with the NWSSP Communications team to create a corporately focused plan and strategy to support the widening of our NWSSP Brand and advertising plan. This will be presented to the Senior Leadership Group in the coming months with the focus on the following key areas:

1. Conduct an in-depth analysis of successful social media strategies employed by similar NHS Organisations (PHW/DHCW etc.).
2. Generate a repository of content for new platforms (TikTok, Facebook, Instagram) to ensure a consistent and engaging presence at launch.
3. Strengthen professional engagement, share industry insights, promote events and highlight organisational achievements on key social media platforms such as Twitter and LinkedIn.

#### Workforce Planning

The Corporate workforce plan has now been finalised, with the the supporting technical documents to accompany this. These are due to be presented at informal SLG in January, evidencing the link between workforce planning and our Employee Value Proposition. These will be supported by newly created Power Business Intelligence (BI) Workforce planning dashboards, providing a simpler way to understand our workforce analytics in a user friendly and intuitive format. These profiles are made up of 5 key areas that have been identified by the People and OD team:

1. Workforce Age profile
2. Workforce Profile (Equality)
3. Movements – To break down turnover data into tangible detail
4. Leavers questionnaire – To identify key themes around why people leave NWSSP
5. Welsh Language

These dashboards can be seen here: [https://nhs.wales365.sharepoint.com/sites/SSP\\_Intranet\\_POD/SitePages/W.aspx](https://nhs.wales365.sharepoint.com/sites/SSP_Intranet_POD/SitePages/W.aspx)

#### Widening Access

- Throughout November, NWSSP was represented at two careers events across Wales. One was in Pembrokeshire College, the other at Swansea University
- NWSSP has hosted 5 work placements during the month of November. Three of these placement have been within the Legal and Risk division, whilst the remaining two have been in Procurement, Supply Chain and Logistics. The two within our Procurement service are run in partnership with Hywel Dda University Health Board, via their Pathway 4 Programme, supported by Coleg Sir Gar.
- Registrations of interest closed for NWSSP's Early Careers Network and service directors were informed of member interest for their area. In total, there are 23 registrations of interest for the network where the majority of our services have a minimum of 1 representative per division.

## RESOURCE BANK AND AGENCY

### General Bank – Monthly Use

71.54 WTE actively engaged on Bank in November 2023, when removing collaborative bank and corporate reserves. This is down from 77.66 WTE in October

Total spend of £236,782 when excluding Corporate Reserves and Collaborative Bank, which compares with £216,745 in October

Increases seen in majority of services, with exception of SMTL AND People and OD who saw significant decrease in expenditure

Row Labels	Sum of Cur Month Actual	Sum of WTE Actual
Accounts Payable & e-Enablement	14,402.61	5.61
Audit & Assurance Services	11,412.27	1.55
Employment Services	36,479.10	9.15
Procurement Services	57,183.78	20.67
Primary Care Services	8,366.85	3.34
Legal & Risk Services	9,840.43	2.58
Planning, Performance & Informatics	3,328.70	0.97
Health Courier Services	64,872.18	21.03
SMTL	-20.16	0.00
Medical Examiner Service	0.00	0.00
All Wales Collaborative Bank	81,870.47	18.03
All Wales Laundry	27,008.34	8.49
E-Business Central Team Services	0.00	0.00
People & Organisational Development	-4,616.61	-4.86
Pharmacy Technical Services	0.00	0.00
Corporate Reserves	0.00	0.00
GP Training Scheme	0.00	0.00
Finance and Corporate Services	4,481.05	1.45
Digital Workforce Solutions	4,043.75	1.56
<b>Grand Total</b>	<b>318,652.76</b>	<b>89.57</b>

### Agency Spend by Service

Service Area	Sum of Nov	No Engagments
Audit	22,729	3
HCS	10,707	3
Laundry	50,659	21
PPI	3,600	1
SMTL	-5,916	0
Legal & Risk	9,882	1
<b>Total</b>	<b>91,662</b>	<b>29</b>

### Agency Use

Agency spend for November increased significantly to £91,662 (from £69,937 in October)

All services relatively static except for the Laundry service, who was an increase of £23,876 in one month

29 x staff engaged via Agency in November, up from 26 in October

## RESOURCE - VACANCY CONTROL PANEL

Vacancy Control September 2023			
Outcome	Business Case	Vacancy	Grand Total
Approved		4	24
Further info required		1	6
Return next week			4
<b>Grand Total</b>		<b>5</b>	<b>34</b>

Vacancy Control October 2023			
Outcome	Business Case	Vacancy	Grand Total
Approved		5	31
Declined			1
Further info required		1	8
<b>Grand Total</b>		<b>6</b>	<b>40</b>

Vacancy Control November 2023			
Row Labels	Business Case	Vacancy	Grand Total
Approved		7	28
Declined		1	
Further information required			1
<b>Grand Total</b>		<b>8</b>	<b>29</b>

## Key Themes for TRAC Vacancies

Significant improvement in level of detail coming through on TRAC 6 core questions

Still seeing some services copy and paste answers from one advert to the other, without considering each post individually

The panel have advised that some adverts do not take a holistic view of the service and/or organisational requirements and have asked managers to consider business agility including transferable skill sets and sharing workloads across teams

## Key themes for Flexible Business Cases

Vacancy control have seen flexible recruitment business cases submitted where the post holder has already been advised they are being made permanent before the panel has agreed to the request. This panel has been put in place for a clear governance process and the ask is managers do not advise staff of any agreements until it has been presented and approved by the panel.

Where multiple roles, the panel have asked fir consistency in approach. As an example, a service pffered staff FTC's with differing tenures for the same role without explanation

Trac Report Code	Trac Recruitment Health Check	Target	Aug-23	Sep-23	Oct-23	Nov-23
T1a	Time to Approve Vacancy Request	10	12.6	11.6	14.8	9.5

## Vacancy Control Approval

November is the first month in 5 that NWSSP has achieved its time to hire vacancy request. This is mainly down to the robust process implement as part of the Vacancy Control meeting and ties in with the new re-draft/reject decision that we are now using

The new POD managers checklist has supported this, providing a clear guide to managers on what they need to do when advertising a job



## 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 as 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**

- Engagement commenced with Divisional SMTs on the Leaders of the Future Programme and the Training Needs Analysis
- 3 members of staff enrolled in the ILM Level 4 qualification which is funded by Welsh Government
- The Managing Attendance at Work course continues to be in high demand with both sessions in November being fully booked. To ensure that all managers and supervisors can attend, more dates have been added to the schedule for 2024
- Several internal workshops were conducted with a total of 111 participants in attendance

**Well-being and Inclusion**

- We held a successful Menopause for Managers session that was delivered by Jennifer Griffin on 07/11, further sessions are being discussed due to the demand.
- Our Health and Wellbeing leads attended Woodland House for a site visit on 08/11 with information on what we can offer in NWSSP to support individuals.
- It was Talk Money Week 06/11 – 10/11 and we supported the week by hosting a Money and Pensions talk with Moneyworks, the Government led initiative to support financial health in Wales.
- NWSSP’s annual Health & Wellbeing conference was held on 15/11, with a total of 247 attendees and fantastic speakers. Immediate feedback through the chat function in Microsoft Teams has been very positive, and further requests for feedback of the event has been made.
- As part of the Coffee and Conversation series for Managers, we delivered an Inclusion and Belonging session which explored the importance of Inclusive Leadership and creating cultures of belonging in NWSSP.

**Staff Survey**

- Throughout November in-person site visits continued to take place across our Supply Chain Logistics and Transport (SCLT) and laundry sites to encourage participation and make paper copies available to staff.
- Multiple communications were circulated across the organisation to inform staff of the survey and encourage participation, posters were distributed out to non-digital sites and included in SCLT site briefings.
- Virtual sessions also continued in November to give staff protected time to complete their survey or allow them to ask the survey leads any questions.
- The NHS Wales Staff Survey officially closed on 27th November for submissions, a 'first look' themes and analysis will be shared from HEIW in December.

## EMPLOYEE EXPERIENCE

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

**Staff Recognition Awards**

- Staff Awards project planning has continued, a meeting was held with members of the sustainability team to explore the options of making the awards more sustainable in line with our environmental targets and identifying ways to reduce cost.
- Nominations for the awards were live from 6th-30th November, with circa 180 nominations received this year.
- The nominations panel is scheduled for 11th December.

**Bespoke Culture Work**

- Scoping began at Swansea Laundry in order to develop a bespoke culture intervention for the site, with focus groups planned for January 2024.
- This is our NWSSP Change Champions have been tasked with collating compassionate leadership case studies from across their services, which will enable the development of further compassionate leadership offerings for NWSSP.
- The culture dashboard innovation has progressed with an initial proposal document being created with the innovation hub and scoping has also taken place to identify if other health organisations have anything similar we could learn from.

**Agile**

- Initial scoping began on the NWSSP Agile Survey and how this will be rolled out within the organisation - a masters student in NWSSP will share their MSc survey which will then feed into the wider piece of work in April 2024, to minimise survey fatigue to the organisation.

**PADR Review**

- The PADR engagement came to an end in November and the findings will now be analysed into December.

**Move from Companies House and Charnwood Court**

- People and OD continue to support the programme of work and a separate paper has been prepared for approval by Senior Leadership Group.

**Primary Care Services**

- The Document Scanning Organisational Change Process (OCP) is close to completion. Excess mileage calculations are being signed off and discussions are to take place on how employees will want to be remunerated. Letters will then be distributed to the staff concerned confirming the move to Mahmillad including details of their excess mileage.

**Laundry Services**

- A meeting has been arranged for Tuesday 9<sup>th</sup> January 2024 to visit Glangwilli Laundry to advise the workforce of the future plans for the Laundry. A decision has been made to advise in groups of 6 to make it more personal and inclusive and to allow staff to raise concerns and questions in a safe environment. Consultation meetings will then be agreed within January to enable the TUPE to take place by 31<sup>st</sup> March 2023.
- A decision has been made to TUPE all of Church Village laundry staff over to NWSSP by 1<sup>st</sup> April 2024. A meeting has taken place between the Senior Laundry management team in NWSSP and the Senior Facilities team in Cwm Taf Morgannwg. A meeting is due to take place with workforce colleagues from NWSSP and Cwm Taf Morgannwg on Monday 11<sup>th</sup> December 2023 to discuss the TUPE work programme in more detail.

**Medical Examiner Service (MES)**

- An OCP has commenced in the service to move the Central Team based in Nantgarw to IP5 in Newport, which will mean that both the Central and East team will be based in one location managed by the Senior Medical Examiner Officer. The scrutiny paper is currently being developed and will be submitted shortly for approval.

**Transforming Access to Medicines (TrAMs)**

- Following the closure of the radiopharmacy unit in UHW, Welsh Government have agreed funding for the design of a new unit within IP5. Assuming funding for the build is granted, the TUPE consultation may start in Quarter 1 of 2024/25. In the meantime, Pharmacy Technical Services and People and OD continue to liaise with CVUHB to develop the best possible interim outcome for the impacted staff and NHS Wales.
- Expressions of interest have been invited for the final two senior leadership roles not filled in OCP1, National Leads for PQS and Validation (Band 8c). Initially these are to be sessional secondments until March 2025, playing a fundamental role in establishing policy and process for the new unit.
- As well as each Pharmacy department in Wales continuing to commission PTS Education and Training via their individual annual ETP Commissioning template spreadsheet and process, it has been agreed that the National Workforce Lead (TrAMs) will collate these and submit to HEIW Pharmacy Programme Dean for Wales in that single overarching document to ensure that all workforce development needs are fully tracked. Requirements for 2025/26 are currently being sought.
- In December, the first three new core production job descriptions (JDs) were matched at national level, fulfilling both the need for JDs for the new service and making JDs in the new format available to the current service.



**GIG**  
CYMRU  
**NHS**  
WALES

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM: 4.3**

**18 January 2024**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Performance Update Report**

**ARWEINYDD:  
LEAD:**

**Alison Ramsey, Director of Planning,  
Performance, and Informatics**

**AWDUR:  
AUTHOR:**

**Richard Phillips, Business and Performance  
Manager**

**SWYDDOG ADRODD:  
REPORTING  
OFFICER:**

**Alison Ramsey, Director of Planning,  
Performance, and Informatics**

**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 August – November 2023.

**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.

**Tystiolaeth:  
Supporting  
evidence:**

NWSSP IMTP 2023-26

**Ymgynghoriad/Consultation :**

Senior Leadership Group

Adduned y Pwyllgor/Committee Resolution (insert ✓):						
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE
<b>Argymhelliad/ Recommendation</b>		The Shared Services Partnership Committee is requested to NOTE:				
		<ol style="list-style-type: none"> <li>1. The significant level of professional influence benefits generated by NWSSP to 30th November 2023.</li> <li>2. The performance against the high-level key performance indicators to 30th November 2023.</li> </ol>				

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



# NWSSP Performance Information Report

Covering Period August to  
November 2023

*Delivering  
Value, Innovation and  
Excellence through  
Partnership*

## Purpose

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

Health Organisations have received their individual performance reports for Quarter 2 at the end of October 2023 and will receive the Quarter 3 reports at the end of January 2024.

Individual review meetings were held in November with the majority of organisations to discuss mid-year performance.

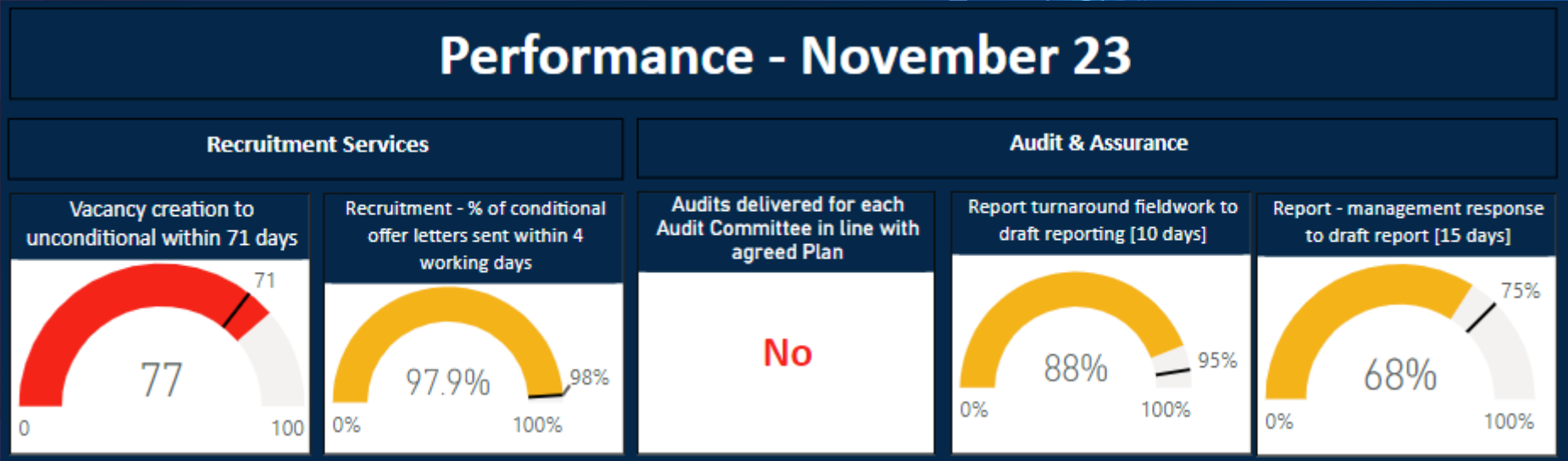
## Key Messages

The in-month November performance was generally good with 37 KPIs achieving the target against the total of 42 KPIs.

However, 5 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 £166M at end of November. This is further broken down on Page 11 of this report.

# Summary Position by exception – 5 KPIs off target









Of the 5 KPIs that did not achieve the targets for July

- 1 is solely the responsibility of the health organisation.
- 2 are a combination of both External/Internal processes.
- 3 are within our gift to influence as a service provider.









# Summary of Key Performance Indicators – November 23

23/24									
KFA	KPIs	Target		August	September	October	November	Trend	
Audit & Assurance									
Our Services	Audit opinions/annual reports on track	Y/N	Monthly	Y	Y	Y	Y		
Our Services	Audits delivered for each Audit Committee in line with agreed plan	Y/N	Monthly	Y	Y	Y	N		
Our Services	Report turnaround fieldwork to draft reporting [10 days]	95%	Monthly	98%	97%	94%	88%		
Our Services	Report turnaround management response to draft report [15 days]	75%	Monthly	93%	93%	81%	68%		
Our Services	Report turnaround draft response to final reporting [10 days]	95%	Monthly	100%	100%	98%	100%		
Procurement Services									
Our Value	Procurement savings *Current Year	£13m	Cumulative	£7,421,541	£7,884,787	£14,894,588	£21,084,022		
Accounts Payable									
Our Value	Savings and Successes		Monthly	£332,025	£663,857	£248,447	£2,001,361		
Our Services	All Wales PSPP – Non-NHS YTD	95%	Quarterly	Reported Quarterly	96.40%	Reported Quarterly	Reported Quarterly		
Our Services	All Wales PSPP –NHS YTD	95%	Quarterly	Reported Quarterly	88.10%	Reported Quarterly	Reported Quarterly		
Our Services	Accounts Payable % Calls Handled (South)	95%	Monthly	99.40%	99.40%	98.80%	99.80%		
Employment Services									
Payroll									
Our Services	Overall Payroll Accuracy	99.60%	Monthly	99.71%	99.73%	99.75%	99.77%		
Our Services	Payroll % Calls Handled	95%	Monthly	98.32%	98.60%	98.18%	97.99%		
Recruitment									
All Wales									
Our Services	All Wales - % of vacancy creation to unconditional offer within 71 days		Monthly	53.7%	55.8%	55.8%	53.7%		
Our Services	Average Days Vacancy creation to unconditional offer within 71 days		Monthly	76.40	76.70	79.60	77.30		
Recruitment Responsibility									
Our Services	Recruitment - % of Vacancies advertised within 2 working days of receipt	98%	Monthly	98.0%	99.0%	100.0%	99.8%		
Our Services	Recruitment - % of conditional offer letters sent within 4 working days	98%	Monthly	94.3%	97.3%	97.1%	97.9%		
Our Services	Recruitment % Calls Handled	95%	Monthly	99.0%	99.4%	99.0%	98.0%		






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# Summary of Key Performance Indicators – September 23

23/24										
KFA		KPIs	Target		August	September	October	November	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		95.38%	93.30%	95.36%	95.01%		
Primary 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		99.72%	99.74%	99.73%	99.77%		
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%		
Legal & Risk										
Our Value	Savings and Successes	£65m annual target	Monthly		£4,126,624	£7,823,249	£15,322,848	£25,825,294		
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%		
Welsh 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%		
Specialist Estates Services										
Our Value	Professional Influence	£16m annual	Monthly		£204,423	£3,594,762	£418,950	£675,621		
Our Services	Timeliness of Advice - Initial Business Case Scrutiny	95%	Monthly		Not Applicable	Not Applicable	Not Applicable	100%		
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 minutes	80%	Cumulative		100%	100%	100%	100%		
Our Services	BACS Service Point tickets received before 14.00 will be processed the same working day	92%	Monthly		100%	100%	100%	100%		

# Summary of Key Performance Indicators – September 23

23/24									
KFA		KPIs	Target		August	September	October	November	Trend
Digital Workforce									
Our Services	DWS % Calls Handled	85%	Monthly	91.80%	90.30%	89.30%	90.60%		
Our Services	Customer Satisfaction	90%	Monthly	87.20%	84.70%	88.60%	92.70%		
SMTL									
Our Services	% of incident reports sent to manufacturer within 50 days of receipt of form	90%	Monthly	100%	100%	100%	100%		
Our Services	% delivery of audited reports on time (Commercial)	87%	Monthly	100%	100%	100%	94%		
Our Services	% delivery of audited reports on time (NHS)	87%	Monthly	100%	100%	100%	100%		
Our Services	% delivery of Technical assurance evaluations on time	87%	Monthly	100%	Not Applicable	100%	100%		
Pharmacy Technical Services									
Our Services	Service Errors	<0.5%	Monthly	0%	0%	0%	0%		
Medical Examiners Service									
Our Services	Deaths Scrutinised	60%	Monthly	100%	100%	100%	100%		
Our Services	Never Events	0	Monthly	0	0	0	0		
All Wales Laundry									
Our Services	Orders dispatched meeting customer standing orders	85%	Monthly	102%	91%	96%	97%		
Our Services	Delivery's made within 2 hours of agreed delivery time	85%	Monthly	100%	100%	100%	100%		
Our Services	Microbiological contact failure points	85%	Monthly	97%	96%	94%	94%		
Our Services	Inappropriate items returned to the laundry including Clinical waste items	<5	Monthly	0	0	0	0		

23/24								
KFA	KPIs	Target		August	September	October	November	Trend
Audit & Assurance								
Our Services	Audits delivered for each Audit Committee in line with agreed plan	Y/N	Monthly	Y	Y	Y	N	
Our Services	Report turnaround fieldwork to draft reporting [10 days]	95%	Monthly	98%	97%	94%	88%	
Our Services	Report turnaround management response to draft report [15 days]	75%	Monthly	93%	93%	81%	68%	

What is happening?

**Audits delivered for each Audit committee within agreed plan** - Audits reports to agreed Audit Committee has been highlighted overall as “No” with 6 of the 13 health organisations not achieving the target (The 6 organisations are highlighted below). The reasons highlighted for the target to be missed were either fully or partly down to delays in carrying out field work due to sickness and resource issues within Audit but also delays in receipt of information. It is anticipated that this will be turned around in quarter 4 and audits will be delivered to plan.

Audit & Assurance	
Org	
AB	Y
BCU	Y
CV	N
CTM	N
HD	N
HEIW	Y
DHCW	Y
NWSSP	N
PTHB	N
PHW	Y
SBU	Y
VEL	Y
WAST	N




**Report turnaround fieldwork to draft reporting (10 days)** - Fieldwork to draft reporting turnaround times was missed in November 2023 with 96 completed from a target 109. The target for 10-day turnaround is 95%, but 88% of reports were completed within that time frame.

**Report turnaround management response to draft report (15 days)** - Management Response to draft reporting turnaround times was missed in November 2023 with 57 completed from a target 84. The target for 15-day turnaround is 75%, but 68% of reports were completed within that time frame.

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

Heads of Audit discuss any delays directly with the health orgs and are made aware of any revised timings.

# Employment Services – Recruitment

KFA	KPIs	Target		August	September	October	November	Trend
Employment Services Recruitment All Wales								
Our Services	All Wales - % of vacancy creation to unconditional offer within 71 days		Monthly	53.7%	55.8%	55.8%	53.7%	
Our Services	Average Days Vacancy creation to unconditional offer within 71 days		Monthly	76.40	76.70	79.60	77.30	
Recruitment Responsibility								
Our Services	Recruitment - % of conditional offer letters sent within 4 working days	98%	Monthly	94.3%	97.3%	97.1%	97.9%	

### What is happening?

The target of creation to unconditional offer within the 71 days has missed the target with an average of **77.3 days**. 54% of the records were within the 71 days target. 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

**97.9%** of conditional offers letters were sent within the target of 4 days slightly missing the compliance target but achieving the average days target with **3.6 days**.

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















There has again been a push on actioning outlying applicant journeys. The older records in the system have a detrimental impact on the Time to Hire, therefore organisations have been asked to look at these older records, which are shared via the Managers Update Report in order that they can be closed. This activity has been further supported via a commitment from the NWSSP Partnership Committee members for work to be completed on these older records as they skew the time to hire and will continue to do so until all are closed down. Some health orgs are making better progress than others on closing down older records and this is being highlighted in the time to hire comparison on slide 10.

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.

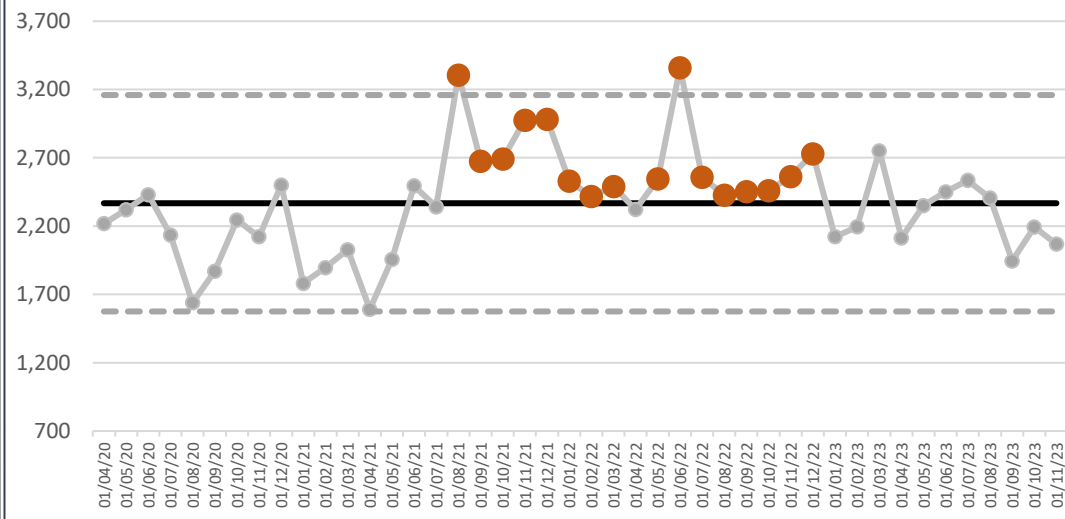
# Employment Services – Recruitment

## Recruitment

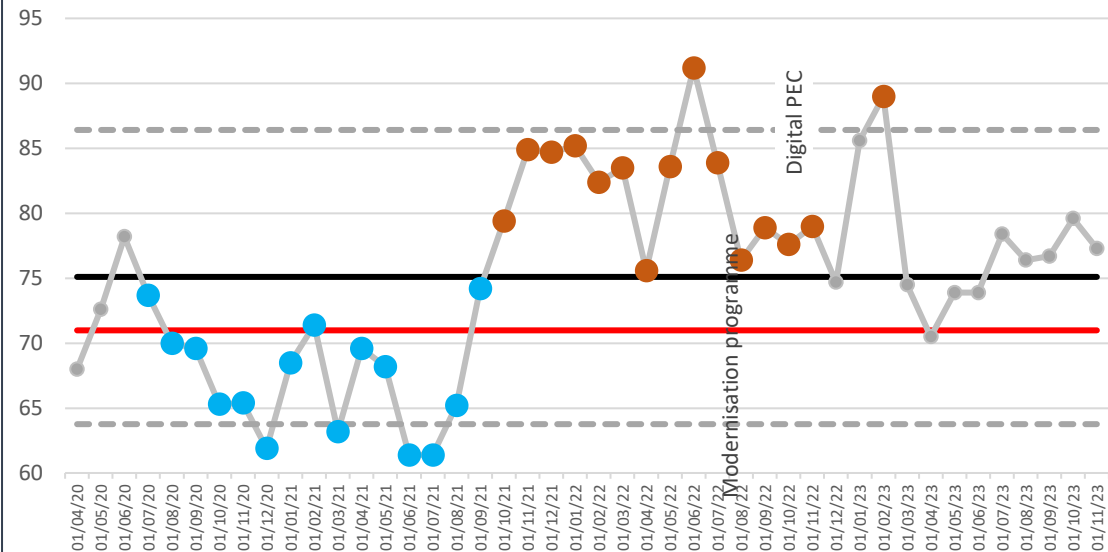
## Vacancy Creation to Unconditional Offer

Org	Target	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Trend
AB	71	81	110	128	77	82	81	87	84	95	83	103	102	
BCU	71	70	80	90	80	73	72	73	74	75	73	69	74	
CV	71	84	88	86	78	81	76	81	86	88	97	95	88	
CTM	71	89	96	98	91	94	87	93	93	93	94	106	94	
HD	71	71	67	79	65	60	65	60	54	65	67	65	58	
HEIW	71	72	72	70	54	35	74	64	76	50	62	89	101	
DHCW	71	74	75	63	58	61	70	59	69	72	76	64	60	
NWSSP	71	61	72	94	63	67	64	62	78	76	87	76	88	
PTHB	71	72	72	81	72	65	64	70	80	82	72	70	74	
PHW	71	54	65	68	57	54	63	57	61	60	56	58	57	
SBU	71	86	90	91	81	77	72	76	79	74	79	72	68	
VEL	71	71	85	86	78	71	75	78	77	65	66	73	66	
WAST	71	93	142	126	107	97	98	92	113	121	110	109	96	
All Wales	71	75	86	89	75	71	74	74	78	76	77	80	77	

### Number of Conditional Offers Sent

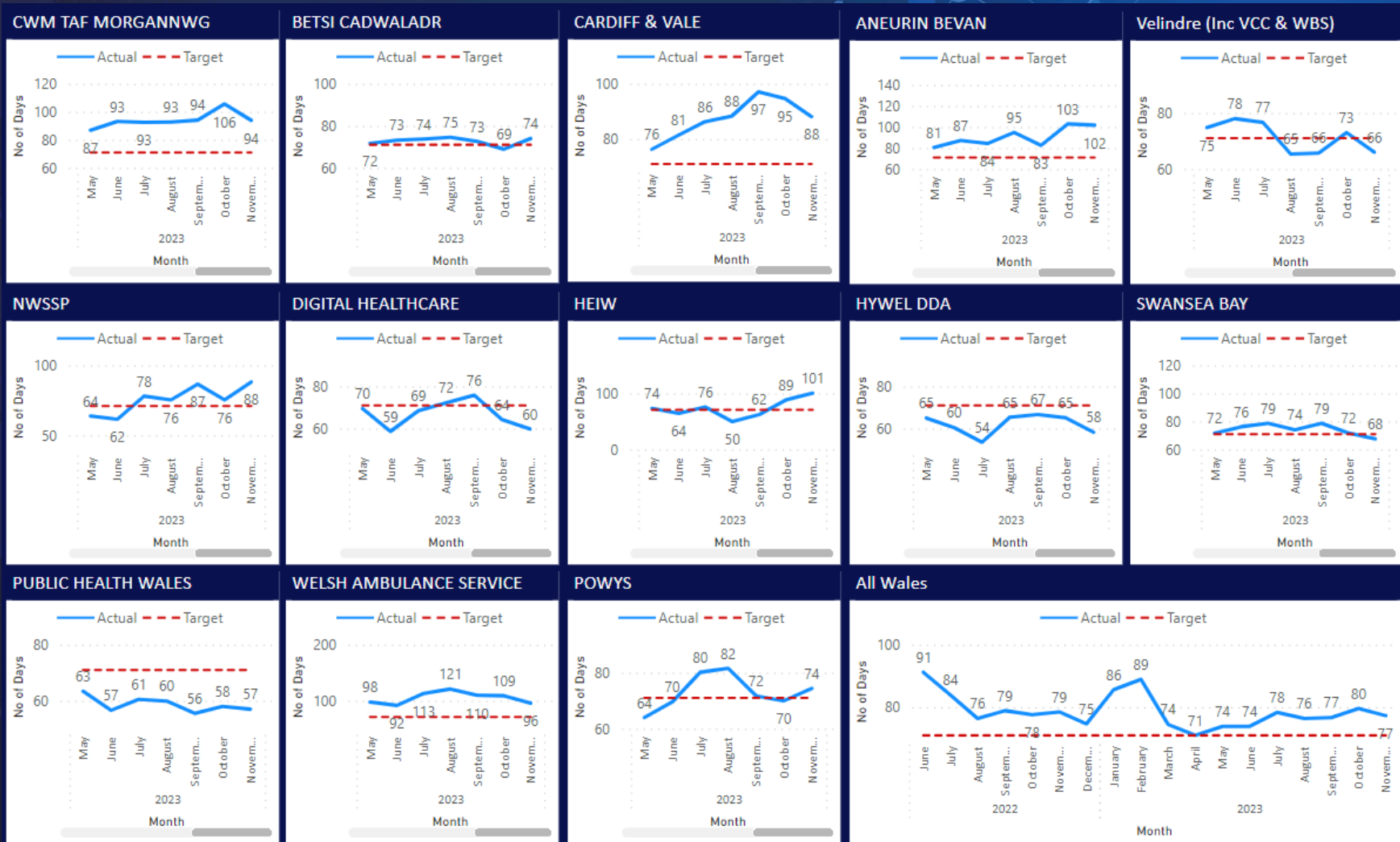


### Vacancy Requested to Unconditional Offer



# 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 May – November 23.



Vacancy Creation to unconditional offer



# 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 and prevention.
- **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 – November 2023 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services	10.9
Procurement Services	21.1
Legal & Risk Services	106.7
Accounts Payable	5.1
Counter Fraud Services*	22.3
<b>Total</b>	<b>166</b>

\* Counter fraud figures includes only April - September



## Other points to note

### Digital Workforce Customer Satisfaction

performance previously Red has achieved the target in November. The vacancy that was impacting the performance has now been appointed to and improved the time to answer queries.

### Accounts Payable – Invoices on Hold

As of November, there were **16k** invoices on hold older than 30 days and not disputed across Wales with a value of **£42M**.

Once paid these invoices will fail the Public Sector Payment Policy (PSPP).

## Summary

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

- The significant level of professional influence benefits generated by NWSSP to 30th November 2023.
- The performance against the high-level key performance indicators to 30th November 2023.

**The report is not Exempt**

**Teitl yr Adroddiad/Title of Report**

**Project Management Office and Service Improvement Update Report**

**ARWEINYDD:** Alison Ramsey, Director of Planning, Performance, and Informatics

**LEAD:**

**AWDUR:** Gill Bailey, Assistant Head of Project Management Office

**AUTHOR:**

**SWYDDOG ADRODD:** Ian Rose, Head of Project Management Office & Service Improvement

**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 and initiatives.

**Llywodraethu/Governance**

**Amcanion:** **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.  
**Objectives:** **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:** NWSSP IMTP 2022-25 approved by SSPC in Jan-22.

**Supporting**

**evidence:**

**Ymgynghoriad/Consultation :**

Senior Leadership Group

**Adduned y Pwyllgor/Committee Resolution (insert √):**

DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE	✓

**Argymhelliad/  
Recommendation**

The Committee is asked to NOTE the progress with key projects.

**Crynodeb Dadansoddiad Effaith:**

**Summary Impact Analysis:**

**Cydraddoldeb ac amrywiaeth:** No direct Impact

**Equality and diversity:**

**yfreithiol:** Compliance with procurement regulations where applicable

**Legal:**

**Iechyd Poblogaeth:** No direct Impact

**Population Health:**

**Ansawdd, Diogelwch a Profiad y Claf:** No direct Impact

**Quality, Safety & Patient Experience:**

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



GIG  
CYMRU  
NHS  
WALES

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

## **GIG Cymru Partneriaeth Cydwasaethau NHS Wales Shared Services Partnership PMO Report**

**NWSSP PMO and Service Improvement Monthly Update - 10 January 2024**  
**Prepared by Gill Bailey**

**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.

<b>Projects</b>	19
<b>Programmes</b>	2
<b>SI Initiatives</b>	4

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

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

- **57% (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
- **43% (9 Schemes) NWSSP** – Typically serving internal purpose for one or more NWSSP Divisions
- **0% (0 Schemes) Health board** – Typically supporting schemes for health boards but where NWSSP play a role in the service provision

The team will be focusing on the closure of projects that are due to end this operational year. This will facilitate a review of bandwidth and capacity for new initiatives identified following the review of Divisional IMTPs.

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.

**SLG Recommendation**

SSPC to note the contents of the report.

# PMO Dashboard Report

## Key Trend information and Initiative Overview

### Initiatives – 21

Scheme Scale								
All Wales	SRO	Previous RAG	Current RAG	SIZE	Start Date	Original Completion	Revised Completion	% Completion
Implementation of AW Translation Memory Software	Non Richards	Green	Green	Large	04/12/2023	31/03/2026	N/A	5%
Demographic Transformation	Ceri Evans	Green	Green	Large	21/06/2021	31/07/2023	31/07/2024	79%
Procurement and Implementation of Wales Healthcare Student Hub	Darren Rees	Green	Green	Large	25/11/2019	01/08/2023	29/02/2024	92%
Medical Examiner	Neil Frow	Green	Green	Medium	31/03/2021	31/10/2023	31/03/2024	95%
Occupational Health Checks	Rebecca Jarvis	Green	Green	Large	15/11/2021	30/11/2023	31/01/2024	96%
GS1 Coding Locations	Andy Smallwood	Amber	Amber	Large	24/08/2022	30/11/2023	30/11/2024	25%
Primary Care Workforce Intelligence System (Including Reporting and Performers List)	Andrew Evans	Amber	Red	Large	13/04/2021	29/03/2024	30/06/2024	17%
Expansion of Legal Services to Primary Care	Daniela Mahapatra	Green	Green	Medium	02/02/2023	29/03/2024	N/A	90%
NWSSP Electronic Prescription Service-EPS	Andrew Evans	Green	Green	Large	01/10/2022	31/03/2024	N/A	87%
Wales General Ophthalmic Service - Primary Care Contract Reform	Nicola Phillips	Amber	Amber	LargeXOrg	04/09/2023	30/09/2024	N/A	54%
Decarbonisation Programme	Stuart Douglas	Amber	Amber	Large	01/04/2022	31/03/2030	N/A	72%
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	05/02/2024	87%
Patient Medical Records and (Scanning) Service Accommodation Review	Scott Lavender	Amber	Amber	Large	16/08/2021	31/08/2023	30/08/2024	25%
Customer Contact Centre - Telephony and Contact Centre Solution	Andrew Evans	Green	Green	LargeXOrg	01/06/2021	31/10/2023	29/03/2024	80%
National Stocked Product Range (NSPR) Catalogue Management Project	Sara Taylor	Green	Green	Medium	03/04/2023	31/05/2024	25/10/2024	50%
NWSSP Job Description Modernisation	James Green Abigail Sheppard	Green	Green	Medium	03/07/2023	28/06/2024	N/A	0%
Data Management	Nicola Phillips	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	28%
Charnwood & Companies House Accommodation	Mark Roscrow	Green	Green	Medium	01/09/2023	31/03/2025	N/A	30%
Leaders of the Future for NWSSP rising Stars	Angela Voyle-Smith	Green	Green	Medium	02/10/2023	01/04/2026	N/A	10%

Service Improvement Key Trend information and Initiative Overview

Initiatives – 4

Scheme Scale							
	Sponsor	Previous RAG	Current RAG	DMAIC Stage	Start Date	Original Completion	Revised Completion
Customer Service Excellence Yr 1	Neil Frow	Green	Green	Work Package	26/10/2022	31/01/2024	N/A
Needle and syringe supply chain	Nicola Phillips	Green	Green	Define	13/06/2023	31/01/2024	N/A
Accounts Payable Process	Andrew Butler	Green	Green	Define	22/06/2023	31/01/2024	N/A
Innovation Strategy		Green	Green	Work Package	10/04/2023	30/03/2024	N/A

Key Individual Project/Programme Updates				
Project Name	Project Manager		Project Exec/SRO	
Primary Care Workforce Intelligence System (Including Reporting and Performers List)	Bethan Rees, Abi Shackson		Andrew Evans	
	Monthly Update (key/issues (blockages)/risks)			
Status	Red (Overall)	Red (Time)	Amber (Cost)	Amber (Overall)
Recent Gateway Review?	No			
Objective				
To implement a single integrated system for the Performers List and Wales National Workforce Reporting System (WNWRS).				
Progress Update				
The RAG status has changed from Amber to Red due to a six-week delay with receiving the Data Migration Strategy document from the supplier, Brightgen.				
Build				
<ul style="list-style-type: none"><li>The solution build is now well underway and key stakeholders from both services, (Primary Care and Employment Services) have attended two 'Show &amp; Tells' with the supplier, Brightgen during Dec-23. The 'Show &amp; Tells' have provided an opportunity for the supplier to demonstrate build progress within the test site and identify areas that require further input from stakeholders. Key stakeholders have provided feedback and this feedback has been incorporated within the build. Additional 'Show &amp; Tells' are being scheduled on a fortnightly basis through to Mar-24.</li><li>During Nov-23 and Dec-23, a total of seven Deep Dives have been held on a range of topics to supplement the build. The Deep Dives have been well attended by stakeholders from both services, and more are planned for the next fortnight.</li></ul>				
Data Migration				
The Data Migration Strategy document and template have been received from Brightgen in Jan-24. This information will provide the basis for the data migration plan, which is currently being updated. Responsibility for data extract, transformation, cleansing and deduplication of data sits with NWSSP, although this activity is dependent on support from DHCW and the Workforce incumbent supplier, Argyle. Timescales for data migration are extremely aggressive and will require full and dedicated support from Data Analysts, IT, and Service Leads to ensure data migration deadlines are met in time for the May-24 solution go live. To assist with this critical activity a Workstream has been set up and will meet on a weekly basis.				
Main Issues, Risks & Blockers				
Risks				
<ul style="list-style-type: none"><li>Project timescales for solution build and data migration are extremely tight &amp; there is a risk to project delivery if this activity is not completed on time.<ul style="list-style-type: none"><li>Response Action: Ensure robust Project Build &amp; Data Migration Plans are in place and monitored for slippage &amp; any exceptions escalated. Identify automation opportunities to assist with data migration activity that could save time. The existing contract with the incumbent supplier has been extended for two months to ensure continuity of service with no impact to stakeholders. If necessary this can be extended further.</li></ul></li><li>Risk of extension to project timelines could impact upon capital funding within current financial year and result in possible contract extension with current legacy supplier.<ul style="list-style-type: none"><li>Response Action: Monitor timelines and maintain communication with Finance throughout project lifecycle.</li></ul></li></ul>				
Issues				
<ul style="list-style-type: none"><li>Project underestimated the work involved with migrating two sets of data; Performers List &amp; Workforce Information System, into one database prior to being imported into the new system. This was compounded by the delay with receiving the Data Migration strategy from the Supplier, Brightgen. The following actions are being put in place to reduce the impact on project delivery timeframe as well as stakeholders:<ul style="list-style-type: none"><li>Data Migration plan being revised taking into consideration information provided in strategy document.</li><li>Additional Data Analyst resources being secured from PCS to support plan.</li><li>Options are being explored for data cleansing.</li><li>Discussions underway with DHCW to support Data Migration Plan.</li><li>Discussion underway with Workforce incumbent supplier to agree data migration via API or alternative method.</li><li>Further discussions taking place with Brightgen on Data Migration.</li><li>Special 'Data Migration' Project Board arranged for Friday 12<sup>th</sup> January to present revised project plan for Data Migration to Board.</li></ul></li></ul>				



- Operational team involvement and capacity with project whilst providing day to day core business and involvement in numerous other projects.
  - Response Action: Consideration given to future project involvement and commitment. Early consideration given to tasks that will need to be performed by the operational team such as data cleansing, UAT etc to ensure these can be factored into work schedules alongside competing demands. Source additional resource.

Project Name	Project Manager	Project Exec/SRO
TRAMS Programme	Peter Elliott	Neil Frow

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

**Status**      **Red** (Overall)      **Amber** (Time)      **Red** (Cost)      **Green** (Quality)

**Recent Gateway Review?**      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

- Programme Board have directed to focus costing work for the South East Hub on the IP5 site.
- The design will be fitted to the constraints of the site. Any scope not able to be included in the South East Hub will be reviewed and re-allocated within the Programme.
- Programme Board in Jun-23 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.
- Funding has been approved for fees to progress the design, and contract awarding is in progress.
- The South East Hub scope includes the new Radio pharmacy Unit for the region. Two investment options will be presented: either to build the whole design at once, or to build the Radio pharmacy Unit first, and the remaining cleanroom suites in two subsequent phases.
- 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 have taken place. The NWSSP Chief Digital Officer is sighted.
- 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

- While the recent closure of the legacy Radio pharmacy service for South East Wales has injected new urgency in bringing forward the Hub Solution for the South East, time pressure remains the main issue in the Programme.
  - We must have new aseptic cleanroom capacity open before the new Velindre Cancer Centre opens, and their legacy aseptic unit closes.
  - Other units across Wales remain very fragile, and immediate investments are needed just to secure continuity of service.
- It is proposed to develop the new facilities in IP5 concurrently with seeking planning permission. The risk is considered justified based on the level or urgency to meet patient care needs. Planning advice is being sought to manage this risk effectively.
- Electrical power remains a key constraint within IP5. The design will work within this constraint. This may result in the re-allocation of some scope to the South West and North hubs. The overall benefits justification of each part of the scope remains under constant review, with the most urgent high benefit elements being given the highest priority for immediate investment. These are:
  - Radio pharmacy
  - Systemic Anti-Cancer Therapy cleanrooms
  - Other Intravenous injectables cleanrooms

- 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"**.

Project Name	Project Manager	Project Exec/SRO		
Data Management	Alison Lewis, Rachel Pember	Nicola Phillips		
Monthly Update (key/issues (blockages)/risks)				
Status	Amber (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 discover phase which will inform the next phases of the project.  <b>To catalogue:</b> - <ul style="list-style-type: none"><li>Existing delivery mechanisms and solutions.</li><li>Current arrangements for the supply of regular reports.</li></ul> <b>To review:</b> - <ul style="list-style-type: none"><li>Data request / response processes including IG review processes</li><li>Existing technical infrastructure</li></ul> <b>To identify:</b> - <ul style="list-style-type: none"><li>Opportunities to streamline request / response processes including IG review processes.</li><li>Duplication / inconsistency in the provision of regular reporting.</li><li>Opportunities to drive Statistical Process Control and performance management using existing data sets.</li><li>Opportunities to add value to data provision through the application of domain knowledge.</li><li>Recurring themes in existing data provision and opportunities to consolidate information delivery around these themes.</li><li>Stakeholder groups that have requirements beyond existing information provision</li><li>Inconsistencies in existing data models.</li><li>Potential “quick wins”</li></ul> <b>Progress Update</b>  Terms of Reference have been drawn up for Phase 2 with the primary aim to create a solution that allows a consistent view of PCS data and provides ease of access to others. This will enable PCS to provide consistent collection and storage of data alongside a consistent approach to the method of delivery.  Currently data is stored in multiple locations. The project team is looking at how this can be pulled together to create one source of truth – core reference data. A potential solution has been identified by NWSSP Informatics, but further discussions are needed to understand if the solution is viable. A meeting was held in Dec-23 with DHCW, Centre of Excellence to gather further information and identify other potential solutions available. A further meeting is scheduled for 18 January 2024 to review and assess the options identified.  <b>Main Issues, Risks &amp; Blockers</b>  Project needs to move at pace to achieve delivery of phase two. PCS resources will need to be fully committed to meeting the tight timescales for delivering the plan by 31 March 2024.			

Project Name	Project Manager	Project Exec/SRO		
Patient Medical Records and (Scanning) Service Accommodation Review	Rachel Pember	Scott Lavender		
Monthly Update (key/issues (blockages)/risks)				
<u>Status</u>	Amber (Overall)	Amber (Time)	Amber (Cost)	Amber (Overall)
<u>Recent Gateway Review?</u>	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 options are being explored.

## **Progress Update**

As the Business Case has obtained formal Velindre Trust Board approval and funding has been secured, there is a degree of confidence that the project can be delivered within the set timescales and budget.

Workstreams are in place to progress at pace:

- Medical records from Brecon House to DuPont (new accommodation)
- Medical records (notes only) C2 / Brecon House to IP5 / Picketston
- Document Scanning Team / Print Room / Post Room - Companies House/Brecon House to Cwmbran House

### **Medical records from Brecon House to DuPont (new accommodation)**

Following formal Welsh Government approval, the workstream are preparing the new premises (Du Pont) lease. The lease has been sent for approval/signing. Work updates are commencing by NWSSP Informatics, Fire, Health & Safety, Procurement and Finance. Communication updates are being provided to staff monthly. The review of the current situation within Brecon House for RAAC, is being monitored and assessed on a regular basis.

### **Medical records (notes only) C2 / Brecon House to IP5 / Picketston**

An exit strategy is being established to move the Medical Records Deceased notes from C2 and Brecon House at Mamhilad to be stored in Picketston & IP5. A staging area is required within C2 to be able to have a working area to palletise the remaining notes. The move of notes will be done in three stages:

- Stage 1:- 16 pallets cleared at C2 to be moved to Picketston Nov-23 - COMPLETED
- Stage 2:- 400 pallets to IP5, 700 to Picketston Dec-23 / Jan-24.
- Stage 3:- 5300 approx from Brecon House to DuPont Feb to Aug-24.

Stage 2 is underway. Whilst recruiting additional staff, weekend working with existing staff is currently underway until the recruitment process has been completed.

### **Document Scanning Team (DST)/Print Room including Post Room - Companies House/Brecon House to Cwmbran House**

A business case addendum has been finalised by the workstream for the DST and Print Room move to Cwmbran House due to the need for additional funding. The addendum was presented to and approved by the Project Board in Dec-23 noting that the revenue funding required will be sourced from existing PCS budget. The capital monies for new racking and lighting have also been secured.

## **Main Issues, Risks & Blockers**

### **Medical records from Brecon House to DuPont (new accommodation)**

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. In the event of a large ingress of water or further significant deterioration is identified, the whole building will be closed and access restricted until assessment of the risk has been undertaken with advice from structural engineers and the Specialist Estates Service

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.

**Medical records (notes only) C2 / Brecon House to IP5 / Picketston**

To mitigate the risk of damage to medical records, PCS have started the process of moving medical records from C2 / Brecon House to existing NWSSP sites. The requirement for additional staff to undertake the work of moving the medical records has been unsuccessful in recruiting bank staff. To mitigate the risk to delaying the project, it is seeking approval of fixed term contracts on a 6 months basis.

Project Name	Project Manager	Project Exec/SRO		
Decarbonisation Programme	Paul Thomas, Sarah Ferrier, Claire Powell	Stuart Douglas		
Monthly Update (key/issues (blockages)/risks)				
Status	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	NWSSP Decarbonisation Action Plan Update <ul style="list-style-type: none"><li>The NWSSP Decarbonisation Action Plan for 2024-25 has been drafted and will be presented for approval at NWSSP Senior Leadership Group in Feb-24 and Shared Services Partnership Committee in Mar-24. This refreshed version of the NWSSP Decarbonisation Action Plan includes achievements to date, and a new action plan which is fully aligned to the Strategic Plan.</li><li>Quarter 2 NWSSP progress data has been submitted to the Decarbonisation Coordination Reporting Team (DCR), and been collated into Dashboards, along with the rest of NHS Wales data. It was submitted to the Health and Social Care Climate Emergency (HSSCE) Programme Team in Dec-23 for review ahead of the Project and Programme Boards in Jan-24. Quarter 3 NWSSP data will be collated in Jan-24 and submitted to the DCR at the end of Jan-24.</li><li>The NWSSP led Transport Task and Finish group, established to target completion of Initiative 17, has published the all Wales Guidance document to assist Health Organisations in developing their best practice approach for EV charging technology, procurement, and car park space planning. This task in the Strategic Plan is now complete. The Task and Finish group will now focus on facilitating Health Boards and Trusts to develop their individual approach for EV charging infrastructure. The date of the next meeting is 18 January 24.</li><li>NWSSP Expenses met with Health Organisations via the Transport Task and Finish group in Nov -23 to highlight the reports available on their grey fleet journeys to enable the tracking of decarbonisation. This will support progress towards completion of Initiative 21 in the Strategic Plan.</li></ul>			
All Wales Reporting: Decarbonisation Coordination Reporting Role	<ul style="list-style-type: none"><li>The DCR Team, launched in Mar-23, continues to work closely with the HSCCE Programme Team in Welsh Government to deliver all Wales reporting on the Strategic Plan.</li><li>Quarter 2 is the second all Wales reporting cycle including all workstreams in the Strategic Plan. The data collated provides an all Wales RAG Status for the Strategic Plan; which is Amber for Quarter 2, and was Amber for Quarter 1. Quarter 3 data is being collated in Jan-24.</li></ul>			

- Data is now being collated using an automation process jointly developed by the DCR Team and NWSSP Robotic Process Automation Team. The data is used to prepare all Wales Insight Dashboards for each workstream.
- The HSCCE Programme Team have requested the Insight Dashboards, all risks and issues, and any exemption requests at 8 weeks following the end of the quarter. This will enable the Chair of each Project Board to review the data in advance. The data will be presented formally to the HSCCE Project Boards, and Programme Board in Jan-24. This Board will focus on Initiatives that are reported as Red Delivery Status, and Red Unfeasible Confidence in Delivery.
- Engagement activity with the reporting Health Organisations continues, with positive feedback being received. The Frequently Asked Questions Document, to assist reporting, will be refreshed and re-issued in Jan-24.
- The HSCCE Programme Team have commenced work on the refresh of the Strategic Plan for 2025. A joint NWSSP and HSCCE Team workshop was held in Dec-23 to review the existing Strategic Plan, and stakeholder workshops will be agreed in early 2024.
- Governance for Change Requests has been jointly developed between NWSSP and the HSCCE Programme Team and will enable Health Organisations to submit changes requests to the Strategic Plan to the HSCCE Project and Programme Boards. If approved the DCR Team will incorporate these changes into the reporting process.
- A review of the Quarter 1 DCR process has been shared with the HSCCE Programme Team, and an action plan to address the recommendations will be prepared by Feb-24.

## Recruitment

The position of Principal Environmental Facilities Advisor and Decarbonisation Subject Matter Expert has been filled by an internal candidate, and work is under way to recruit his replacement.

## Main Issues, Risks & 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 had been 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.

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



## 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 Information Management Systems
- Phase 4 - Implementation of GLN barcodes to unique locations
- Phase 5 - 100% of organisation locations have a compliant barcode label affixed

## Progress Update

Limited progress made as 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.

Consequently, Project has been paused with a review planned for end of Jan-24.

## 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 was discussed at the Oversight Group on 04 September 2023, but no immediate action was taken as the Chair of the Oversight Group is planned to transfer in Dec-23 and this is likely to sit within Mike Emery's (Chief Digital and Innovation Officer, Welsh Government) remit along with digital standards. This change is hoped to put the project in a better position to obtain a mandate from Welsh Government on the use of GLNs which is currently a blocker on the project's progress.

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 phase two and three has become more difficult. (Project Phase information displayed beneath). 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.

Project Name	Project Manager	Project Exec/SRO
<b>Wales General Ophthalmic Service - Primary Care Contract Reform</b>	Abi Shackson, Bethan Rees	Nicola Phillips

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

**Status** **Amber** (Overall) **Amber** (Time) **Amber** (Cost) **Amber** (Overall)

**Recent Gateway 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 for5 all parties.

## Progress Update

### Pathways

Pathways have been drafted by the National Clinical Leads and submitted for review by key stakeholders from NWSSP, Health Boards, and Optometry Wales in Dec-23. Documentation will be updated following feedback from key stakeholders and is scheduled to be approved by the WGOS (Wales General Ophthalmic Service) Workstream on 08 January 2024 and Project Board on 16 January 2024. Following approval, the pathways will be ready to be deployed within the Health Boards in time for the legislation coming into force on 31 March 2024.The Pathways currently being reviewed are:

- Referral Refinement Plan & Monitoring - Medical Retina
- Referral Refinement Plan & Monitoring - Glaucoma

- SPECS (School Pupil Eye Care Services)
- HCQ (Hydroxychloroquine) Monitoring.

## Communications

The Communications Plan is currently being updated and communications will be drafted for the pathway roll out in Mar-24. In addition, discussions are underway with Llais (Patient Group) to reach out to patients involved in changes to WGOS (Wales General Ophthalmic Service).

## Procurement

Requirements have been obtained for the collection of clinical waste from all Optician Practices in Wales. Procurement have obtained prices from Stericycle and further prices will be obtained in early Jan-24 for procurement of consumables in time for the WGOS (Wales General Ophthalmic Service) roll out for levels 3 & 4 at the end of Mar-24.

## IT

Funding has been secured to roll out Microsoft 365 to all Optician Practices within Wales. Project Managers from DHCW have commenced this project and it is scheduled for completion by the Aug-24. This will ensure that all Practices operate on a secure and safe network within NHS Wales.

## 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. A new project structure has also been agreed to enable the project team to complete tasks at pace. Response Action: Monitor all projects / programmes within NWSSP and wider NHS.
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. Response Action: Plan milestones & tasks effectively to maximise time. Focus on mandatory element of implementation & move resources accordingly.

Project Name	Project Manager	Project Exec/SRO		
Medical Examiner	Bethan Rees	Neil Frow		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective	To create a Medical Examiner Service model for Wales that: <ul style="list-style-type: none"><li>Is fit for purpose</li><li>Complies with standards set by the National Medical Examiner</li><li>Is sustainable and resilient</li><li>Represents value for money for NHS Wales</li><li>Meets the requirements of the Coroners &amp; Justice Act 2009.</li><li>Provides independence</li></ul>			
Progress Update				
Implementation	The Medical Examiner Service (MES) is ready to double capacity in Apr-24 to scrutinise Primary Care deaths prior to legislation coming into force in Apr-24. The Workforce and processes are in place; however the Service will need to adjust to the new workload in April.			
Regulations	Welsh Government have confirmed that the regulations were published in Dec-23. The Welsh Government Minister also made a statement for Wales in Dec-23, and interested parties can now view the regulations prior to Apr-24.			
Main Issues, Risks & Blockers				
Risks	The inability to retain staff could jeopardise service continuity.  Welsh Government have advised that new paper Medical Certificate Cause of Death (MCCD) forms will be implemented in Apr-24. This could create issues for the Medical Examiner Service (MES) who will be implementing the service within Primary Care at the same time. Action: Welsh Government to meet with NWSSP Primary Care Service to discuss further.  The following concerns have been noted but are outside the control and influence of NWSSP. These have been flagged with Welsh Government:			

1. There has been a low take up of GP Practices allowing the Medical Examiner Service (MES) to scrutinise Primary Care Deaths to date. GP Practices will be legislated for the Medical Examiner Service to scrutinise deaths from Apr-24. Action: Additional comms will be issued to GP Practices.
2. GP Practices have not allowed the Medical Examiner Service (MES) access to GP systems to enable the service access to medical records for scrutiny of cases. Action: Combined communications to be issued from service and DHCW (Digital Healthcare Wales).

Project Name	Project Manager	Project Exec/SRO		
Demographic Transformation	Gill Bailey	Ceri Evans		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
<p>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.</p> <p>Implementation of replacement functionality such as:</p> <ul style="list-style-type: none"><li>• Use of Welsh Demographic Service provided by Digital Health &amp; Care Wales (DHCW) – complete</li><li>• Implement replacement NHAIS local hardware hosting (legacy infrastructure) to ensure continuity of service up to and during transition - complete</li><li>• Implementation of alternative data extract provided by DHCW</li><li>• Implementation of in-house application known as 'Notify' that monitors the movement of medical records</li><li>• Implementation of Primary Care Registration Management System (PCRM) provided by NHS England (previously NHS Digital)</li><li>• De-commission NHAIS local boxes</li></ul>				
Progress Update				
<p>Patient Care Registration System:</p> <p>The transition to PCRM is dependent upon the implementation of Cervical Screening Management System (CSMS) in England due to be launched on 26 February 2024 although this is currently under some pressure. Wales is due to transition at the end of the roll-out programme anticipated to be Jun-24.</p> <p>NHSE planning workshop held on 29 November 2023. The intention for Wales to transition at the end of the roll-out remains the same, with the likelihood that a cross-border NHAIS box such as Gloucestershire/Cheshire will go live around mid-Apr 24. A further meeting is to be scheduled during Jan-24 to refine the implementation plan for Wales.</p> <p>In collaboration with NHSE, elaboration sessions are continuing to help PCS Users understand the new system and identify any gaps for NHS Wales.</p> <p>Data Feeds: Comparison of data is ongoing to provide assurance prior to implementing the change.; data to be retrieved from Welsh Demographic Service (WDS) provided by DHCW.</p> <p>Notify: The application (App) development has been completed and released to the test environment. Functionality and User test plans created with User Testing underway. Following a meeting with PCS and DHCW, options have been identified and assessed for the ongoing method of receiving the data feed from WDS. An options paper has been drafted and circulated for comment.</p> <p>Data retention: A task and finish group consisting of representatives from PCS, PPI, NHSE and DHCW has been established to progress with extracting and storing the historical data. Data has been extracted from all Welsh NHAIS boxes (5) and mapped in preparation for the final data extract.</p>				
Main Issues, Risks & Blockers				
<p>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.</p>				
PHW Dependency				
<p>The Breast Screening solution to be provided by PHW is on track to be delivered Feb-24. If the PHW project is drastically delayed or stopped preventing implementation before Wales transition to PCRM, it has been noted that the dual running</p>				



of NHAIS and PCRM is not an option. As soon as PCRM is live, the NHAIS boxes will effectively become 'dumb' terminals and will only contain static data that cannot be accurately updated/maintained.

The risk lies with PHW with the PHW project team member agreeing that the focus should remain on the development of the new Breast Screening solution with non-delivery perceived to be a low risk. This risk has been explained to Welsh Government during NWSSP most recent JET (Joint Exec Team) meeting.

Project Name	Project Manager	Project Exec/SRO		
L&R Case Management System implementation phase	Daniel Sinderby	Mark Harris		
Monthly Update (key/issues (blockages)/risks)				
Status	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.				
Progress Update				
The Legal and Risk Services (L&RS) team have been continuing to work with Procurement to finalise the tender specification and have been reviewing frameworks that Procurement have outlined; G-CLOUD, Back Office Software (BOS) and Virtual Application Solutions (VAS). Procurement leads have put together a briefing paper that has been sent to the Director of Procurement for approval, followed by submission to Welsh Government.				
The draft business case has been updated highlighting the available options assessed against the NWSSP Digital Strategy and will include the Financial Appraisal and Procurement Route information. This will then go through the required governance route for approval.				
Other work related to the Case Management System is still progressing with L&RS continuing to work with WAST to set them up on the L&RS database and Virtual Cabinet document management system.				
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.				

Project Name	Project Manager	Project Exec/SRO		
Procurement and Implementation of Wales Healthcare Student Hub	Bethan Rees	Darren Rees		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective	<ul style="list-style-type: none"><li>To provide contract continuity in a stable and secure IT environment for the contract extension period.</li><li>To procure a single IT solution for Student Services to:<ul style="list-style-type: none"><li>Deliver the highest quality Bursary &amp; Streamlining Service capable of adapting to changing demand.</li><li>Comply with standards.</li><li>Enhance the student journey.</li><li>Provide a single IT solution that is fit for the future.</li><li>Comply with IT security &amp; Welsh Government Cloud First Principles.</li></ul></li></ul>			
Progress Update				

## Student Streamlining

Final User Acceptance Testing for Student Streamlining is now underway and is scheduled for completion mid Jan-24. This activity will provide assurance for both services that the Hub will manage the journey from Student Awards into Streamlining.

The Student Streamlining Process (SSP) phase of the Student Hub is planned to go live for Students end Feb-24, for the March 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

### Risks

- There are currently no major risks >15.

### Issues

- There are currently no issues.

Project Name	Project Manager	Project Exec/SRO
Occupational Health Checks	Rhiann Iles	Rebecca Jarvis

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

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

**Recent Gateway**      No

### Review?

### Objective

NWSSP have the responsibility to contract and manage an Occupational Health system on behalf of NHS Wales. 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 closure phase with an anticipated closure date of w/c 29 January 2024 to coincide with project closure from the system supplier, Civica. All organisations are live and utilising the system. The following actions have been undertaken during this period to ensure the implementation of OPAS-G2, the solution/system, by Civica:

- Powys Teaching Health Board (PTHB) went live with the system on 29 November 2023.
- An additional training/support session was held on 12 December 2023 to answer any outstanding queries and provide a refresher session of certain areas of the system.
- A system has been put in place for organisations to gain access to their own data (as supplied by previous supplier Cority/Cohort) with a backup of the data held by NWSSP for the agreed retention period of 6 years.
- A list of outstanding actions have been collated and shared with Civica and will be monitored and updated over the next four weeks prior to full project closure.
- A lessons learned session was held with Stephen Steele, Services & Customer Support Director from Civica on 29 November 2023 where the list of outstanding actions was shared with a particular focus on the development of the system to facilitate the use of the system for organisations who use multiple Occupational Health Providers for staff recruitment. Subsequently, a Statement of Work was produced by Civica, which has been reviewed and shared back to Civica. The project team is now awaiting next steps for the development to commence.
- A formal change control notice process and register for any all Wales changes to the system is in its final draft and will be shared at the next All-Wales Occupational Health Group meeting.

Outstanding tasks will be added to the project plan and the focus of the next four weeks will be the completion of the closure documentation.

## Main Issues, Risks & Blockers

Issues with communication have been mitigated through regular meetings and the development of a working copy of outstanding tasks shared with Civica.

An issue highlighted in respect of a third-party supplier (Cronofy) used by Civica to support calendar functionality with OPAS-G2 remains. Further information has been shared with organisations to enable decisions to be made to progress access to this functionality. Conversations are ongoing.

Project Name	Project Manager	Project Exec/SRO
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Customer Contact Centre - Telephony and Contact Centre Solution	Will Brown	Andrew Evans		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective	Review and improve how our customers interact with NWSSP.			
Progress Update	The new telephony and contact centre contract has been awarded to the supplier 8 by 8 (8X8). The solution has been implemented by DHCW along with Hywel Dda University Health Board and NHS Wales Shared Service Partnership (NWSSP). 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 use of 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. 8x8 have built and tested the system. NWSSP have carried out User Acceptance Testing (UAT) with a group of Early Adopters from across the organisation. This period helped raise issues with the system; the majority of which were resolved quickly. The UAT is to be formally signed off on 15 January 2023. All identified users have been provided with training and are required to complete this in readiness to use the system by 12 January 2024. As part of this system change NWSSP will be moving to a new phone number range that will all begin with the prefix 02921. The new numbers will be ported across on the 26-28 January 2024. From 29 January 2024 all new service numbers will be live. Once this is completed there will be a period of monitoring, but the system will begin moving into business as usual (BAU).			
Main Issues, Risks & Blockers	There are two outstanding technical issues relating to Caller ID name and Teams Busy Status that are currently being resolved but there is a potential risk to the UAT sign-off date. These issues are being actioned by NWSSP, 8x8 and DHCW.			

Project Name	Project Manager	Project Exec/SRO		
NWSSP Electronic Prescription Service-EPS	Rhiann Iles	Andrew Evans		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway 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 NWSSP Primary Care Services (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 (TPOC) by Mar-23, this was delayed on 3 separate occasions by the Programme before being realised in November 2023.

## **Progress Update**

The project is live for the First of Type (FOT) site in Rhyl. Boots are the next supplier in the programme rollout and are currently within the test in test phase due to go live on 26 February 2024.

There has been a suggestion by DHCW regarding possibly reducing the Boots "Test in Live" phase from 4 weeks to 2 weeks, due to an issue with Waste Reduction, to keep to the original "Go Live" timescale, however, the NWSSP Project Team have rejected this proposal due to issues evidenced through the reduced "Test in Live" window for the FOT site.

The NWSSP Project Team will be focussing on residual tasks from FOT site as well as planning for the Boots rollout over the coming weeks. A new project plan has been formulated by NWSSP for rollout, covering the 3 project phases, First of Type, Early Adopters, and Business as Usual listed against specific areas within PCS. The plan format will be reviewed at the next Project Team meeting on 02 January 2024.

## **Project Status Summary:**

The following work packages have been **completed**:

## **Changes to the Message Handler / Inegration- Development of Internal Applications / Dispensing Tokens:**

The following work packages are **ongoing**:

**Assurance:** There have been no further issues with the FOT, Invatech, site in Rhyl. The next supplier in the EPS rollout is Boots, now in the "Test in Test" phase of programme assurance. Issues were identified on 30 November 2023 regarding messages sent from the spine to the MESH mailbox. These issues have now been resolved but the messages had to be resent due to a 5-day retention period for the claims to sit within the MESH before deletion. This resulted in a minor delay to testing. Witness testing has since been completed and a corresponding report sent to DHCW the same day the issues were resolved. The Project Team also raised with DHCW the disparity in both the number and type of claims that were sent through as part of testing, meaning that not all scenarios can yet be fully evidenced.

**Service Management:** A new Service Management lead within DHCW has been appointed and the Project Team are continuing to work with a wider group of stakeholders within DHCW to progress this workstream. Support for the first sites is in place and this work will be continued as the programme progresses.

**Cyber Security:** An issue was identified from the penetration testing carried out in Oct-23 in relation to the servers. Further exploration has been undertaken by NWSSP and DHCW and remediation work is scheduled for 08 January 2024. This risk has been logged by DHCW.

**NHSBSA- Memorandum of Understanding (MOU)-** The document has been completed and signed by Andrew Evans, Director PCS. The document is subject to sign off by NHSBSA Leadership Team and this is anticipated early Jan-24. The MOU covers Leaked Data, Misdirected Claims and Changes of Ownership (Pharmacy). The document is scheduled for final sign off by NHSBSA by the end of Jan-24.

**Golden Script:** The Project Team has been working with the Programme Team to complete the technical document, designed to detail the full end to end process. Several queries are still outstanding from NHS England. Whilst the queries are being explored, the Project Team are reviewing the document based on the current information provided and expect to return the document to the programme team within the next few weeks. The process, as detailed within the document was not followed for the TPOC site.

**Communication Strategy:** Various communications have been released around the "First of Type" sites and the communications teams from both organisations have been working together. Work is ongoing on NWSSP external and internal websites to ensure that the relevant information is ready for the next rollout (Boots). The timescale for this workstream has been altered accordingly.

**Smart Cards:** Continuing to support the current Live sites whilst working with DHCW to prepare the second First of Type (FOT) sites. Boots have had Apply for Care ID training and NWSSP are now waiting for the staff to be set up. Invitations to Apply for Care ID have also been sent to Plas Menai GP Practice and Camella Healthcare Gwynan Edwards Pharmacy (Invatech). DHCW are working with the GP Practice to analyse current clinical system roles so that NWSSP can create the correct positions for Role Based Access Control (RBAC) permissions for the smartcards for practice staff.

The new printers have successfully been installed at Cwmbran House and are working as expected. Next steps are to order the remaining number of printers to ensure the team are covered to print the expected numbers of Smartcards during the rollout.

The Registration Authority Policy legal concerns have been resolved with the policy looking to have final sign-off from Velindre through an Out of Board, Chair's action.

Work is progressing with the internal and external processes (linking in with DHCW Programme and PCMH teams), getting the training materials made available bilingually and understanding what communications are to be made available online.

## **Main Issues, Risks & Blockers**

The following issues and risks have been identified within the project environment and are listed below with mitigating actions.

1. Some potential legal concerns were raised with regards to the Registration Authority Policy when it was tabled at the Velindre Trust Board on the 30 November 2023, which led to it not getting final approval. NWSSP Primary Care Services and Legal & Risk Services have met with Velindre and agreed a way forward. It is anticipated that approval will now be sought prior to the next scheduled Board meeting to alleviate timescales pressures.
2. As detailed above, following penetration testing undertaken in Oct-23, DHCW have highlighted a further action in relation to a 'high vulnerability' issue involving encryption. The Project Team are working with NWSSP Informatics and DHCW to investigate and mitigate this issue.
3. There continues to be an unknown risk relating to the impact the introduction of ePrescribing will have on the PCS workforce, due to the processing efficiencies that will result. A draft Implementation Plan has been received from DHCW with proposed timescales, and this will be used to help quantify the impact as quickly as possible. Ongoing and regular communication with DHCW will help manage this going forward.
4. There is also a continual risk to PCS resource created by the work generated by the EPS Project, which is being run alongside running a live, business as usual, service. Bringing in additional team members would not help as the experience is required for both roles. A lack of capacity would put at risk the timeframes of the EPS Programme. There is no mitigation for this risk. Costs for PCS Staff undertaking EPS Programme work have been calculated and shared with DHCW with a view to recharge in the next financial year.

## Smartcard

### Issues

In relation to Smartcards, there is a PC linked directly to the Smartcard printer. It has been identified that Java updates will cause PC failure. In mitigation, it has been agreed that DHCW will run a script to restore settings as soon as an update has been deployed.

Project Name	Project Manager	Project Exec/SRO		
Mobile Phones	Abi Shackson	Mark Roscrow		
Monthly Update (key/issues (blockages)/risks)				
<u>Status</u>	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
<u>Recent Gateway Review?</u>	No			
<u>Objective</u>	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.			
<u>Progress Update</u>	Crown Commercial Services (CCS) Aggregation - The contract was counter signed by BT/EE. Contracts already with BT/EE sims were set to migrate w/c 18 December 2023.			
	HCS/ Mobile Device Management (MDM) - Costs for the new MDM service from BT/EE 'The Samsung Knox' were sent to procurement and Health Courier Services (HCS). The costs relating to the new service are higher than what is currently being paid with Vodaphone. The project team are now awaiting updated costs from Vodaphone so that they can be compared with the new BT/EE Samsung Knox costs.			
<u>Main Issues, Risks &amp; Blockers</u>	None identified over risk threshold			

Project Name	Project Manager	Project Exec/SRO		
Expansion of Legal Services to Primary Care	Gill Bailey	Daniela Mahapatra		
Monthly Update (key/issues (blockages)/risks)				
<b>Status</b>	<b>Green</b> (Overall)	<b>Green</b> (Time)	<b>Green</b> (Cost)	<b>Green</b> (Quality)
<b><u>Recent Gateway Review?</u></b>	No			
<b><u>Objective</u></b>				
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 e.g. 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**

Service offering drafted along with back-office processes such as internal account set-up and billing for clients (GP Practices). Web form designed for client to request support/advice.

Client Terms of Reference and Contract to be designed along with marketing strategy.

## **Main Issues, Risks & Blockers**

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.

Project Name	Project Manager	Project Exec/SRO
<b>Charnwood &amp; Companies House Accommodation</b>	Abi Shackson	Mark Roscrow

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

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

**Recent Gateway Review?**      No

## **Objective**

The objective of the project is to move from our current accommodation within Companies House and our existing Headquarters in Charnwood Court, to new accommodation located at the Cefn Coed business park, Nantgarw.

The move provides an opportunity to consolidate existing accommodation and also seek to improve the agile working environment for staff.

## **Progress Update**

The project has been rescoped to include the additional requirements which mean any new location must now include the relocation of Charnwood Court in addition to the original scope of Companies House. The has resulted in a new property search and identification of a new preferred option.

This decision was presented to NWSSP Senior Leadership Group in Nov-23 including the financial analysis of the new preferred option which is located in Cefn Coed business park, Nantgarw approximately 3/4 mile away from the existing Charnwood Court location.

This option remains the only preferred option suitable enough to accommodate both existing locations under the required the timescales and will be taken forward on a lease basis.

The project will seek to revise existing documentation in Jan-24 to include;

- Revised Project Initiation documentation.
- New Staff consultation and engagement.
- Accommodation design and layout.
- Plan and key milestones.

Currently the project timeline indicates potential move in timescales around Nov-24 but this is subject to other dependencies and further planning on design and layout which may bring this timeline forward slightly.

Other elements will also be revisited in relation to the exit strategies from Charnwood Court and Companies House to ensure exits are controlled.

## **Main Issues, Risks & Blockers**

A number of initial risks have been captured for review including;

- Site attendance numbers exceed available space. This can be mitigated through the use of booking apps to control space selection and usage and reduce the likelihood.



- Car Parking for 80 vehicles - Parking is available directly adjacent to the property but wider parking would need to be used as it currently is for visitors to Charnwood Court.
- Site Layout and design - This needs to be determined and finalised to allow formal proceeding to commence which support the current timescales. Failure to do so will mean the likelihood of a move in on or before Nov-24 at put at risk
- Workforce Demographics - With over 867staff impacted by the potential move it is imperative that consultation and impact to the workforce is modelled and understood.

Project Name	Project Manager	Project Exec/SRO		
National Stocked Product Range (NSPR) Catalogue Management Project	Will Brown	Sara Taylor		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	None (Cost)	Green (Quality)
Recent Gateway Review?	Yes			
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 assessed this data and were able to use the average figures to extrapolate and reassess the overall timescale. The project end-date has been revised accordingly, however as this is based on completion of a set amount of codes alignments per week this date will need to be continually revised.				
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.				
Main Issues, Risks & Blockers				
There is a risk to the project's timescale that the warehouses prioritise BAU rather than the project. As they have limited resource this often means that during busy periods no code alignments take place due to higher priority tasks. The project team are in close communication with the warehouses involved to try to mitigate this where possible, however sometimes this is unavoidable.				
This risk will not affect the overall completion of the project.				

Project Name	Project Manager	Project Exec/SRO
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<b>NWSSP Job Description Modernisation</b>	Rachel Pember	James Green Abigail Sheppard
<b>Monthly Update (key/issues (blockages)/risks)</b>		
<b>Status</b>	<b>Green</b> (Overall)	<b>Green</b> (Time)
		<b>Green</b> (Cost)
		<b>Green</b> (Quality)
<b>Recent Gateway Review?</b>	No	
<b>Objective</b>	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.	
<b>Progress Update</b>	Project on pause pending review end Jan-24.	
<b>Main Issues, Risks &amp; Blockers</b>	No risks or issues identified at this time.	

<b>Project Name</b>	<b>Project Manager</b>	<b>Project Exec/SRO</b>
<b>Leaders of the Future for NWSSP rising Stars</b>	Rachel Pember	Angela Voyle-Smith
<b>Monthly Update (key/issues (blockages)/risks)</b>		
<b>Status</b>	<b>Green</b> (Overall)	<b>None</b> (Quality)
<b>Recent Gateway Review?</b>		
<b>Objective</b>	The purpose of the project is to create and manage a Leadership development programme for Leaders of the Future For NWSSP' Rising Stars.	
	NWSSP is looking to develop & grow staff within the organisation, giving them the opportunity to step outside their current roles and take on a new initiative to develop their leadership skills.	
<b>Progress Update</b>	The Leadership development programme has been devised based on the success of the PCS STARS initiative. Information has been provided to Divisions setting out the basis of the programme.	
	An options paper was presented to NWSSP People & Organisational Development Senior Management Team identifying the different roll-out approaches. Following review, the recommended approach is that the roll-out will take place across all Divisions at the same time.	
	Information is currently being sought from each Division to identify an appropriate leadership initiative along with nominations.	
<b>Main Issues, Risks &amp; Blockers</b>	Issue:	
	<ul style="list-style-type: none"> <li>How will cross divisional movement of staff work as no funding available. Options and solutions currently being worked through.</li> </ul>	

<b>Project Name</b>	<b>Project Manager</b>	<b>Project Exec/SRO</b>
<b>Implementation of AW Translation Memory Software</b>	Rhiann Iles	Non Richards
<b>Monthly Update (key/issues (blockages)/risks)</b>		
<b>Status</b>	<b>Green</b> (Overall)	<b>Green</b> (Time)
		<b>Green</b> (Cost)
		<b>Green</b> (Quality)
<b>Recent Gateway Review?</b>	No	
<b>Objective</b>		

The procurement and implementation of Welsh Translation memory software for all participating Health Boards.

## Background:

NWSSP currently has a contract with Phrase Translation Memory software and supports the following organisations with translation services through a Service Level Agreement:

- NWSSP and hosted programmes
- VNHST
- PHW
- DHCW

The project purpose is to address the inconsistent approach to the use of Welsh Translation memory software across NHS Wales in line with 'More than just words' (Welsh Government Strategy).

## **Progress Update**

PMO received request to support on 20 November 2023 with Project Manager allocated to support from 04 December 2023.

The project is in the start-up phase. To date two meetings have taken place between Project Management Office (PMO) and the Welsh Language Manager, Non Angharad Richards. A scoping document has been completed and shared. The new system must be in place by Mar-26. The current contract for NWSSP is in the process of being extended until this time.

Over the coming months, the focus will be on establishing a baseline of current use and contractual agreements by organisations across NHS Wales and establishing buy in by organisations. To establish a baseline, a questionnaire has been developed and will be shared at a meeting with Welsh Translation Leads and Welsh Government on 17 January 2024 with a scheduled meeting with the project manager on 24 January 2024.

Milestones agreed- Production of a project plan by Q1 2024-25.

## **Main Issues, Risks & Blockers**

No issues presented at this stage of the project.

## Service Improvement Initiatives

Initiative Name	Service Improvement Lead	Service Improvement Sponsor
<b>Customer Service Excellence Yr 1</b>	Kim Eley	Neil Frow
<b>Monthly Update (key/issues (blockages)/ risks)</b>		
<p><b>Status</b> <span style="color: green;">Green</span> (Overall)</p> <p><b>Objective</b></p> <p>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.</p> <p><b>Progress Update</b></p> <p>NWSSP has successfully achieved the CSE accreditation and achieved the following outcomes:</p> <ul style="list-style-type: none"> <li>• 12 Compliance Pluses* (Exceeded the standards required)</li> <li>• 33 Compliances* (Met the standard required)</li> <li>• 2 Partial Compliances* (Areas of Improvement)</li> </ul> <p>*excluding Employment Services</p> <p>The CSE report demonstrates how many Compliance Plus/Areas of Strengths and Areas of Improvement/ Partial Compliance were received per division. There are occasions where the same feedback has been given against multiple points although these would only represent a single area of improvement.</p> <p>Divisions will be asked to provide an action plan against their recommended improvements, which will need to be in place before the Community of Practice Meeting in Feb-24. Lessons Learned will be reviewed prior to year 1 being closed.</p> <p><b>Main Issues, Risks &amp; Blockers</b></p> <p>None to report</p>		

Initiative Name	Service Improvement Lead	Service Improvement Sponsor
<b>Innovation Strategy</b>	Tim Knight	Alison Ramsey
<b>Monthly Update (key/issues (blockages)/ risks)</b>		
<p><b>Status</b> <span style="color: green;">Green</span> (Overall)</p> <p><b>Objective</b></p> <p>To deliver an innovation framework that can be adopted across the Organisation.</p> <p><b>Progress Update</b></p> <p>We have developed an Innovation Ecosystem which is supported by the innovation hub, these tools are underpinned by the Innovation principles and managed by the Innovation Community of Practice.</p> <p>The Innovation Hub has recently been rolled out to the Organisation through the Managing Director's update bulletin to all NWSSP staff, which was done following a pilot with 25% of the Organisation.</p> <p>We currently have over 15 Innovations in the early stages of the Innovation Pipeline. These are being progressed following initial innovator and key NWSSP stakeholder meetings.</p> <p>Through these innovations being raised, the Innovation team have been able to:</p> <ul style="list-style-type: none"> <li>• Refine the innovation process as it develops.</li> <li>• Refine the intranet site as it develops to support all users.</li> <li>• Develop processes for those staff who cannot access the intranet.</li> <li>• Continue with a phased approach to launching the hub.</li> <li>• Monitor resource requirements.</li> </ul> <p><b>Main Issues, Risks &amp; Blockers</b></p> <p>A lack of adoption by the Organisation and its divisions.</p> <p>We are currently working with the Microsoft 365 Centre of Excellence to automate elements of the backend process.</p>		

# PMO Dashboard Report

Initiative Name	Service Improvement Lead	Service Improvement Sponsor
Accounts Payable Process	Tim Knight, Niall Quilton	Andrew Butler
Monthly Update (key/issues (blockages)/ risks)		
<p><b>Status</b> <span style="color: green;">Green</span> (Overall)</p> <p><b>Objective</b></p> <p>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.</p> <p>Below are some key messages highlighted in the Accounts Payable April Performance Data 2023 slide deck.</p> <ul style="list-style-type: none"> <li>The invoice on hold (30 days+) position remains high, with 35,935 invoices on hold.</li> <li>We have over 531 invoices on hold across 6 organisations that are older than 01 April 2018. These require attention to see if they can be cancelled off Oracle due to their age - 5 years old</li> </ul> <p>In parallel, we will review the "No Purchase Order No Pay" invoices being reported, looking to reduce this figure also. It is hoped that these will reduce naturally as we look at the 30 day plus figure, though depending on where the data takes us, we might need to switch these to the primary focus.</p> <p>An increase to the number/percentage of invoices meeting the requirements of straight through processing metric will be a good indicator of improvement.</p> <p><b>Progress Update</b></p> <p>This Initiative has moved into an Improvement stage, with an Improvement teamworking together daily.</p> <p>We are focussing on invoices under £500 and that are older than 30 days, which represent 50% of the problem when you include those invoices that have a credit.</p> <p>This is being done on two fronts, one of which will be to work invoices on hold on an individual basis and the other to work with the data to identify any potential process improvements that will also deliver bulk releases or reductions.</p> <p>We have also spoken with Procurement and are looking to align our efforts, both avoiding duplication and maximising the opportunity for improvement. A response is expected during Jan-24 from procurement services as to how progress can be made.</p> <p>Additionally, we are starting to work through our list of potential improvements and looking to implement those that are both viable and that will deliver appropriate benefits. This is to include invoices that are marked as off statement and those that sit with a credit balance.</p> <p><b>Main Issues, Risks &amp; Blockers</b></p> <p>We are looking to gain an understanding of the average handling times for the 10 key entry points to invoices on hold, allowing us to gain a better understanding of the query teams potential clearance and impact.</p> <p>There is a risk that this will take longer than we expect or that the averages are not as accurate as we would like and is dependent on the quality of the information obtained/received.</p> <p>To mitigate this, we will work closely with the query teams to understand as and when we expect to be taking longer than the predicted average and then to identify the reason why, adjust any forecasted clearance as necessary.</p>		

Initiative Name	Service Improvement Lead	Service Improvement Sponsor
Needle and syringe supply chain	Rebecca Bowen	Nicola Phillips
Monthly Update (key/issues (blockages)/ risks)		
<p><b>Status</b> <span style="color: green;">Green</span> (Overall)</p> <p><b>Objective</b></p> <p>To review the Needles and Syringes supply chain specifically relating to those items that are ordered through and delivered to Mamhilad Stores, before being transported to the relevant GP surgeries.</p> <p>Currently there are two divisions being used to provide the same service, with items being transferred from IP5 to Mamhilad to be unloaded and then repacked before moving them on to the final destination.</p> <p><b>Progress Update</b></p>		

Progress has been limited due to scheduling availability, work priorities, delay in producing data needed and Health Board involvement.

There are three quick wins that have been identified between Service Improvement Team, PCS Mamhilad Stores and IP5 Newport, and a longer term solution.

1. Mid & West stores who operate out of Matrix House in Swansea, ordering its supply of needles & syringes from the Bridgend warehouse. This would enable a more productive flow process, eliminating Mamhilad Stores from the process.

Waiting for NWSSP supply chain to confirm available resources to facilitate the change.

2. Cardiff & Vale University Health Board (C&VUHB) ordering their needles and syringes direct from IP5 and being delivered direct from IP5. This again would enable a more productive flow process, eliminating Mamhilad Stores from the process and allowing GP practices to have one supplier for needles and syringes.

CVUHB have transport numbers already set up for GP Practices on Oracle, they already order clinical supplies and have them delivered by IP5. Waiting for supply chain to confirm implementation.

3. Potential Long-term solution

All GP practices ordering directly through IP5. PCS would receive prepacked orders with GP practice addresses attached. These prepacked orders would then be placed with the relevant GP Medical Record bags and delivered on the correct day.

Information is currently being sought on how GP practices can gain access to Oracle to order needle & syringes directly removing PCS from the process.

### Main Issues, Risks & Blockers

Issues with resource, capacity, and prioritisation within NWSSP Supply Chain have delayed implementation of the above changes. Communication is ongoing between Service Improvement Team and NWSSP Supply Chain to resolve.

### NON PMO Managed Initiatives

Key Individual Project/Programme Updates				
Project Name		Project Manager	Project Exec/SRO	
Radio Pharmacy		Peter Elliott	Neil Frow	
Monthly Update (key/issues (blockages)/risks)				
<b>Status</b>	Amber (Overall)	Amber (Time)	Green (Cost)	Green (Quality)
<b>Recent Gateway Review?</b>	No			
<b>Objective</b>				
To provide a new Radio pharmacy facility serving the South East region of Wales				
<b>Progress Update</b>				
The project has been established within the TRAMS Programme, managed by the South East Wales Project Board. An initial Business Case was prepared that analysed the investment options and recommended the IP5 Warehouse as the preferred site. This was submitted to Welsh Government in Nov-23, and fees have been awarded to develop the design. Outline design work for the South East Wales Hub will be carried out concurrently, to ensure fit, and that sufficient power and other utilities remain available.				
A tender process has been carried out for the cleanroom contractor, a preferred bidder selected, and contract awarding for design phase is in progress. A Project Surveyor and other key advisors and internal resources are also being appointed. User Requirements Documents have been prepared.				
It is currently expected that design and costing work will have progressed to the point that supports an Investment Decision during Quarter 1 of 2024/5. Total Project Costs are currently estimated at £9.4m.				
Main building activity is expected to be during Quarters 2 and 3 of 2024/5.				
Testing, validation, and regulatory approvals will follow in Quarter 4 of 2024/5.				
The best case for the new unit to be opened is Quarter 1 2025.				
Proceeding at this pace requires acceptance of certain risks, as set out in the following section. These are considered to be justified by urgent patient need and will be carefully managed and reported on.				

Project is rated Amber overall due to the time constraint, and the impact of this on risk management.

**Main Issues, Risks & Blockers**

The main risks and issues to the project are as follows:

- **Power supply** within IP5 is known to be a constraint. An assessment by NWSSP Specialist Estates has concluded that there is available margin of 1.0MVA for work. Current estimates are that the Radio pharmacy requires 0.4 MVA. Design work to refine these figures further is ongoing.
- **Planning Permission** will need to be sought, both for the change of use of the floor footprint, and for changes to the elevations for air intakes and vents, and for one additional external door. It is proposed to carry out a thorough pre-engagement with the planning authority prior to the Investment Decision, and then submit the planning application for consideration in parallel with the build. The planning advisor has been appointed. Based on the successful approval for the IP5 Labs built during COVID, it is believed that this approach should be viable. Nevertheless it is a risk that will be managed and reported on.
- **The IP5 Roof** remains a concern, with sporadic water leaks continuing to occur despite the recent remediation work. It is generally accepted that the whole roof will eventually need to be over clad at some point. The project has made cost provision for further short-term remediation works to the roof over the project area. The options for this will be analysed and reported on during the design phase.
- **Staffing** is probably the biggest risk to the project. The current staff at CVUHB are in a precarious position with their unit closed. Once the capital investment decision is made it is proposed to carry out a TUPE transfer of these staff to NWSSP, accompanied by their budget allocation, and the non-pay budget for the service. There remains a risk that before that can happen, the staff will seek alternative employments elsewhere, or be redeployed within the service to manage urgent pressures of one kind or another. When the new unit is ready to open, existing staff may not be available, and a recruitment and training process would then be needed.
- **The Revenue Budget** for the service is a financial risk. If the budget transferred from CAVUHB meets the cost of the new service all will be well. If it does not, then the issue will need to be remitted back to SSPC for consideration.
- **Streamlining of clinical demand** is needed to ensure service resilience over the next 15 months. To emphasise: this is not about limiting the number of patients scanned, but about clustering demand for similar scans on particular days of the week. The aim is to ensure 3 patients can be scanned from every 1 vial of radioactive product produced, which can be done on the same day in the same place, but not on separate days or in different places. This will also lay the foundations for a successful introduction of the new service for the South East when the new unit opens. NWSSP will be supporting this process with an impartial chair for the clinical group and Project Management resource.

Project Name	Project Manager	Project Exec/SRO
Once for Wales Concerns Management System	Maria Stolzenberg , Judith Lewis	Jonathan Webb

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

**Status** Green (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 Information Governance solutions including a Data Privacy Impact Assessment for every functionality have been established.

Compliance with the duty of candour has been built into the system workflows and a major work stream to support implementation of the duty on 1st April 2023 was established - with this moving to an ongoing support and development work stream as the duty takes effect. Interim solutions following the discontinuation of NRLS were established and a new portal functionality to transmit data from health bodies to the NHS Wales Executive has been designed and agreed for delivery in the autumn of 2023. All systems were successfully migrated from ADFS authentication to Azure (Entra) this was scheduled to be completed by December 2023 and was completed on time.

Phase 3 objectives are still in place for delivery by 31/03/24.

**Main Issues, Risks & Blockers**

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

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		Gareth Hardacre

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

Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			

Objective

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

Progress Update

The ESR Transformation Programme led by the NHS Business Service Authority [NHSBSA} continues through its procurement stage against the following timeline:

- final engagement event with longlisted bidders, prior to the submission of bids, took place Oct-23.
- submissions received from each of the longlisted bidders, as planned, on the 24 November 2024.
- evaluation of bids commenced as planned on 04 December 2023.
- moderation sessions planned for Jan–Mar-24.
- Workforce, Digital and Strategic representatives from NHS Wales are assisting with the evaluation and moderation of the supplier bids for their views and to assess the 'best fit for NHS Wales', as well as colleagues from NHS England, NHS BSA and third-party specialist assurance partners, as part of the overall ESR Transformation Programme governance structure.
- due to changes in circumstances further representation from Senior strategic Workforce and Organisational Development colleagues is currently being sought

Next Steps: Procurement Stage will move into Proof of Concept and negotiation stage from Apr-24 onwards.

In 2024, an **ESR Transformation Programme Governance Structure for Wales** will be required to ensure the programme remains actively aligned to national and local workforce and digital strategies. The membership of the group will span across workforce, finance and digital colleagues who will work collaboratively, thus ensuing delivery against agreed boundaries.

The purpose of the Steering Group will be to consider and validate the practical delivery requirements of the new solution at organisational level and/or rollout. This will include resource and funding capacity required to deliver the new solution and to steer and endorse the programmes communication and engagement strategy, ensuring an inclusive and business led engagement and adoption.

PMO support for the ESR Transformation Programme Steering Group will be provided by NWSSP; and meetings will commence Feb-24.

**Enabling Readiness –** The goal of 'enabling readiness' is to support organisations in reaching an optimal state in which the new solution can be adopted quickly and safely and to maximum benefit. As a baseline, the annual assessments have been undertaken, incorporating the NHSBSA 'Levels of Attainment'; the anticipated level each organisation is expected to reach prior to system migration. From the audits it was clear that some organisations would benefit from the adoption of additional functionality i.e. Applicant dashboard, Exit Questionnaire, Flexible Working, recording Conflict of Interest for example. However, they also identified the critical activities required to ensure NHS Wales is prepared to allow a smooth transition from the old to the new system. These are:

- Full adoption of Manager Self-Service activities
- Adoption of Establishment Control
- Accurate data quality
- Assurance of the Inter-Authority Transfer Process {assists transfer of data for individuals moving roles} led by NWSSP



## 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.

Project Name	Project Manager	Project Exec/SRO
Scan 4 Safety	Andrew Smallwood	Andy Smallwood

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

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

**Recent Gateway Review?** 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 across NHS Wales with a key milestone achieved this quarter with Cardiac Catheter Labs in Cardiff and Vale going live. All Health Boards are now extending the coverage of with scanning to some extent every month. Welsh Ambulance and Welsh Blood are in the pre-implementation phase and will be aiming to go live in Q4.

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 (H DUHB) has allowed Digital Health and Care Wales (DHCW) to test its extended use to other health organisations. The test environment has proved successful with links ready for all remaining Health Boards.

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 is now live following the go live of Cardiac Catheter Labs.

Aneurin Bevan servers were successfully migrated across to the Central infrastructure, removing the risks it was facing with the age of their local server and the end of Microsoft support. The migration also allowed ABUHB to upgrade to the latest version of SupplyX and as such plans to implement across Cardiology are well underway and go live due Q4

## 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 a alternatives are available, although not available for global use and each unique to its use. Welsh Government have recognised this and have suggested further work with DHCW is respect of developing a Welsh Health Circular to be issued. Initial meetings have taken place and draft documents created, currently being reviewed.

The Theatre environment in all health organisations remains highly pressured at present with staff sickness compounding pre-existing 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 H DUHB allows patient id to be brought up on the SupplyX handset, the barcode printed on the wristband is the hospital number not the NHS Number as required by the Programme. However, the feed from WPAS does allow SupplyX to use the hospital number so scanning product and patient is now live. Whilst this is good from a local efficiency perspective WHC (2015) 049 states that the NHS number should be the primary identifier for patients.

NWSSP will continue to work with DHCW in order to push for improved patient identifier direction from Welsh Government and aim for a new Welsh Circular to be issued in 2024.

Project Name	Project Manager	Project Exec/SRO
Health Roster Implementation		Rebecca Jarvis

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

Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
<b>Recent Gateway Review?</b>	No			
<b>Objective</b> 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).				
<b>Progress Update</b> <b>Health Roster</b> <ul style="list-style-type: none"> <li>23 units/ services agreed for rollout during 23-24.               <ul style="list-style-type: none"> <li>10 (43.5%) are live to payroll.</li> <li>1 (4.4%) withdrawn.</li> <li>4 (17.4%) on hold with engagement to recommence in Jan-24.</li> <li>8 (34.7%) outstanding. Rosters have been built for six with final data checks being complete before training commences. Two are in the data gathering stage.</li> </ul> </li> </ul> <p>NWSSP currently fund 1,100 licenses. As of the 30 November 2023, via Health roster and Bank we are utilising (480) licenses.</p> <p>An analysis of remaining services within NWSSP will be undertaken in Jan-24 to identify any areas with variable pay with the view of developing an implementation plan for 24-25.</p>				
<b>BankStaff</b> <ul style="list-style-type: none"> <li>Weekly bank pay is fully live and electronic.</li> <li>3 monthly paid staff remaining with a target of being fully live by the end of Jan-24.</li> <li>All (532) bank staff have Employee Online accounts to monitor their shifts.</li> </ul>				
<b>PHW</b> <ul style="list-style-type: none"> <li>Two early adopters are live to payroll with no pay issues raised in Nov-23 and Dec-23.</li> <li>3<sup>rd</sup> early adopter unit was unable to proceed with the roll out at this time.</li> <li>A new early adopter has been identified. Training to commence towards the end of Jan-24.</li> <li>Amending Pay Period Implemented (<i>pending formal agreement</i>) to a month in arrears for variable pay.</li> <li>Diabetic Eye Screening Wales within Public Health Wales who are not a pilot area, have expressed interest in the Health Roster system and a meeting has been schedule during Jan-24.</li> </ul>				
<b>Main Issues, Risks &amp; Blockers</b> Medical Examiner Service is on hold indefinitely. HCS Aneurin Bevan & ABU Laundry Transport are on hold due to a re-structure.				

 <b>GIG CYMRU NHS WALES</b>	Partneriaeth Cydwasaethau Shared Services Partnership	<b>AGENDA ITEM: 4.5</b> <b>18 January 2024</b>
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<b><i>The report is not Exempt</i></b>
<b>Teitl yr Adroddiad/Title of Report</b>
<b>NWSSP Corporate Risk Update – January 2024</b>

<b>ARWEINYDD: LEAD:</b>	Peter Stephenson Head of Finance & Business Development
<b>AWDUR: AUTHOR:</b>	Peter Stephenson Head of Finance & Business Development
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<b>Pwrpas yr Adroddiad: Purpose of the Report:</b>
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:	-

<b>Ymgynghoriad/Consultation:</b>
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.

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

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact
<b>Cyfreithiol: Legal:</b>	Not applicable
<b>Iechyd Poblogaeth: Population Health:</b>	No impact
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
<b>Ariannol: Financial:</b>	Not applicable
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> <b>Standard 1.1 Health Promotion, Protection and Improvement</b>
<b>Gweithlu: Workforce:</b>	No impact
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open. The information is disclosable under the Freedom of Information Act 2000.

## NWSSP CORPORATE RISK REGISTER UPDATE January 2024

### 1. INTRODUCTION

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

### 2. RISKS FOR ACTION

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

Current Risk Rating	January 2024
Red Risk	5
Amber Risk	10
Yellow Risk	1
Green Risk	0
<b>Total</b>	<b>16</b>

#### **2.1 Red-rated Risks**

The following red risks remain on the Corporate Risk Register:

- The threat to services if a suitable building is not found to house the TRAMs service in South-East Wales.
- The Brecon House roof at Mamhilad where there are serious issues with water ingress and falling masonry, making the building unsafe for staff;
- The impact on staff time and resources as a requirement of responding to the COVID 19 UK Public Inquiry;
- The planned industrial action by 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.

#### **2.2 New/Deleted Risks**

There have been no new risks added or risks deleted since the last meeting of the Committee.

### 3. RISKS FOR MONITORING

There are 10 risks that have reached their target score, and which are rated as follows:

Current Risk Rating	January 2024
Red Risk	0
Amber Risk	2
Yellow Risk	5
Green Risk	3
Total	10

4. RECOMMENDATION

The Committee is asked to:

- **NOTE** to the Corporate Risk Register as at January 2024.

## Corporate Risk Register

Ref	Risk Summary	Inherent Risk			Existing Controls & Mitigations	Current Risk			Further Action Required	Progress	Trend since last review	Target & Date
		Likelihood	Impact	Total Score		Likelihood	impact	Total Score				
Risks for Action												
A1	Lack of storage space across NWSSP due to increased demands on space linked to COVID and specific requirements for IP5	4	4	16	IP5 Board Additional facilities secured at Picketston Regular review at SLG Formal project for Companies House relocation	3	4	12	Review options for relocation from Companies House (Complete) Paper to December SLG on accommodation options (Complete)	The option to move to Cathays Park is no longer being pursued. The option of a move to Nantgarw 2 is now actively being investigated.	➡	31-Dec-23
	Strategic Objective - Service Development									Risk Lead: Programme Director		
A2	Risk of cyber attack exacerbated if NWSSP, or other NHS Wales organisations, run unsupported versions of software.	5	5	25	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) Increase size of team to manage mitigation of threat (Neil Jenkins 31/03/2024)	Heightened state of alert. Recent attack on Home Electronics System - although this is not hosted by NWSSP. Presentation to September SLG and October 2023 Audit Committee. Two additional staff at Band 6 recruited and should start in Q4.	➡	31-Mar-24
	Strategic Objective - Service Development									Risk Lead: Director of Planning, Performance & Informatics		
A3	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. Bi-monthly Recruitment Modernisation Project Boards	3	4	12	Payroll and Recruitment Update presented to SLG (Complete)	Good progress being made with the Recruitment Modernisation Programme. Update provided to Sept and Nov 23 SSPC. New systems in place within Student Awards and recent internal audit review awarded substantial assurance.	➡	31-Mar-24
	Strategic Objective - Customers									Risk Lead: Director of People and OD		
A4	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	3	3	9	Confirm WG required stock holding for PPE - currently 16 weeks (AB 31 Jan 2024) -	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 We are still awaiting the formal Ministerial advice on required stock levels but indiciative figures have been shared. Hopeful that there will now be a workshop hosted by WG before the end of January.	➡	30/11/2023
										Risk Lead: Director of Finance & Corporate Services		
A5	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	Industrial Action Planning Cell with WG & HBs	4	4	16	Currently in discussion with HBs around some key issues e.g. derogations etc and how we can help to manage these. (GH 31/03/24)	Ballot result was in favour of industrial action. 3-day walkout planned from 15 January.	➡	31/03/2024
	Strategic Objective - Staff									Risk Lead: Director of People and OD		
A6	Adverse publicity arising from the financial irregularities at BCUHB have a reputational impact on NWSSP.	4	4	16	All requests for information are channelled through a formal Communications route,	3	4	12	Ensure consistent and strategic responses to any information request concerning this issue (SLG - 31/07/23) complete Review Comms resource in the light of increased scrutiny (AB - 31/07/23) complete Provide support to any affected individuals (GH 31/07/23) complete	Recent meetings with BCUHB have been very positive.	⬇	31/03/2024
	Strategic Objective - Customers									Risk Lead: Director of People and OD		



A7	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	Undertatke Organisational Change Process 2 (Colin Powell - 31/03/24)	Update to July & September 2023 SSPC	➡	31/03/2024
	Escalated Divisional Risk								Risk Lead: Service Director			
A8	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 of 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 (AH 31/03/24)	Awaiting the allocation of year by year capital for the implementation of the short to medium term plan. Rationalisation of the service through closing the Hywel Dda Laundry approved by September 23 SSPC. Cwm Taff staff to also TUPE over to NWSSP.	➡	30/06/2024
	Strategic Objective - Service Development								Risk Lead: Director, Procurement Services			
A9	Financial restraints prevent recruiting sufficient staff to meet the expectations of Welsh Government and NHS Wales organisations in playing a leading role in delivering the decarbonisation agenda.	5	5	25	Decarbonisation Programme Board Project Execution Plan PMO Support	3	4	12		The financial postion across NHS Wales is leading to increasing demand from HBs/Trusts on the NWSSP team. Funding was sought for additional capacity in the team but this has been turned down.	➡	31/03/2024
	Strategic Objective - Service Development								Director, Specialist Estates Services			
A10	The move to agile working, and the relatively imminent expiry of a number of our property leases, require urgent agreement of an Accommodation Strategy.	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 Lease for Nantgarw HQ renegotiated and signed (AB Complete) Paper on alternative accommodation options taken to October SLG (MR 31/10/2023)	Nantgarw lease renegotiated. Obvious link to Risk A1. Update to SSPC (Nov 23) and SLG (Dec 23) on plans to move to Nantgarw 2.	➡	31/12/2023
	Strategic Objective - Staff								Director, Specialist Estates Services			
A11	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.	5	5	25	Majority of staff working from home. Health & Safety Reviews Structural Engineers appointed Temporary safety measures in place e.g. netting SSPC approved revised Business Case	3	5	15	Plan to vacate Companies House by 31/03/2024 - RAAC in self-contained area. SSPC and Trust Board approval of revised business case and for signing of Du Pont lease (AE complete) Lease for Du Pont agreed - signed by Velindre and now only requires signature of landlord (AE 31/12/2023)	Ove Arup in place for monitoring RAAC condition Cook & Arkwright appointed to mobilise contractors to intervene directly if required Revised Business Case approved by SSPC and Trust Board Nov 23. Planned timescale for exit from Brecon House slipping due to lengthy contract negotiation.	➡	31/12/2023
	Esclated Divisional Risk								Director, Primary Care Services			
A12	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	3	15	Decision taken to apply for Core Participany status for Module 5 (AB 30/11/23) Rule 9 request received for Module 5 - request extension for submission of evidence (complete)	Evidence now being requested for Module 5 and possibly also for Module 3.	⬆	31/03/2024
	Strategic Objective - Services								Director, Finance & Corporate Services			
A13	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	Meeting to discuss options for roof to be held on 22 January (GW)	Roof has been patched but specaillist surveyors recommend over cladding of roof which will be very expensive.	➡	30/06/2024
	Strategic Objective - Services								Director, Specialist Estates Services			
A14	The continued delay in locating suitable accommodation in South-East Wales for the TRAMS project threatens the supply of critical drugs to cancer patients	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	Explore options for accommodation in SE Wales (Colin Powell - 31/03/24)	Two potentially compliant sites shortlisted. Risk assessments completed with Chief Pharmacists. Update provided to September SSPC. Funding for Radio Pharmacy Unit in SE Wales agreed in principle by WG and business case approved at November SSPC.	➡	31/03/2024
	Strategic Objective - Services								Service Director TRAMs			
A15	The financial climate in NHS Wales poses significant threats to the delivery of existing services and the development of new 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 arrangemenrs implemented (aug 23)	➡	31/03/2024
	Strategic Objective - Services								Director, Finance & Corporate Services			
A16	The transfer of the laundries to NWSSP expose a number of risks including concerns over health and safety and formality of customer relationships.	4	4	16	Internal Audit review Laundry Programme Board Regular updates to SLG on progress with Action Plan	2	3	6	Appoint additional H&S resource to address problems and maintain progress in Laundry sites - recruitment in progress.	Risk Assessments have been undertaken at the laundries and good progress has been made in addressing the risks. An update is provide to each meeting of the Laundry Programme Board	➡	31/03/2024
	Strategic Objective - Service Development				Draft SLAs approved by SSPC				Risk Lead: Director of Procurement Services			
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 undertake 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. However SLG agreed (Nov 23) that level of stock and sensitivity of some items justifies this risk remaining on the Corporate Risk Register.	➔	
										<b>Risk Lead: Director Specialist Estates Services/Director of Finance and Corporate Services</b>		
M2	There is an increased fire risk with a consequence for protection of buildings at Alder House, Brecon House and Matrix House due to a lack of compartmentation in the roof space.	2	5	10	Fire Safety Officer Risk Assessment - assessed risk to life as low - Update Paper to Feb, May and November SMTs.	1	5	5	Discrete fire risk assessments undertaken for each site at the recommended intervals. Risk to remain on Corporate Risk Register to ensure sufficient monitoring.	Landlords consider any work on compartmentation to be our responsibility. SES reported to Nov 2020 SLT where it was agreed that the risk to life is very low.	➔	
										<b>Risk Lead: Director of People and OD</b>		
M3	Specific fraud risk relating to amendment of banking details for suppliers due to hacking of supplier e-mail accounts leading to payments being made to fraudsters	5	3	15	Documented process for bank mandate changes Role of Supplier Maintenance Team Authorisation by Senior Finance Staff Internal Audit Reviews	1	3	3	Spate of attacks (Apr 22) reinforces need to maintain current controls.	Further spate of attempted frauds in April/May 2022 (4) but all stopped by team. This has reinforced the need to maintain and possibly even strengthen existing controls.	➔	
										<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
M4	The Student Awards software is at end of life and needs replacement without which delays to student bursary payments could be significantly affected.	5	5	25	Formal project management in place	1	3	3	Phase 1 delivered by April 2023. (GH - 31 March 2023)	SAS contract support agreement with Kainos in place to end of March 2023. FBC approved by Welsh Govt 5/9/22 and funding agreed.	➔	
	<b>Strategic Objective - Customers</b>									<b>Risk Lead: Director of People and OD</b>		
M5	The threat of industrial action (both within the NHS and across other sectors) is likely to lead to staff shortages in both NWSSP and across NHS Wales impacting delivery of services	4	4	16	Good working relationship with Trade Union colleagues - presence on and updates to SLG. Business Continuity Plans and Arrangements - action cards updated Training provided by Legal & Risk	1	3	3	Continue to monitor impact through SLG (SLG 31 July 2023)	Pay award accepted. Current risk score reduced.	➔	
	<b>Strategic Objective - Staff</b>									<b>Risk Lead: Director of People and OD</b>		
M6	Suppliers, Staff or the general public committing fraud against NWSSP.	5	3	15	Dedicated NWSSP LCFS Counter Fraud Service Wales Internal Audit Audit Wales PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	2	3	6	Produce review of 1st year activity for NWSSP LCFS (PS/MW 30 June 2023) - COMPLETE	C&V UHB have withdrawn their 75 days p.a. support due to limited resource. Structure of NHS Wales Counter Fraud resource has been the subject of a recent independent review on behalf of DoFs (Nov 23)	➔	
	<b>Strategic Objective - Value For Money</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
M7	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.	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	Paper on energy costs to March SSPC, where approval was given for switch to CCS and establishment of the WEG and WEOG.	➔	
	<b>Strategic Objective - Value For Money</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
M8	The volatility in the energy market, due to the war in Ukraine, increases the reputational risk to NWSSP in its role in securing energy on behalf of NHS Wales.	5	5	25	Energy Price Risk Management Group Forward purchase of energy Briefings to Welsh Government	2	5	10	Restructure the EMRMG to establish the Welsh Energy Group and the Welsh Energy Operational Group. (AB 30/04/2023) - complete	Paper on energy costs to March SSPC, where approval was given for switch to CCS and establishment of the WEG and WEOG.	➔	
	<b>Strategic Objective - Value For Money</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
M9	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.	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.	1	5	5	Confirm funding for COVID- specific temporary posts from Welsh Government - this has been confirmed 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	➔	
	<b>Strategic Objective - Customers</b>									<b>Risk Lead: Director of People and OD</b>		
M10	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	1	4	4	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. The loss with the previous supplier has been provided for although efforts continue to reach a settlement.	➔	
	<b>Escalated Divisional Risk</b>									<b>Risk Lead: Director, Legal &amp; Risk Services</b>		

## **NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 8 – NOVEMBER 2023**

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for November 2023 and should be read in conjunction with the Monitoring Return tables submitted for Month 8.

Thank you for your email of 1<sup>st</sup> December 2023 responding to the Month 7 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 8 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.

Following the transfer to the provision of energy under the CCS framework from 1<sup>st</sup> October 2023, we have been working with NHS Wales Organisations to validate forecast information against the actual charges being invoiced. As previously anticipated, the forecasts provided by CCS appear to be higher than the charges now being invoiced by the new energy suppliers. We are awaiting the outcome of a validation exercise across all NHS Wales Organisations and aim to be able to provide an All Wales update for inclusion in the Month 9 monitoring returns (**Action Point 7.3**).

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. Where UHBs have provided us with actual data, we have progressed the recharge arrangements.

We have received updated laundry energy forecasts from the majority of UHBs. Based on these forecasts the value of the anticipated funding shortfall for laundries has been amended from £4.079m as included in our IMTP to £0.990m. This is obviously dependent upon the accuracy of the forecast and the actual costs that will be recharged. Welsh Government have confirmed that funding for the laundry energy pressure is included in the recently announced non-recurrent energy allocations provided to UHBs.

Table A has also been populated with the full year updated forecast of Covid expenditure and funding anticipated. This now includes the costs of the Medicine Stockpile SLA that we have been asked to include against the Covid budget.

Additional in year savings and income generation of £1.423m are included to Month 8 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 £1.600m distribution was approved at our September Shared Services Partnership Committee and both Directors and Deputy Directors of Finance have been made aware of Organisational shares. We will continue to review our forecast during December to identify the extent of any further savings that can be achieved to increase this distribution which, if confirmed, will be presented to the January Shared Services Partnership Committee.

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 marginally reduced from £677.647m as forecast in Month 7 to £677.425m in Month 8. This is primarily due to the amendments to the energy forecast and the updated SLE income forecast.
- 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. 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 and further increased in October with the payment of backdated Medical & Dental pay arrears to 1<sup>st</sup> April 2023.

- The SLE pay and non pay forecast has been updated following the pay award and arrears payments and now totals £258.964m (£259.482m Month 7) as detailed below:

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	18.472	17.452	18.268	18.145	19.935	20.120	26.518	20.783	20.942	20.942	20.942	20.942	243.462
NON PAY	1.080	1.179	1.072	1.045	1.362	1.306	1.270	1.827	1.269	1.269	1.269	1.556	15.502
TOTAL	19.552	18.631	19.341	19.190	21.297	21.426	27.788	22.610	22.211	22.211	22.211	22.498	258.964

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 £6.036m have been included which reconcile to both our November non-cash submission and the values included in Table E1
- £35.895m income and expenditure is included to Month 8 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.

Following a detailed review of our forecast at the beginning of December, there remains a large number of relatively high value cases that are due for settlement in Quarter 4 2023/24 and Quarter 1 2024/25. Due to the uncertainty in timings inherent in the claims process, these have the potential to either settle in 2023/24 or fall into next financial year. Due to this uncertainty we are maintaining our forecast outturn at £135.929m, with the continued assumption of £26.494m to be funded from NHS Wales Organisations under the risk sharing agreement (**Action Point 7.1**).

- The energy cost forecast has been reviewed in November and updated based on actual costs to date and the rates invoiced by the new energy suppliers against estimated volumes. Updated forecasts for the laundry energy costs from UHBs have also been included. This review has further reduced the total NWSSP energy forecast from the previous £4.676m to £3.580m. The laundry energy costs have also been profiled on a monthly

basis rather than the bi-annual reconciliation basis we had previously assumed within the forecast.

- Explanations for the highlighted variances in Table B1 are:
  - Welsh NHS LHB & Trust income – the reduction in the full year forecast is due to both the reduction in the laundry energy forecast and the updated SLE forecast.
  - 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 – the increase in the full year forecast income is due to the inclusion of the Medicines stockpile SLA and income for Health Pathways.
  - Pay – the full year forecast reduced due to a reduction in the forecast SLE pay costs
  - Non pay – the in month and full year forecast increase is primarily due to the net impact of the increase in the SLE non pay costs that incurred in Month 8 for GP trainee retention payments, reduced forecast energy costs and the inclusion of the Medicines stockpile and Health Pathway costs.
  - 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. The forecasts have been refreshed in Month 8 and now include £0.294m of expenditure for the Medicines stockpile SLA as requested by Welsh Government colleagues, with the year to date costs included in Month 8. A summary of the year to date and forecast expenditure is detailed below.

It should be noted that if funding for these Covid support services is not extended beyond 31<sup>st</sup> March 2024 then potential redundancy costs will be due to fixed term staff who have now obtained contractual rights due to the length of their fixed term employment. We are actively looking to redeploy the staff concerned, however it is likely that we will need to make a number of these staff redundant and will need to utilise current year funding. These costs have not been factored into the forecast below and could be in the region of £200k if redeployment is not possible.

Covid Costs	YTD M8	2023/24
	£m	£m
PPE Operational Costs	1.664	2.491
Social Care/Primary Care PPE	2.730	4.094
Mass Vacc - Pay & Non Pay (non PPE)	0.522	0.833
Lateral Flow Testing	0.091	0.136
Medicines Stockpile SLA	0.196	0.294
<b>TOTAL</b>	<b>5.202</b>	<b>7.847</b>

The Primary & Social Care PPE issues have been forecast based on a year to date expenditure average, however it should be noted that in Months 6 and 7 an increase in PPE expenditure above the value of previous months was reported although this reduced to expected levels in Month 8. Our forecast will require further refinement if PPE requests continue to increase or if we are required to provide additional services for any potential Covid waves during the winter.

We met with Welsh Government colleagues on 17<sup>th</sup> November 2023 to discuss a number of issues relating to PPE stockholding and service provision and some concerns we have regarding the revised stockholding levels for PPE requested by Welsh Government. We await a date in December/January for the planned PPE workshop to progress these queries further and understand the longer term stock holding requirements and the impact this will have on any stock provisions and write offs in this 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. The following amendments have been made in Month 8:

- The risk for the laundry energy pressure has reduced to £0.990m following receipt of updated forecasts from the majority of UHBs. The level of risk has also been reduced to 'low' following confirmation by Welsh Government that UHBs have been funded for the increased energy costs in 2023/24.
- The risk that our energy forecast is more than currently forecast has been reduced to £0.250m following a review of the actual energy costs being invoiced from the new suppliers.
- The risk of not receiving funding for the IP5 energy pressure of £0.286m and the IP5 loss of rental income pressure £0.244m have been removed in month as these can be covered non-recurrently from NWSSP savings in 2023/24. The pressure remains recurrently which we are flagging within our IMTP.
- The risk of the Foundational Economy income has been removed in month due to the costs incurred being recharged to Welsh Government, although we do not have a recurrent funding stream for these posts which remains a risk.
- The opportunity that activity reduces and additional staff costs are no longer required has been reduced to zero in month given the ongoing activity levels and the contracts for a number of temporary staff running until 31<sup>st</sup> March 2024 limiting our ability to avoid costs this financial year.

### **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)**

£0.091m of agency expenditure was reported in Month 8 which is an increase on the previous month. Agency staff were primarily utilised to cover Estates & Ancillary staff vacancies.

## **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 £1.423m to the end of November 2023, with a forecast overachievement of £1.600m. This aligns with the NWSSP savings return 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.

## **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. As noted in the risks section above, we have removed funding anticipated in 2023/24 for IP5 loss of income and energy pressures due to our forecast to cover these items from non-recurrent savings this financial year. The recurrent requirement for this funding remains and has been flagged as part of our IMTP planning process.

We have also removed the transitional TRAMS management structure income anticipated as we are able to cover this pressure from savings in 2023/24 due to the delay in appointing to these posts. The requirement for funding for these posts throughout the transitional phase remains a pressure that we have noted within our IMTP.

Foundational economy income has also been reduced to zero in month given funding for 2023/24 has been agreed and we are invoicing based on actual costs incurred. The funding stream for these posts has not been agreed recurrently.

£0.103m income continues to be anticipated for additional records storage costs we are incurring as a result of us no longer being able to cull medical records as a result of the Infected Blood Inquiry.

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

Not applicable for NWSSP.

**9. Statement of Financial Position and Aged Welsh NHS Debtors (Tables F & M)**

Table F is not completed by NWSSP.

At 31<sup>st</sup> October 2023 there were three NHS invoices outstanding over 17 weeks all of which have been paid or credited by the submission date. We continue to urgently chase the remaining invoices for payment and we are not aware of any issues that present an arbitration risk (**Action Point 7.2**)

**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 £4.504m that was issued on 27<sup>th</sup> November 2023.

To Month 8 we have incurred £1.359m capital expenditure and we have plans to ensure all funding is spent in full during the financial year. Due to an amendment to the Charnwood Court lease, to include an earlier break clause – if this is exercised before the end of the financial year we may need to amend the value of the IFRS16 funding required this 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.

Funding of £0.500m for exploratory fees for a Radiopharmacy facility at IP5 was added to our CEL in November. The funding letter noted this funding was available over 2023/24 and 2024/25 and it is unlikely that we will be able to fully utilise the full £0.500m in 2023/24. Early estimates suggest we could potentially incur expenditure up to £0.332m although this includes deposits for equipment that hasn't yet been approved. The risk against this scheme has been recorded as 'medium' due to the likelihood that we will be unable to spend the full allocation this financial year.

We met with WG capital colleagues in November regarding our estates rationalisation strategy. We noted that we are exploring alternative options to rationalise our accommodation even further than originally planned. If a relatively modest sum of capital funding could be made available to support the purchase of a combined Headquarters and South East Regional hub building, this would enable 7 leases to be terminated and recognise estimated revenue savings of circa £1m per year.

Due to the need for us to vacate Brecon House as a result of the existence of RAAC we urgently need to incur additional capital and revenue costs to facilitate the move. The capital requirement is £0.274m for new racking and IT infrastructure and we await an update on advice presented to the Minister to fund this racking and also additional racking at Denbigh stores.

### **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 8 and 9 Financial Monitoring Returns at the January meeting.

14. Authorisation of Return



.....  
**NEIL FROW**  
**MANAGING DIRECTOR**  
**NWSSP**

**12<sup>th</sup> December 2023**



.....  
**ANDY BUTLER**  
**DIRECTOR OF FINANCE &**  
**CORPORATE SERVICES**

## **NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 9 – DECEMBER 2023**

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for December 2023 and should be read in conjunction with the Monitoring Return tables submitted for Month 9.

Thank you for your email of 22<sup>nd</sup> December 2023 responding to the Month 8 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 9 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.

Following the transfer to the provision of energy under the CCS framework from 1<sup>st</sup> October 2023, we have been working with NHS Wales Organisations to validate forecast information against the actual charges being invoiced. An updated forecast was shared with NHS Wales colleagues on 8<sup>th</sup> January, which identified £5.787m of the previously identified £9.051m opportunity can be recognised, with a potential further £2.089m opportunity to be confirmed once we receive more detailed forecast information from EDF for electricity. The impact of the forecast changes across NHS Wales are detailed in the table below (**Action Point 8.2**).

	CCS (OCT-MAR) £m			HYBRID FORECAST (OCT-MAR) £m			POTENTIAL OPPORTUNITY £m			UPDATED FORECAST - JANUARY 2024 (PLEASE SEE ASSUMPTION NOTES) £m			MOVEMENT FROM PREVIOUS CCS FORECAST £m			POTENTIAL FURTHER OPPORTUNITY @ JANUARY 2024 £m		
	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL	Gas	Power	TOTAL
BCU	6.184	7.591	13.775	5.147	6.346	11.493	1.037	1.245	2.282	5.340	6.969	12.309	- 0.844	- 0.623	- 1.467	-	0.623	0.623
C&V	6.125	4.886	11.011	4.945	4.381	9.326	1.180	0.505	1.685	5.172	4.634	9.806	- 0.953	- 0.253	- 1.206	-	0.253	0.253
AB	5.015	5.641	10.656	4.141	5.258	9.399	0.874	0.383	1.257	4.345	5.450	9.795	- 0.670	- 0.192	- 0.862	-	0.192	0.192
CTM	3.310	4.489	7.799	2.710	3.819	6.529	0.600	0.670	1.270	2.885	4.154	7.039	- 0.425	- 0.335	- 0.760	-	0.335	0.335
SBU	3.756	4.588	8.344	3.242	4.152	7.394	0.514	0.436	0.950	3.540	4.370	7.910	- 0.216	- 0.218	- 0.434	-	0.218	0.218
HD	2.699	3.949	6.648	2.260	3.318	5.578	0.439	0.631	1.070	2.339	3.634	5.973	- 0.360	- 0.316	- 0.676	-	0.316	0.316
VELINDRE	0.263	0.868	1.131	0.221	0.799	1.020	0.042	0.069	0.111	0.228	0.834	1.062	- 0.035	- 0.035	- 0.070	-	0.035	0.035
POWYS	0.792	0.666	1.458	0.659	0.602	1.261	0.133	0.064	0.197	0.684	0.634	1.318	- 0.108	- 0.032	- 0.140	-	0.032	0.032
DHCW	0.005	0.099	0.104	0.004	0.089	0.093	0.001	0.010	0.011	0.004	0.094	0.098	- 0.001	- 0.005	- 0.006	-	0.005	0.005
WAST	0.208	0.479	0.687	0.189	0.446	0.635	0.019	0.033	0.052	0.183	0.463	0.646	- 0.025	- 0.017	- 0.042	-	0.017	0.017
PHW	0.029	0.148	0.177	0.025	0.119	0.144	0.004	0.029	0.033	0.026	0.134	0.160	- 0.003	- 0.015	- 0.018	-	0.015	0.015
HEIW	0.023	0.059	0.082	0.019	0.050	0.069	0.004	0.009	0.013	0.020	0.055	0.075	- 0.003	- 0.005	- 0.008	-	0.005	0.005
NWSSP	0.093	0.253	0.346	0.066	0.160	0.226	0.027	0.093	0.120	0.038	0.207	0.245	- 0.055	- 0.047	- 0.102	-	0.047	0.047
TOTAL	28.502	33.716	62.218	23.628	29.539	53.167	4.874	4.177	9.051	24.804	31.628	56.432	- 3.698	- 2.089	- 5.787	-	2.089	2.089

The energy budgets for the laundries, agreed as part of the transfer arrangements, were based on historic values. 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. Where UHBs have provided us with actual data, we have progressed the recharge arrangements.

No further forecast information for laundries has been received from UHBs in December so the value of the anticipated funding shortfall remains at £0.990m as reported in Month 8. This value is obviously dependent upon the accuracy of the forecast and the actual costs that will be recharged. Welsh Government have confirmed that funding for the laundry energy pressure is included in the 2023/24 energy allocations provided to UHBs.

Table A has also been populated with the full year updated forecast of Covid expenditure and funding anticipated. There has been no significant movement to the forecast this month.

Additional in year savings and income generation of £1.701m are included to Month 9. The full year forecast remains at £1.600m in 2023/24 which will be distributed to support the All Wales financial position, however we are likely to be able to increase this distribution once we have received confirmation of outstanding funding and reviewed the forecast position in January.

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 £677.425m as forecast in Month 8 to £678.545m in Month 9. This is primarily due to additional income for stores issues, international recruitment and certificates of sponsorship above that previously forecast.
- 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. 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 and further increased in October with the payment of backdated Medical & Dental pay arrears to 1<sup>st</sup> April 2023.

- The SLE pay and non pay forecast has been updated following the pay award and arrears payments and now totals £258.538m (£258.964m Month 8) as detailed below:

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	18.472	17.452	18.268	18.145	19.935	20.120	26.518	20.783	20.319	20.942	20.942	20.942	242.839
NON PAY	1.080	1.179	1.072	1.045	1.362	1.306	1.270	1.827	1.465	1.269	1.269	1.556	15.698
TOTAL	19.552	18.631	19.341	19.190	21.297	21.426	27.788	22.610	21.784	22.211	22.211	22.498	258.538

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 £6.036m have been included which reconcile to both our November non-cash submission and the values included in Table E1
- £64.848m income and expenditure is included to Month 9 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.

Following a detailed review of our forecast at the beginning of January, there remains a large number of relatively high value cases that are due for settlement in Quarter 4 2023/24 and Quarter 1 2024/25. Due to the uncertainty in timings inherent in the claims process, these have the potential to either settle in 2023/24 or fall into next financial year. Due to this uncertainty we are forecasting that the WRP will have an outturn of between £132.000m and £135.929m. Based on the continued assumption that this forecast is likely to be at the higher end of this range, the risk share contributions totalling £26.494m required from NHS Organisations are detailed below (**Action Point 8.1**).

	2023/24
	£
Aneurin Bevan Health Board	4,790,198
SBU Health Board	3,562,369
Betsi Cadwaladr Health Board	4,916,201
Cardiff & Vale University Health Board	4,246,968
CTM Health Board	4,005,958
Hywel Dda Health Board	2,769,214
Powys NHS Trust	1,095,377
Public Health Wales NHS Trust	308,635
Velindre NHS Trust	287,798
Welsh Ambulance Service NHS Trust	511,280
NHS Wales Shared Services Partnership	0
DHCW	0
HEIW	0
	<b>26,494,000</b>

- The energy cost forecast has been reviewed in December and updated based on actual costs to date and the rates invoiced by the new energy suppliers against estimated volumes. This has identified a small increase in the forecast from £3.580m to £3.610m and is due to an increase in warehouse utility costs in the winter months above those previously forecast.
- Explanations for the highlighted variances in Table B1 are:
  - Welsh NHS LHB & Trust income – the in month and full year forecast increases are due to the net effect of additional income for stores issues, international recruitment and certificates of sponsorship and a reduction in SLE income.
  - WG Income – the in month increase is due to the phasing of the income for the WRP to match the DEL expenditure incurred which was greater than forecast in month with no impact on the full year forecast.
  - Other income – the in month decrease is due to the phasing of the pharmacy rebate income with no impact on the full year forecast.
  - Pay – the in year and full year forecast primarily reduced due to a reduction in the Month 9 SLE pay costs
  - Non pay – the in month reduction is primarily due to the net impact of the pharmacy rebate phasing and the SLE, stores issues, certificates of sponsorship and international recruitment increases. With the exception of the pharmacy rebate rephasing the movement in the other items has caused the full year forecast increase.

- 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 service provision. Other covid expenditure relates to the NWSSP operational support costs (PPE management, storage and distribution) and PPE issues to Primary & Social Care. The forecasts have been refreshed in Month 9 with only minor amendments. A summary of the year to date and forecast expenditure is detailed below.

Covid Costs	YTD M9	2023/24
	£m	£m
PPE Operational Costs	1.762	2.384
Social Care/Primary Care PPE	2.998	3.997
Mass Vacc - Pay & Non Pay (non PPE)	0.600	0.833
Lateral Flow Testing	0.102	0.136
Medicines Stockpile SLA	0.221	0.294
<b>TOTAL</b>	<b>5.683</b>	<b>7.644</b>

The Primary & Social Care PPE issues have been forecast based on a year to date expenditure average, which after seeing a spike in expenditure in Months 6 and 7 has now returned to lower levels in Months 8 and 9. Our forecast will require further refinement if PPE requests increase again or if we are required to provide additional services for any potential Covid waves during the winter.

We met with Welsh Government colleagues on 17<sup>th</sup> November 2023 to discuss a number of issues relating to PPE stockholding and service provision and some concerns we have regarding the revised stockholding levels for PPE requested by Welsh Government. We await a date in January for the planned PPE workshop to progress these queries further and understand the longer term stock holding requirements and the impact this will have on any stock provisions and write offs in this financial year.

Our Month 8 return noted the potential redundancies for fixed term staff if Covid funding wasn't extended beyond 31<sup>st</sup> March 2024. We have now received confirmation of recurrent funding in our 2024/25 allocation letter which largely negates this risk (**Action Point 8.3**)

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. The following amendments have been made in Month 9:

- The risk for the laundry energy pressure has been removed following Welsh Government confirmation that UHBs are now funded for this pressure.
- The risk that our energy forecast is more than currently forecast has been reduced to £0.150m following a review of the actual energy costs being invoiced from the new suppliers.

## **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)**

£0.089m of agency expenditure was reported in Month 9 which is slight decrease on the previous month. Agency staff were primarily utilised to cover Estates & Ancillary staff vacancies.

**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 £1.701m to the end of December 2023. The forecast full year overachievement remains at £1.600m although we are looking to confirm an increase to this in January once we have received confirmation of outstanding funding allocations.

**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. As noted in Month 8 we have removed funding anticipated in 2023/24 for IP5 loss of income due to our forecast to cover this from non-recurrent savings this financial year. The recurrent requirement for this funding remains and has been flagged as part of our IMTP planning process.

We have also removed the transitional TRAMS management structure income anticipated as we are able to cover this pressure from savings in 2023/24 due to the delay in appointing to these posts. The requirement for funding for these posts throughout the transitional phase remains a pressure that we have noted within our IMTP.

£0.103m income continues to be anticipated for additional records storage costs we are incurring as a result of us no longer being able to cull medical records as a result of the Infected Blood Inquiry.

Our removal of IFRS16 Leases income has reduced to £0.906m in line with the updated forecast for the income recovery.

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

Not applicable for NWSSP.

**9. Statement of Financial Position and Aged Welsh NHS Debtors (Tables F & M)**

Table F is not completed by NWSSP.

At 31<sup>st</sup> December 2023 there were four NHS invoices outstanding over 17 weeks one of which has been credited by the submission date, however we are urgently progressing the other three for payment.

**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 £4.906m that was issued on 8<sup>th</sup> January 2024.

To Month 9 we have incurred £1.302m capital expenditure and we have plans to ensure all funding is spent in full during the financial year. Due to an amendment to the Charnwood Court lease, to include an earlier break clause – if this is exercised before the end of the financial year we may need to amend the value of the IFRS16 funding required this 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 through the remainder of the financial year.

Funding of £0.500m for exploratory fees for a Radiopharmacy facility at IP5 was added to our CEL in November. The funding letter noted this funding was available over 2023/24 and 2024/25 and it is unlikely that we will be able to fully

utilise the full £0.500m in 2023/24. Early estimates suggest we could potentially incur expenditure up to £0.332m although this includes deposits for equipment that hasn't yet been approved. The risk against this scheme has been recorded as 'medium' due to the likelihood that we will be unable to spend the full allocation this financial year.

We are finalising a list of capital schemes we could progress this financial year if additional capital funding is available to meet the submission deadline of midday on 12<sup>th</sup> January 2024.

### **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 8 and 9 Financial Monitoring Returns at the January meeting.

### **14. Authorisation of Return**



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**NEIL FROW**  
**MANAGING DIRECTOR**  
**NWSSP**



.....  
**ANDY BUTLER**  
**DIRECTOR OF FINANCE &**  
**CORPORATE SERVICES**

**11<sup>th</sup> January 2024**