

Shared Services Partnership Committee

Thu 19 January 2023, 10:00 - 12:00

TEAMS



Agenda

10:00 - 10:15 15 min **1. Agenda**

1.1. Welcome and Introductions

Tracy Myhill, Chair

1.2. Apologies for absence

Tracy Myhill, Chair

1.3. Declarations of Interest

Tracy Myhill, Chair


1.4. Draft minutes of meeting held on 22 September 2022

Tracy Myhill, Chair

 1.4 NWSSP Partnership Cttee Minutes 22.09.22.pdf (13 pages)

1.5. Action Log

Tracy Myhill, Chair

 1.5 Action Log January 2023.pdf (2 pages)


10:15 - 10:30 15 min **2. Chair/Managing Director's Reports**

2.1. Chair's Report

Tracy Myhill, Chair

2.1.1. Feedback on Development Day

Tracy Myhill, Chair

 2.1 SSPC - Development Session next steps FINAL.pdf (5 pages)

 Appendix A SSPC Event - Feedback.pdf (5 pages)

2.2. Managing Director's Update

Neil Frow, Managing Director

 2.2 SSPC MD Update January 23.pdf (9 pages)

10:30 - 11:15 45 min **3. Items for Approval/Endorsement**

3.1. IMTP

Alison Ramsey, Director. Planning, Performance & Informatics

- 📄 3.1 SSPC IMTP Cover.pdf (4 pages)

3.2. Digital Strategy

Neil Jenkins, Chief Digital Officer

- 📄 3.2 SSPC Digital Strategy.pdf (5 pages)
- 📄 3.2 Appendix 1 NWSSP Digital Strategy.pdf (29 pages)

3.3. Building Construction Frameworks

Andrew Waddington, Head of Building for Wales

- 📄 3.3 SSPC NHSBfW2 Framework Approval Jan 2023 FINAL.pdf (10 pages)

3.4. Risk Appetite Statement

Peter Stephenson, Head of Finance & Business Development

- 📄 3.4 SSPC Risk Appetite Cover.pdf (2 pages)
- 📄 3.4 NWSSP Risk Appetite Statement November 2022.pdf (4 pages)

11:15 - 11:45
30 min

4. Governance, Performance & Assurance

4.1. Finance Report

Andy Butler, Director of Finance & Corporate Services

- 📄 4.1 SSPC Finance Report December 2022.pdf (10 pages)

4.2. Performance Report

Alison Ramsey, Director, Planning, Performance & Informatics

- 📄 4.2 Jan 23 SSPC Performance Report Cover.pdf (2 pages)
- 📄 4.2 SSPC Performance Report Jan 23.pdf (12 pages)

4.3. PMO Highlight Report

Alison Ramsey, Director, Planning, Performance & Informatics

- 📄 4.3 PMO Bi Monthly Report Jan 23 Final.pdf (23 pages)

4.4. People & OD Report

Gareth Hardacre, Director of People & Organisational Development

- 📄 4.4 SSPC People and OD Report December 2022.pdf (8 pages)

4.5. Corporate Risk Register

Peter Stephenson, Head of Finance & Business Development

- 📄 4.5 Corporate Risk Register January 2023.pdf (5 pages)
- 📄 4.5 Corporate Risk Register 20230113.pdf (4 pages)

4.6. Health & Care Standards

Peter Stephenson, Head of Finance & Business Development

- 📄 4.6 SSPC -NWSSP Health and Care Standards.pdf (5 pages)
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5. Items for Information

5.1. TRAMs Update

Neil Frow, Managing Director

- 📄 5.1 TRAMS Report 10 01 2023.pdf (3 pages)

5.2. Counter Fraud Management Arrangements

Andy Butler, Director of Finance & Corporate Services

- 📄 5.2 Counter Fraud Management Arrangements.pdf (7 pages)

5.3. Annual Review

Peter Stephenson, Head of Finance & Business Development

5.4. Audit Committee Annual Report

Andy Butler, Director, Finance & Corporate Services

- 📄 5.4 NWSSP Audit Committee Annual Report 2021-22 .pdf (12 pages)

5.5. Audit Committee Assurance Report

Andy Butler, Director of Finance and Corporate Services

- 📄 5.5 SSPC Audit Committee Assurance Report.pdf (6 pages)

5.6. Counter Fraud Annual Report

Andy Butler, Director, Finance & Corporate Services

- 📄 5.6 SSP CF Annual Report 21-22 .pdf (12 pages)

5.7. WIBSS Annual Report

Alison Ramsey, Director, Planning, Performance & Informatics

- 📄 5.7 WIBSS ANNUAL REPORT 20212022.pdf (28 pages)

5.8. Welsh Language Annual Report

Peter Stephenson, Head of Finance & Business Development

- 📄 5.8 .FINAL Welsh Language Performance Report 2021.2022.pdf (15 pages)
- 📄 5.8 FINAL Welsh Language Performance Report 2021.2022 Cymru.pdf (15 pages)

5.9. IMTP Q2 Progress Report

Alison Ramsey, Director Planning, Performance and Informatics

- 📄 5.9 SSPC Q2 IMTP Cover Paper.pdf (2 pages)
- 📄 5.9 NWSSP IMTP Q2 Report Final (1).pdf (13 pages)

5.10. Finance Monitoring Returns

Andy Butler, Director of Corporate and Finance Services

- 📄 5.10 Monitoring Return Commentary Month 6 NWSSP 2022-23.pdf (9 pages)
 - 📄 5.10 Monitoring Return Commentary Month 7 NWSSP 2022-23.pdf (8 pages)
 - 📄 5.10 Monitoring Return Commentary Month 8 NWSSP 2022-23.pdf (7 pages)
 - 📄 5.10 Monitoring Return Commentary Month 9 NWSSP 2022-23.pdf (8 pages)
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11:55 - 12:00 **6. Any Other Business**
5 min

12:00 - 12:00 **7. Date and Time of Next Meeting**
0 min

Thursday, 23rd March 10am (Teams)

**NHS WALES SHARED SERVICES
PARTNERSHIP COMMITTEE**

**MINUTES OF MEETING HELD THURSDAY 22nd September 2022
10:00 – 11.30
Meeting held on TEAMS
Part A - Public**

ATTENDANCE		DESIGNATION	ORGANISATION
MEMBERS:			
Tracy Myhill	(TM)	Chair	NWSSP
Neil Frow	(NF)	Managing Director	NWSSP
Huw Thomas	(HT)	Director of Finance	Hywel Dda UHB
Catherine Phillips	(CP)	Director of Finance	C&VUHB
Claire Osmundsen-Little	(COL)	Director of Finance	DHCW
Rhiannon Beckett	(RB)	Interim Director of Finance and Corporate Services	HEIW
Pete Hopgood	(PH)	Director of Finance	Powys tHB
Debbie Eytayo	(DE)	Director of Workforce & Organisational Development	Swansea Bay UHB
Steve Ham	(SH)	Chief Executive	Velindre
Chris Turley	(CT)	Director of Finance	WAST
Matt Denham-Jones	(MDJ)	Deputy Director of Finance	Welsh Government
OTHER ATTENDEES:			
Rob Nolan	(RN)	Director of Finance	BCUHB
Helen Watkins	(HW)	Deputy Director of Workforce & Organisational Development	CTMUHB
Helen Bushell	(HB)	Board Secretary	PHW
Tanya Bull	(TB)	Trade Union Representative	UNISON
Andy Butler	(AB)	Director, Finance & Corporate Services	NWSSP
Gareth Hardacre	(GH)	Director, People & Organisational Development	NWSSP
Alison Ramsey	(AR)	Director, Planning, Performance & Informatics	NWSSP
Lindsay Payne	(LP)	Deputy Director, Finance & Corporate Services	NWSSP
Ruth Alcolado	(RA)	Medical Director	NWSSP
Peter Stephenson	(PS)	Head of Finance & Business Development	NWSSP
Olivia Angilly	(OA)	Graduate Finance Management Trainee	NWSSP

PRESENTERS:			
Eifion Williams	(EW)	Chair, Energy Price Risk Management Group	HEIW
Jonathan Irvine	(JI)	Director of Procurement and Health Courier Services	NWSSP
Sue Saunders	(SS)	Finance Business Partner - Legal & Risk	NWSSP
Angela Jones	(AJ)	Assistant ESR Programme Director	NWSSP

Item	Action
1.1	Welcome and Opening Remarks The Chair welcomed members to the September 2022 Shared Services Partnership Committee meeting.
1.2	Apologies Received From <ul style="list-style-type: none"> • Sarah Simmonds, Director of Workforce & OD, ABUHB • Sue Hill Executive Director of Finance BCWUHB – Rob Nolan deputising • Hywel Daniel Director of Workforce & OD CTMUHB – Helen Watkins deputising.
1.3	Declarations of Interest The Chair declared an interest in agenda items 4.1 and 4.2 as these relate to the process for her appraisal and the number of days that she is contracted to work. She advised that she would step out of the meeting for these items and that HT would chair this part of the agenda.
1.4	Minutes of Previous Meeting The minutes of the July meeting of the Committee were reviewed and approved.
1.5	Action Log The Chair was content that the Action Log provided a comprehensive update on the progress with each action.
1.6	<u>Matters Arising</u> Recruitment Update GH gave a verbal update on the position with the pre-employment checks software. The Home Office have announced that from 1 st October 2022 organisations will be able to use a certified Identification Document Verification Technology service provider to carry out digital identity checks on their behalf for those appointees who have an in-date UK or Irish Passport or Share Code. Those who do not meet these criteria will still require a face-to-face pre-employment check from

Item		Action
	<p>1st October 2022. Without this software, all appointees would require a face-to-face pre-employment check meeting from this date.</p> <p>NWSSP Recruitment Services have procured a service provider to enable digital identity checks for NHS Wales as part of the Recruitment Modernisation Programme, which will be implemented on 28th September 2022. This will improve the experience for appointees and also provide process efficiencies for NWSSP Recruitment Service and internal Health Board/Trust recruitment services such as Medical and Bank Recruitment, as most appointees will be able to complete their pre-employment checks via this route. NWSSP have agreed to fund this software for the first year for all organisations due to the benefits this will bring to NHS Wales.</p> <p>Student Awards Update</p> <p>GH also provided an update on the replacement of the Student Awards system which had been noted at the May Committee as the one project in the Programme Management Office Highlight Report as a red risk. He reported that good progress was now being made with the new system having received confirmation of funding from Welsh Government and upon conclusion of the procurement process he now expected the new system to be in place and fully operational by April 2023.</p> <p>RB emphasised that it would be helpful for HEIW to be kept in the loop to minimise any disruption to the payments process. GH confirmed that HEIW would be regularly made aware of all developments.</p> <p>The Committee NOTED the updates.</p>	
2. Deep Dive – Role of the Energy Price Risk Management Group		
	<p>Eifion Williams (EW), as Chair of the Energy Price Risk Management Group (EPRMG), introduced a deep dive into the work of the Group, focusing particularly on recent weeks and months due to the significant increase in energy prices.</p> <p>EW has chaired the EPRMG since it was set up in 2005. Prior to that electricity and gas was purchased on behalf of NHS Wales by an individual Procurement Officer who would purchase for the year ahead with little strategic input. The Group was established with</p>	

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	<p>representation from all NHS Wales organisations and a British Gas market specialist who provides an overview of the energy market at each meeting. Based on this, the Group considers its pricing strategy. Currently British Gas provide both electricity and gas to NHS Wales and there is an ability to purchase energy on a monthly or quarterly basis. The Group currently meets on a weekly basis to consider its purchasing strategy but in times of extreme volatility (e.g. when Russia first invaded Ukraine) it has met three times a week. Prices are monitored daily which enables tranches of volumes of energy to be secured when appropriate.</p> <p>EW demonstrated the current volatility in the market through a comparison of prices in the month of August for the last five years. Between 2018 and 2021 inclusive, the price being paid for gas by NHS Wales in each August was in the range of 39p to 44p a therm. In August 2022, the price per therm was 281p. The same comparison for electricity saw a range of £40 to £47 per megawatt hour and the price in August 2022 was £218. The price had been falling prior to the Ukraine conflict, and is also affected by the weather, the world economy outlook, and the price of oil. Although the price of energy is totally unpredictable, the forward purchasing strategy adopted by the EPRMG delivered savings of £33.8m for NHS Wales against the actual average daily cost of gas and electricity in 2021/22. It is also important to note that the prices quoted are the global prices on the energy markets which all suppliers use – you therefore don't get quoted different prices by different suppliers.</p> <p>The current contracts with British Gas end in March 2025 for electricity and March 2027 for gas. British Gas has given notice that it will not seek new commercial energy contracts but will fully support existing contracts. EW highlighted that whilst the EPRMG has served NHS Wales well there was a need to consider whether the current approach remains the best option for NHS Wales given the volatility in the energy market. It was noted that liaison is currently taking place with Crown Commercial Services to assess the options that they have available.</p> <p>Committee members emphasised the importance of this issue and thanked EW for the clarity of his presentation. There was discussion on whether additional external consultancy expertise was needed given the amounts that NHS Wales is likely to have to pay for energy going forward. AB mentioned that the recent announcement by the UK Government of the Energy Price Guarantee would require significant re-modelling of the figures. It</p>	

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	<p>was agreed that EW would come back to the Committee later in the year to provide an update on progress.</p> <p>The Committee NOTED the presentation.</p>	
3.	Chair and Managing Director Update	
3.1	<p><u>Chair's Update</u></p> <p>The main update was on the planned development sessions, where invites have been issued for Friday 11th November for a face-to-face meeting, probably in Cardiff. The Chair stressed the importance of attending and that if members cannot make this date that they nominate another Executive Director to attend in their place. The NWSSP Senior Leadership Group is holding their own sessions during September, to provide some initial reflections and ideas to inform the sessions. The indicative agenda will focus on where NWSSP will be in 2033, assessing where we feel NWSSP is now, identifying opportunities to improve and develop further, and taking a fresh look at our strategic objectives and overarching goals/outcomes. There will also be some discussion on our appetite for risk as a Committee.</p> <p>The Committee NOTED the update.</p>	
3.2	<p><u>Managing Director Update</u></p> <p>The Managing Director presented his report, which included the following updates on key issues:</p> <ul style="list-style-type: none"> • The CEO NHS Wales/DG Health and Social Care Group WG wrote in July confirming acceptance of NWSSP's IMTP, recognising the continued development and maturing of integrated planning within NWSSP and demonstrating the positive position that the organisation is in as we move from the pandemic towards recovery. The letter highlights the expectations on the Committee to effectively scrutinise the plan and to monitor progress throughout the year; • As part of the decarbonisation work the NWSSP Head of Operations – Procurement Services is currently working with Health Boards, Trusts, and Special Health Authorities, in reviewing fleet management arrangements with the purpose of defining a common set of data standards and management information. Specialist Estates Service is also supporting Health Boards in establishing a national infrastructure plan for electric vehicle charging. Health 	

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	<p>Boards have been approached to nominate representatives to sit on the various decarbonisation sub-groups that support the above agendas;</p> <ul style="list-style-type: none"> • The Payroll team within Employment Services are currently experiencing an exceptionally busy period responding to the implications of the recent pay rise and processing of pay arrears. This is in addition to implementing the changes to the pension tiers. • The NWSSP Medical Director, has been asked to work with health organisations to review how the Single Lead Employer rotational and recruitment processes can be further streamlined to improve overall experiences for the trainees; and • In terms of major projects, the Laundry and TrAMs projects are continuing but in the context of extreme limitations on available capital funding. In particular NWSSP were waiting for formal feedback from Welsh Government on the Laundry Outline Business Case Scrutiny Panel. <p>The Committee NOTED the update.</p>	
4.	Items for Approval/Endorsement	
4.1	<p>Chair’s Appraisal Process</p> <p>The Chair left the meeting and this item was chaired by Huw Thomas as there was potential for conflict of interest.</p> <p>GH introduced the paper setting out a formal process for the appraisal of the Chair. The management of the recruitment process for the Chair was the responsibility of the Director of People, OD & Employment Services as laid down in the Standing Orders. It is therefore proposed that the responsibility for managing the Annual Appraisal process will reside with the same postholder, who will co-ordinate the feedback and undertake the review itself with the Chair.</p> <p>The framework that is proposed, establishes a more standardised approach to the appraisal process, based on multiple stakeholder assessment from each member of the Partnership Committee; and is aligned with a set of core competencies for a NHS Chair that is suitable for use with the Chair of the Partnership Committee.</p> <p>Once all the feedback (which will be both confidential and anonymised) has been received, this will be compiled and</p>	

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	<p>correlated, in order to provide feedback for the Chair as an integral part of the process. This will enable a cross section of views and feedback to be provided to the Chair.</p> <p>The three key agreed objectives for this year against which performance is to be measured are those contained within the original role description laid down in the recruitment process as follows, in terms of their effectiveness in:</p> <ul style="list-style-type: none"> • Chairing SSPC meetings; • Establishing and ensuring adherence to the standards of good governance set for the NHS in Wales, ensuring that all SSPC business is conducted in accordance with these SSPC Standing Orders; and • Developing positive and professional relationships amongst the SSPC’s membership and between the SSPC and each Health Board, Trust, and Special Health Authority Board. <p>The feedback process will commence imminently so that it is able to be brought back to the November meeting.</p> <p>HB noted that in her organisation, the Chair was asked to undertake a self-assessment against their agreed objectives which GH will consider going forward. It was also clarified that the Chair’s role in NWSSP is appointed to by the Committee rather than being a ministerial appointment.</p> <p>The Committee APPROVED the standard framework within which annual appraisal for NWSSPC’s Chair is applied and managed.</p>	
4.2	<p>Chair’s Working Arrangements</p> <p>As in the item above, the Chair was not present in the meeting for this item due to a perceived conflict of interest and the item was chaired by Huw Thomas. Neil Frow provided a verbal update, stating that the Chair had been appointed on terms equating to 48 days per annum. It has become apparent that this is insufficient to do the role properly, and indeed similar conversations were being had with Margaret Foster, prior to her retirement from the role at the end of November 2021. Consideration is therefore being given to increasing the number of days to enable the role to be discharged effectively and it is considered that a minimum of 60 days annually would be required. Consideration has also been given to appointing a second independent member to provide cover for the Chair when she is unable to attend events. Questions were asked as to how this number of days compared to that of</p>	

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	<p>Chairs in similar-sized organisations and the reply was that it was consistent with comparable organisations elsewhere.</p> <p>Whilst there was support for the proposal, it was felt that these were two separate issues and a paper needed to be produced and formally considered to include comparison with other NHS Wales organisations.</p> <p>The Committee AGREED the proposal but requested sight of a formal paper which included comparisons to the arrangements for other NHS Wales Chairs.</p>	PS
4.3	<p>Procurement SLA</p> <p>The Chair reminded Committee members that the Service Level Agreements for 2022/23 had been agreed in the May meeting, but that the Procurement SLA was being brought back to reflect changes caused by the implementation of the new Operating Model.</p> <p>The Committee APPROVED the Procurement SLA.</p>	
4.4/4.5	<p>Provision of Digital Patient Pathways and Remote Advice and Guidance</p> <p>AB introduced this item which outlined the procurement for two separate contracts for which funding had already been secured and agreed by Welsh Government. Given the nature of the clinical digital elements of the contracts it was felt important to ensure that DHCW were clear on how they linked into the current strategy and processes.</p> <p>Following discussion the Committee NOTED the reports and ENDORSED both contracts. Further discussions would be needed with DHCW to ensure the digital elements were aligned to the national strategies.</p>	AB
4.6	<p>Welsh Risk Pool – Risk Sharing Agreement</p> <p>Sue Saunders, Finance Business Partner - Legal & Risk presented a paper setting out the risk sharing details for the current financial year. This paper had also been discussed and endorsed at the Welsh Risk Pool Committee on the previous day.</p>	

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	<p>The Welsh Risk Pool receives an annual funding stream to meet in year costs associated with settled claims, the Departmental Expenditure Limit (DEL). When expenditure rises above the DEL allocation, the excess is recouped from Health Boards and Trusts via a Risk Sharing Agreement approved by the Shared Services Partnership Committee. The core DEL allocation is currently £109.435M per annum for Clinical Negligence, Personal Injury and Redress claims. The 2022/23 IMTP DEL forecast is £134.780M and therefore the estimated Risk Share charge for 2022/23 is £25.345M. In 2021/22 this figure was £16.495m.</p> <p>The current Risk Share methodology was approved by the Welsh Risk Pool Committee and Directors of Finance in March 2017. The overarching principles are set out below:</p> <ul style="list-style-type: none"> • a risk-based contribution, based on size and activity levels; • a contribution based on paid claims experience over five years; and • a contribution based on known outstanding claims. <p>These principles have been translated into five specific measures and a weighting applied to each. This results in those organisations that can demonstrate learning and who have implemented strategies to lower risk weightings benefitting as their share of the overall total should be lower.</p> <p>Applying these measures to the forecast risk share for the current year has meant that although some Health Boards percentage share has reduced compared to last year, the expected 2022/23 monetary charge has increased for all, due to the substantial overall increase in the total charge to be apportioned.</p> <p>The paper will now be taken to the Deputy Directors of Finance Groups for further discussion. It was also agreed that the paper would be sent separately to all Committee members.</p> <p>The Committee NOTED the report and APPROVED the updated Risk Share charges to NHS Wales for 2022/23.</p>	PS
5.	Items for Noting	
5.1	<p>All-Wales Agency Audit</p> <p>Angela Jones, Assistant ESR Programme Director presented a paper on audit arrangements for agencies supplying nursing staff.</p>	

		Action
Item		
	<p>The Temporary Staffing Group is a workstream which reports directly to the National Nursing Workforce Group (NNWG). The Temporary Staffing Group is responsible for the award and monitoring of contracts for agency workers throughout Wales. The contract was awarded in March 2021 for a period of three years with an option to extend for a further year to February 2025. There are 146 agencies on contract and each agency is aware that failure to abide by the contract specification would result in their removal from the framework.</p> <p>Implementing appropriate audit measures is essential to ensure that all contracted agencies supplying nurses and health care support staff to NHS Wales uphold the conditions of the contract. Agency audits have typically been undertaken internally on an ad-hoc basis when issues arose rather than via a proactive approach linked to a planned audit programme. Following discussions at the Temporary Staffing Group it was agreed that a robust audit programme should be put in place and that various options to achieve this should be explored, including the use of external audit firms and the potential use of NWSSP Audit & Assurance Services.</p> <p>Due to external providers quotes being comparatively high, it was agreed that NWSSP's Audit and Assurance team would carry out the necessary audits providing an audit specification (All-Wales Agency Audit Checklist) was developed and utilised. A risk-based programme of audits will be undertaken focussing initially on the highest spend and highest usage providers. Usage data will be used to agree a priority list of agencies to be audited.</p> <p>It is anticipated that:</p> <ul style="list-style-type: none"> • 30 audits will be carried out per year; • Audit plans will be annually set out based on provider usage and spend; and • The audit plan will be discussed and created annually by the Temporary Staffing Group led by Procurement. <p>Based on 30 audits in the first year (2022/23), the total auditor time required would be 60 days at a cost of £19,870, amounting to less than £3k per Health Board.</p> <p>The Committee were supportive of this proposal and the only query was whether the proposed audit time was enough given the level of spend with agency suppliers. It was agreed that this would be</p>	

Item		Action
	<p>considered further but the point was also made that audits of suppliers can now be conducted once on an all-Wales basis rather than multiple times across Health Boards, thus delivering economies of scale.</p> <p>The Committee NOTED the Report and AGREED for NWSSP's Audit and Assurance team to carry out the necessary audits providing an audit specification (All-Wales Agency Audit Checklist) was developed and utilised.</p>	
6.	Governance, Performance and Assurance	
6.1	<p>Finance Report</p> <p>AB presented the finance report.</p> <p>NWSSP reported the Month 5 financial position. The year-to-date position includes a number of non-recurrent savings that will not continue at the same level during the financial year. Directorates are currently reviewing budgets with a view to accelerating initiatives to generate further benefits to NHS Wales and a potential increase in the distribution. The forecast outturn remains at break-even with the assumption of £4.985m of exceptional pressures funding from Welsh Government.</p> <p>The current Capital Expenditure Limit for 2022/23 is £1.947m. Funding for the Welsh Healthcare Student Hub (Student Bursary and Streamlining) was approved in early September. Capital expenditure to Month 5 is £0.366m and plans are in place to fully utilise all available capital funding. A priority list of capital projects is being prepared that we could expedite if additional funding becomes available later in the financial year. Since the transfer of the All-Wales Laundry Service in 2021/22 there is increased pressure on the discretionary capital allocation as this was not increased following the transfer of the new Service</p> <p>The Committee NOTED the:</p> <ol style="list-style-type: none"> 1. Financial position to 31st August 2022 including the financial risks from anticipated funding. 2. Forecast financial position for 2022/23 including the financial risks from anticipated funding. 3. Achievement to date against key financial targets. 4. The content of this update and seek further information if required. 	

Item		Action
<p>6.2</p>	<p>Performance Report</p> <p>AR introduced the report.</p> <p>The report is generally positive with only six KPIs not meeting target. The area of concern remains Recruitment although there was some improvement in performance during August. Committee members were asked to share with their colleagues that prior notice of local recruitment plans is very helpful in enabling NWSSP to adapt demand and capacity to meet peaks in demand. There was also a short-term issue with Payroll call handling in August because of increases in activity driven by the new Doctor intake and rotation, and this was not helped by the loss of phone systems for a few hours. Peaks in demand are also anticipated in September because of the payment of pay award arrears and again in October because of the pension changes. The Quarter Two individual Performance Reports will be issued at the end of October.</p> <p>The Committee NOTED the report and in particular:</p> <ol style="list-style-type: none"> 1. The significant level of professional influence benefits generated by NWSSP to 31st August 2022. 2. The performance against the high-level key performance indicators to 31st August 2022. 3. The ongoing work to develop outcome measures during 2022-2023. 	
<p>6.3</p>	<p>PMO Highlight Report</p> <p>AR presented the report.</p> <p>The only item of concern is the Legal & Risk Case Management system replacement where a current dispute with the supplier has led to the project being temporarily halted. Contingency arrangements are in place to ensure that there is no risk to the continuity of services. A question was raised as to whether projects not covered by the PMO (e.g. the Once for Wales Concerns Management System) should be included in the report. This will be included going forward. It was also suggested that a separate and more detailed briefing on the TrAMs programme would be helpful – this will be issued in December.</p> <p>The Committee NOTED the report and the specific progress with key projects.</p>	<p>AR</p> <p>NF</p>

		Action
6.4	<p>People & Organisational Development Report</p> <p>The report was considered. The Chair commented on the overall PADR compliance rate of 85% which is positive, and specifically the increase within the Laundry Service where really good progress has been made.</p> <p>The Committee NOTED the report.</p>	
6.5	<p>Corporate Risk Register</p> <p>The Corporate Risk Register was presented and it was noted that a risk relating to the threat of industrial action had been added.</p> <p>The Committee NOTED the Corporate Risk Register.</p>	
7.	<p>Items for Information</p> <p>The following papers were provided for information:</p> <ul style="list-style-type: none"> • Disposal of Surplus Beds to Moldova; • Audit Committee Assurance Report; • Welsh Risk Pool Annual Report 2021/22; and • Finance Monitoring Returns (Months 4 and 5). 	
8.	There were no other items of business.	
<p>DATE OF NEXT MEETING: Thursday, 19th January from 10:00-12:00 Via Teams</p>		

Item 1.5

ACTION LOG

SHARED SERVICES PARTNERSHIP COMMITTEE

UPDATE FOR 19 JANUARY 2023 MEETING

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS JANUARY 2023
1.	2022/01/3.1	January 2022	Integrated Medium Term Plan Management of assurance arrangements, including Counter-Fraud to be reviewed.	SC/AB	November 2022	Complete A paper was taken to the Counter Fraud Steering Group for discussion in October. Following this an updated paper was taken to DoFs who supported further work being undertaken to progress this issue. The DoFs paper is included on the agenda for information.
2.	2022/05/1.4	May 2022	Minutes of Previous Meeting The Committee approved the proposed action to explore the provision of an all-Wales Lease Car Salary Sacrifice Service.	AB	November 2022	Complete Meeting held with NHS Fleet Solutions and the Lease Car Scheme has now been made available to all NHS Wales organisations.
3.	2022/09/4.2	September 2022	Chair's Working Arrangements A formal paper would be brought to the November Committee following the discussion in the September meeting of this item.	NF/GH	November 2022	On Agenda
4.	2022/09/4.4	September	Provision of Digital Patient Pathways and	AB	November	Complete

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS JANUARY 2023
		2022	Remote Advice and Guidance AB agreed to discuss these contracts further with COL outside of the meeting.		2022	
5.	2022/09/4.6	September 2022	Welsh Risk Pool – Risk Sharing Agreement PS to circulate the paper separately after the meeting.	PS	November 2022	Complete
6.	2022/09/6.3	September 2022	PMO Highlight Report AR to include reference to large-scale projects not covered by PMO in the report.	AR	November 2022	Complete
7.	2022/09/6.3	September 2022	PMO Highlight Report A separate and more detailed update on TrAMS to be produced and shared with members.	NF	November 2022	On Agenda



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CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

MEETING	NWSSP Partnership Committee
DATE	19 January 2023
AGENDA ITEM	2.1
PREPARED BY	Alison Ramsey Director of Planning, Performance, and Informatics
PRESENTED BY	Tracy Myhill Chair
RESPONSIBLE HEAD OF SERVICE	Tracy Myhill Chair

Follow up to SSPC Development Session on 11 November 2022

PURPOSE OF REPORT

To summarise the key outputs and outcomes from the Development Session held on 11 November 2022; and to agree next steps

1. BACKGROUND

In September 2022 the NWSSP Senior Leadership Group (SLG) ran two development sessions to consider our appetite to risk, our strengths, weaknesses, threats, and opportunities (SWOT) and our extant Strategy Map.

In November 2022, the NWSSP Partnership Committee members held a development session with the SLG, where some of these themes were presented and discussed.

It was clear that there was appetite amongst the SLG and SSPC members to make appropriate changes now as part of the 2023-26 IMTP process and to run further sessions together as part of a more regular programme of engagement and shared learning.

2. Feedback from the Development Session

Appendix A collates the feedback from the Development Session held on 22 November 2022. This, together with the positive social media posts from several colleagues, clearly shows that the session was an effective use of time and lots of enthusiasm to collaborate more across NHS Wales. There was a 'buzz' in the room and a real value in a face-to-face meeting that cannot always be achieved through virtual meetings.

A summary of the output from the 'I like, I wish, What if' exercise we completed on the day is set out below:

I like	I wish	What if
Good People	More consistency in the design of national services	Develop consultancy services for NHS Wales and wider public service
Breadth of services	Challenge back more often where an All-Wales solution or prompt action is required	Offer programme and project support services – acting as an agency/consultancy
Expertise	Take the lead more often	Work with HEIW on working planning, productivity data etc
Responsive	Make better use of the data NWSSP holds	Deliver services across the public sector not just NHS
Trusted to deliver	More responsive and accessible customer interface to our systems	Provide services into social care including recruitment
Being part of the NHS	Have more influence over the digital agenda	Expand into income generation
Collaborative	Be brilliant on the basics	Move more into professional and advisory work and away from operational delivery
An All-Wales perspective	Promote what NWSSP does and increase visibility	Greater system leadership on decarbonisation and sustainability
An All-Wales approach	Take direct feedback from end users on our processes	Do more for NHS Wales on workforce retention not just recruitment
Good practice	More time to develop the longer-term plan	Develop a talent pipeline for roles within NWSSP – from local communities
Economies of scale	Review the funding model to meet increasing demands	Enhance approach to innovation and R&D

We would propose to hold at least two face-to-face Development Sessions in 2023-24.

- The first session to be in Quarter 1 to build further on the 'What if' analysis and continue our longer-term goals and 10-year Roadmap discussion from our last session.
- The second session to be in Quarter 3 to support the development of the annual IMTP process and additional topic areas.

Drawing out the suggestions from our last event, potential future topic areas for inclusion include:

- Practical ways to strengthen the partnership approach
- What more could NWSSP be doing in collaboration with others to support NHS Wales, primary and social care
- Creating a more well-defined approach to innovation
- Cultivating appropriate partnerships with industry and academic institutions
- Defining our appetite for growth and how we prioritise suggestions for taking forward new services

3. Proactive engagement with our partners

Our SLG discussed how we can be more proactive with our partners in our December meeting and propose the following way forward:

- To share the outputs from the 'I like, and I wish' session with our Heads of Service that they can take on board and address with their operational lead peers within your NHS organisations.

The concept of a lead engagement Director for every partner organisation was also put forward. The purpose of this role would be to:

- Act as a named point of contact for the NHS organisation and develop an understanding of local priorities and how these align with national priorities.
- Meet at least twice a year with the NHS partnership committee member.

The intention would be for this role and engagement to complement and not replace the regular organisational performance meetings that take place with the Director of Finance, Director of Workforce and OD and the Managing Director. These meetings would be scheduled bi-annually (twice a year) with the respective Directors in the partner

organisation, usually the Director of Finance and Director of Workforce and OD.

The NWSSP Managing Director and Chair to still attend local Board development session annually to highlight the work of NWSSP and to engage with local Board members on what we can do differently or what more we can do to help support NHS organisations.

SLG would welcome any additional reflections on the benefits of this approach and how it would work in practice within our partners' own organisations.

4. Changes to the NWSSP Strategy Map, risk appetite and outcomes

Following the engagement session on our future strategy, SLG endorsed several changes to our Strategy Map at our meeting on 16 December 2022. These have been incorporated into the Integrated Medium-Term Plan for 2023-26 which is covered in more detail on today's agenda.

The main points are summarised below:

- To amend slightly the NWSSP Strapline to ***Delivering Value, Innovation and Excellence through Partnership.***
- To revise the NWSSP Strategic Objectives to:

1. Our People - Working together to be the best that we can be

The steer from SSPC was that this should be focused on our people in the main i.e., our own staff.

2. Our Services - Driving the pace of innovation, and consistently providing high quality services

There was a strong view amongst some SSPC members that we should focus on quality, innovation, and consistency.

3. Our Value - Maximising the benefit, efficiency, and social impact of what we do for our partners

There was a clear view that value should be as broad as possible in its definition to incorporate qualitative benefits and social impact. And not just cash releasing savings.

There was also acknowledgement that we need to invest in our own services by generating efficiencies to enable our support to others.

Following the discussion on **risk appetite** at the SSPC event, we were encouraged to be bolder and more targeted in the language we were using to define our proposed outcomes under each of the Strategic Objective headings.

We have incorporated this feedback into the NWSSP Strategy Map and IMTP document.

Richard Phillips, NWSSP Performance Manager is in the process of establishing the NWSSP Performance and Outcomes Group which will start to meet from January 2023. The intention is that this group develops a set of measures for the new outcomes that are both quantitative and qualitative. It is unlikely that this work will be fully completed in time for submission of the IMTP; but would have the aim to be agreed in principle by SLG in March 2023, and then discussed further with SSPC.

In conclusion SLG endorsed the changes to the Strategy Map, recognising that we will keep it under review as planned work on outcome measures is taken forward.

3. RECOMMENDATION

SSPC members are asked to:

1. Consider and endorse the proposal to hold two face-to-face development sessions in 2023-24.
2. Share with Alison Ramsey Director of Planning, Performance, and Informatics any additional suggestions for topics to include on those agendas.
3. Consider and endorse the proposal for proactive engagement with our partners from 2023-24.
4. Note the summary of changes to be made to the NWSSP Strategy Map, and that this will be discussed in more details as part of the IMTP paper.

SSPC Development Session

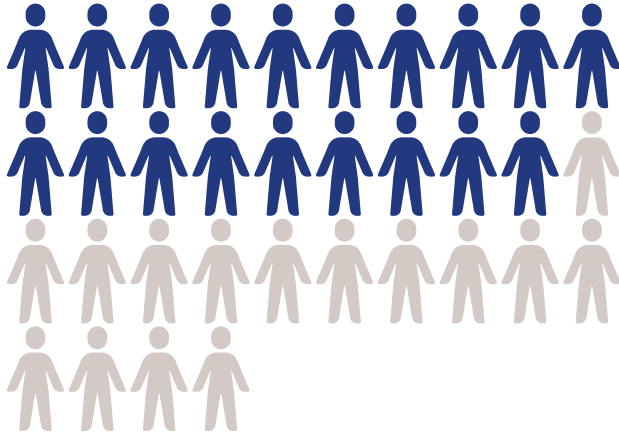
Friday 11th November 2022

Reflections 3,2, 1
Feedback



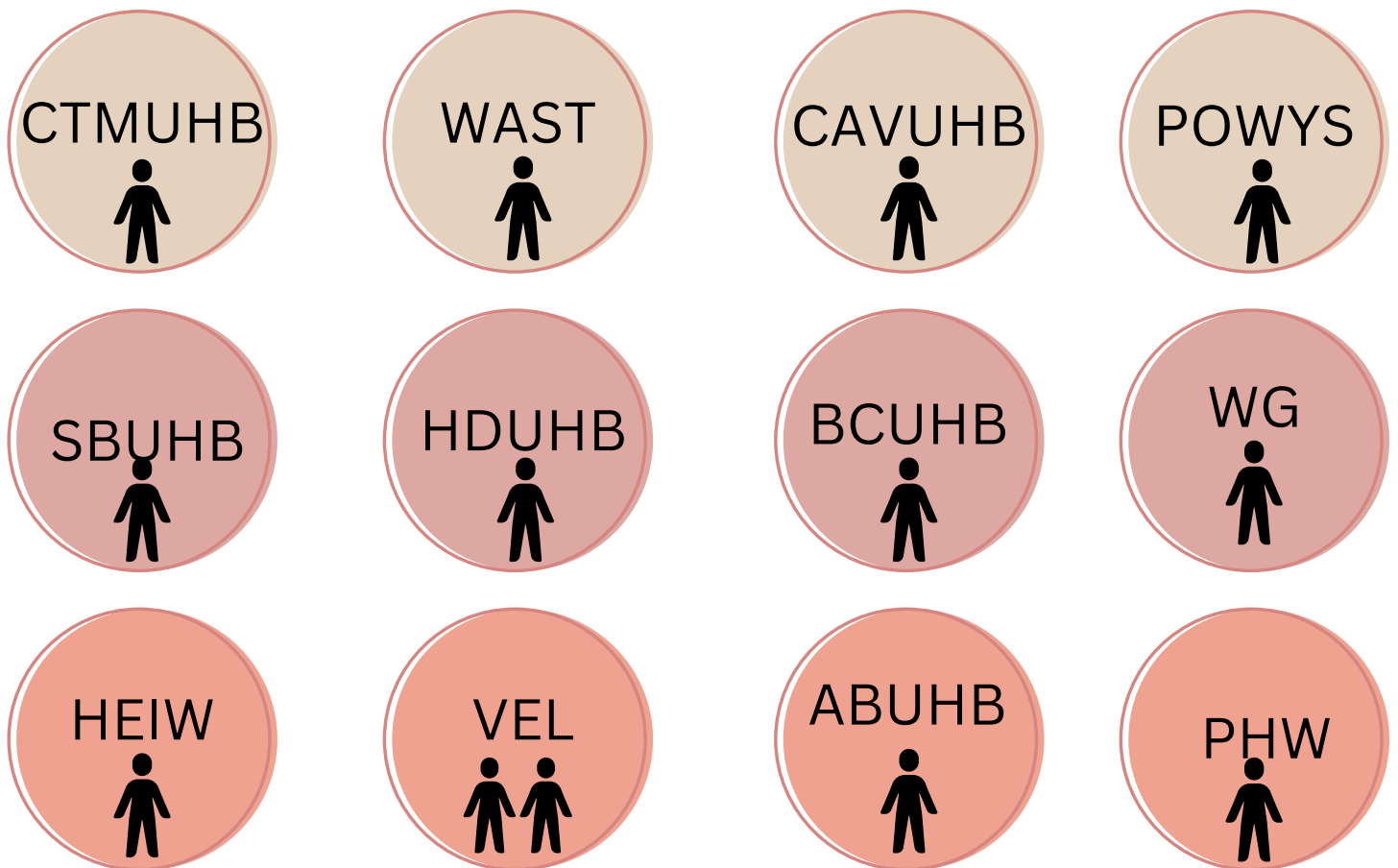
Prepared by
GEORGIA KEEGAN

Who completed the form?



19 out of 34
filled in the
form.

What areas had representation?



NWSSP



Question 1 -What 3 things will I take away from today back to my organisation?

Themes

Risk appetite needs to be higher, "Be BOLD," "Lead on agendas."

We need further collaboration and communication with the partnership committee.

Improve the language used for outcomes

Need further clarity on terminology.

Comments

<p>Broader roles of NWSSP and how these feed into partner organisations Requirements/requests of partners and their increased appetite for innovation/risk Potential changes to values and strategic objectives.</p>	<p>The value that our partners and customers put on "Partnership" nature of the NWSSP governance structure. Focus on language in framing outcomes and objectives. How we modernise the way we sell Shared Services as a place to work.</p>	<p>We have a mandate to be more innovative and take risks We have a very supportive committee We need to be less inward focussed.</p>
<p>Be more ambitious We need clarity on what some words mean We need NWSSP to act more corporately.</p>	<p>Collaboration The need to be clear on terminology 'stakeholders partners customers staff people' etc Encouragement from sspc member.</p>	<p>Our partners want us to continue to innovate Our partners appreciate the contributions of NWSSP divisions for the greater good of NHS Wales There's so much more we could be doing together.</p>
<p>Our risk appetite needs to be higher We need to be more aspirational We can lead the agenda not just facilitate or deliver it.</p>	<p>We need to be bold We need to have more conversations with our partners We need to lead on some agendas.</p>	<p>Breadth of services Be bold looking to the future Enhance visibility and partnership across the system.</p>
<p>Need to get wider engagement with NWSSP Stronger links on the decarb agenda Greater partnership approach.</p>	<p>Opportunities for sharing data experiences etc with colleagues need to be grasped We are not alone in terms of problems faced.</p>	<p>Update on our discussions today The desire to take more risk and lead For my organisation to ensure we have clear lines of comms and feedback back into NWSSP</p>
<p>How we better align to create a better relationship with NWSSP</p>	<p>Really positive session. Ambition to work together.</p>	<p>Ambition, partnership working, great culture</p>
<p>Communication...keep talking Clarity of purpose Interdependency</p>	<p>Collaborative approach, passion and open approach</p>	<p>The positive ambition in the room The huge potential we have as a partnership The support and respect we show for each other</p>
<p>The discussion on the importance of our people and how that should be highlighted in the outcomes. Take a bigger risk in the outcomes that we set for our strategic objectives.</p>		

Question 2 - What 2 questions do I still have for us to consider for a future SSPC session?

Themes

Further sessions
- Working together

What is the role of the partnership committee?

How can NWSSP further support HBs?

Comments

How do we get into the intelligence which will drive change for HBs? and change in NWSSP?	What's your compelling offer for your own people (what will it look like to work and grow / develop at NWSSP)? Who are your customers / partners / stakeholders etc. and why is the word customer so jarring?	Lots of what's today - further sessions on the how we work together perhaps
What is value? How do we harness and use the data we have?	How do we set meaningful kpi's to meet the strategy we have developed How do we do more for more people	Future structure and positioning of NWSSP within NHS Wales? Further clarity on measures of success
What more could we be doing together? What should we stop doing?	How do we enhance/optimize our partnership working? How do we get university involvement in some of our work?	The role of SSPC? Strategic objectives of NWSSP... Growth, service delivery model and measuring outcomes.
How do NWSSP and hbs trusts integrate better	What if? What are the priorities as we look past the 3 year IMTP How will engagement with partner organisations be enhanced	What do we not want to do/ get into Committee membership and roles
How do we get the best out of the partnership committee maintaining our good governance but maximising how we innovate and look to the future	Clarity on refreshed and succinct objectives. Key metrics through which these will be measured.	How can we address the skills shortage to meet current and future needs How can we develop and retain our staff
What additional areas can we help HBs Are we clear on our future markets eg LAs,, wider public sector etc	What is our appetite for growth and how do we scope that. How do we create capacity for innovation.	How can we increase communication between partners and NWSSP?
How is the membership of the SSPC selected? Is this a true representation of HBs?		

Question 3- What is the one thing I enjoyed the most from today?

Themes

In person event

Collaboration

Positive atmosphere

Great Discussions

Comments

Working with friends and colleagues across Wales.	Being in the room with good people wanting to make positive change.	Meeting so many colleagues from across the system.
Meeting the SSPC members.	Collaboration & enthusiasm.	Networking/interaction with others on a wide range of topics.
The electric/positive energy of having this meeting in person and the joy of a real life meeting.	Realising we are more creative as a group.	Collaboration
The passion and drive for more collaboration and the recognition that together we are truly stronger.	Partnership working - real engagement, support and learning.	The buzz and the people and the great atmosphere.
Opportunity to contribute, learn and space to think. Really valuable being in person.	Seeing everyone!	Meeting colleagues in the flesh and listening to experiences outside of my normal environment.
Liked it all . Good content, well organised and good venue.	Engagement in discussions across the range of topics.	The discussions that took place. It was great to hear different views and opinions.
Meeting partners, putting faces to names and opportunity to meet in an informal manner		



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Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM:2.2

19 January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Managing Director's Report

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

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

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

Llywodraethu/Governance

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

Ymgynghoriad/Consultation :

Shared Services Partnership Committee

Adduned y Pwyllgor/Committee Resolution (insert ✓):

DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	✓	NODI/ NOTE	✓
Argymhelliad/ Recommendation		The Partnership Committee is to NOTE and DISCUSS the report.			

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

IMTP

The IMTP is included on the agenda for the Committee to approve its formal submission to Welsh Government.

COVID Response Funding

NWSSP continues to provide products and services to support the ongoing NHS Wales and Social Care response to the COVID pandemic. The additional operational services being provided across NWSSP above our business-as-usual funded baseline include:

1. COVID PPE: procurement, purchase, storage, pick & pack, and distribution to Healthcare settings (Secondary care);
2. COVID PPE: procurement, purchase, storage, pick & pack, and distribution to Healthcare settings (Primary Care contractors: GPs / Dentists / Opticians / Community Pharmacies);
3. COVID PPE: procurement, purchase, storage, pick & pack, and distribution to Social care settings;
4. Lateral Flow Devices: storage, pick & pack, and distribution, primarily to Healthcare settings but have provided cross public sector;
5. Vaccination support - provision of consumable packs: procurement, purchase, storage, pick & pack, and distribution to vaccination sites;
6. Vaccination support - provision of vaccines to vaccination sites: distribution service;
7. Vaccination support – part funding of Senior Manager to work with Welsh Government to plan vaccination distribution;
8. COVID Medicines: storage, pick & pack, and distribution to Health care settings (Secondary care);
9. COVID Field Hospital equipment: storage of surplus field hospital equipment, and distribution where required;
10. COVID pathology sample transport;

11. Surgical Material Testing Laboratory PPE testing support – date life management of PPE stocks, ongoing stockpile management and further PPE procurement;
12. Medicines Unit support to mass vaccination – bulk delivery, storage and repackaging of vaccines ready for distribution; and
13. Management of the feeder entries for the Primary & Social care stores issues and recharge of issues to Welsh Government. Cash management related to additional stock balances.

Surplus Beds

Throughout Quarter 3 we have been working closely with Welsh Government officials to arrange the distribution of surplus COVID Field Hospital beds to Social Care Homes and Joint Equipment Stores Services throughout Wales. Through that period, roughly 1600 beds have been allocated out across various parts of Wales, and the programme continues into the next quarter.

Recruitment

Trust ID was implemented on 30th Sept across NHS Wales in line with legislative changes from the Home Office. The system removes the need to face to face pre-employment checks for those with an in-date UK or Irish Passport or Share Code.

The majority of organisation in NHS Wales are live with the following process changes, with others having agreed go live dates:

- Include a proposed start date in the offer letter
- Reduction of Mandatory Pre-employment checks prior to start date (references and qualifications can be completed after start).
- More streamlined internal employment checks process where dates from ESR are used to evidence some existing pre-employment checks.
- Removal of the unconditional offer letter.

Although data is limited currently due to the short time the changes have been live in some organisations, improvements can be seen already in relation to reducing the time to hire.

CIVAS

In light of the national Penicillin V shortage for treatment of Strep A infections the CIVAS@IP5 Medicines Unit, utilising its national portfolio and MHRA Wholesale Dealer licence, procured direct from the manufacture significant numbers of the Penicillin V liquid (11000 bottles in total). This stock was received and processed for distribution to primary and secondary care sites across all UHBs in collaboration with HCS within 48 hours to

provide resilience in stock to health boards. The service subsequently took delivery of a further 8000 bottles of Clarithromycin and these were distributed to UHBs and primary care sites in the week leading to Christmas provided further resilience of supply.

Emergency planning / pandemic medicines storage of Welsh Government owned stock in Wales

From April 1st, 2023, the management of the above stock will transfer to NWSSP. This includes:

- CBRN (Chemical, Biological, Radiological and Nuclear) stock, including antidotes for use against specific chemical, biological, radiological, and nuclear threats as determined at UK level.
- PIPP (Pandemic influenza) - NWSSP will take over the responsibility for the Wholesale Dealing Authorisation from Cardiff and Vale UHB.
- Medicines Buffer Stock programme will commence within NWSSP which will include medicines previously included in the COVID Medicines Stockpile. NWSSP will take over the responsibility for the Wholesale Dealing Authorisation from Cardiff and Vale UHB. This new programme will avoid unnecessary waste as these medicines will be distributed routinely across Wales and replenished with longer dated stock.
- New COVID-19 treatment medicines - NWSSP will take over the responsibility for the Wholesale Dealing Authorisation from Cardiff and Vale UHB.

Low Vision Service

On 22nd December 2022 Welsh Government confirmed that, subject to full consultation, all aspects of the Low Vision Service Wales (LVSU), currently undertaken through the hosting arrangement with Hywel Dda University Health Board (HDuHB) will transfer to NWSSP.

Welsh Government requested that HDuHB in collaboration with NWSSP, commence detailed discussion as part of the Transfer of Undertakings/Protection of Employment process from December 2022 with an expected completion date of 31st March 2023.

NWSSP have contacted HDuHB to confirm that we are supportive of these arrangements and will work in partnership with the Health Board to ensure a smooth transition to the new arrangements. HDuHB now need to commence a consultation process with the LVSU team, so that they can advise NWSSP on next steps regarding all TUPE transfer requirements.

TrAMS

There is a separate update paper provided for information on the agenda, but it is also worth noting that the first meeting of the All-Wales TrAMS Finance representatives is taking place on the 20th of January. The intention is for the Group to meet every few months. It is important that Health Boards/Trusts are appropriately represented as we move through the programme completing business cases for the South East, South West and North Hubs and ultimately identifying budgets to be transferred on the opening of the hubs.

Citizens' Voice Body (CVB)

Work is progressing on the establishment of the CVB, and a separate Virtual Private Database (VPD) code has been set up. The Audit & Assurance Team are undertaking analysis of the consultation exercise by Welsh Government that is due to end on 5th March and will produce a report summarising the findings.

Laundry Services

Following submission of the Outline Business Case to Welsh Government we are currently working through a number of queries that they have raised. However, given the challenging position with regards to availability of capital, we are also currently working up alternative options to provide a different approach for the next five years which allows us to push ahead with the consolidation of laundry sites and meet the required minimum standards in terms of hygiene regulations. However, this will not deliver the significant changes planned to support the decarbonisation agenda.

Decarbonisation

We are working with Welsh Government on decarbonisation following the allocation of funding to support the programme. A number of positions have already been appointed to, and plans are in place with Welsh Government to fill the remaining vacancies.

Premises

Issues with Reinforced Autoclaved Aerated Concrete (RAAC) have been noted at Brecon House in Mamhilad affecting our Primary Care Directorate. RAAC was used between the 1960s and 1990s in schools and hospitals to speed up the construction process, but there is a high volume of air within RAAC, making it vulnerable to moisture ingress and losing strength. This is particularly affecting the roof of Brecon House where there are regular leaks and some falls of concrete. Immediate safety measures have been put in place to protect staff, and we are in discussion with the Landlord to move

out of this building at the end of the current financial year, and to relocate in a building that is not affected by RAAC. RAAC has also been identified in Companies House but currently the state of that building does not give any cause for concern.

Oracle Upgrade and reporting tool

NWSSP run all Wales Oracle Procurement and Finance system. Following on from the decision made in September 2022 to migrate the All-Wales Oracle system into the cloud, there is requirement to also replace the current reporting tool (Qlikview)

Considerable work has been undertaken in recent months by the NWSSP Central team, working in collaboration with Health Board and Trust colleagues, to identify a replacement. This work has identified two potential solutions, both of which will offer a significant improvement over the current Qlikview system. NHS bodies have not as yet been able to reach a consensus on selecting the replacement. As a consequence a sub-group of the All Wales STRAD group, working with Procurement colleagues, have developed a robust evaluation model to select the replacement

Health Organisations and Procurement have been heavily engaged in the assessments and discussions at all levels, and more recently, a presentation was made to the Deputy Directors of Finance on the 13th January. It is expected STRAD will review the outcomes of the task finish group on the 17th January and further soundings will be taken at the All Wales Directors of Finance group.

It is vital that a decision is made promptly to avoid introducing significant risk to the Oracle cloud migration, by removing the safety net of a contingency date prior to the expiry of the warranty on the FMS Hardware.

Energy arrangements update

Procurement for All Wales Energy contracts is undertaken by NWSSP and purchasing decisions are made through the Energy Price Management Risk Group (EPMRG). The EPMRG arrangements have been in place since 2005 and pre-date the current NHS organisational structure.

In June 2022 our Energy supplier announced that they were not taking any more business in the industrial and commercial exceptional energy price increases. This announcement alongside the volatility in energy markets experienced during 2022/23, resulted in a review being undertaken by the All Wales Directors of Finance group to consider current arrangements and how they may be strengthened and made more sustainable for the future. The review has identified a number of proposals for consideration including the introduction of new management arrangements and establishing a new

and compliant procurement arrangement with a new energy provider. These proposals are to be considered by the All Wales Directors of Finance group and if implemented will have implications on NWSSP. A further update will be provided at the next Committee meeting in March 2022.

Corporate Risk Register

Following a detailed review of the Corporate Risk Register at the November SLG, a number of risks have been escalated to red and some new red risks added.

- The existing red risk relating to the inflationary consequences of the situation in Ukraine and the resultant impact on energy prices remains red. This is currently being mitigated through the role of the Energy Price Risk Management Group (EPRMG), but energy prices remain very volatile.
- The above risk has also been articulated into a second risk which considers the role that NWSSP plays as the lead energy purchaser for the whole of NHS Wales, and the reputational risk that is associated with that role.
- The existing risk of the impact of potential industrial action has been escalated from amber to red as strike action has now been confirmed. While the strikes currently called by the RCN are not likely to have a significant impact on NWSSP, the likely industrial action from other Trade Unions will have a greater impact.
- Similarly the existing risk of having insufficient staff resource to meet demand has also been escalated from amber to red. NWSSP have a lot of staff on bank contracts who help to deliver essential services but for whom we are unable to guarantee security of employment due to Welsh Government not confirming whether these posts will be funded into 2023/24.
- The contractual dispute affecting the replacement for the Legal & Risk Case Management system has also been escalated from amber to red. While there are contingency arrangements in place to maintain services, the potential financial loss could be significant.
- The Laundry Transformation Programme has been added as a red risk due to uncertainty over whether the required capital funding for the scheme will be available to complete it.
- The Brecon House roof at Mamhilad has also been added as a red risk due to serious issues with water ingress and falling masonry, making the building unsafe for staff.

Senior Staff Changes

Neil Davies, Director, Specialist Estates Services is retiring in March and following a comprehensive recruitment process, Stuart Douglas, the current Deputy Director, will take on this role with effect from 1st of February. This allows an appropriate handover period between Neil and Stuart.

**Neil Frow,
Managing Director, NWSSP,
January 2023**



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Partnership

AGENDA ITEM:3.1

19th January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Integrated Medium Term Plan (IMTP) 2023-2026

**ARWEINYDD:
LEAD:**

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

**AWDUR:
AUTHOR:**

**Helen Wilkinson, Planning and Business
Change Manager**

**SWYDDOG ADRODD:
REPORTING
OFFICER:**

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

**MANYLION
CYSWLLT:
CONTACT DETAILS:**

Alison.ramsey@wales.nhs.uk

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

To gain the approval of the SSPC for the IMTP.

Llywodraethu/Governance

**Amcanion:
Objectives:**

Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement

**Tystiolaeth:
Supporting
evidence:**

Ymgynghoriad/Consultation :

Senior Leadership Group
Welsh Government

Adduned y Pwyllgor/Committee Resolution (insert √):

**DERBYN/
APPROVE**

✓

**ARNODI/
ENDORSE**

**TRAFOD/
DISCUSS**

**NODI/
NOTE**

Argymhelliad/ Recommendation	<p>The SSPC is asked to</p> <ul style="list-style-type: none"> • Approve the NWSSP IMTP for 2023-26 subject to the touchpoint meetings with Welsh Government and the Finance Delivery Unit. • 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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Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	Equality and diversity implications have been fully considered in the IMTP.
Cyfreithiol: Legal:	Any legal implications have been considered in the IMTP.
Iechyd Poblogaeth: Population Health:	No direct impact.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	Quality and safety implications have been fully considered in the IMTP.
Ariannol: Financial:	The financial implications of the IMTP are fully stated.
Risg a Aswiriant: Risk and Assurance:	The risks to the IMTP are fully stated.
Safonau Iechyd a Gofal: Health & Care Standards:	<p>Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Governance, Leadership and Accountability</p>
Gweithlu: Workforce:	Workforce implications have been fully considered in the IMTP.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open.

1. BACKGROUND

The Welsh Government require NHS organisations to prepare an IMTP for 2023-26 in line with the NHS Wales Planning Framework published in late November 2022.

The Ministerial Priorities for 2023-24 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 2023-2026 was published by the Welsh Government in late December and our financial plan has been revised to reflect this.

We have revised our Strategy Map to reflect our development sessions held with our Senior Leadership Group (SLG) and the Partnership Committee.

The draft IMTP was endorsed by SLG in December 2022, 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.

The IMTP and the Divisional plans reflect priorities identified by:

- the Welsh Government where we are playing a lead national role;
- our customers, to support delivery of their local plans; and
- professional peer groups such Directors of Workforce and Finance.

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 2023-24. We have therefore agreed as an SLG that our key organisational priorities will be:

- Decarbonisation and Climate Change
- Implementation of our new Digital Strategy as a key enabler

- Financial sustainability and good governance
- Employee Wellbeing

We are submitting a balanced financial plan for 2023-26. However, this will be challenging and there are several significant financial risks to be managed to achieve this aim.

Current position

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

A summary PowerPoint presentation on the key aspects of the IMTP will be given at the SSPC meeting.

Next steps

- Touch point meeting with Welsh Government Planning team on 24 January 2023.
- Meeting with the Finance Delivery Unit on 6 February 2023.
- Communications team is finalising design of the detailed divisional plans.
- 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 2023-26 subject to the touchpoint meetings with Welsh Government and the Finance Delivery Unit.
- 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.



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM:3.2

19th January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Digital Strategy

ARWEINYDD: LEAD:	Alison Ramsey – Director of Planning Performance and Informatics
AWDUR: AUTHOR:	Neil Jenkins – Chief Digital Officer
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**Pwrpas yr Adroddiad:
Purpose of the Report:**

To gain approval for the NWSSP Digital Strategy

Llywodraethu/Governance

Amcanion: Objectives:	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement
Tystiolaeth: Supporting evidence:	Please see the NWSSP Digital Strategy document at Appendix 1

Ymgynghoriad/Consultation :

The draft strategy has been shared with NWSSP Senior Leadership Group for comment from divisional leads and the Digital Health & Care Wales executive team for information. On approval from the committee it will be shared with the NHS Wales Directors of Digital peer group.

Adduned y Pwyllgor/Committee Resolution (insert ✓):

DERBYN/ APPROVE	✓	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	
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Argymhelliad/ Recommendation	It is recommended that the committee approves the strategy for publication.					

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	The strategy will be underpinned by a resourcing plan that will consider the appropriate skills and organisational structure required to deliver its' aims. The plan will take account of the NHS Wales Organisational Change Policy where applicable. All recruitment will be undertaken in accordance with relevant policies and procedures.
Cyfreithiol: Legal:	The strategy may require the development of contractual relationships with commercial partners which will be delivered in accordance with relevant procurement standards and frameworks.
Iechyd Poblogaeth: Population Health:	No impact.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	The strategy is designed to promote consistency of process, conformity with industry standard frameworks and compliance with legislative and regulatory provisions.
Ariannol: Financial:	The underpinning resourcing plan will be fully costed. Renegotiation of SLAs and contracts with commercial partners may be required.
Risg a Aswiriant: Risk and Assurance:	Initial risks have been identified and will be managed via the project assurance processes that will be part of the implementation programme.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Governance, Leadership and Accountability
Gweithlu: Workforce:	Workforce requirements will be managed via the resourcing plan.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	This information is Open. The information is disclosable under the FOI.

1. BACKGROUND

From the formation of the NHS Wales Shared Services Partnership (NWSSP) in 2011, we have embarked on a digital modernisation journey to: -

- Enable a digital workplace
- Adopt new technologies
- Adopt new ways of working
- Drive innovation

Our future digital planning must align to the priorities of our Integrated Medium-Term Plan (IMTP) and seek out synergies between the elements of the plan that require digital solutions, identifying opportunities for cohesive, streamlined delivery.

The next stage in our journey is to become more focussed on delivering solutions at an enterprise level that ensure we promote consistency, simplicity, and leverage economies of scale to deliver our desired outcomes.

The digital strategy attached in Appendix 1, sets the direction for the future provision of digital services, the approach and methodology we will adopt and the outcomes we seek to achieve. It is designed to recognise that the principal role of digital services is to enable the delivery of our IMTP and our divisional plans.

The strategy has three key themes:

1. **Strategic alignment** – to ensure that everything we do in delivering digital services aligns not only to the NWSSP strategic business objectives but also to key national strategies.
2. **Streamlining our solutions portfolio** to ensure that we optimise digital investment and minimise the costs of support and maintenance.

This will include ensuring that we maximise the use of each solution, avoid duplicating functionality and deliver integrated user experience, for example, using single sign-on and common user interfaces. To do this we will adopt an Enhance → Buy → Build approach i.e., by identifying opportunities to make use of existing nationally implemented modules or services. If we can't reuse, we procure externally. We may build custom solutions but only where suitable commercial products are not available. We will also adopt a "cloud first" approach when delivering new solutions.

3. To deliver on the first two themes we **will implement a new operating model** which will shift the focus of our in-house teams away from operational delivery into a business partner model. This is a natural evolution building on where we are now with the existing hybrid arrangement in place with Digital Health and Care Wales. The model will guide and support our stakeholders, our internal Divisions and external customers and partners, through identifying their digital requirements more effectively. It should strengthen the awareness and consideration of NWSSP planned service changes as part of the national infrastructure conversations.

The key message here is that we think not in terms of “digital projects” but in terms of business change projects that are underpinned by digital solutions. The strategy therefore emphasises alignment with our Portfolio Management approach to ensure that there is as much emphasis on managing the associated business change as there is on sourcing the digital solution.

The new operating model also proposes putting more emphasis on providing operational delivery via our strategic partners and commercial suppliers. This includes ensuring that we “position” ourselves appropriately when delivering solutions to ensure that we are not duplicating the work of other national service providers. For example, to allow our stakeholders to make best use of the large data sets we collect and manage, we should play the role of data provider as opposed to solution provider i.e., we will deliver data to national solutions such as the National Data Resource rather than provide specialised tools for stakeholders to mine and analyse our data.

The transition to the new operating model will be delivered by a programme of work, described at a high level in the roadmap at Appendix 1 in the strategy document. It will consist of three phases designed to: -

1. Stabilise the existing model by addressing known gaps or risks.
2. Optimise the model by realising the target state to deliver a continuous cycle of service improvement.
3. Sustain the model by providing a targeted set of digital solutions that are robust and secure

We recognise that the shift of emphasis in the new operating model will require changes to the way we engage with our strategic partners and commercial suppliers. This may require review existing Service Level Agreements and underpinning contracts. We have already met with Digital Health and Care Wales Executive Team to discuss the key

themes in the strategy, which was wholly positive and further discussions around managing the transition will be taken forward operationally.

The shift to a revenue-based cloud services model from the traditional capital based on-premises model is a financial challenge for NWSSP, as it is for other NHS organisations. And this risk is discussed regularly with the Welsh Government and the Directors of Digital peer group and is reflected in the narrative to our IMTP financial plan.

In conclusion this digital strategy sets out the framework upon which our IMTP and divisional plans will be delivered. Updates on progress with implementation will be provided to the Senior Leadership Group.

2. RECOMMENDATION

The Committee is asked to approve the Digital Strategy for publication.

3. APPENDIX 1 – DIGITAL STRATEGY



NWSSP Digital
Strategy V1.1.docx

NHS Wales Shared Services Partnership Digital Strategy

DRAFT

Version: 1.1
Issue Date: 11-Jan-23

Document

Author:	Neil Jenkins
Owner:	Alison Ramsey
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Version History

Version	Date Issued	Brief Summary of Change
0.1	12-Oct-22	First draft
0.2	25-Oct-22	Responses to AR initial comments
1.0	28-Oct-22	Draft for NWSSP SLG
1.1	30-Nov-22	Executive summary completed

Reviewers and Approvals

Name	Position	Signature on approval	Date	Version
Alison Ramsey	Director of PP&I		28-Oct-22	1.1

Distribution

Name	Date of issue	Version
Alison Ramsey	12-Oct-22	0.1
Alison Ramsey	25-Oct-22	0.2
NWSSP Senior Leadership Group	31-Oct-22	1.0

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INTRODUCTION

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.

This document defines and communicates the organisation's unified strategy and direction on the provision of digital services. It identifies the high-level approach and methodology the organisation will take as well as the outcomes we seek to achieve.

The strategy is designed to recognize that the principal role of digital services is to enable the delivery of the organisation's business strategy and that the digital strategy must underpin that strategy. Our digital planning must align to the priorities of our Integrated Medium-Term Plan and seek synergies between the elements of that plan that require digital solutions, identifying opportunities for cohesive, streamlined delivery. The focus of the strategy is "digital as an enabler" and it sets out the key objectives as a set of digital goals and aims to be delivered via a Target Operating Model.

The document is divided into three key sections. The **Strategic Context** sets out the strategic goals, aims and outcomes and describes how they align to the NWSSP strategic objectives and the mission statements of the Digital Strategy for Wales¹. The **Target Operating Model** section sets out how functions will be organized to deliver the strategic goals and aims. The **Resourcing** section shows how the responsibility for delivery of each component of the Target Operating Model will be divided between our teams and those of our partners and suppliers.

¹ [Digital strategy for Wales \[HTML\] | GOV.WALES](#)

EXECUTIVE SUMMARY

The strategy has three key themes: -

Strategic Alignment	Streamlining Solution Portfolio	New Operating Model
<ul style="list-style-type: none"> NWSSP Strategic Objectives Digital Strategy for Wales Key strategies 	<ul style="list-style-type: none"> Enhance → Buy → Build Enterprise level solutions Process alignment 	<ul style="list-style-type: none"> Business Relationship Management Partners and Suppliers “Positioning” appropriately

At its’ heart, the strategy focusses on “digital as an enabler”, putting an emphasis on business strategy and business change as the drivers for digital solutions. It outlines 5 key digital goals that are designed to underpin the NWSSP corporate objectives and values and align to the Digital Strategy for Wales. They also reflect the core principles of other strategic initiatives such as the All-Wales Infrastructure Programme.



It aims to deliver optimised digital investment by streamlining our solution portfolio through aligning solution delivery processes to service demand and service design. This will ensure that we implement customer-centric solutions to deliver value and improve user experience.

To deliver the streamlined solution portfolio, a new operating model will be introduced that moves the focus of NWSSP digital teams away from operational delivery. We will place more reliance on partners and suppliers in this area allowing the development of a business partner model which will enable NWSSP to position itself appropriately alongside other national service providers.

We will move to the proposed new Target Operating Model by delivering projects within a programme of work that fit broadly into three categories: -

Stabilisation – activities to designed to address gaps or risks in the existing model.

Optimisation – activities designed to realise the Target Operating Model and design process to deliver a continuous cycle of service improvement.

Sustainability – 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.



DRAFT

BACKGROUND

From the formation of the NHS Wales Shared Services Partnership in 2011, we have embarked on a digital modernisation journey to:

- Enable a digital workplace
- Adopt new technologies
- Adopt new ways of working
- Drive innovation

The journey has underpinned our service modernisation programme and estates strategy. Our COVID-19 response in 2020, jump started our digital estate modernisation



As part of an All-Wales enterprise agreement, we invested circa £1M in Microsoft Office 365.



We have undertaken significant work in the field of cyber security to ensure that we are vigilant to cyber threats and continue to review and enhance our infrastructure. We have worked with Internal Audit and Audit Wales with recommendations made to enhance our Cyber Resilience Plan and rolled out a mandatory Cyber Awareness training package for all staff.

We have also invested heavily in the robotic process automation, developing principles for using suitable tools that can replicate and automate repeatable human tasks freeing our people to undertake more value-added work.

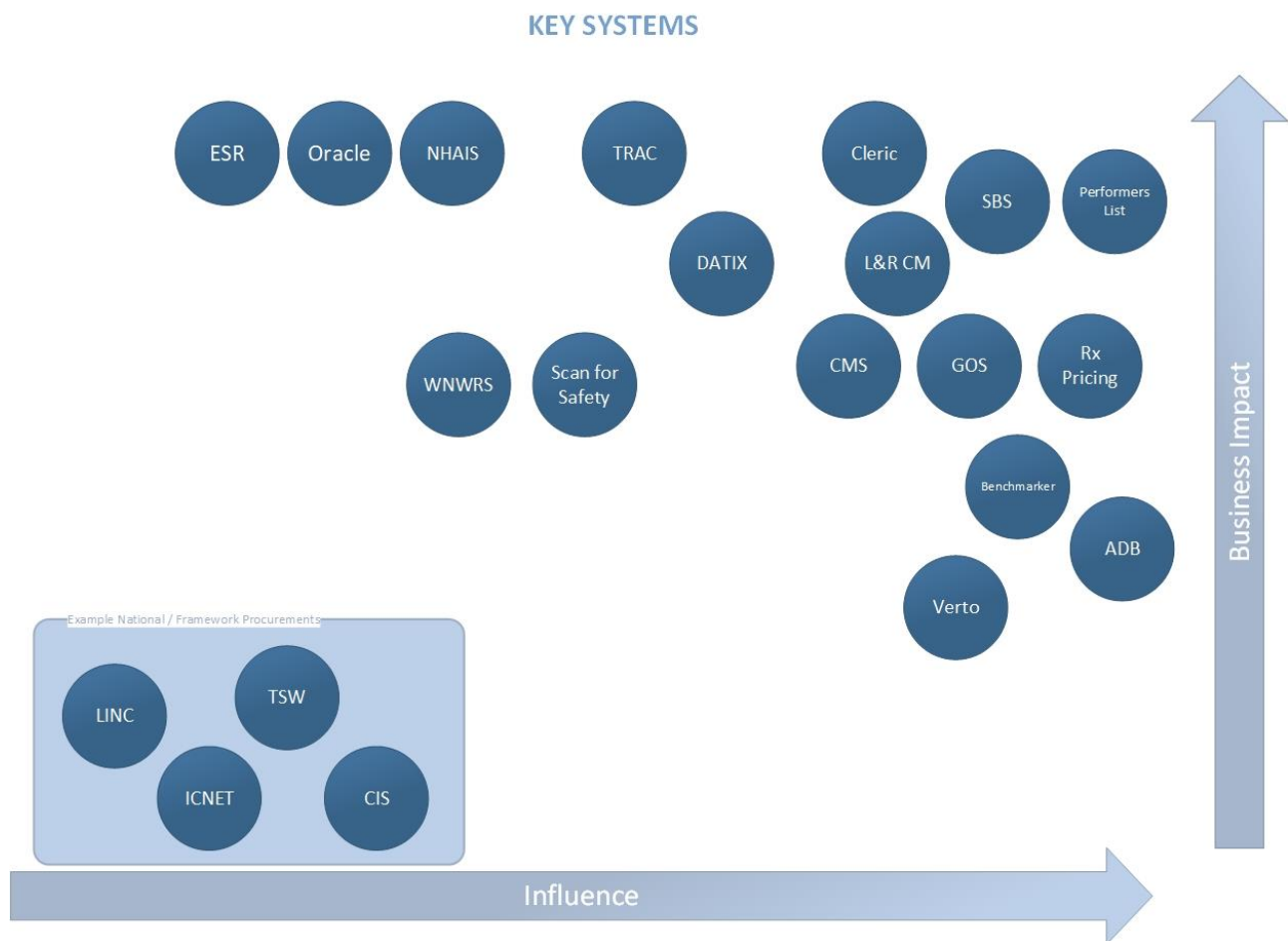
The next stage in our journey is to become more focussed on delivering solutions at an enterprise level that ensure we promote consistency, simplicity and leverage economies of scale to deliver our desired outcomes.

SCOPE

The scope of this strategy will include the delivery, hosting, service management and assurance of digital solutions that are: -

- Owned and operated by NWSSP
- "National" solutions operated on behalf of other NHS Wales organisations
- Procured under framework agreements for operation by other NHS Wales organisations (where the responsibility of NWSSP in the digital arena is mostly limited to assurance)

It is important to recognise that our sphere of influence or control over the direction of solutions that are considered national or where we are the procuring authority only, may be significantly different to those where we operate and / or own the solution. The strategy promotes a common approach to delivery but reflects the varying responsibilities for NWSSP.



NOTE: This is not intended to provide an exhaustive list of systems. The systems in scope will change over time.

STRATEGIC CONTEXT

Strategic Digital Goals The digital goals set out below describe the key building blocks required to ensure that this strategy underpins the NWSSP strategic objectives, aligns with NHS Wales digital strategies and programmes and with the six mission statements in the Digital Strategy Wales.



Streamline customer experience. Enable customer facing teams to close majority of enquires at first contact. Majority of interactions via self-service portals.

Improve product and service delivery speed. Enhance product and service delivery quality. Ensure high levels of service performance and reliability. Automate processes.



Become more data driven, providing meaningful service metrics to stakeholders. Maximize use of data to drive performance and quality, benchmark and quantify benefits to drive process improvement.

Ensure that services are delivered securely with appropriate controls, are protected from cyber threats, and monitored appropriately.

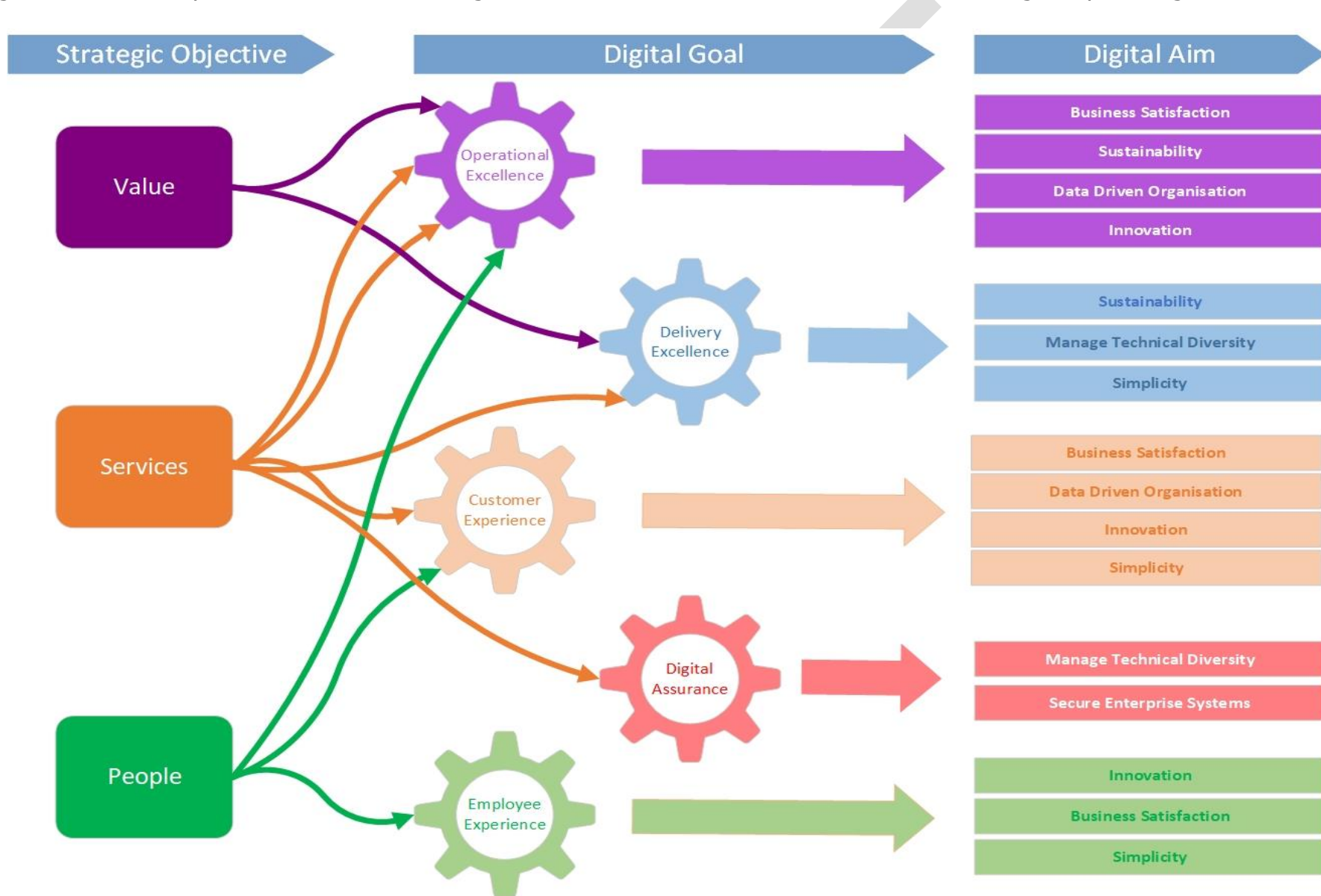


Provide tangible benefits to employees including the right tools to enable them to focus on their main tasks and training them to use those tools effectively

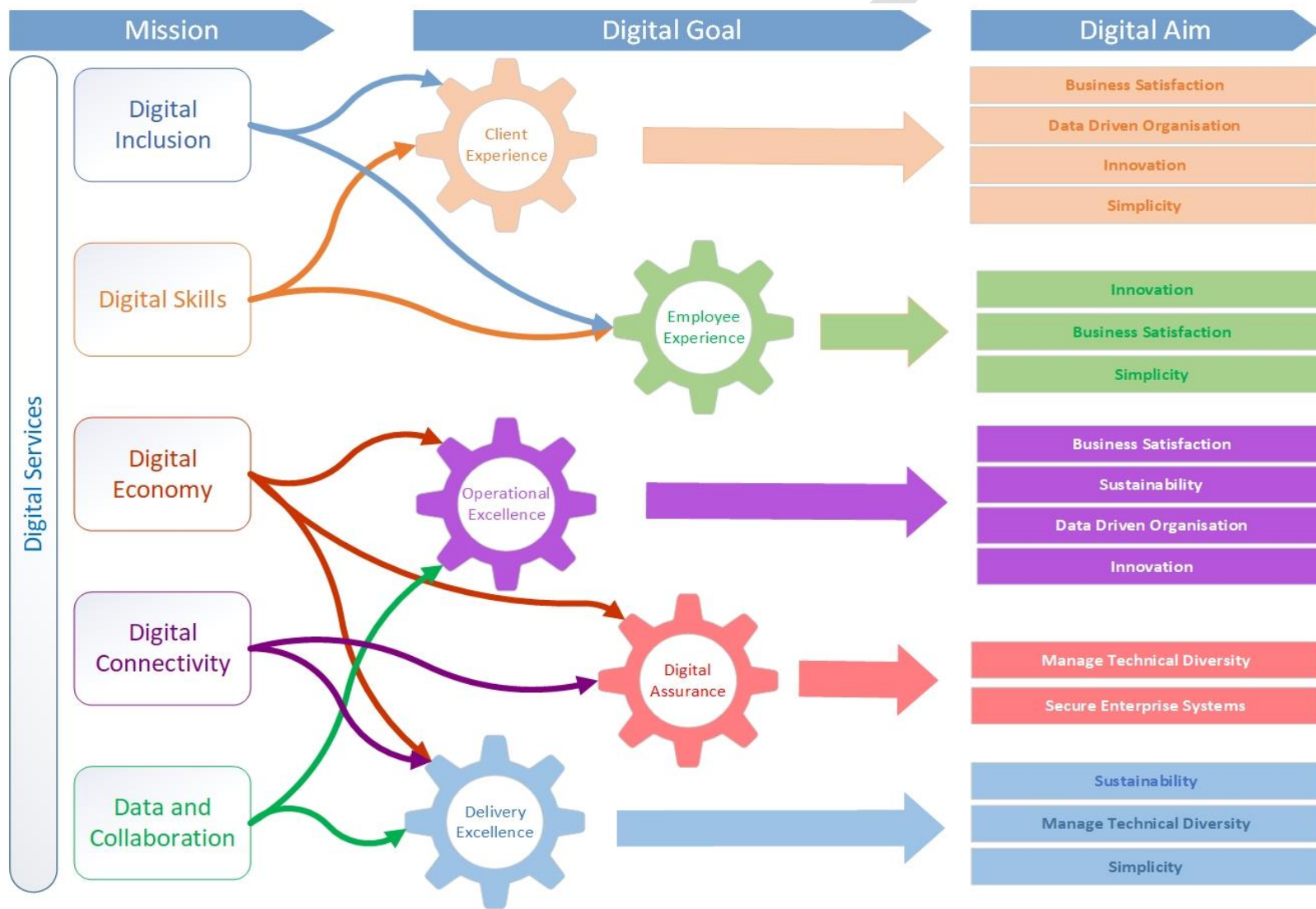
Strategic Digital Aims - The following strategic aims underpin the strategic goals.

Aim	Aim Statement	Outcome Measures
1. Business satisfaction	Ensure digital solutions are sourced to deliver the best-possible outcomes for our business and our stakeholders.	Improved employee satisfaction Improved customer / stakeholder satisfaction
2. Sustainability	Ensure NWSSP makes technology decisions and delivers solutions, being mindful of long-term value, the decarbonisation agenda and the impact on the foundational economy.	Evidence of benefits realisation Digital procurement aligned to national foundational economy principles Reduced carbon footprint Reduced energy consumption
3. Data-driven Organisation	Ensure solutions enable data creation and modification for enterprise-wide use in support of stakeholder requirements and in compliance with data governance policies.	Trusted contributor to national data sets and linkage projects Metrics driven benefits realisation Metrics driven KPI and outcome based reporting Improved demand and capacity management in transactional processes Accreditation and Benchmarking results
4. Innovation	Seek innovative ways to drive business advantage and service improvement through technology.	Evidence of increased automation in transactional processes Reduction in paper and manual processes Number of new service offerings
5. Manage technical diversity	Ensure that the variety of technology platforms is minimized and manageable.	Reduced service management costs Reduced carbon footprint Reduced energy consumption
6. Secure enterprise systems	Ensure that solutions are secured to protect the confidentiality, integrity, and availability of customer and corporate data.	Compliance with security frameworks Accreditation Reduction in incidents
7. Simplicity	Ensure that NWSSP selects solutions that aim to reduce operational complexity and improve user experience.	Improved employee satisfaction Improved customer / stakeholder satisfaction

Strategic Alignment Each of the digital goals is designed to underpin one or more of the organisation’s strategic objectives. In turn the digital aims underpin one or more of the goals and describe the deliverables of the Target Operating Model.



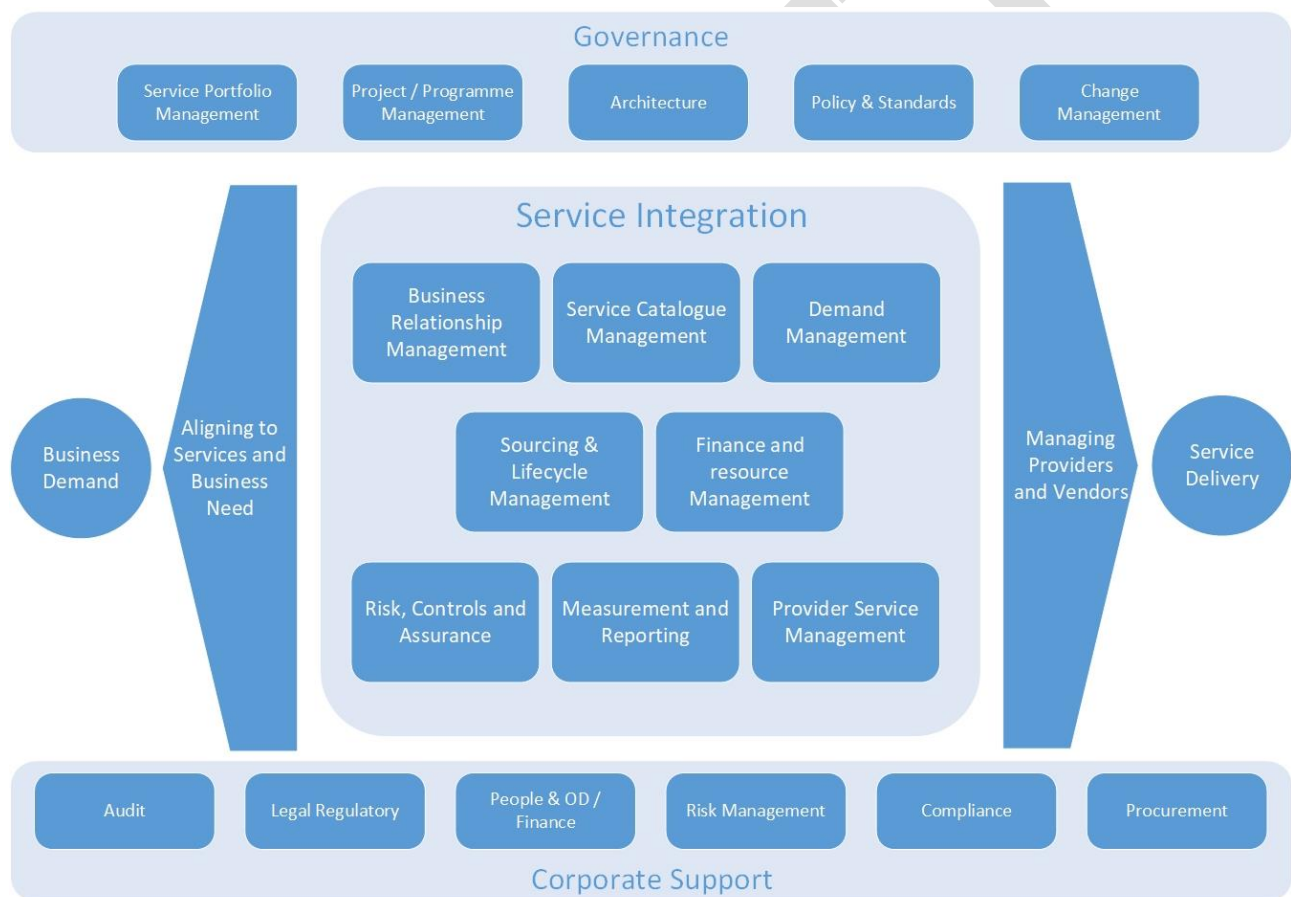
The digital goals are also designed to align to the 6 missions in the Digital Strategy for Wales. All 5 digital goals underpin Mission 1 – Digital Services. The map below shows how they align to the remaining 5 mission statements.



TARGET OPERATING MODEL

Achievement of the strategic aims requires a set of delivery functions that sit within an overarching Target Operating Model. The model is designed to align to the All-Wales Infrastructure Programme work on a National Target Operating Model. This work recognises that that an identical single model is not feasible for all organisations but aims to describe the overarching components that will figure in each organisation’s model.

The model below contains the components that are relevant to the NWSSP delivery model and describes the relationship between the core digital delivery functions (described in “Service Integration”) and the planning, control and support functions (described in “Governance” and “Corporate Support”)



The sections overleaf describe the scope of the functions shown in the model above and how they will be organised to deliver the strategic goals and aims. The section focusses on the Governance and Service Integration functions because these are delivered in whole or in the majority by the digital service teams. Where there is a significant contribution to delivery in the Corporate functions, these will also be described.

Project and Programme Management

The digital project management function will align to the NWSSP Project Management Office (PMO) Portfolio Management Strategy. The function will provide technical project management support including the partner and supplier management aspect of the project providing support to the project manager and single point of focus to marshal the technical resources required by the project.

Architecture

We will adopt the key principles of Enterprise Architecture² to ensure that the business architecture is the driver behind technology, data, security, and integration architecture decisions.

We will also ensure that we align to key architecture principles defined by the All-Wales Infrastructure Programme as a consequence of the NHS Wales Digital Architecture Review. The core principles that are applicable to our digital services are:

Aims delivered by the Architecture function: -

- 1. Business Satisfaction*
- 2. Sustainability*
- 3. Data-Driven Organisation*
- 4. Innovation*
- 5. Manage Technical Diversity*
- 6. Secure Enterprise Systems*
- 7. Simplicity*

Access Our solutions will support long term flexible working practices for staff to work seamlessly from remote locations. Access to systems should be achievable from any suitable device , within defined standards, allowing access from both managed and unmanaged devices.

Cloud First We will adopt cloud computing services using a cloud-first approach for both new and existing workloads

The key considerations in implementing this element of the strategy are:

- Cloud first – we should consider and fully evaluate potential cloud solutions first before considering any other option.
- Multi Cloud – for Software as a Service (SaaS) solutions we will select the provider based on analysis of capabilities in the marketplace. We will source Platform as a Service (PaaS) and Infrastructure as a Service (IaaS) solutions through our Service Level Arrangements (SLA) with Digital Health & Care Wales.
- Interoperability and Portability - Wherever possible, we will ensure that data and applications are interoperable and portable across cloud offerings.
- Security – security of data and systems will be a guiding principle and all solutions will integrate with appropriate security incident and event monitoring tools.

² Zachman Framework Enterprise Architecture

It should be noted that whilst our ambition will be to provide cloud-first services there are a number of potential barriers that will need to be closely reviewed. These include: -

- Legacy solutions may not be suitable for cloud adoption and the effort in rearchitecting them to achieve cloud migration will need to be balanced against anticipated benefits.
- Funding models across NHS Wales are not yet adapted to the shift from capital to revenue.
- Where we seek to migrate existing on-premises hosted solution to the cloud, economies of scale may not be realised in the early stages where smaller numbers of solutions or smaller scale solutions are migrated.

KEY MESSAGE

Shifting the financial model from a capital to a revenue base will be key to achieving cloud first delivery. This will require a national approach from Welsh Government.

Data Driven

A number of NWSSP services maintain large data sets including NHS workforce (Electronic Staff Record), primary care activity (Prescription Pricing and Primary Care Contractor Payments), finance and procurement (Oracle) and primary care workforce (Welsh National Workforce Reporting System). We will focus our Business Intelligence, decision support and data visualisation efforts on the provision of data driven performance and service improvement solutions. This will also focus on the creation of models that can predict and manage demand, providing more accurate resource and capacity planning capability.

Where our data supports our customers, local decision making, planning and delivery activities, we play the role of data provider. Rather than deliver "one size fits all" BI solutions that may not meet the disparate requirements of all stakeholders we will deliver the data in ways that can be consumed by our customers own solutions.

Where the intrinsic value in our datasets can only be realised by linking with datasets that we do not own, maintain or have a legal basis to process, we will not seek to gather that data but will ensure that we provide the data in ways that enable data linkage to be achieved by the receiving organisation. In addition, to reduce the requirement to provide multiple interfaces into our datasets, where possible, we will deliver our data to established national repositories such as the Welsh Reference Data Service and the National Data Resource.

Policy and Standards

As NWSSP is not a statutory body, creation of digital policy is not within our gift. We will continue to ensure that there are processes in place to adopt, contribute to and implement Trust and national digital policies. Through collaboration with national boards, peer groups and policy leads we will seek to influence policy direction where appropriate.

Standards, legislation and regulatory frameworks are evolving rapidly in the digital arena particularly in response to the cyber security threat landscape. Where agreed standards exist, we will ensure that they are applied in a well governed and transparent way. Please refer to Appendix 1 for a list of currently applicable frameworks.

Change Management

In conjunction with NWSSP PMO, service leads, Digital Health & Care Wales and 3rd party support partners we will ensure that change is managed in a controlled and responsive manner. We will route requests through appropriate Change Advisory and Service Management Boards (SMBs) and work with PMO to ensure SMBs are in place for new services.

KEY MESSAGE

It is critical that service management arrangements are defined for new services and Service Management Boards created at the service design stage to prioritise and manage service change. Where appropriate alignment with or integration into the National Service Management structure should be sought.

The NWSSP digital teams will provide a central focus for response to and communication of national infrastructure changes that impact on our services, advising service leads accordingly.

Business Relationship Management

We will expand and develop the role of the digital teams in line with a digital business partner model to assist service leads in identifying organisational change and coordinating departments to take advantage of technology that will create opportunity and help marshal the right resources to deliver the desired business outcomes.

Using a Business Model Canvass (see example canvass overleaf) approach and working in conjunction with the NWSSP PMO, dedicated resource will work with service leads to define service capability and maturity, identify opportunities for digital innovation, identify route cause of pain points and assist with the formulation of IMTP projects and priorities.

Aims delivered by the BRM function: -

1. Business Satisfaction
2. Sustainability
3. Data-Driven Organisation
4. Innovation
7. Simplicity

The business model canvass brings together in a one-page summary the key factors that impact on digital delivery and provides a focal point for generating and measuring digital delivery.

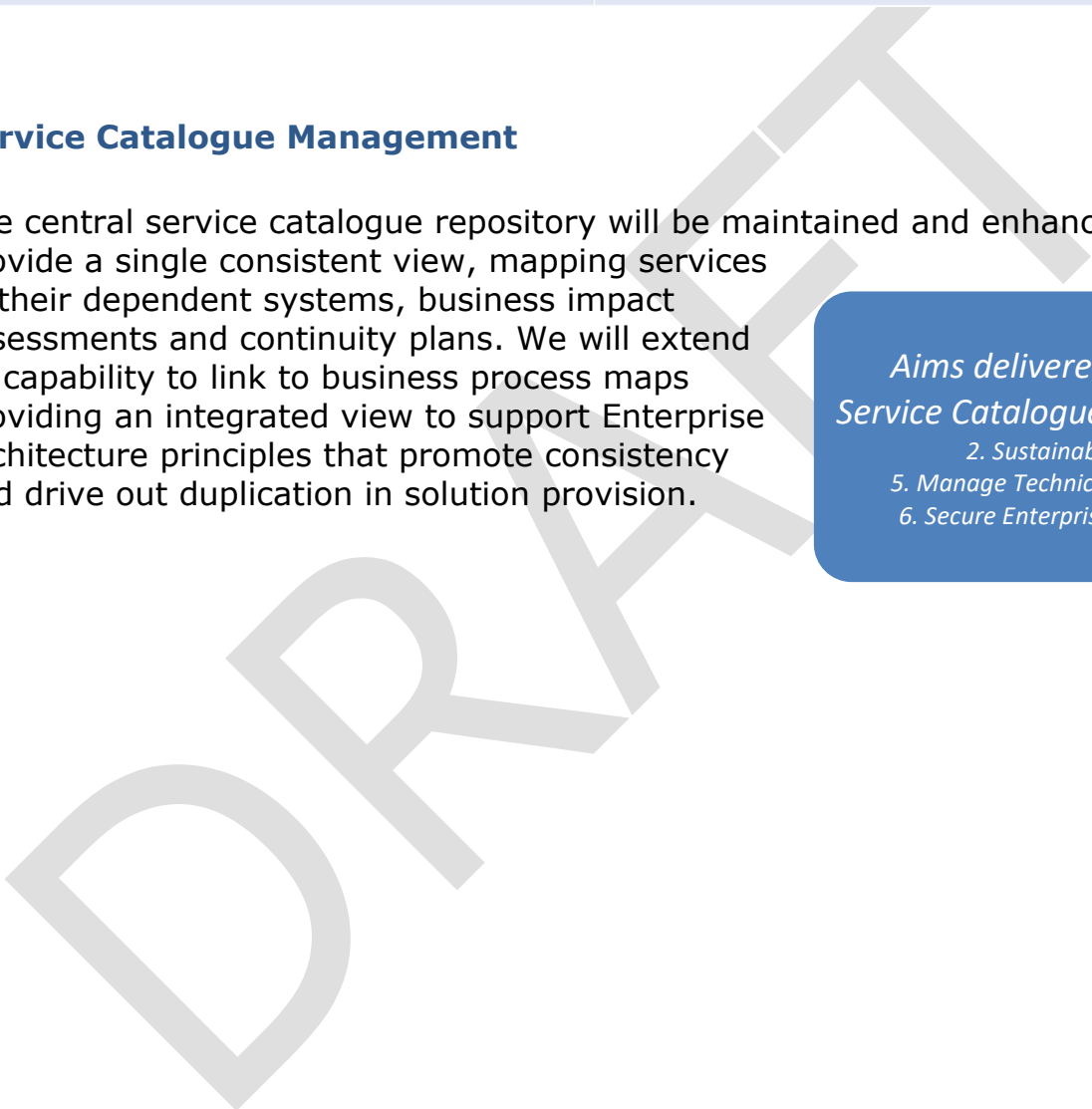
RESOURCES		CURRENT SERVICE CAPABILITY / OFFERING		FUTURE SERVICE CAPABILITY / OFFERING	
MEASURES	KEY PARTNERS	TARGETS	OPPORTUNITIES	PAIN POINTS	SUPPORT
CURRENT PROJECTS			BACKLOG ITEMS		

Service Catalogue Management

The central service catalogue repository will be maintained and enhanced to provide a single consistent view, mapping services to their dependent systems, business impact assessments and continuity plans. We will extend its capability to link to business process maps providing an integrated view to support Enterprise Architecture principles that promote consistency and drive out duplication in solution provision.

Aims delivered by the Service Catalogue function: -

- 2. Sustainability*
- 5. Manage Technical Diversity*
- 6. Secure Enterprise Systems*



Demand Management

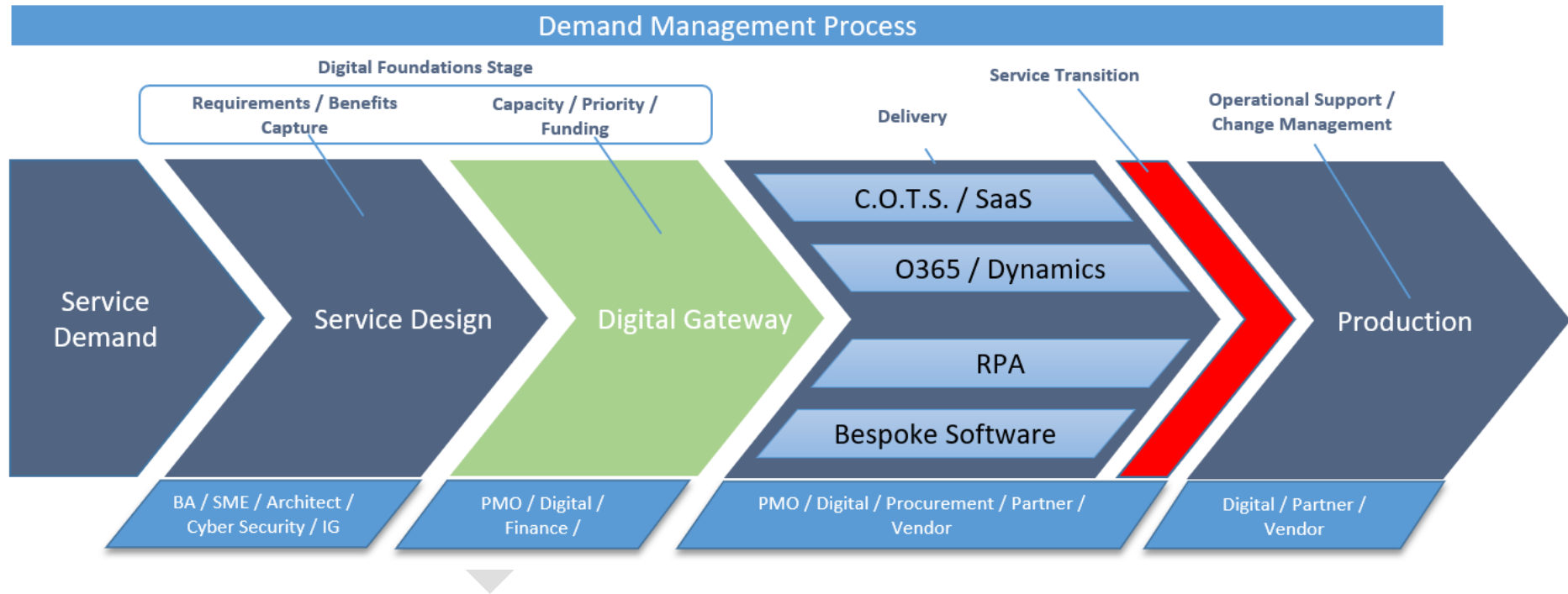
All new demand will be routed through the NWSSP PMO Portfolio Management process and categorised to align with portfolio management categories i.e.: -

- Programme
- Project
- Management Action

Demand that results in a requirement for an underpinning digital solution will be subject to the provisions of the Digital Foundations Stage as described in the Portfolio Management strategy. The demand management process will contain a number of key gateways as described in the diagram below.

Aims delivered by the Demand Management function: -

- 2. Sustainability*
- 5. Manage Technical Diversity*
- 6. Simplicity*



Sourcing and Lifecycle Management

We will utilize the “Enhance → Buy → Build” model. The starting point for the sourcing of all digital solutions will be to ensure that we leverage existing assets where possible, including identifying opportunities to make use of existing nationally implemented modules or services. If we can’t reuse, we procure externally. We may build custom solutions but only where suitable commercial products are not available. The process will be driven by the Enterprise Architecture model described above. In delivering solutions, wherever possible, we will adhere to the “open by default” principle ensuring that solutions are designed to enable integration and also provide interfaces to output data for reuse without restriction on content or uses of data.

Aims delivered by Sourcing & Lifecycle Management: -

1. Business Satisfaction
2. Sustainability
3. Data-Driven Organisation
4. Innovation
5. Manage Technical Diversity
6. Secure Enterprise Systems
7. Simplicity

Where applicable, we will build discovery phases into solution delivery projects. Such phases will involve full elaboration of user requirements to a technical specification and solution component design level. This process is designed to ensure that the supplier offering is completely aligned to the service specification and within the scope of the Invitation to Tender. In addition, it will ensure that the end user functionality is what the business expects. A

KEY MESSAGE

We must describe our requirements “generically”, drawing parallels with services provided in other sectors. This will help vendors to understand that our requirements are only bespoke in exceptional circumstances or where we provide niche services.

detailed solution architecture will be expected as an output describing each component of the solution in sufficient detail to ensure that the proposed solution architecture is fully understood, can be assured from an information governance and cyber security perspective and, where applicable, all hosting components can be catered for and supported.

We will ensure alignment to the principles of user centred design, set out in the Digital Strategy for Wales, collaborating with the Centre for Digital Public Services where appropriate.

We will work to ensure that we leverage the benefits of the Microsoft Enterprise Agreement working closely with and utilizing the resources provided by the Office 365 Centre of Excellence.

We will explore opportunities to invest in Artificial Intelligence technology through collaboration with our partner organisations, consultation with the Centre for Digital Public Services and participation in the “AI In Health in Wales” review commissioned by the chairs of Public Health Wales, Digital Health and Care Wales and Health Education and Improvement Wales.

To maximise business benefit and ensure optimal usage of finite resource, we will focus our solution delivery on optimizing business critical functions and deliverables.

Working closely with NWSSP Procurement and business service leads we will monitor the lifecycle of solutions ensuring that appropriate review points are identified and replacements for end-of-life solutions are sought in a timely manner.

Digital solution procurement will be embedded into the NWSSP Portfolio Management Approach and will be subject to the Digital Foundations Stage review built into that process

We will work with NWSSP Procurement to develop national templates that encompass these processes as well as catering for agile solution delivery projects.

KEY MESSAGE

We must recognize that a digital solution procurement is not a project in itself. In the vast majority of cases the project is a business change that is underpinned by a digital solution. We must therefore construct the project accordingly with appropriately resourced plans not only to deliver and implement the solution but also to manage the business change, design and implement the service management wrap and address the business continuity implications.

Finance and Resource Management

We will work with Digital Health & Care Wales to implement a comprehensive asset management process that will deliver a single consistent view of the status of all digital assets (including hardware, infrastructure and licensing).

This will provide an accurate forecast of all future replacement requirements, enable modelling of expanding workforce requirements and support the capital asset validation process. This process will also support the lifecycle management process by providing a forward look on replacement requirements for all solution components. In addition, it will mitigate the security risks posed by unmanaged devices.

Aims delivered by Finance & Resource Management:

- 2. Sustainability*
- 5. Manage Technical Diversity*
- 6. Secure Enterprise Systems*

We will work closely with service leads to define digital investment proposals, engaging with the capital and service planning processes.

As we move into the cloud hosting arena, we will work with our digital delivery partners to develop processes for managing cloud computing costs and creating models to predict on-going service costs for new and expanding solutions.

Risks, Controls and Assurance

We will manage all aspects of digital risk through the organisational risk management process, advising service leads on the relationship between digital risk and service risk and helping to frame those risks where appropriate. We will ensure that cyber security risks are managed in parallel through the Welsh Government Cyber Assessment Framework risk process.

As a participant in the NHS Wales National Digital Risk Approach Framework, we will work closely with other NHS organisations to ensure oversight, scrutiny and management of those risks considered to be 'System risks' or 'National risks' and that those risks are appropriately communicated to NWSSP service leads. We will ensure that appropriate mitigation actions are undertaken where appropriate.

We will develop an on-going programme of work to ensure compliance with the Welsh Government Cyber Assessment Framework aimed at continuous improvement of our compliance score and implementation of all recommendations. The existing Cyber Assessment Framework remediation project will address the current report recommendations and develop a process for response to future iterations of the framework.

Aims delivered by Risks, Controls and Assurance:

*5. Manage Technical Diversity
6. Secure Enterprise Systems*

We will continue to develop our security and threat monitoring, investigation and forensics capability through investment in appropriate tools, processes and liaison with Digital Health & Care Wales and the Cyber Resilience Unit.

Through the Digital Foundations process we will engage with service leads, PMO and Procurement colleagues to ensure that Secure Lifecycle Management principles (as described in the All-Wales Infrastructure Programme Target Operating Model) are embedded into all service developments that are underpinned by a digital solution.

We will identify suitable security accreditation frameworks at organisation and individual staff level and develop programmes of work to ensure that the organisation and appropriate staff members achieve and retain those accreditations.

Using national policies and frameworks as key enablers, we will develop and communicate procedures and processes to ensure that staff understand and are able to comply with their responsibilities in all aspects of cyber security.

We will work in conjunction with Audit Wales and NWSSP Internal Audit to build on existing audit briefs for our solutions and infrastructure. This will involve constructing robust plans for responding to recommendations with the aim of continuing to improve the capacity and resilience of our systems and gaining appropriate levels of assurance.

Measurement and Reporting

As part of the digital gateway process, we will work closely with service owners to define service levels that are appropriate and cost effective for services that are underpinned by digital solutions. We will ensure that service metrics such as resilience and availability are standardised to specific levels that are common to all services, where possible using the national [Service Level Target Policy](#) as the basis.

We will advise service owners on appropriate levels of monitoring, review periods and KPI and outcome reporting, providing advice and guidance on opportunities for service improvement, breaches and escalations.

KEY MESSAGE

It is particularly important that any dependency on support from Digital Health & Care Wales is identified at the digital gateway stage. Where appropriate we will identify the need for and advise service leads on navigation of the [New Service Request](#) process or raising changes to our existing SLA with DHCW.

Provider Service Management

As part of the digital gateway process, we will work closely with service leads to define service management arrangements that are appropriate and cost effective for services that are underpinned by digital solutions. This will include (but not be limited to): -

- review and approval of service architecture to ensure that all touchpoints are catered for and that responsibility is assigned for all aspects of the service model.
- review and negotiation of service level agreements with partner organisations and commercial suppliers.

KEY MESSAGE

NWSSP procurement runs national framework procurements where NWSSP is not the consumer of the procured solution. Where we provide cyber assurance of these solutions we must ensure buy in from all organisations that will operate the solution

We will advise service owners on appropriate levels of monitoring, review periods and KPI and outcome reporting, providing advice and guidance on opportunities for service improvement, breaches and escalations.

Procurement

Working with the NWSSP Digital Procurement team we will advise on the development of specific digital procurement processes to deliver effective digital procurements for NWSSP that align to the relevant legislation and policy. This will include embedding the digital gateway process, ensuring that terms and conditions reflect the delivery and service management requirements of each project and that cyber security assurance is a key component of the process.

It is important to recognise that the extant legislation³ (as of October 2022) governing critical digital systems for health places, the cyber risk on the organisation that operates the system. NWSSP procures solutions on behalf of NHS Wales organisations under framework agreements. As part of the procurement process NWSSP provides the cyber assurance. We will work closely with partner organisations and national boards to ensure that the level of assurance is consistent and acceptable to operating organisations.

RESOURCING

We will continue to shift the focus of the NWSSP in-house teams away from operational delivery to focus more on supporting service leads to enact business change that is underpinned by digital solutions.

We will expand the scope of our relations with key partners such as Digital Health & Care Wales to deliver a broader range of operational support and service management. This will require negotiation of extended SLA provisions to move further towards fully managed service offerings where possible.

We recognise we are currently limited in: -

- a) offering the career development opportunities comparable with those organisations that focus on the delivery of digital services or have large digital infrastructures.
- b) providing resilience in key roles where the requirement for those skills sets is sporadic.
- c) "Standing up" dedicated project resource at short notice, particularly in the field of application development where requirements to provide support and maintenance of legacy systems pulls resource away from project work.

Digital infrastructure services are provided by Digital Health & Care Wales therefore we do not require roles that potential employees regard as core digital roles e.g.: -

- Network services
- Active Directory management
- Server operating system management
- Desktop operating system management
- Mobile Device management
- Service desk operations

We also have limited or sporadic requirement for "green field" solution development i.e. a development that introduces brand new business processes and requires untried development techniques that provides opportunities to invest in solution architecture skills and staff development on emerging technologies.

³ [The Network and Information Systems Regulations 2018 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

This combination of factors limits our ability to recruit and retain staff with appropriate skills.

As noted in “Sourcing and Lifecycle Management” (above) we will also give preference to fully managed service offerings from 3rd party vendors where appropriate.

Where we have legacy application support and maintenance requirements or true bespoke development needs we will deliver these through: -

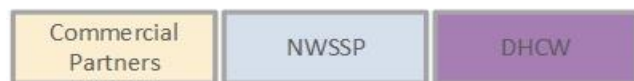
- a) Teams focused purely on support and maintenance through to end of the legacy solution’s lifecycle.
- b) Collaborations with partner organisations such as DHCW and commercial 3rd party providers that will provide a full service management wrap beyond initial solution delivery to include development, support and maintenance through the lifecycle of the solution.

DRAFT

The matrix below drills down on the functions of the Target Operating Model to describe how functions will be assigned across NWSSP and our partners.



Key



RISKS

Ref	Risk Summary	Risk Score		
		Likelihood	Impact	Total Score
A1	There is a risk that the operational and service management aspects of the proposed Target Operating Model will not be fully implemented because Digital Health & Care Wales may not be able to offer a broader range of services for strategic or capacity related reasons.	3-Possible	4-Major	12
A2	There is a risk that the operational and service management aspects of the proposed Target Operating Model will not be fully implemented because the capital and or revenue costs associated with moving to a fully managed service may be prohibitive.	3-Possible	4-Major	12
A3	There is a risk that the responsibilities identified as falling on NWSSP teams in the proposed Target Operating Model will not be fully fulfilled because recruitment to posts may be hampered by the restrictions of the current skills market.	3-Possible	4-Major	12

HOW WILL WE TAKE THIS STRATEGY FORWARD

Our digital goals, aims and the related outcomes can be used to help guide our decisions immediately. A programme of work will be developed and included as part of our IMTP and tracked by the NWSSP Senior Leadership Group and the Shared Services Partnership Committee. We will also review and update this overall Strategy on an annual basis to ensure it remains relevant and fit for purpose.

The projects within the programme will be designed to deliver the optimal Target Operating Model and fit broadly into three categories.

Stabilisation – activities to designed to address gaps or risks in the existing model.

- Provision of a robust hosting environment
- Provision of a robust and comprehensive digital asset and configuration management solution
- Remedial actions identified in the NWSSP Cyber Assessment Framework report
- Recruitment to address capacity and capability gaps in solution sourcing and cyber assurance

Optimisation – activities designed to realise the Target Operating Model and design process to deliver a continuous cycle of service improvement.

- Enhancement of the service catalogue to provide a holistic, service-based view
- Expansion of the DHCW SLA to remove any legacy reliance on NWSSP staff for change, release, problem and availability management
- Recruitment to embed support for service leads to enact business change underpinned by digital solutions through the business partner model
- Implementation of the fundamentals of demand management and the digital gateway process
- Provision of enhanced flexibility in the hosting environment leveraging cloud first principles.

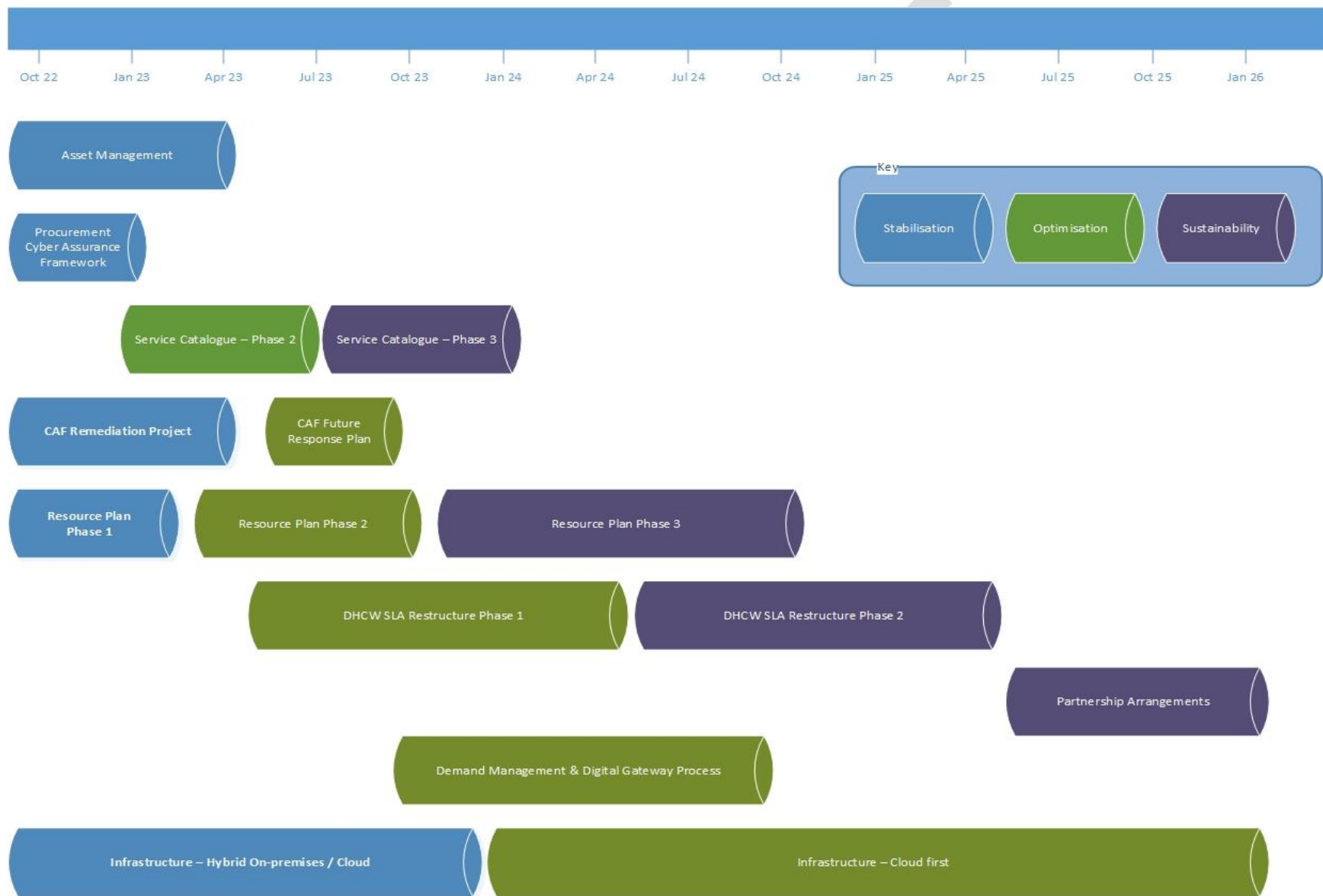
Sustainability – activities designed to ensure that we have a clearly defined model to support continuous improvement cycles and provide a targeted set of digital solutions that are robust and secure.

- Expansion of the DHCW SLA to deliver enterprise and data architecture services
- Underpinning solutions to support enterprise and data architecture services
- Development of partnership arrangements with DHCW and commercial partners to deliver bespoke development and legacy application support
- Recruitment to fully support business change delivered through the business partner model








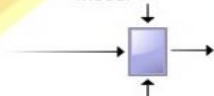

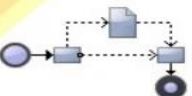
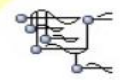
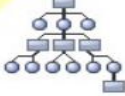

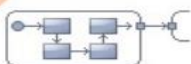

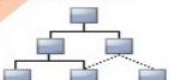




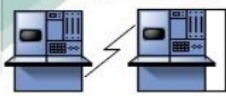
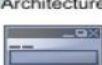
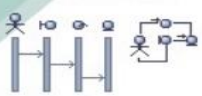








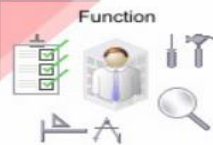




An indicative timeline for delivery of these projects is included in Appendix 1. The projects falling into the categories described above may run in parallel and / or overlap with one another. Re-planning or re-prioritisation may be required, particularly as the financial impact of some proposals becomes clearer.

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APPENDIX 1 – ROADMAP TO TARGET OPERATING MODEL



APPENDIX 2 – ZACHMANN ENTERPRISE ARCHITECTURE FRAMEWORK

ZFI Zachman Framework						
The Zachman Framework	DATA What	FUNCTION How	NETWORK Where	PEOPLE Who	TIME When	MOTIVATION Why
SCOPE (Contextual) Planner	Things Important to the Business 	Processes the Business Performs 	Locations in which the Business Operates 	Organizations Important to the Business 	Events/Cycles Significant to the Business 	Business Goals/Strategies 
BUSINESS MODEL (Conceptual) Owner	Conceptual Data Model 	Business Process Model 	Business Logistics 	Work Flow Model 	Master Schedule 	Business Plan 
SYSTEM MODEL (Logical) Designer	Logical Data Model 	Application Architecture 	Distributed System Architecture 	Human Interface Architecture 	Processing Structure 	Business Rule Model 
TECHNOLOGY MODEL (Physical) Builder	Physical Data Model 	System Design 	Technology Architecture 	Presentation Architecture 	Control Structure 	Rule Design 
DETAILED REPRESENTATIONS Sub-Contractor	Data Definition 	Program 	Network Architecture 	Security Architecture 	Timing Definition 	Rule Specification 
FUNCTIONING ENTERPRISE	Data 	Function 	Network 	Organization Units 	Schedule 	Strategy 



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Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM:3.3

19th January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NHS BUILDING FOR WALES 2 CONSTRUCTION FRAMEWORKS

ARWEINYDD: LEAD:	Neil Davies, Director, Specialist Estates Services
AWDUR: AUTHOR:	Andrew Waddington, Head of Building for Wales
SWYDDOG ADRODD: REPORTING OFFICER:	Neil Davies, Director, Specialist Estates Services
MANYLION CYSWLLT: CONTACT DETAILS:	Neil.davies4@wales.nhs.uk Mobile: 07798 607962

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

To obtain Shared Services Partnership Committee (SSPC) approval for the development of the NHS Building for Wales 2 (NHSBfW2) construction frameworks and place Find a Tender notices/proceed to tender.

Llywodraethu/Governance

**Amcanion:
Objectives:**

The project is managed through a Strategic Framework Board consisting of senior representatives of NHS Health Boards/Trusts; Welsh Government; Constructing Excellence in Wales; NWSSP-Specialist Estate Services SES and NWSSP Corporate (Director of Finance).

The project's strategic objectives are:

- Implement the Welsh Government's construction policy to ensure that the NHS in Wales complies with best practice models of procurement based on long-term strategic partnerships.

	<ul style="list-style-type: none"> • Support the NHS in Wales becoming an exemplar client for all major construction procurement projects. • Support the Welsh Government’s Healthier Wales foundation economy programme. • Create an environment of continuous improvement and team building and skills development to help deliver better value for money for the NHS in Wales in the procurement of major construction projects through strategic partnerships with integrated supply chains. <p>To help deliver these objectives NWSSP-SES will procure and manage construction and consultant frameworks for use by Health Boards/Trusts for the delivery of major capital projects within NHS Wales in excess of £7million.</p> <p>The frameworks are required to be operational by the end of April 2024 when the current arrangements cease.</p> <p>The frameworks will support expenditure of circa £1 billion during their duration.</p>
Tystiolaeth: Supporting evidence:	As attached paper below

Ymgynghoriad/ Consultation:
<p>NWSSP-SES commissioned Constructing Excellence in Wales (CEW) to undertake an independent 360 consultation with Health Boards and Trusts, Welsh Government, Framework Partners and NWSSP-SES on current framework performance and outline requirements for a future framework.</p> <p>In addition to CEWs 360 review, NWSSP-SES has also consulted with P23 in England, Framework Scotland, and the wider construction market.</p>

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

Argymhelliad/ Recommendation	The SSPC is asked to note this report and to approve the publication of Find a Tender notices to invite expressions of interest and thereafter for NWSSP-SES to proceed for the NHSBfW2 construction and consultant frameworks.
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Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	Ethical employment protocols are already embedded within the existing frameworks and will be incorporated into the next NHSBfW2 frameworks.
Cyfreithiol: Legal:	NWSSP-Legal and Risk Services has been appointed to assist in the compilation of contract documentation.
Iechyd Poblogaeth: Population Health:	Not applicable.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	The construction and consultant frameworks act as an enabler for Health Boards/Trusts to develop, design and deliver their major capital projects. As part of these processes, aspects of quality, safety and patient experience will all be considered.
Ariannol: Financial:	<p>The following estimated budgets have been established for the 2022/2023 financial year:</p> <p>Conference facilities NW & SW £4,000.00</p> <p>Legal advice £25,000.00</p> <p>Contingency £3,000.00</p> <p>Total £32,000.00</p> <p>The above estimates are exclusive of Value Added Tax.</p> <p>The estimated budget requirement for the 2023/2024 financial year has been currently established as:</p> <p>PQQ/ITT Evaluators £15,000.00</p> <p>Legal Advice £10,000.00</p>

	<p>Framework Launch £2,500.00</p> <p>Contingency £3,000.00</p> <p>Total £30,500.00</p>
Risg a Aswiriant: Risk and Assurance:	A risk register has been established and will be periodically reviewed and reported on to the Strategic Framework Board which oversees all current and proposed frameworks.
Safonau Iechyd a Gofal: Health & Care Standards:	<p>The establishment of consultant and contractor frameworks for the delivery of major capital projects within the NHS in Wales encompasses many of the Health & Care Standards. The main aspects covered by the establishment of these frameworks are: -</p> <p>Safe Care:</p> <p>2.1 Managing Risk and Promoting Health and Safety.</p> <p>2.4 Infection prevention and control (IPC) and decontamination.</p> <p>2.9 Medical devices, equipment and diagnostic systems.</p> <p>Dignified Care:</p> <p>4.1 Dignified Care.</p>
Gweithlu: Workforce:	There are no workforce implications for NWSSP-SES. Specific training will be provided to Health Boards/Trusts by NWSSP-SES to support the new arrangements.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	NWSSP-SES will carry out 'meet the buyer' events across Wales to publicise the new framework structure for potential bidders. The tender process will be 'open' via 'etendering' and 'SelltoWales'.

1. INTRODUCTION

The current NHS Building for Wales construction and consultant frameworks for use by the NHS Wales Health Boards and Trusts have been in existence since 2018 and were formally extended by an initial twelve-month period to 28th April 2023 in order to maintain service continuity whilst the framework procurement processes are in development.

NWSSP-SES anticipate that a further 12-month extension will be required to maintain service continuity whilst the procurement process is concluded.

The Strategic Framework Board gave approval for NWSSP-SES to proceed with a consultation exercise in February 2021 to establish the needs and requirements of the NHS in Wales, Welsh Government, and Industry for the next generation of frameworks.

Constructing Excellence in Wales (CEW) were appointed in April 2021 to undertake an independent 360 consultation with Health Boards and Trusts, Welsh Government, Framework Partners, and NWSSP-SES on current framework performance which identified a number of common themes/requirements for a future framework as follows:

- Pipeline of Projects;
- Value for Money;
- Simplicity; and
- Achievements/Recognition.

The overriding message is that frameworks are the preferred mechanism for procuring construction services. Health Boards/Trusts also identified the benefits of early supply chain involvement, integrated supply chains and the rapid response time provided through frameworks as major advantages.

NWSSP-SES has also carried out further engagement with the wider market including National Contractors and Welsh Small and Medium sized Enterprises (SMEs) and consultants. Key findings from those discussions were:

- Majority of larger companies would welcome the opportunity to tender for the next generation frameworks,
- Small Medium Enterprises (SMEs) generally have capacity to tender for works up to £7million,
- SMEs recommended that, if the framework remained mandatory, the minimum threshold value is raised to allow Health Boards/Trusts more scope to develop smaller schemes through the local market.

NWSSP-SES has consulted with the P23 framework in England and Framework Scotland to share best practice. NWSSP-SES has also reviewed the recommendations of the 'Constructing the Gold Standard report',

published by Cabinet Office, that recognises that, for any framework to be successful in achieving its key benefits, a pipeline of work is essential.

Two meet the buyer events were held, one in North Wales and one in South Wales in December 2022 where the views and opinions of the proposal were sought from potential partners.

The above will support the development of the proposal for the NHSBfW2 capital construction frameworks.

Milestones

Key Milestone	Milestone Dates
Develop Preferred Option for Strategic Framework Board approval	9 th November 2022
PQQ Short-listing: Issue contract notice	20 th February 2023
PQQ Short-listing: Strategic Framework Board approval.	15 th June 2023
ITT Bid & Evaluation Strategic Framework Board approval	9 th November 2023
Contract Award Notice	9 th November 2023
Contract Execution: Completion	16 th January 2024
Velindre Contract Execution: Completion	30 th January 2024
Framework Operational Deadline	26 th April 2024

2.0 The New Framework Model

2.1. Structure of Framework Model

It is proposed that there are three main procurement routes for capital projects within the NHS in Wales:

- NHSBfW2 Lot 1: Works Value (ex VAT) £20million+,
- NHSBfW2 Lot 2: Works Value (ex VAT) £7million to £20million,
- Local arrangements: Works Value (ex VAT) <£7million

It is envisaged for very high value schemes that Health Boards and Trusts would need to consider alternative arrangements such as Welsh Governments Mutual Investment Model.

The primary purpose of the national frameworks is to support the efficient and effective design and construction of capital projects and to enable Health

Boards and Trusts within Wales to rapidly procure from a team of pre-selected parties in competition to support their capital needs. The frameworks will provide the appropriate governance and assurance that the pre-selected parties have met prescribed standards in terms of capacity and capability and processes align with the Welsh Government business case methodology to ensure value for money is at the forefront of all projects.

Welsh Government policy requirements, such as the Well-being of Future Generations (Wales) Act 2015 and the Environment (Wales) Act 2016 will be integrated within each of the frameworks. Best practice requirements of Constructing Excellence Wales and Welsh Government procurement policy will also be incorporated to align with the requirements to support the Foundation Economy and meet Welsh Government's ambition for the public sector to be net zero by 2030.

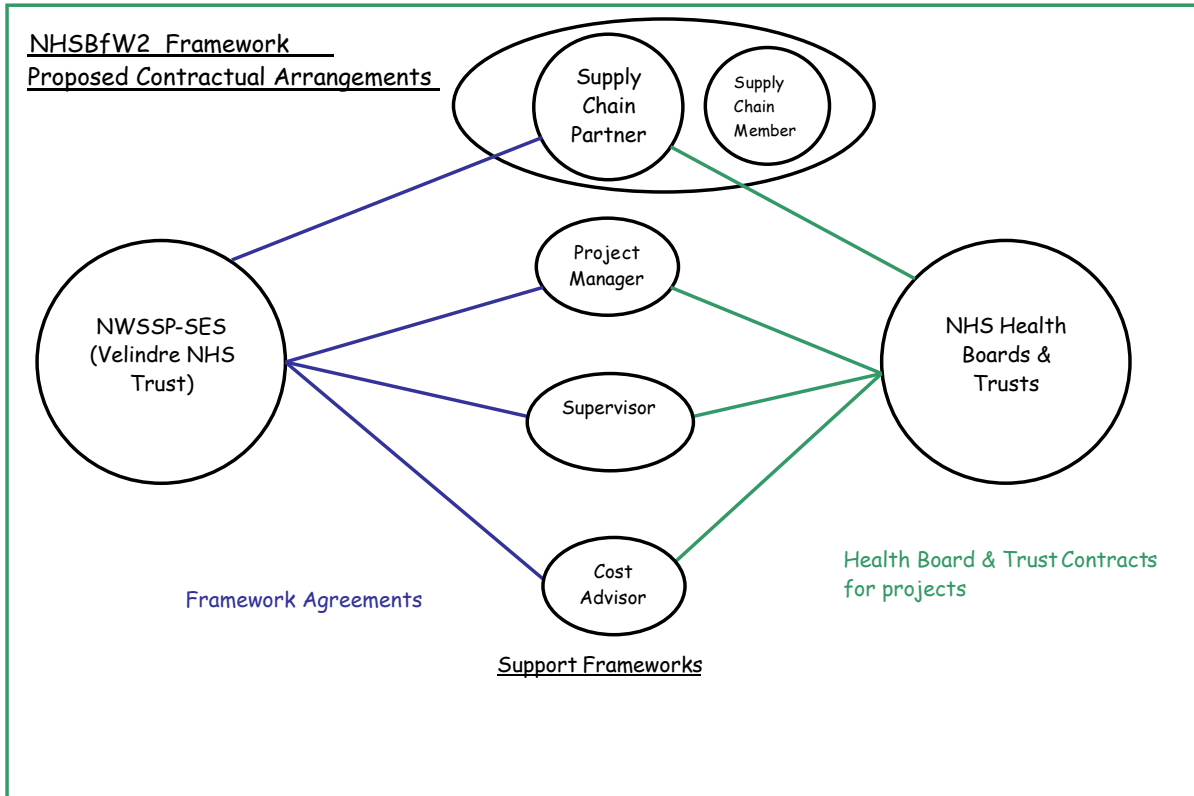
2.2 National Frameworks

It is proposed that support consultant frameworks are established in order to assist and represent the Health Boards/Trusts from the outset of a project. The disciplines to support the Health Boards and Trusts are:

- Project Manager (4 number)
- Cost Adviser (4 number)
- Supervisor (3 number)

In addition, it is proposed that a Supply Chain Partner framework is established comprising four Supply Chain Partners per lot. The Supply Chain Partner will be required to act as Designer, Principal Contractor, and Principal Designer under the Construction Design Management 2015 Regulations. Each Supply Chain Partner will comprise of the following Supply Chain Members: -

Architect (2 number)
Building Services Engineer (2 number)
Civil and Structural Engineer (2 number)
Building Services Installer (2 number)



It is proposed that the use of the national frameworks by Health Boards and Trusts is mandatory for all construction projects in excess of £20M.

It is further proposed that the use of the Lot 2 national frameworks by Health Boards and Trusts for all construction projects with values between £7M and £20M will be non-mandatory, subject to agreement at Strategic Outline Case/Programme Business Case stage (SOC/PBC) between Welsh Government and the Health Boards/Trusts, to enable projects primarily involving reactive maintenance, equipment or fire precaution works to be procured directly by the Health Boards/Trusts through alternative arrangements.

NWSSP-SES will develop 'ground rules' for procurement to prevent conflicts of interests developing. Parties representing the Health Boards/Trusts will only be employed on the Client side of a project.

All contractual arrangements will utilise the National Engineering Contract 4 suite of construction contracts.

The model enables early contractor involvement, integrated supply chains and single point contractual responsibility. Feasibility, design development and construction will be underpinned by the Royal Institute British Architects Plan of Works and Schedules of Duties developed by NWSSP-SES.

The national frameworks are similar to the current arrangements but have been strengthened in certain key areas including the introduction of sanctions to discourage non bidding at Call-Off contract stage and increased attractiveness for suppliers through the introduction of more flexible contract terms.

2.1.3 Local Arrangements

Local arrangements are classified as any capital project below £7million. During the consultation process, SES established that some Health Boards and Trusts have developed their own local frameworks upto £4million. These are due to be renewed close to the proposed start date for the NHSBfW2 frameworks. It has been further established that Health Boards/Trusts also currently utilise alternative frameworks for their lower value schemes; those alternative arrangements currently allow for procurement of services up to and in excess of £7million.

Through consultation with current framework partners, national suppliers and consultants and local SMEs, NWSSP-SES has determined that opportunity for supporting Welsh SMEs would be enhanced through this proposed change to the minimum framework threshold. During consultation, feedback from Welsh SMEs noted that adjusting the minimum threshold in line with the Building Cost Information Service (BCIS) Public Sector (PUBSEC) Construction Tender Price Index will provide them more opportunity to bid for work in a market less attractive for national suppliers.

General arrangements

It is proposed that:

1. Frameworks are developed, implemented, and procured by NWSSP-SES in collaboration with NWSSP Procurement Services and NWSSP Legal & Risk on behalf of NHS Wales.
2. Frameworks are managed by NWSSP-SES on behalf of NHS Wales.
3. Framework agreements are executed by Velindre NHS Trust as host to NWSSP.
4. The current framework principle whereby Health Boards and Trusts can access the central frameworks arrangements and select private sector parties under a prescribed mini-competition process is maintained.
5. Health Boards/Trusts will act as the Client under the terms of the contract.
6. Frameworks are flexible in order to allow access for joint agency working in the provision of developments that include health and associated facilities within Wales.
7. Frameworks are structured for capital funded schemes only. As such it is proposed that revenue funded projects are excluded from the frameworks.

8. Frameworks are for four years duration with an option to extend by a further two years.
9. Frameworks are non-subscription for suppliers and free at source for client use.
10. Frameworks are structured to deliver major new-build, infrastructure and refurbishment schemes, using a Design & Build (D&B) contract strategy.
11. The minimum framework threshold value is raised from £4million to £7million (works costs) in line with BCIS (PUBSEC) Construction Tender Price Index.
12. The use of the frameworks will continue to be mandatory for schemes with works cost in excess of £20million unless agreed at SOC/PBC between Welsh Government and the Health Boards/Trusts on an exception basis.
13. The use of the frameworks for schemes with works costs between £7million to £20million will be non-mandatory, subject to agreement at SOC/PBC between Welsh Government and the Health Boards/Trusts, to enable projects primarily involving reactive maintenance, equipment or fire precaution works to be procured directly by Health Boards/Trusts.
14. Current arrangements for annual adjustments to framework rates are maintained but amended to a biannual cycle to smooth cash flow.
15. The Pain/Gain share percentage is realigned with P23 and Framework Scotland at 5% from the current 2.5% to better ensure new arrangements attract strong market engagement in a competitive framework market.

The Strategic Framework Board approved the arrangements for the new frameworks at its meeting on the 9th November 2022.

3.0 RECOMMENDATION

The SSPC is asked to approve the development of the NHS Building for Wales 2 construction frameworks and place Find a Tender notices/proceed to tender.



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Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM: 3.4

19th January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Risk Appetite Statement

ARWEINYDD: LEAD:	Andy Butler, Director of Finance & Corporate Services
AWDUR: AUTHOR:	Peter Stephenson, Head of Finance & Business Development
SWYDDOG ADRODD: REPORTING OFFICER:	Peter Stephenson, Head of Finance & Business Development
MANYLION CYSWLLT: CONTACT DETAILS:	Peter.stephenson2@wales.nhs.uk

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

For the Committee to approve the NWSSP Risk Appetite Statement.

Llywodraethu/Governance

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

Ymgynghoriad/Consultation :

Senior Leadership Group
Shared Services Partnership Committee (through Development Day).

Adduned y Pwyllgor/Committee Resolution (insert ✓):

DERBYN/ APPROVE	✓	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	
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Argymhelliad/ Recommendation	The Committee is asked to APPROVE the revised Risk Appetite Statement.
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Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	No direct impact.
Cyfreithiol: Legal:	No direct impact.
Iechyd Poblogaeth: Population Health:	No direct impact.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct impact.
Ariannol: Financial:	No direct impact.
Risg a Aswiriant: Risk and Assurance:	No direct impact.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Governance, Leadership and Accountability
Gweithlu: Workforce:	No direct impact.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open.

1. BACKGROUND

The Risk Appetite Statement is presented to the SSPC for approval on an annual basis, or sooner if circumstances require. The statement was informally reviewed at the SSPC Development Day on 11 November 2022 and the Informal Senior Leadership Group on the 10th of November.

2. RECOMMENDATION

The Committee is asked to **APPROVE** the revised Risk Appetite Statement.

NHS Wales Shared Service Partnership

Risk Appetite Statement.

Introduction.

NWSSP is committed to achieving and maintaining the highest standards of managerial practices that maximise and progress service benefits. NWSSP recognises that effective risk management is a key component of corporate governance and is critical to achieving the strategic objectives of the organisation.

NWSSP's Risk Management Protocol seeks to ensure that there is an effective process in place to manage risk across the organisation. Risk management is part of management decision-making and is the responsibility of all staff. Risks are identified, assessed, and managed at a corporate level ('top-down') and operational level ('bottom-up'). Managers have a responsibility to evaluate their risk environment, to put in place appropriate controls and monitor the effectiveness of these controls.

An organisation's risk appetite is defined as the amount and type of risk that the organisation is willing to take in the pursuit of its strategic objectives. The risk appetite can help NWSSP by enabling the organisation to take decisions based on an understanding of the risks involved and communicating expectations for risk-taking to managers.

NWSSP has undertaken a review to identify the most commonly used framework for NHS organisations and confirmed that this is one developed by the Good Governance Institute (Annex 1).

The risk appetite has been communicated to staff to embed it throughout the organisation and it is also a key reference document in discussions regarding the risks on the NWSSP risk register, ensuring these are in line with NWSSP's risk appetite.

The Risk Appetite Statement is presented to the SSPC for approval on an annual basis, or sooner if circumstances require. The statement was informally reviewed at the SSPC Development Day on 11 November 2022 and the Informal Senior Leadership Group on the 10th of November.

General Statement of Appetite.

NWSSP faces a broad range of risks reflecting its responsibilities. The risks arising from our responsibilities can be significant. These risks are managed through detailed processes that emphasise the importance of integrity, intelligent inquiry, maintaining high quality staff and public accountability.

NWSSP make resources available to control operational risks at acceptable levels and recognises that it is not possible or indeed necessarily desirable to eliminate some of the risks inherent in our activities. Acceptance of some risk is often necessary to foster innovation within the services for which we are responsible.

This statement considers the most significant risks to which NWSSP is exposed and provides an outline of the approach to managing these risks. All strategic and business plans for operational areas must be consistent with this Statement. Given the range of our activities and responsibilities, it is not appropriate to make a single overarching statement of our attitude to risk. Instead, a range of risk appetite statements arising from the different areas of our work are set out below.

1. Financial

We are prepared to accept some financial risk as long as appropriate controls are in place. We have a holistic understanding of VFM with price not the overriding factor.

2. Regulatory

We are prepared to accept the possibility of some regulatory challenge as long as we can be reasonably confident that we would be able to challenge this successfully.

3. Quality

We will pursue innovation wherever appropriate. We are willing to take decisions on quality where there may be high inherent risks but the potential for significant longer-term gains.

4. Reputational

We are prepared to accept the possibility of some reputational risk as long as there is the potential for improved outcomes for stakeholders.

5. People

We will pursue workforce innovation. We are willing to take risks which may have implications for our workforce but could improve the skills and capabilities of our staff. We recognise that innovation is likely to be disruptive in the short-term but with the possibility of long-term gains.

Conclusion

This statement has acknowledged that NWSSP faces a broad range of risks reflecting its responsibilities and that some of these can be significant.

It has also asserted that risk management is part of management decision-making and is the responsibility of all staff. It has reaffirmed that Managers have a responsibility to evaluate their risk environment, to put in place appropriate controls and monitor the effectiveness of these controls.

NWSSP's risk appetite levels are communicated to staff through the practical adoption of these risk appetite levels in the way that the Directorate and Corporate Risk Registers function. Directorate Senior Management meetings and the NWSSP Senior Leadership Group are the conduit through which this process is led.

This statement will be reviewed annually, unless circumstances dictate that an earlier review is necessary

Applying risk appetite matrix

RISK APPETITE LEVEL ▶	0 NONE	1 MINIMAL	2 CAUTIOUS	3 OPEN	4 SEEK	5 SIGNIFICANT
RISK TYPES ▼	Avoidance of risk is a key organisational objective.	Preference for very safe delivery options that have a low degree of inherent risk and only a limited reward potential.	Preference for safe delivery options that have a low degree of residual risk and only a limited reward potential.	Willing to consider all potential delivery options and choose while also providing an acceptable level of reward.	Eager to be innovative and to choose options offering higher business rewards (despite greater inherent risk).	Confident in setting high levels of risk appetite because controls, forward scanning and responsive systems are robust.
FINANCIAL How will we use our resources?	We have no appetite for decisions or actions that may result in financial loss.	We are only willing to accept the possibility of very limited financial risk.	We are prepared to accept the possibility of limited financial risk. However, VFM is our primary concern.	We are prepared to accept some financial risk as long as appropriate controls are in place. We have a holistic understanding of VFM with price not the overriding factor.	We will invest for the best possible return and accept the possibility of increased financial risk.	We will consistently invest for the best possible return for stakeholders, recognising that the potential for substantial gain outweighs inherent risks.
REGULATORY How will we be perceived by our regulator?	We have no appetite for decisions that may compromise compliance with statutory, regulatory or policy requirements.	We will avoid any decisions that may result in heightened regulatory challenge unless absolutely essential.	We are prepared to accept the possibility of limited regulatory challenge. We would seek to understand where similar actions had been successful elsewhere before taking any decision.	We are prepared to accept the possibility of some regulatory challenge as long as we can be reasonably confident we would be able to challenge this successfully.	We are willing to take decisions that will likely result in regulatory intervention if we can justify these and where the potential benefits outweigh the risks.	We are comfortable challenging regulatory practice. We have a significant appetite for challenging the status quo in order to improve outcomes for stakeholders.
QUALITY How will we deliver safe services?	We have no appetite for decisions that may have an uncertain impact on quality outcomes.	We will avoid anything that may impact on quality outcomes unless absolutely essential. We will avoid innovation unless established and proven to be effective in a variety of settings.	Our preference is for risk avoidance. However, if necessary we will take decisions on quality where there is a low degree of inherent risk and the possibility of improved outcomes, and appropriate controls are in place.	We are prepared to accept the possibility of a short-term impact on quality outcomes with potential for longer-term rewards. We support innovation.	We will pursue innovation wherever appropriate. We are willing to take decisions on quality where there may be higher inherent risks but the potential for significant longer-term gains.	We seek to lead the way and will prioritize new innovations, even in emerging fields. We consistently challenge current working practices in order to drive quality improvement.
REPUTATIONAL How will we be perceived by the public and our partners?	We have no appetite for decisions that could lead to additional scrutiny or attention on the organisation.	Our appetite for risk taking is limited to those events where there is no chance of significant repercussions.	We are prepared to accept the possibility of limited reputational risk if appropriate controls are in place to limit any fallout.	We are prepared to accept the possibility of some reputational risk as long as there is the potential for improved outcomes for our stakeholders.	We are willing to take decisions that are likely to bring scrutiny of the organisation. We outwardly promote new ideas and innovations where potential benefits outweigh the risks.	We are comfortable to take decisions that may expose the organisation to significant scrutiny or criticism as long as there is a commensurate opportunity for improved outcomes for our stakeholders.
PEOPLE How will we be perceived by the public and our partners?	We have no appetite for decisions that could have a negative impact on our workforce development, recruitment and retention. Sustainability is our primary interest.	We will avoid all risks relating to our workforce unless absolutely essential. Innovative approaches to workforce recruitment and retention are not a priority and will only be adopted if established and proven to be effective elsewhere.	We are prepared to take limited risks with regards to our workforce. Where attempting to innovate, we would seek to understand where similar actions had been successful elsewhere before taking any decision.	We are prepared to accept the possibility of some workforce risk, as a direct result from innovation as long as there is the potential for improved recruitment and retention, and developmental opportunities for staff.	We will pursue workforce innovation. We are willing to take risks which may have implications for our workforce but could improve the skills and capabilities of our staff. We recognize that innovation is likely to be disruptive in the short term but with the possibility of long term gains.	We seek to lead the way in terms of workforce innovation. We accept that innovation can be disruptive and are happy to use it as a catalyst to drive a positive change.



NWSSP Finance Report December 2022

*Adding Value
Through Partnership,
Innovation and Excellence*

Dashboard Summary – 1st April 2022 to 31st December 2022

	Annual Budget £'000	YTD Budget £'000	YTD Spend £'000	YTD Variance £'000
Income	-666,146	-475,359	-477,738	-2,379
Pay	309,998	230,889	227,152	-3,738
Non Pay	220,618	168,630	172,594	3,965
WRP – DEL	134,780	75,840	75,840	0
Distribution	750	0	0	0
Year to date Underspend	0	0	2,152	2,152
	0	0	0	0

POSITION SUMMARY	M9 £m	22/23 Forecast £m
Outturn/Forecast before anticipated funding	14.164	19.680
Mass Vaccination & PPE funding agreed	-13.180	-17.716
ADJUSTED OUTTURN	0.984	1.964
Anticipated energy funding	-0.984	-1.964
REPORTED/FORECAST POSITION	0.000	0.000

£1.964m of funding within our 2022/23 forecast is currently anticipated from WG to fund the exceptional energy pressures.

Covid Costs	YTD £m	22/23 Forecast £m
CONFIRMED FUNDING:		
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay	1.036	1.437
Social/Primary Care PPE	8.489	11.489
PPE delivery/warehousing/testing	3.397	4.532
Ukraine PPE donation	0.258	0.258
TOTAL CONFIRMED FUNDING	13.180	17.716
NWSSP TO FUND:		
Covid Recovery	0.923	1.163
TOTAL COVID COSTS	14.103	18.879

£14.103m of Covid costs have been incurred to Month 9 with a full year forecast of **£18.879m**. The forecast is largely dependent upon the demand for PPE from Primary and Social Care which has reduced in 2022/23.

£1.163m of Covid Recovery costs are being funded from NWSSP core allocation.

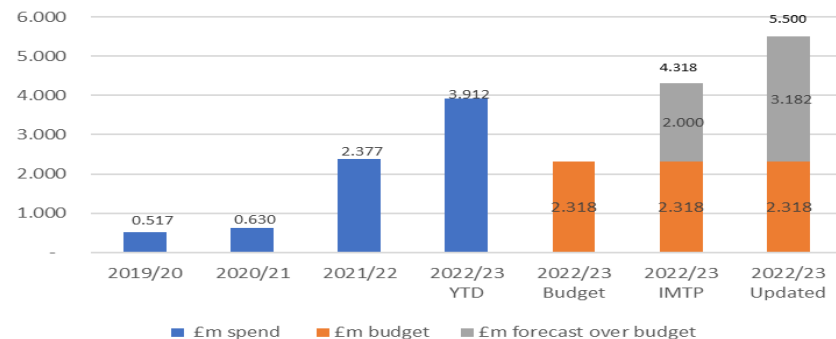
NWSSP reported the Month 9 financial position with a year to date **underspend of £2.152m** after anticipating £0.984m of Welsh Government funding for Energy pressures.

We have increased the NWSSP 2022/23 distribution to **£2.000m** and Organisations are requested to submit invoices for these funds in January 2023 per the distribution shares below.

The year end forecast outturn remains at break-even with the assumption of full funding of exceptional energy pressures and Covid costs from Welsh Government.

Health Board /Trust	%	PLANNED DISTRIBUTION £	ADDITIONAL DISTRIBUTION £	TOTAL DISTRIBUTION £	Agreed Recurrent Reinvestment £	2022/23 DISTRIBUTION £
Aneurin Bevan	9.85	73,844	123,125	196,969		196,969
Swansea Bay	8.80	66,029	110,000	176,029		176,029
Betsi Cadwaladr	11.98	89,815	149,750	239,565	-89,815	149,750
Cardiff and Vale	10.49	78,652	131,125	209,777		209,777
Cwm Taf	10.60	79,527	132,500	212,027		212,027
Hywel Dda	7.77	58,293	97,125	155,418	-58,293	97,125
Powys	1.95	14,598	24,375	38,973	-14,598	24,375
Velindre	1.17	8,781	14,625	23,406		23,406
WAST	1.28	9,580	16,000	25,580	-9,580	16,000
Public Health Wales	0.87	6,530	10,875	17,405	-6,530	10,875
Welsh Government	35.25	264,351	440,500	704,851	-264,351	440,500
Total	100%	750,000	1,250,000	2,000,000	-443,167	1,556,833

Annual Energy Costs, Budget & Forecast (£m)

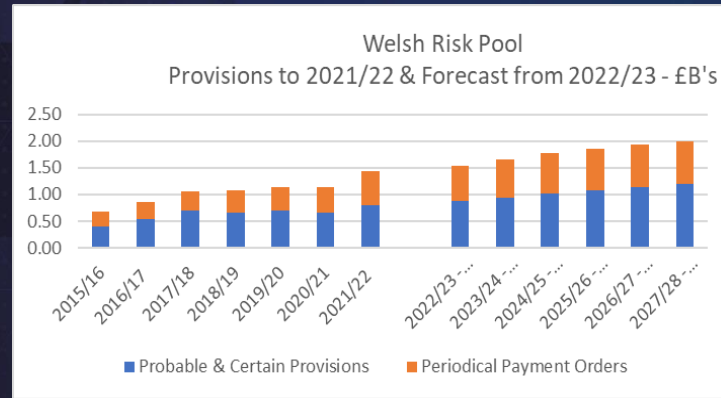


The energy forecast for 2022/23 is **£5.500m** with funding for the **£3.182m** exceptional pressure anticipated from WG.

Welsh Risk Pool, Stock and Capital: 1st April 2022 to 31st December 2022

Month 9 2022/23	£000s
Actual spend to December 2022 incl Redress	75,840
Settled cases - awaiting payment	10,470
Joint Settlement/Round Table Meeting/Offer	23,753
Periodical Payment Orders to March 2023	687
Sub Total	110,750
Future Estimated Settlements	18,028
Month 9 2022/23 DEL Forecast - Min	128,778
Month 9 2022/23 DEL Forecast - Max	142,300
IMTP DEL Forecast 2022/23	134,870

£75.840m WRP DEL expenditure has been incurred to 31st December 2022. A review of cases due to settle in 2022/23 indicates a potential range of **£128.8m-£142.3m**. The IMTP forecast of **£134.780m** remains within this forecast range. We continue to assume **£25.345m** will be funded under the Risk Share Agreement in 2022/23.



Long term liability (AME) provisions totalled **£1.429bn** at 31st March 2022. As at Month 9 this is expected to increase by a further **£107m** in 2022/23. This is after accounting for the impact of the HM Treasury PES paper for updated inflation and discount rates issued in December 2022. Provisions are forecast to be in excess of **£2bn** by 2027/28.

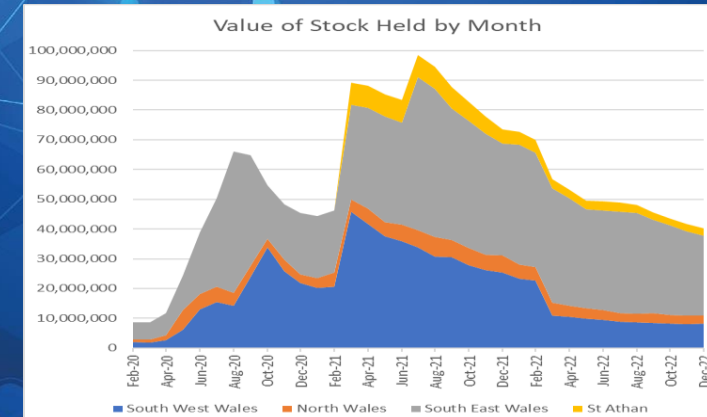
	Forecast Risk Share Charges 2023/24 - 2027/28 £m				
	2023/24	2024/25	2025/26	2026/27	2027/28
2023/24 IMTP £m	26.494	27.911	30.857	32.106	33.364
2022/23 IMTP £m	26.703	28.07	28.439	28.813	
Increase/(decrease)	-0.209	-0.159	2.418	3.293	

Forecast risk share charges for 2023/24 and 2024/25 remain in line with the indicative charges included in our 2022/23 IMTP

Scheme	Allocation	YTD Spend	Balance Outstanding
	£000	£000	£000
Laundry Services	83	85	2
EV charging infrastructure	0	1	1
IP5	42	0	-42
IT equipment	46	17	-29
TRAMS	150	0	-150
Denbigh	78	13	-65
Samlet Road	9	0	-9
Unallocated	49	-56	-105
Discretionary Capital Total	457	60	-397
IP5 discretionary	190	14	-176
Scan for Safety	826	420	-406
Laundry Services	1,522	0	-1,522
TRAMS	0	227	227
Welsh Healthcare Student Hub	474	474	0
IP5	908	0	-908
Denbigh	20	9	-11
EV charging infrastructure	68	0	-68
HCS replacement vehicles	503	0	-503
Additional Capital Total	4,511	1,144	-3,367
TOTAL CAPITAL ALLOCATION	4,968	1,204	-3,764

Our current Capital Expenditure Limit for 2022/23 is **£4.968m**. This includes **£3.021m** of year end capital funding that we submitted bids for. Capital expenditure to Month 9 is **£1.204m** and we have plans to fully utilise all available capital funding. Since the transfer of the All Wales Laundry Service in 2021/22 we are experiencing increased pressure on our discretionary capital allocation as this was not increased following the transfer of the new Service

The value of stock held in stores at 31st December 2022 was **£40.1m**. We continue to maintain the 16 week PPE stock holding requested by Welsh Government.



Financial Position and Key Targets

KPI	Target	2021/22					2022/23							Trend	
		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	Achieved	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	On Target	
Planned Distribution	£0.75m Annual	£2.00m	£2.00m	£2.00m	£0.75m	£0.75m	£0.75m	£0.75m	£0.75m	£0.75m	£0.75m	£0.75m	£0.75m	£2.000m	
% of Non NHS Invoices paid within 30 days (In Month)	95% Monthly	94.74%	96.24%	95.14%	96.54%	94.52%	96.77%	95.43%	97.12%	95.73%	95.51%	95.04%	93.91%		
% of Non NHS Invoices paid within 30 days (Cumulative)	95% Monthly	96.22%	96.18%	96.12%	96.54%	95.09%	95.75%	95.65%	95.96%	95.92%	95.85%	95.75%	95.51%		
% of NHS Invoices paid within 30 days (In Month)	95% Monthly	89.77%	92.31%	93.68%	94.29%	91.64%	97.73%	84.29%	84.09%	86.67%	86.52%	83.82%	76.29%		
% of NHS Invoices paid within 30 days (Cumulative)	95% Monthly	92.28%	92.29%	92.40%	94.29%	92.56%	94.74%	92.11%	91.02%	90.07%	89.44%	88.77%	86.96%		

Corporate

KPI	Target	2021/22					2022/23							Trend
		January	February	March	April	May	June	July	August	September	October	November	December	
NHS Debts in excess of 17 weeks - number of invoices	0 Monthly	0	3	0	2	3	1	0	2	3	1	7	12	
Variable Pay – Overtime	<£75k Monthly	£84k	£75k	£102k	£104k	£90k	£93k	£86k	£140k	£148k	£137k	£143k	£120k	
Agency % to date	<0.8% Cumulative	0.51%	0.52%	0.53%	0.31%	0.25%	0.32%	0.32%	0.33%	0.32%	0.30%	0.31%	0.29%	
Agency % Adjusted to exclude SLE	<1% Cumulative	1.01%	1.07%	1.02%	1.06%	0.89%	1.12%	1.13%	1.16%	1.13%	1.08%	1.10%	1.04%	

Covid

Covid expenditure to 31st December 2022 was **£14.103m**. Welsh Government has approved funding for mass vaccination, Social/Primary care PPE issues and All Wales PPE delivery, warehousing and testing.

Our expenditure to date includes **£0.923m** of Covid recovery support costs for the increased staff costs we have recruited in our payroll, recruitment and accounts payable teams. Welsh Government have confirmed that there is **no additional funding** for Covid Recovery costs. We forecast these Covid recovery costs will total **£1.163m** in 2022/23 which includes **£0.126m** to pump prime the new virtual ID checking software. These costs are being funded from **NWSSP savings** rather than being recharged to UHBs/Trusts.

The full year forecast Covid funding requirement from Welsh Government is **£17.716m**. The forecast has reduced following reductions in the PPE supplied to Primary & Social Care and the forecast reduction in PPE and consumables to be supplied to the mass vaccination booster programme.

Covid Costs	YTD	22/23 Forecast
	£m	£m
CONFIRMED FUNDING:		
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay	1.036	1.437
Social/Primary Care PPE	8.489	11.489
PPE delivery/warehousing/testing	3.397	4.532
Ukraine PPE donation	0.258	0.258
TOTAL CONFIRMED FUNDING	13.180	17.716
NWSSP TO FUND:		
Covid Recovery	0.923	1.163
TOTAL COVID COSTS	14.103	18.879

Energy

The IMTP Funding assumptions letter issued by Judith Paget on 14th March enabled NHS Organisations to anticipate income at risk to cover the increasing energy costs during 2022/23.

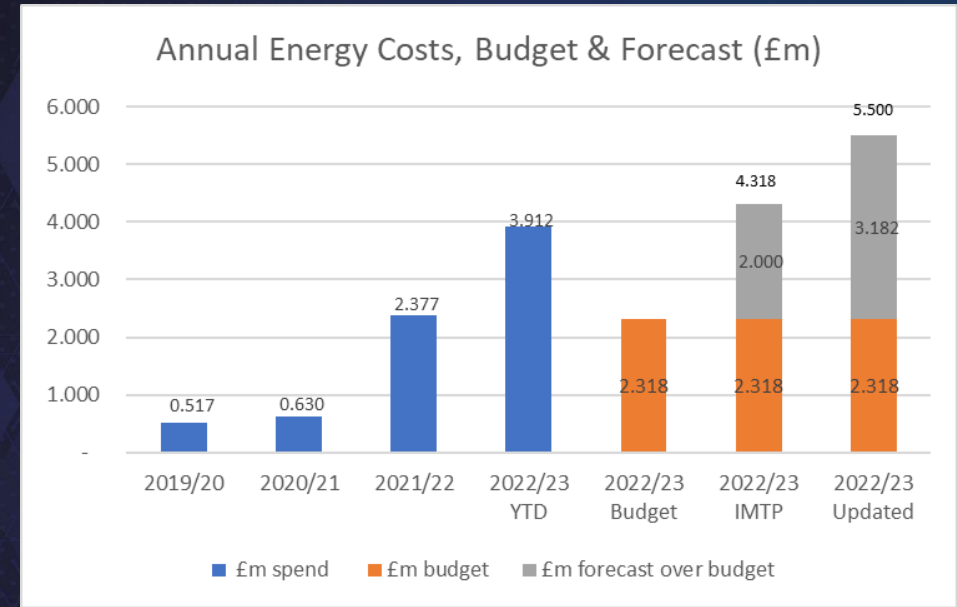
Our IMTP included a high level energy forecast of £4.318m. Following increased energy prices in early 2022/23 this energy pressures forecast increased to £6.838m. Following receipt of more recent British Gas forecasts incorporating the discount from the Energy Billing Relief Scheme (EBRS), our energy forecast is now **£5.500m** with exceptional cost pressures funding of **£3.182m** anticipated from Welsh Government.

To Month 9, we have received energy pressures funding for Months 1- 6 of £1.217m with a further anticipated **£1.964m** of funding to cover the increased costs over budget.

The volatility of the current energy markets presents issues in forecasting with any accuracy, this is also compounded by:

- Some of our sites being on the All Wales energy contract and others recharged by Landlords
- Changes to energy requirements on our sites as laboratories are commissioned/ decommissioned
- Impact of the installation of IP5 lighting
- Seasonal fluctuations
- Increased use of sites as more staff return to the office.

The laundries are our biggest energy consumers and due to metering arrangements, the majority of the invoices are part of the Health Board recharges from British Gas adding additional complexity and delay in obtaining accurate energy costs in a timely manner to report within the financial position.



The increase in energy costs between 2020/21 and 2021/22 is due to the transfer of the All Wales Laundries during 2021/22

Capital

Our current Capital Expenditure Limit for 2022/23 is **£4.968m**. This includes **£3.021m** of new year end capital funding that we received confirmation of in December 2022.

The NWSSP discretionary allocation for 2022/23 was reduced by Welsh Government to **£0.457m** from £0.600m and the IP5 discretionary allocation reduced from £0.250m to **£0.190m**.

Welsh Government have committed to funding the OBC Fees for TRAMS again in 2022/23. We continue to liaise with Welsh Government colleagues regarding the forecast of costs we will incur before the funding is allocated.

Capital expenditure to Month 9 is **£1.204m**. This appears low at the end of Quarter 3 but is due to the significant additional capital funding that was only allocated in December.

Scheme	Allocation £000	YTD Spend £000	Balance Outstanding £000
Laundry Services	83	85	2
EV charging infrastructure	0	1	1
IP5	42	0	-42
IT equipment	46	17	-29
TRAMS	150	0	-150
Denbigh	78	13	-65
Samlet Road	9	0	-9
Unallocated	49	-56	-105
Discretionary Capital Total	457	60	-397
IP5 discretionary	190	14	-176
Scan for Safety	826	420	-406
Laundry Services	1,522	0	-1,522
TRAMS	0	227	227
Welsh Healthcare Student Hub	474	474	0
IP5	908	0	-908
Denbigh	20	9	-11
EV charging infrastructure	68	0	-68
HCS replacement vehicles	503	0	-503
Additional Capital Total	4,511	1,144	-3,367
TOTAL CAPITAL ALLOCATION	4,968	1,204	-3,764

Welsh Risk Pool

To Month 9 expenditure of **£75.840m** has been incurred within the Welsh Risk Pool.

Our IMTP included a 2022/23 expenditure forecast of **£134.780m**, which requires **£25.345m** to be funded under the Risk Share Agreement.

At Month 9 the DEL forecast has a range of **£128.8m to £142.3m**. The IMTP forecast of £134.780m remains within this range. There is more certainty in the forecast range for 2022/23 compared to last year.

Cases are still being assessed in terms of likelihood of settlement this year. There is also likely to be some slippage for some cases whilst others may be brought forward from future years in later months.

Monthly detailed analysis of the forecast is ongoing with discussions with Legal & Risk solicitors on the likelihood of settlement of each high value case with cashflows >£200K on the database for 2022/23.

Expenditure type	Position as at M9 2021/22 £m	Position as at M9 2022/23 £m
Claims reimbursed & WRP Managed Expenditure	84.906	85.260
Periodical Payments made to date	16.369	19.320
Redress Reimbursements	1.608	1.800
EIDO – Patient consent	0.062	0.077
Clinical Negligence Salary Subsidy	0.413	0.413
WRP Transfers, Consent, Prompt, CTG	0.133	0.218
Movement on Claims Creditor	-34.383	-31.248
Year to date expenditure	69.108	75.840

Month 9 2022/23	£000s
Actual spend to December 2022 incl Redress	75,840
Settled cases – awaiting payment	10,470
Joint Settlement/Round Table Meeting/Offer	23,753
Periodical Payment Orders to March 2023	687
Sub Total	110,750
Future Estimated Settlements	18,028
Month 9 2022/23 DEL Forecast - Min	128,778
Month 9 2022/23 DEL Forecast - Max	142,300
IMTP DEL Forecast 2022/23	134,870

Recommendations

The Shared Services Partnership Committee is asked to note the :

1. Financial position to 31st December 2022 including the financial risks from anticipated funding
2. Forecast financial position for 2022/23 including the financial risks from anticipated funding
3. Achievement to date against key financial targets
4. The content of this update and seek further information if required.



GIG
CYMRU
NHS
WALES | Partneriaeth
Cydwasaethau
Shared Services
Partnership



*Adding Value
Through Partnership,
Innovation and Excellence*



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 2022 – November 2022.

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 2022-25

Ymgynghoriad/Consultation :

Senior Leadership Group

Adduned y Pwyllgor/Committee Resolution (insert ✓):						
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE ✓
Argymhelliad/ Recommendation		<p>The Shared Services Partnership Committee is requested to NOTE:</p> <ol style="list-style-type: none"> 1. The significant level of professional influence benefits generated by NWSSP to 30th November 2022. 2. The performance against the high-level key performance indicators to 30th November 2022. 				

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

NWSSP Performance Information Report

Covering Period August to
November 2022

*Adding Value
Through Partnership,
Innovation and Excellence*

Purpose

The purpose of this report is to provide the Shared Services Partnership Committee (SSPC) with an update on Key Performance Indicators (KPIs) for August 2022 – November 2022.

Health Organisations will receive their individual performance reports for Quarter 3 at the end of January.

NWSSP Senior Leadership Group (SLG) agreed a definition to our RAG traffic light system :

- Red - an unacceptable result, there is a problem that needs rectification (Opportunity to improve).
- Amber - there may be a problem, we should investigate.
- Green - an acceptable result, we are on target.

Key Messages

The in-month November performance was generally good with 34 KPIs achieving the target against the total of 38 KPIs.

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

Professional influence benefits amount to £94M at end of November.

NB December information is not available at the time of writing for the January SSPC deadline.

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.

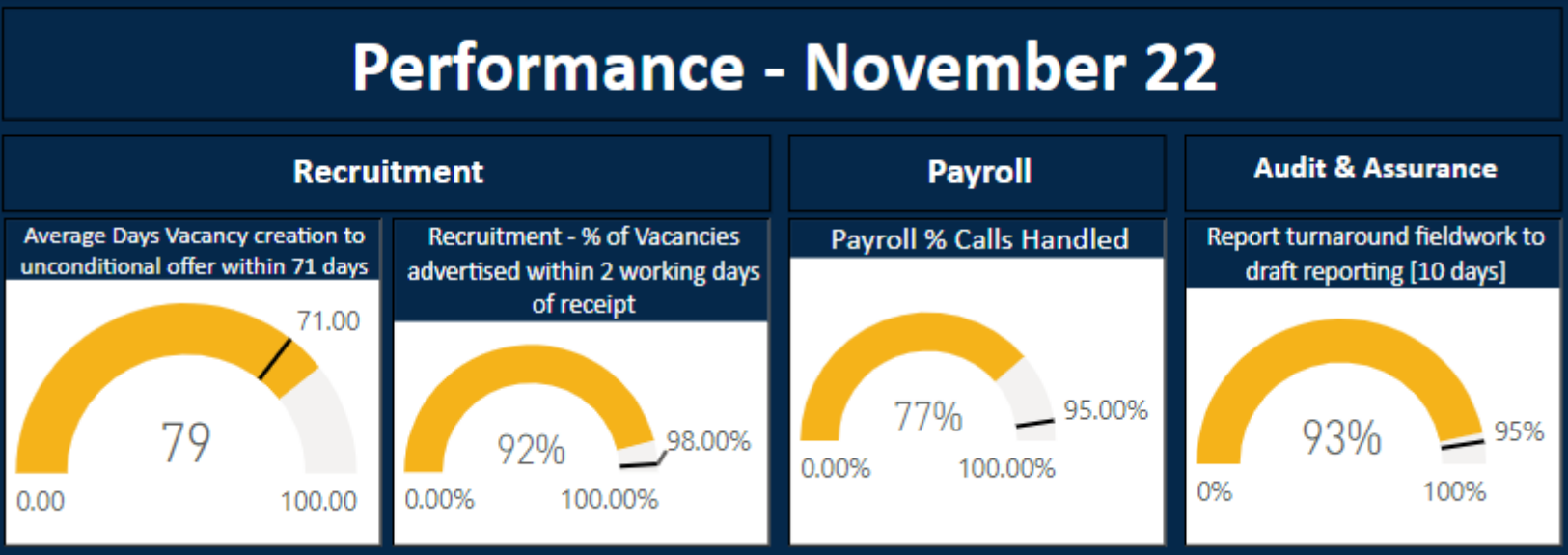
The benefits relate to Legal Services, Procurement Services, Specialist Estates Services, Accounts Payable* and Counter Fraud Services.

* Accounts Payable professional influence benefits includes statement reconciliation, priority supplier programme and the prevention of duplicate payments.

The indicative financial benefits across NHS Wales arising in the period April 2022 – November 2022 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services	7.3
Procurement Services	29.7
Legal & Risk Services	51.3
Accounts Payable *	4.4
Counter Fraud Services	1.5
Total	94

Summary Position by exception – 4 KPIs currently off target



Summary of Key Performance Indicators – November 22

22/23

KFA	KPIs	Target		August	September	October	November	Trend
Audit & Assurance								
Excellence	Audit opinions/annual reports on track	Y/N	Monthly	Y	Y	Y	Y	
Excellence	Audits delivered for each Audit Committee in line with agreed plan	Y/N	Monthly	Y	Y	Y	Y	
Excellence	Report turnaround fieldwork to draft reporting [10 days]	95%	Monthly	98%	97%	91%	93%	
Excellence	Report turnaround management response to draft report [15 days]	75%	Monthly	71%	80%	81%	75%	
Excellence	Report turnaround draft response to final reporting [10 days]	95%	Monthly	100%	100%	100%	100%	
Procurement Services								
Value for Money	Procurement savings *Current Year	£11m	Cumulative	£22,270,992	£22,650,083	£28,898,165	£29,714,756	
Accounts Payable								
Value for Money	Savings and Successes		Monthly	£511,790	£145,649	£35,071	£47,485	
Excellence	All Wales PSPP – Non-NHS YTD	95%	Quarterly	Reported Quarterly	95.30%	Reported Quarterly	Reported Quarterly	
Excellence	All Wales PSPP –NHS YTD	95%	Quarterly	Reported Quarterly	87.60%	Reported Quarterly	Reported Quarterly	
Customers	Accounts Payable % Calls Handled (South)	95%	Monthly	99.00%	99.60%	99.60%	98.80%	
Employment Services								
Payroll								
Excellence	Overall Payroll Accuracy	99.60%	Monthly	99.66%	99.67%	99.61%	99.64%	
Customers	Payroll % Calls Handled	95%	Monthly	70.31%	69.41%	80.48%	77.19%	
Recruitment								
All Wales								
Excellence	All Wales - % of vacancy creation to unconditional offer within 71 days		Monthly	50.50%	52.60%	51.90%	51.30%	
Excellence	Average Days Vacancy creation to unconditional offer within 71 days		Monthly	76.40	78.90	77.60	78.50	
Recruitment Responsibility								
Excellence	Recruitment - % of Vacancies advertised within 2 working days of receipt	98.00%	Monthly	99%	93%	99%	92%	
Excellence	Recruitment - % of conditional offer letters sent within 4 working days	98.00%	Monthly	98%	94%	96%	98%	
Customers	Recruitment % Calls Handled	95%	Monthly	94%	92%	94%	95%	

Summary of Key Performance Indicators – November 22

22/23

KFA	KPIs	Target		August	September	October	November	Trend
Student Awards								
Excellence	% of NHS Bursary Applications processed within 20 days	100.00%	Monthly	100.00%	100.00%	100.00%	100.00%	
Customers	Student Awards % Calls Handled	95%	Monthly	91.61%	93.94%	95.89%	96.46%	
Primary Care								
Excellence	Primary care payments made in accordance with Statutory deadlines	100%	Monthly	100%	100%	100%	100%	
Excellence	Prescription - keying Accuracy rates (Payment Month)	99%	Monthly	99.70%	99.79%	99.79%	99.78%	
Excellence	Urgent medical record transfers actioned within 2 working days	100%	Monthly	100%	100%	100%	100%	
Customers	Patient assignment actioned within 24 hours of receipt of request	100%	Monthly	100%	100%	100%	100%	
Customers	Category A Cascade alerts to be issued within 4 hours of receipt	100%	Monthly	100%	100%	100%	100%	
Legal & Risk								
Value for Money	Savings and Successes	£65m annual target	Monthly	£1,864,265	£525,382	£5,327,832	£797,226	
Excellence	Timeliness of advice acknowledgement - within 24 hours	90%	Monthly	100%	100%	100%	100%	
Excellence	Timeliness of advice response - within 3 days or agreed timescale	90%	Monthly	88%	100%	100%	100%	
Welsh Risk Pool								
Excellence	Time from submission to consideration by the Learning Advisory Panel	95%	Monthly	100%	100%	100%	100%	
Excellence	Time from consideration by the Learning Advisory Panel to presentation to the Welsh Risk Pool Committee	100%	Monthly	100%	100%	100%	100%	
Excellence	Holding sufficient Learning Advisory Panel meetings	90%	Monthly	100%	100%	100%	100%	
Specialist Estates Services								
Value for Money	Professional Influence	£16m annual	Monthly	£211,478	£135,414	£1,934,163	£2,587,649	
Excellence	Timeliness of Advice - Initial Business Case Scrutiny	95%	Monthly	100%	100%	Not Applicable	100%	
Customers	Issues and Complaints	0	Monthly	0	0	0	0	
CTES								
Excellence	P1 incidents raised with the Central Team are responded to within 20	80%	Cumulative	100%	100%	100%	100%	
Customers	BACS Service Point tickets received before 14.00 will be processed the	92%	Monthly	100%	100%	100%	100%	

Summary of Key Performance Indicators – November 22

22/23

KFA	KPIs	Target		August	September	October	November	Trend
Digital Workforce								
Customers	DWS % Calls Handled	70%	Monthly	85.40%	73.70%	92.70%	97.00%	
SMTL								
Excellence	% of incident reports sent to manufacturer within 50 days of	90%	Monthly	100%	100%	100%	100%	
Excellence	% delivery of audited reports on time (Commercial)	87%	Monthly	95%	100%	84%	98%	
Excellence	% delivery of audited reports on time (NHS)	87%	Monthly	Not Applicable	Not Applicable	100%	Not Applicable	
Customers	% delivery of Technical assurance evaluations on time	87%	Monthly	100%	100%	100%	100%	
Pharmacy Technical Services								
Excellence	Service Errors	<0.5%	Monthly	0%	0%	0%	0%	
Medical Examiners Service								
Excellence	Deaths Scrutinised	60%	Monthly	100%	100%	100%	100%	
All Wales Laundry								
Excellence	Orders dispatched meeting customer standing orders	85%	Monthly	100%	99%	97%	110%	
Excellence	Delivery's made within 2 hours of agreed deliver	85%	Monthly	100%	100%	100%	100%	
Excellence	Microbiological contact failure points	85%	Monthly	93%	96%	94%	94%	
Customers	Inappropriate items returned to the laundry including Clinical waste items	<5	Monthly	0	0	0	0	

Employment Services – Recruitment

All Wales

The target of creation to unconditional offer within the 71 days has been missed with an average of 79 days. Only 51% of the records were within the 71 days target. The time to hire for November is still impacted by the ongoing work on older records for appointees where they are likely to have already started in post. This work will continue for the foreseeable future however, will have less of an impact on the performance due to the lower number of records.

Recruitment are engaging with all organisations on our recruitment modernisation programme to make improvements under 3 key themes of Education, Process and Technology. The Recruitment Business Partners are meeting with the health organisations regularly to share the programme and progress implementation on some of the key changes that can support a reduction in the Time to Hire and an improved customer experience.

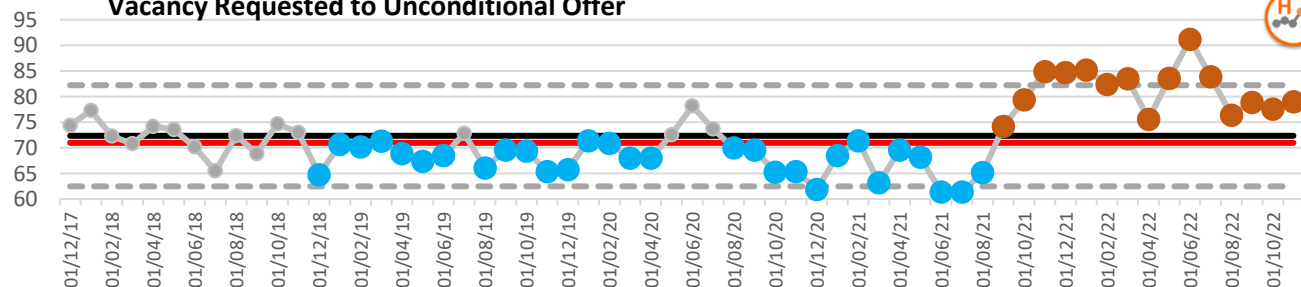
The table below highlights the variation of performance that exists within each organisation for April – November 22.

The recruitment teams are still currently experiencing unprecedented levels of demand compared to 2018, which has meant compliance with the KPI measures has been missed. The activity and performance is shown in the charts below.

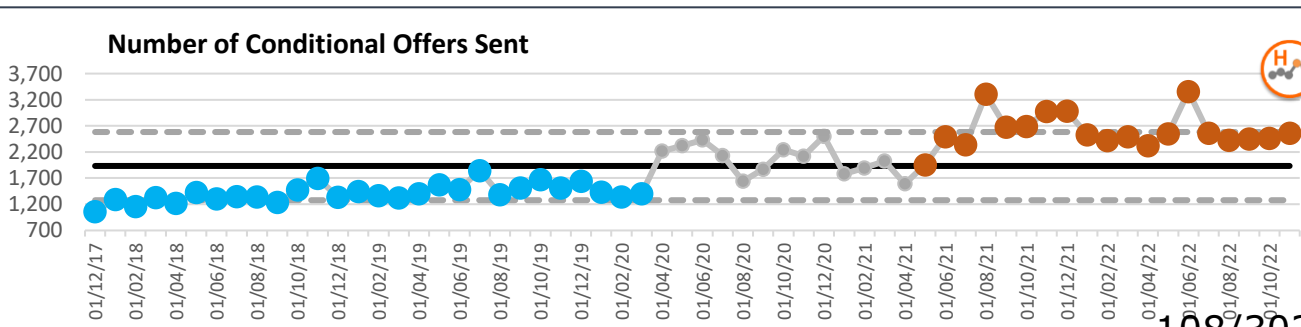
Recruitment Vacancy Creation to Unconditional Offer

Org	Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22
AB	71	102	102	94	86	87	81	89	89
BCU	71	85	88	84	86	84	94	80	76
CV	71	80	85	85	92	84	90	83	83
CTM	71	97	99	116	111	102	110	94	101
HD	71	59	76	79	82	67	71	76	77
HEIW	71	48	80	61	52	71	69	59	77
DHCW	71	53	57	84	58	66	60	75	67
NWSSP	71	63	65	82	60	55	79	68	61
PTHB	71	80	76	73	66	77	80	73	74
PHW	71	60	68	65	56	60	60	66	60
SBU	71	73	87	75	87	84	82	103	100
VEL	71	74	87	114	97	73	75	73	74
WAST	71	113	111	127	131	92	85	81	90
All Wales	71	76	84	91	84	76	79	78	79

Vacancy Requested to Unconditional Offer



Number of Conditional Offers Sent



Recruitment Services – % of vacancies advertised within 2 working days of receipt

22/23

KFA	KPIs	Target	August	September	October	November	Trend
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Employment Services Recruitment Recruitment Responsibility

Excellence	Recruitment - % of Vacancies advertised within 2 working days of receipt	98.00%	Monthly	99%	93%	99%	92%	
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93% of records have the vacancies advertised within the target of 2 days with an average of 1.8 days.


The slight under performance was due to the bulk receipt of offer letters in addition to the high volume of activity in all parts of the recruitment process.

Audit & Assurance – Report Turnaround

22/23

KFA	KPIs	Target	August	September	October	November	Trend
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Audit & Assurance

Excellence	Report turnaround fieldwork to draft reporting [10 days]	95%	Monthly	98%	97%	91%	93%	
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Report turnaround fieldwork to draft reporting performance was slightly behind target due to fieldwork taking longer than anticipated in some health orgs and some A&A staff absence. Any delays are discussed directly with the health orgs and are made aware of any revised timings.

Employment Services – Payroll % Calls Handled

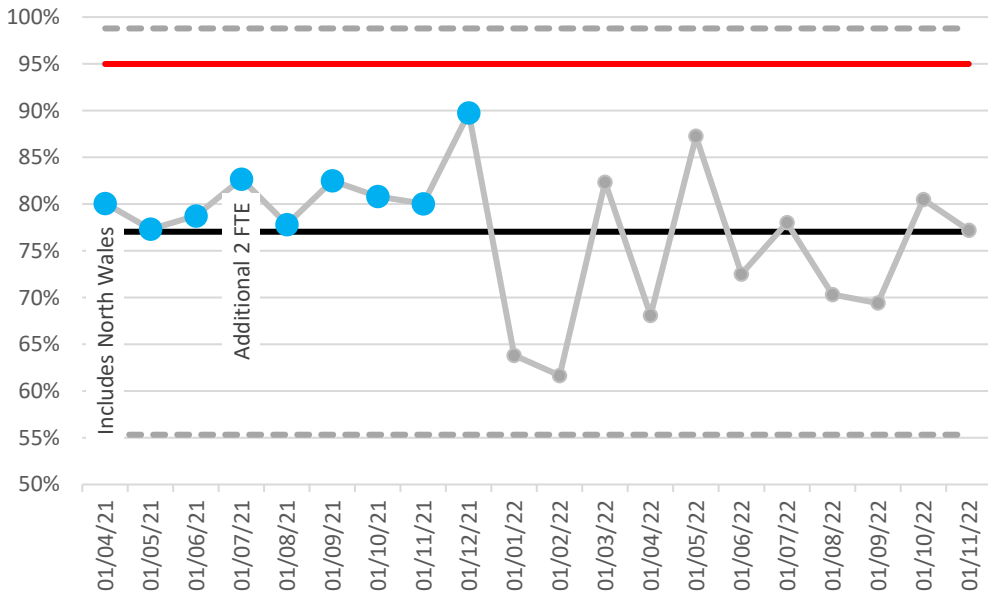
For the month of November, 77% of calls were handled against the target of 95%. The October performance was 80% and 70% in September.

Performance has deteriorated this month due to ongoing high volume of calls. During November the transfer of the contact centre commenced with moving the call handling into the payroll teams, this is planned to be complete by the end of February. Early indications have shown improvements in call handling for Aneurin Bevan calls which have had the call handling transferred into the payroll team.

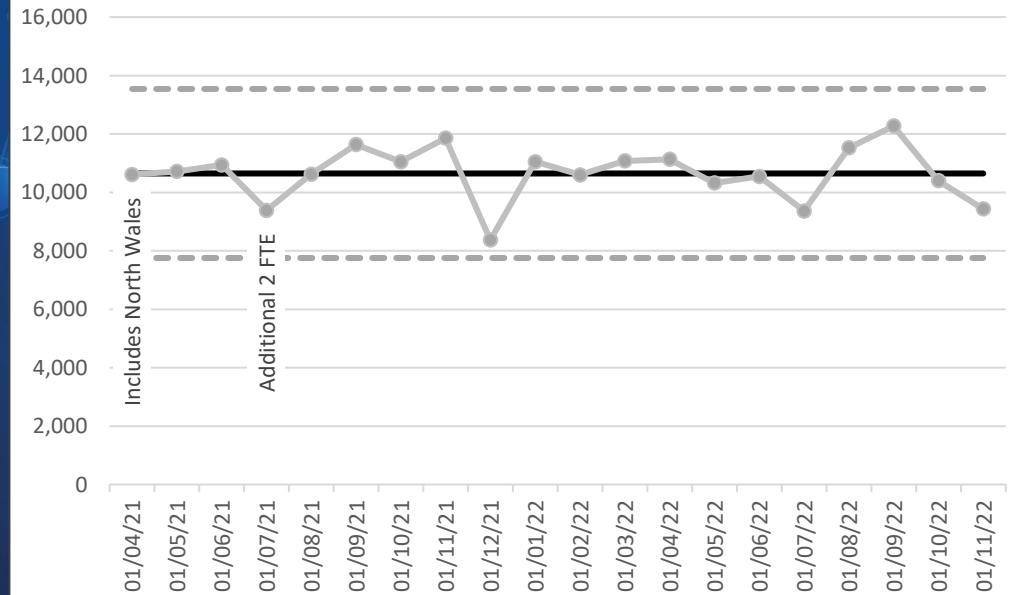
As you would expect when the payslips are made available and actual pay day are the pressure points where a high volume of calls is received on a couple of days and where most of the unanswered calls can be attributed to.

The charts below show performance and activity over the last 17 months.

Payroll % of Calls Handled



Payroll Calls



Other points to Note

Specialist Estates Services – Professional Influence – The higher comparative figures reported for October and November relate to Build 4 Wales figures which are reported quarterly and a specific rental reimbursement case respectively.

Legal and Risk Services – Professional Influence – The lower figure reported in November is attributed to a lower volume of cases closed with values in excess of £100k compared to previous months.

SMTL – Delivery of Commercial Audit Reports – The under performance in October was due to sickness and leave within a small team causing delays in the writing and signing off of reports. A reallocation of some duties has released capacity for the reporting writing by technicians.

Accounts Payable – Savings and Successes – The decrease in both October and November is due to the Statement reconciliation figures unable to be included due to system issues. This is in the process of being resolved and will be included when available.

Summary

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

- The significant level of professional influence benefits generated by NWSSP to 30th November 2022.
- The performance against the high-level key performance indicators to 30th November 2022.



The report is not Exempt
Teitl yr Adroddiad/Title of Report
Project Management Office Update Report

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

Pwrpas yr Adroddiad: Purpose of the Report:
The purpose of this report is to provide the Shared Services Partnership Committee with an update on progress with key projects.

Llywodraethu/Governance	
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 2022-25 approved by SSPC in January 2022.

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: Equality and diversity:	No direct Impact
yfreithiol: Legal:	Compliance with procurement regulations where applicable
Iechyd Poblogaeth: Population Health:	No direct Impact
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct Impact

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



**GIG Cymru Partneriaeth
Cydwasaethau
NHS Wales Shared Services Partnership
PMO Report**

NWSSP PMO Monthly Update - 10 January 2023

Prepared by Ian Rose

Monthly Summary

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

Projects 22

Programmes 5

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

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

- **54% (15 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
- **39% (10 Schemes) NWSSP** – Typically serving internal purpose for one or more NWSSP Divisions
- **7% (2 Schemes) Health Board** – Typically supporting schemes for health boards but where NWSSP play a role in the service provision

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

Following a request at the September SSPC meeting, additional All Wales Programmes and Projects are included in Section B of this report.

These initiatives are not managed by the PMO and have responsible SROs and localised programme and project management arrangements in place.

Once for Wale Concerns Management and ESR Transformation are included in this report with Scan 4 Safety and any other applicable initiatives to follow in the January 2023 Report.

SSPC Recommendation

SSPC are asked to note the contents of the report.

Key Trend information and Initiative Overview

Initiatives – 27

Scheme Scale						
All Wales	SRO	RAG	SIZE	Estimated Start Date	Original Completion	% Completion
All Wales Laundry Transformation	Neil Davies	Red	LargeXOrg	04/04/2016	31/03/2023	95%
Citizens Voice Body (CVB)	Hazel Robinson	Green	Medium	30/04/2022	31/03/2023	27%
Single Lead Employer Phase 3	Ruth Alcolado	Green	Medium	01/06/2021	31/03/2023	90%
Once for Wales Concerns Management System	Jonathan Webb	Green	Large	01/01/2021	31/03/2023	TBC
EPS Reimbursement claims	Andrew Evans	Amber	Large	01/10/2022	30/04/2023	15%
Demographic Transformation	Ceri Evans	Green	Large	21/06/2021	31/07/2023	62%
Student Awards System Existing Stabilisation and New System Spec	Darren Rees	Amber	Large	25/11/2019	01/08/2023	71%
Medical Examiner	Andrew Evans	Green	Medium	31/03/2021	31/10/2023	95%
Occupational Health Checks	Rebecca Jarvis	Green	Large	15/11/2021	30/11/2023	61%
GS1 Coding Locations	Andy Smallwood	Green	Large	24/08/2022	30/11/2023	21%
Workforce Reporting Intelligence System (Including Performers List)	Andrew Evans	Amber	Medium	13/04/2021	30/04/2024	55%
Scan 4 Safety	Andy Smallwood	Amber	LargeXOrg	01/09/2021	31/08/2025	TBC
Decarbonisation Programme	Neil Davies	Amber	Large	01/04/2022	31/03/2030	5%
ESR Transformation Programme	Gareth Hardacre	Green	LargeXOrg	01/10/2022	30/08/2030	TBC
TRAMS Programme	Neil Frow	Amber	LargeXOrg	01/04/2021	31/03/2031	10%

NWSSP	SRO	RAG	SIZE	Estimated Start Date	Original Completion	% Completion
Health Roster Implementation	Rebecca Jarvis	Green	Medium	TBC	TBC	0%
Customer Contact Centre - Service Improvement (Website)	Andrew Evans	Green	Medium	01/01/2022	31/01/2023	40%
Laundry Transition	Neil Davies	Amber	Medium	26/02/2021	31/01/2023	90%
L&R Case Management System implementation phase	Mark Harris	Red	LargeXOrg	01/09/2020	28/02/2023	75%
Renewal of Virtual Cabinet & Servers	Mark Harris	Green	Medium	01/09/2020	28/02/2023	40%
Medicine Value Unit	Alex Curley	Green	Medium	01/10/2022	31/03/2023	5%
CAF Remediation	Neil Jenkins	Green	Medium	03/05/2022	31/03/2023	25%
Patient Medical Records and (Scanning) Service Accommodation Review	Scott Lavender	Amber	Large	16/08/2021	31/08/2023	25%
Customer Contact Centre - Telephony and Contact Centre Solution	Andrew Evans	Green	LargeXOrg	01/06/2021	31/10/2023	91%
Data Management	Neil Jenkins	Amber	Large	04/04/2022	30/09/2024	54%

Healthboard	SRO	RAG	SIZE	Estimated Start Date	Original Completion	% Completion
Cwm Taf Phase 2 Community Dressings	Emma Williams	Green	Medium	04/05/2021	30/11/2022	100%
Community Dressings Powys - Phase 1	Stephen Powell	Green	Medium	22/10/2021	30/11/2022	100%

Key Individual Project/Programme Updates

Project Name	Project Manager	Project Exec/SRO
L&R Case Management System implementation phase	Jenna Goldsworthy	Mark Harris

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

Status **Red** (Overall) **Red** (Time) **Red** (Cost) **Red** (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. A Business Case for a replacement system submitted to and approved by Digital Priorities Investment Fund (DPIF), Welsh Government on 24 March 2021 for financial year 21/22.

Following a tender process, DXC were awarded a contract to design, create and implement a case management system, document storage and sharing solution using Microsoft Dynamics 365.

The project has been set up to implement the new solution above.

Progress Update

L&RS have encountered difficulties with the provider and are currently taking steps to resolve these. The main points are set out in the following section. These are in highly summarised form to preserve confidence.

The supplier has begun negotiating with NWSSP to resolve the ongoing issues.

There is no direct impact on service delivery for our customers.

Main Issues, Risks & Blockers

Scope Issues

There is currently significant disagreement between NWSSP and the provider about the scope of the contract.

DXC Hours Overspend

The DXC team have used an excessive number of hours above what was anticipated.

DXC Supplier Delay

While working with the DXC Management team to resolve the current open issues, it was agreed that all work from DXC's perspective will halt from 07 July 2022 until all issues have been resolved.

Microsoft Dynamics (D365) Licenses

L&RS have purchased a 3-year contract for 150 Microsoft Dynamics (D365) Licenses and due to the current project position, these cannot be utilised this year. L&R is currently looking at possible mitigations with meetings taking place but there are no firm changes in the position.

Project Name	Project Manager	Project Exec/SRO
Data Management	Alison Lewis	Neil Jenkins

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 discovery phase which will inform the next phases of the project.

To catalogue: -

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

To review: -

- Data request / response processes including IG review processes
- Existing technical infrastructure

To identify: -

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

Progress Update

The Project Board approved the revised delivery approach in Nov-22 to set up a task and finish group/workstream to support the delivery of the next project phases with representative's who have the correct domain knowledge for each of the services.

Project Board agreed on 16 November 2022 to pause the project until PCS have secured the required resources to support the project by middle of January, where the project will take a view and agree if the project can proceed or be paused for longer.

Main Issues, Risks & Blockers

The project had encountered delays whilst PCS internal Lead was being sought and the new delivery proposal was being considered, which has resulted in slippage to the original timescales by 20 weeks. However, as no-one had the required skills or knowledge, it was agreed at Project Board for representatives from PCS to support a task and finish group but due to current capacity constraints timescales are currently unknown to when they will have the required capacity. This will be determined in middle of Jan-23 where the project will take a view and agree if the project can proceed or be paused for longer.

These delays have resulted in not being able to move onto the next pre-delivery phase which involves reviewing the outputs from the statement of works contract and agreeing the plan which is to identify recommendations that will inform the next delivery phases. This does not present any risk or impact on any current services but there could be a risk of further slippage. The project estimated end date may need to be extended.

Project Name	Project Manager	Project Exec/SRO
Student Awards System Existing Stabilisation and New System Spec	Bethan Rees	Darren Rees

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

Status	Amber (Overall)	Amber (Time)	Amber (Cost)	Amber (Overall)
Recent Gateway Review?	No			

Objective

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

Progress Update

- The SAS discovery phase has been successfully completed and the solution build is underway. User acceptance testing of the SAS phase one student application stage will take place during early Jan-23. User acceptance testing of the solution bursary assessment stage is scheduled to take place at the end of Feb-23. Timelines are extremely tight, but the solution build is on course for completion in time for 01 April 23 go live.
- Plans are being developed to migrate circa 400gb of data stored within the current SAS system's servers to the new solution and an archive database. Discussions are in progress with the incumbent supplier Kainos, who are required to prepare the data prior to migration. The work is planned to be carried out under the support contract hours, however Kainos have requested an additional £40k for extra hours to complete this work. Procurement is now in discussion with Kainos to review this request with a view to mitigating the extra cost for data migration. Several contingency options have been explored such as utilising Swansea Bay University Health Board or the new supplier to prepare the data for migration if the preferred option does not come to fruition. The data migration is essential for the project, as access to the data will enable the SAS team to complete essential checks on student applications prior to bursary assessment.
- Phase Two Student Streamlining Discovery is scheduled for completion & sign off during Jan-23. The solution build for phase two will commence during Mar-23 in preparation for the Aug-23 go live.

Main Issues, Risks & Blockers

Risks

- Vulnerability and end of support for legacy software and hardware remains a risk for the next 6 months until the new solution is deployed however business continuity plans exist to protect the service until project completion.

- GDPR risk from hosting end-of-life systems. Higher risk of a full records management breach, risks around the fragility of an unsupported system and the potential of data loss or corruption of thousands of student data records which could pose potential monetary penalties of several million pounds for a loss.
- If the new solution is not implemented by 01 April 2023, then there will be a high risk of disruption to Student Awards Service delivery.
- Contingency plans exist with NWSSP IT maintaining the out of support system at risk until the new system is in place and also consideration of extending the existing arrangements with the current supplier but this would present a cost pressure which will be evaluated should it become more of a possibility.

Issues

- The data migration phase of the project is dependent on the support of the incumbent supplier to prepare the data for migration. The work is planned to be carried out under the contract support hours; however, the supplier has requested an additional £40k and extra hours to complete this work (over & above contract support hours). Procurement are currently in discussion with the supplier to mitigate this request and several contingencies' plans have been explored, such as using Swansea Bay University Health Board IT or the new supplier for support. A resolution to this issue is expected in early Jan-23.

Project Name	Project Manager	Project Exec/SRO		
Workforce Reporting Intelligence System (Including Performers List)	Alison Lewis	Andrew Evans		
Monthly Update (key/issues (blockages)/risks)				
Status	Amber (Overall)	Amber (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	Yes			
Objective				
To implement a single integrated system for the Performers List and Wales National Workforce Reporting System (WNWRS).				
Progress Update				
Briefing paper approved by Director of Procurement and submitted to Welsh Government for noting in Dec-22. Specification completed with tenders issued on 21 December 2022, 2 weeks behind schedule. Closing date set for 2 February 2023, extended due to the Festive season.				
Evaluation of tenders re-scheduled to the first week of Feb-23 due to the delay with issuing the tender.				
Main Issues, Risks & Blockers				
Project is now running 16 weeks behind schedule due to the delays experienced with advertising the contract and publishing the tender. It is anticipated that the contract will still be awarded in Feb-23 with no impact to stakeholders.				

Project Name	Project Manager	Project Exec/SRO		
Patient Medical Records and (Scanning) Service Accommodation Review	Kev Coulson, Bethan Clift	Scott Lavender		
Monthly Update (key/issues (blockages)/risks)				
Status	Amber (Overall)	Red (Time)	Amber (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
The responsibility of the Medical Records Accommodation review Group is to find suitable additional accommodation for the Medical Records team and all stock currently residing in Brecon House				
Background				
The PCS team are undergoing an accommodation review of the Medical Records and stores and distribution teams driven by:				
Property lease expiry date:				
<ul style="list-style-type: none"> • Brecon House, Mamhilad Industrial Estate, Pontypool – Lease expires Mar-23 • Additional storage space is required to ensure business as usual can be maintained and to enable the expansion of the medical record service 				
Current set-up of building means there will be a capacity issue impending, preventing growth of the Patient Medical Record storage programme, alongside a need for modernisation and aesthetic improvements to aid staff wellbeing, and bring the space in line with other space we currently occupy.				
Progress Update				
The business case for new accommodation to store medical records has been approved by all NWSSP parties, however, when Velindre NHS Trust approved the business case, they requested ratification from Welsh Government.				

The business case has been submitted to Welsh Government in Sept-22 who raised a query on the fire suppression plans for the new building given the type of information that will be stored within it. Following investigation, a report has been produced by NWSSP SES, approved by NWSSP PCS and submitted to Welsh Government. Currently awaiting a response from Welsh Government.

Main Issues, Risks & Blockers

A recent survey of existing premises leased by NWSSP PCS, Brecon House, Mamhilad Park Estate, Pontypool, has identified issues with the Reinforced Autoclaved Aerated Concrete (RAAC). Whilst immediate actions have been put in place to safeguard staff working in Brecon House, it is unlikely that the lease will be renewed in Apr-23. NWSSP PCS are currently therefore considering what options are available to accommodate Brecon House staff and the services provided from there as well as including the additional capacity required to meet the project objective. The business case will be updated to reflect the new position.

Due to the delay in the response from Welsh Government and the need to re-visit the business case in light of the issue identified above, the time status of the project is now red.

Capacity in medical records is currently expected to be reached by Spring - Summer 2023. If NWSSP PCS cannot secure a new premise, this will have an impact on:

- Existing services whereby should an existing GP practice expand its services PCS may not be able to host the additional medical records; and
- PCS will not be able to extend the medical record services to new or expanded GP practices.

Project Name	Project Manager	Project Exec/SRO
Decarbonisation Programme	Jessica Jones, Paul Thomas	Neil Davies

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

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

Recent Gateway Review? No

Objective

The NHS Wales Decarbonisation Strategic Delivery 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, Transport, Procurement, Estates Planning and Land Use and Approach to Healthcare, with NWSSP leading on a number of tasks.

In line with these objectives, NWSSP outlined a local Decarbonisation Action Plan in Mar-22, integrating all Wales duties and responsibilities as an NHS organisation.

NWSSP have established a programme team to support the implementation and management of the Decarbonisation plans. The NWSSP Programme arrangements feed into the National Decarbonisation and Climate Change Programme Board arrangements.

Proactive engagement with all NHS organisations will form a key element to the programme of work; but accountability for their own plans sits with the individual organisations.

Progress Update

Welsh Government funding has been used for the recruitment of required resource to support the Decarbonisation Programme:

- Decarbonisation Programme Lead position is currently being filled on a pro tempore basis by Lee Wyatt.
- 1 Project Manager was successfully appointed who started on 21st November and an advertisement has been placed to fill a second project manager vacancy which closes on the 16th January 2023.
- Environment and Facilities Management Advisor in SES has been appointed and started in post.
- Principal Environmental Facilities Advisor and Decarbonisation subject matter expert post vacant - Recruitment process underway

19 of the 46 initiatives outlined in the NHS Wales Decarbonisation Strategic Delivery Plan 2021-2030 will be led by NWSSP. The Decarbonisation steering group will oversee the implementation and progress of these initiatives.

NWSSP led Task & Finish group has been established for Transport related actions.

AECOM (3rd Party Contractor) are amending their low carbon heat study report as requested by NWSSP and the expectation is that the report will be returned to NWSSP by the end of the year.

Main Issues, Risks & Blockers

Risks:

- If dedicated resource in NWSSP and Health Boards to monitor and support the delivery of these initiatives is not obtained then key actions will be not have a timely start, be delivered appropriately and the NHS will not succeed in making an impact in reducing carbon.
- If finance, for decarbonisation is not available to address initiatives with the biggest carbon savings as identified in the NHS Decarbonisation strategy, then emissions targets in 2025 and 2030 will not be achieved; behaviour change by staff and the patients will be delayed or not happen; and air quality and health related illnesses will not improve. Capital funding pressures are limiting available funds to support schemes.

- If by 2030 the estate does not meet agreed targets, then there is a reputational risk for the NHS and Ministers.

Issues:

- Limited specialist resource available within NWSSP, NHS Wales more generally, and in the private sector (decarbonisation) consultancy market. There is a vacancy in SES for a Principal Environmental Facilities Advisor and Decarbonisation subject matter expert.

Project Name	Project Manager	Project Exec/SRO		
Laundry Transition	Ian Rose	Neil Davies		
Monthly Update (key/issues (blockages)/risks)				
Status	Amber (Overall)	Amber (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
As part of the laundry transformation programme, the transition project was initiated to devise an approach to transferring laundry budget for the three laundries in Llansamlet, Glan Clwyd and Greenvale. This was approved by the Committee and verified within the Health Boards in Mar-21 as part of transferring the laundry services for NHS Wales to NWSSP.				
Progress Update				
Three Laundries continue to operate on the agreed basis because of the transfer in Apr-21:				
<ul style="list-style-type: none"> Glan Clwyd – Complete. Llansamlet – Complete. Aneurin Bevan / Greenvale – Aneurin Bevan University Health Board (ABUHB) Estates & Facilities team & NWSSP are still currently reviewing the Memorandum of Terms of Occupancy (MOTO) – Amendments have been requested in relation to Cyber responsibilities and provision of IT services and hardware which NWSSP Informatics have reviewed and accepted. The next steps are for those additional MOTO inclusions to be assessed by the laundry operation and NWSSP finance and H&S groups before presenting to the NWSSP Director of Finance for signature. At present there are no perceived issues presented by the additional MOTO inclusions. 				
Main Issues, Risks & Blockers				
There are no major issues observed on the basis MOTO agreement not being signed as it is not legally binding document and service will remain uninterrupted and continuation of linen production will continue.				
Consideration should be given to accelerating the laundry IT service provision from ABUHB to DHCW to mitigate any potential IT service disruption which whilst being minimal and affecting a small number of users, it would not jeopardise linen production.				

Project Name	Project Manager	Project Exec/SRO		
TRAMS Programme		Neil Frow		
Monthly Update (key/issues (blockages)/risks)				
Status	Amber (Overall)	Amber (Time)	Amber (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				
<ul style="list-style-type: none"> Discussions are ongoing with the owners of potential sites in SE Wales. Informal discussions with Welsh Government during Aug-22 have revealed a strong preference from Government for the investment to result in a tangible asset in public ownership. The Project Team are reviewing the site options to ensure that the proposals developed have due regard to this preference. The South East Wales OBC will ultimately recommend the best site based on a scored assessment of a balance of factors. Capital funds continue to be made available by Welsh Government to support development of the South East OBC. Discussions are ongoing to confirm the final amount to be allocated in 2022/3. 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. Scoping has begun of the User Brief for the South West Hub, to support site selection. Space has been secured for the TRAMS Quality Control Lab in IP5. Opportunities for early benefit realisation from this capacity are being assessed. The TRAMS Digital Project, to procure and deploy a workflow and stock management application, has started up. A Prioritised Requirements List and Conceptual Data Map have been produced. A New Service Request has been submitted to DHCW, and is being considered by DHCW Executives. The NWSSP Chief Digital Officer is sighted. Organisational Change Project 1 (OCP1) is in the implementation phase. 5 national roles have had staff identified through the consultation process. Two further posts are currently out to advert, and two posts originally included in the OCP1 consultation 				

will now be rolled over into OCP2. It is planned to commence secondments of the selected staff into their new roles on a 20% basis from Apr-23. Care will be taken not to destabilise the frontline service. The actual TUPE transfer will take place only when they move to NWSSP full time. Planning of OCP2 (for around 230 staff) is ongoing, working in partnership with unions and Health Board and Trust workforce colleagues.

- Education and Training Project is successfully delivering new science-based qualifications to the service, in partnership with HEIW, with significant recurring funding for courses and posts being secured for a variety of roles.
- The Clinical Reference Group has been convened with the assistance of the NWSSP Medical Director and has now met twice, to ensure alignment with ePrescribing and clinical product and protocol standardisation initiatives. This group will meet quarterly.
- Finance Subgroup of Health Board and Trust representatives to work on detailed identification of the revenue budgets that support the existing services has begun work with the first meeting of the whole group planned on 20 Jan 2023.
- Engagement with UK peer projects on standardising the product catalogue and commissioning product stability studies is ongoing.

Main Issues, Risks & Blockers

- Confirming suitable sites that meet both the very demanding needs of the service, and the strategic context of the funding stakeholder.
- Ongoing cost inflation in the construction and scientific equipment markets. This is not necessarily TRAMS specific but a global market pressure that will act on all major capital projects
- 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
- Achieving Agreement by DHCW to support the required digital application for stock control and workflow management. If DHCW do not agree to support this service then it may place practical limits on the responsiveness of the service to urgent patient requests, generated in the ePrescribing systems.
- Based on current position, the programme remains **"Amber"**.

Project Name	Project Manager	Project Exec/SRO
EPS Reimbursement claims	Jenna Goldsworthy	Andrew Evans

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

Status **Amber** (Overall) **Amber** (Time) **Amber** (Cost) **Amber** (Overall)

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 HL7 claims messages which are routed via the NHS Spine to NHS Business Services Authority (NHSBSA) for reimbursement, and pharmacies also send paper prescriptions monthly to NHSBSA.

As PCS is the reimbursement agency for NHS Wales, modifications will need to be made to both NHS Spine and NWSSP system to enable the HL7 message to be re-routed to NWSSP for the reimbursement to be processed. PCS have been tasked with providing technical proof of concept by 31 March 2023.

Progress Update

Funding secured from DHCW to cover the cost of a dedicated project manager to support delivery of the NWSSP elements. Jenna Goldsworthy allocated with the hand over completed by 9th December 2022.

PCS staff attended a workshop on 22 November 2022 arranged by DHCW to work through the current 'as is' process and to confirm the 'to be' position. The roles and responsibilities for PCS were defined and shared with DHCW on 13 December 2022. Currently awaiting a response from DHCW to confirm the position.

A Statement of Works Contract for the development of internal NWSSP systems to accommodate the changes required for EPS has been instigated. Technical developer appointed and set up with access to all appropriate systems with Milestone 1 tasks completed. Progress on completing milestone 2 is dependent upon receipt and set-up of new server.

Additional development tasks have been identified to support integration with NWSSP business processes. Agreement reached to extend contract to the end of Feb-23. Original procurement approval and funding provided by DHCW includes the additional amount associated with the extension.

In order to implement EPS, Welsh Pharmacy data needs to be shared with Business Services Authority (BSA). A Data Privacy Impact Assessment has been completed with confirmation received from Information Governance Manager that nothing will need to be completed for sharing the additional information with BSA. BSA has agreed to revise the current Service Level Agreement to include the additional data required.

Prescription and Dispensing tokens will be required during the implementation phase and need to be available for the Technical Proof of Concept (TPOC) as requested by DHCW. Meetings held in Dec-22 with DHCW to scope out NWSSP requirement. The token specifications have been shared with the NWSSP Prescription printing partner and we are awaiting a response for expected timeframe and cost for completion.

A Golden Script, the authorisation process for pharmacies to be set-up in ESR, is required for final commissioning test. DHCW has provided the specification for golden script to PCS who are currently reviewing this to understand the requirement and impact.

Participation in Assurance working group and task and finish group to establish testing protocols. To provide a consistent approach to testing, Team Foundation Server is required. Flagged as a potential issue to Programme as PCS does not have current version.

An additional server is required by NWSSP PCS to create additional space to host EPS and store the data. It has been agreed that PCS will order the equipment as specified by DHCW, on the assumption that DHCW will provide a managed service wrap around free of charge. DHCW have agreed to provide the capital required for this expenditure to NWSSP.

NWSSP have previously implemented Electronic Transfer of Claims (ETC) for a proportion of Pharmacy contractors. An options paper was presented to EPS Programme Board in Nov-22 to consider the continued use of ETC. The recommended option was approved: Only EPS claims are required to be available in Welsh PMR systems supporting 2DRx and EPS.

The paper included the anticipated increase in PCS resource required during the implementation phase to manually process claims due to the loss of ETC. The Programme Manager has advised that funding will be available to plug the short-term resource gap, but further work is required to understand and quantify the support required.

Main Issues, Risks & Blockers

The NWSSP Project Teams Senior Supplier will be leaving their role at the end of Jan-23. Due to the technical requirement of this project, there is a risk that this will impact the project team’s capacity to deliver the project on time.

The server has been ordered from the supplier with an original delivery date of 22 December 2022. The delivery has been delayed to the 09 January 2023 resulting in a delay to completing milestone 2 of the Statement of Works Contract. This will not impact the overall timeframe for completing the development work. Whilst PCS await the delivery and installation of the server, the technical developer has been able to complete other tasks associated with delivery of a Technical Proof of Concept (TPOC).

Project Name	Project Manager	Project Exec/SRO
Medical Examiner	Bethan Rees	Andrew Evans

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:

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

Progress Update

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

Welsh Government have confirmed that the Department of Health & Social Care have agreed to fund the non-statutory & statutory service in Wales. This will provide assurance for the service whilst increasing capacity to meet the legal obligations.

Main Issues, Risks & Blockers

The main risk / issues are:

- 1) The inability to retain staff could jeopardise service continuity.
- 2) No issues and blockers have been observed.

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"> • Use of Welsh Demographic Service provided by Digital Health & Care Wales (DHCW) – complete • Implement replacement NHAIS local hardware hosting (legacy infrastructure) to ensure continuity of service up to and during transition - complete • Implementation of alternative data extract provided by DHCW • Implementation of in-house application known as 'Notify' that monitors the movement of medical records • Implementation of Primary Care Registration Management System (PCRM) provided by NHS Digital • De-commission NHAIS local boxes 				
Progress Update				
<p>Data retention: The recommendation to retain the existing data held in NHAIS for seven years following de-commissioning was approved by NWSSP, PCS, Senior Management Team on 22 September 2022. A meeting was held with DHCW colleagues on 25 October 2022 who raised some concerns on how this can be achieved. Internal DHCW discussions are ongoing to identify viable options for retaining and storing the data.</p> <p>PCRM: The implementation of PCRM is dependent upon NHS Digital who are managing the change. NHS Digital are currently considering various options for NHS Wales and NHS England to transition to the new system. One of these options is to de-couple cervical screening from NHAIS to allow implementation of PCRM. NHS Digital has instigated a proof of concept. Following analysis of the output, NHS Digital will make a decision on how and when the PCRM roll-out will be undertaken. It is anticipated that further information will be made available to the NWSSP project team at the beginning of Jan-23. Whilst a decision is awaited on the timeline for implementing PCRM, NHS Digital are arranging elaboration workshops with PCS Subject Matter Experts to identify Welsh differences.</p> <p>An impact assessment to understand the changes required in PCRM to comply with Welsh Health policy e.g. to ensure the provision of services to the 'resident' population of Wales as opposed to the 'registered' population adopted in England, has been completed. It is anticipated that no development to the PCRM system will be required as work arounds will be in place.</p> <p>Following a delay, NHS Digital have provided an updated work package to support and maintain NHAIS. This is currently being reviewed.</p>				
Main Issues, Risks & Blockers				
<p>Notify: Following the resignation of the PCS Lead Developer in Aug-22, PCS have been trying to recruit a replacement to no avail. Alternative solutions to securing resource are currently being explored to complete the development. Whilst the development of the minimum viable product stands at around 90% complete, it is likely that the remaining 10% will be complex. Consequently, the completion of Notify is delayed with the impact manageable due to the delay of PCRM but this will need to be reviewed once PCRM implementation date has been provided by NHS Digital. No impact to stakeholders.</p>				

Project Name	Project Manager	Project Exec/SRO		
Cwm Taf Phase 2 Community Dressings	Bethan Clift	Emma Williams		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?				
Objective				
To support Cwm Taf Morgannwg University Health Board (CTMUHB) with the implementation of a standardised approach to the supply and management of wound care products within the Community setting to release nursing time back to patient care.				
Phase 2: Implementation of a new end-to-end service to be provided by NWSSP Supply Chain, Logistics & Transport.				
Progress Update				
Project objectives have been delivered, with the new end-to-end wound care service successfully operational.				
Project closure report drafted to include residual tasks assigned to relevant team members. The ongoing business as usual activities will be discussed through the Cwm Taf Morgannwg University Health Board (CTMuHB) wound care meetings, who will have full oversight and management of operational issues.				
Main Issues, Risks & Blockers				
None.				

Project Name	Project Manager	Project Exec/SRO		
Single Lead Employer Phase 3	Jenna Goldsworthy	Ruth Alcolado		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Amber (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
Establish NWSSP as the Single Lead Employer (SLE) for all trainees within NHS Wales by adopting a phased implementation approach. Establish arrangements to manage all trainee rotations whilst employed by NWSSP under the SLE model in partnership with HEIW and the Host Education and training providers (Health Boards).				
Progress Update				
On-boarding plan has been completed.				
Following the onboarding and rotation session in Aug-22, it has been agreed that a process and policy review will be undertaken prior to project closure. The aim of the review will be to provide recommendations for any changes that could improve the policies and processes and the experience of the doctors in training when they begin their employment and undertake rotations.				
The project review of SLE Process has begun with the Terms of Reference being agreed by all parties and the initial walkthrough sessions completed with the following stakeholder groups:				
NWSSP Workforce 09 December 2022; NWSSP Finance and Payroll 13 December 2022; HEIW 14 December 2022; All Health Boards (except Betsi Cadwaladr University Health Board - no confirmed representative) and BMA16 December 2022; and Occupational Health 19 December 2022.				
Main Issues, Risks & Blockers				
Discussion ongoing in relation to IT support and licencing arrangements for trainee Dentists as the management for this cohort varies from previous trainees.				
Following a review of the work that is required for the process review, it is expected that the Feb-23 deadline will not be met. To ensure recommendations are submitted to stakeholders with enough time for changes to be made, it has been agreed that the team will work with an agile approach and submit recommendations to stakeholders as and when they become available. The project plan is also being reviewed to see if any time can be saved and to prioritise areas for review.				
A representative from Betsi Cadwaladr UHB has not yet been confirmed.				

Project Name	Project Manager	Project Exec/SRO		
Community Dressings Powys - Phase 1	Bethan Clift	Stephen Powell		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
To support Powys Teaching Health Board (PTHB) with the implementation of a standardised approach to the supply and management of wound care products within the Community setting to release nursing time back to patient care.				
Phase 1: Facilitate development and approval of Business Case by Powys Teaching Health Board.				
Progress Update				
Project Board have reviewed the business case and have opted for the 'do nothing' option.				
While there were financial and operational benefits of moving to a service provided by NWSSP Supply Chain, Logistics and Transport division, the service was deemed non-viable. Due to the geographical split of Powys Teaching Health Board (PTHB) wound care bases, the district nurses require a more flexible service that can provide next day deliveries 24/7, a provision that they are receiving from their current provider.				
Main Issues, Risks & Blockers				
The resistance to change within the Health Board from the way the service currently operates, compared to the proposed options provided by SCL&T, has meant that the HB has opted to 'do nothing'. There is a small financial missed opportunity for PTHB, however, there is no impact for NWSSP.				

Project Name	Project Manager	Project Exec/SRO		
Occupational Health Checks	Rhiann Cooke	Rebecca Jarvis		
Monthly Update (key/issues (blockages)/risks)				
Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
Recent Gateway Review?	No			
Objective				
NWSSP have the responsibility to contract and manage an Occupational Health system on behalf of NHS Wales. The system enables Health Boards and Trusts to manage their Occupational Health records. The existing contract is due to expire on 30th November 2022.				
<ul style="list-style-type: none"> 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				
During this period, the contract with the awarded provider, Civica, has been finalised and we are awaiting their detailed plan for the implementation of the product OPAS-G2. The project team is in discussion with current provider, Cohort, on a firm date for data migration.				
The project team will meet with Civica for a refresh on system use and kick off meeting, over 2 sessions (one for Clinicians and one for system administrators). These sessions are taking place on 19 and 25 January 2023. To ensure that a Once for Wales approach is adopted throughout all occupational health processes, a task and finish group is being formulated with nominated representatives from each of the Health Boards.				
Main Issues, Risks & Blockers				
The main issue currently facing the project is the level of resource needed by Health Boards and Trusts to implement the new system. Discussions around the order in which the system will be implemented will further highlight any risks and issues in terms of Health Board resource.				

Citizens Voice Body (CVB)	Gill Bailey	Hazel Robinson
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Monthly Update (key/issues (blockages)/risks)

Status	Green (Overall)	None (Time)	None (Cost)	None (Quality)
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Recent Gateway Review?	Yes
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Objective

Welsh Government sponsored programme to implement a new statutory body, Citizen's Voice Body for Health and Social Care. The project objective is to implement back-office functions in preparation for Citizen Voice Body to become a legal entity. Citizen's Voice Body will be known as Llais.

Progress Update

The scope of the PMO support has been changed to focus on the coordination and management of NWSSP tasks and activities to achieve the project objective by 01 April 2023. Project Manager allocated since early October.

The activities involved cover the following service areas within NWSSP:

- Payroll
- Recruitment Services
- Pensions
- Expenses
- Workforce Information
- Finance (Including development of Financial Management System)

Work undertaken in this period includes:

- Formation of Project Team and Task and Finish groups.
- Production of Project Plan and other relevant project documentation.
- Attendance and contribution at weekly CVB Implementation meeting, coordinated by Welsh Government.

The main focus areas in this period have been on the establishment of a CVB Bank account, which had been subject to a lengthy delay and the development of the Financial Management systems to accommodate the CVB Financial Ledger and Purchase Orders.

The project team is awaiting confirmation from CVB regarding contact details needed for inclusion on the purchase order, plus the terms and conditions that will be displayed for suppliers.

The project team received confirmation on 03 January 2023 that the CVB will have their own Virtual Private Database (VPD) code. The delivery of a skeleton VPD (subject to testing and no issues identified) is expected at the end of Jan-23.

Main Issues, Risks & Blockers

The introduction of the new VPD will mean that the project team will now review tasks, identify any risks that could impact project delivery and alter plans accordingly.

Project Name	Project Manager	Project Exec/SRO
GS1 Coding Locations	Bethan Clift	Andy Smallwood

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

Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
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Recent Gateway Review?	No
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Objective

To support organisations and trusts across NHS Wales, to adopt GS1 standards. Facilitating the upload of physical and specific 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

Progress Update

Project Initiation Document developed and awaiting approval by Project Executive. Engagement continues to take place with all Health Boards and Trusts across All Wales, although several meetings have needed to be rescheduled due to annual leave and sickness over the winter period. Project Manager progressing the Standard Operating Procedure for the creation and ongoing management of Global Location Numbers. Project plans have been agreed and shared with stakeholders and Risks and Issues log is in development.

Main Issues, Risks & Blockers

While engagement across All Wales has been sufficient, there is a lack of resource available to support the implementation and ongoing sustainability of maintaining the project. Ongoing discussion with Health Board estates teams to discuss requirements.

Project Name	Project Manager	Project Exec/SRO
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Renewal of Virtual Cabinet & Servers	Jenna Goldsworthy	Mark Harris
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Monthly Update (key/issues (blockages)/risks)

Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
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Recent Gateway Review?

Objective

As the current case management system project has stalled (as at Jul-22), Legal & Risk Services and Welsh Risk Pool need to maintain the document storage solution (Virtual Cabinet) and the case management system to ensure business as usual operations can continue.

- A secondary project has been established to:
- Implement an extension of the Virtual Cabinet System;
 - Explore the options for the case management extension upgrade;
 - Confirm how WAST can access their files post 31 March 2023 when their Datix access is revoked; and
 - Confirm the infrastructure for the Virtual Cabinet System to sit on as the warranty on the current server is due to expire Feb-23.

Progress Update

The Virtual Cabinet (VC) upgrade has been rolled out to the L&RS Team. The new version of VC has initially made a substantial improvement in VC performance. Monitoring and testing of the system is still ongoing.

The extension of the server warranty is currently being explored with the supplier.

Procurement and the L&RS team are working on the Virtual Cabinet extension for 24 months to include financial years 2023-2024.

A further upgrade to VC is required as the current version is alpha. VC have released the client files to DHCW, who are working on building the deployment method. Legal & Risk IT are working through the release notes to build a testing plan. Once the old live environment is upgraded, testing will commence.

A shortcut to the new terminal server has been deployed and the shortcut to the old terminal server removed in Nov-22.

DHCW have built a new server and L&RS are preparing to migrate the database. There are some ongoing performance issues with the database which are being investigated and solutions being explored. L&RS have drafted a procurement specification to upgrade the Legal & Risk database from Office 2007 to Office 365 and are working with procurement to recruit an external supplier to carry out the work.

Main Issues, Risks & Blockers

Server Warranty

The Hyper-V Server that Virtual cabinet sits on has warranty until Jul-23. Work is ongoing to see if this warranty can be extended to Feb-24. The supplier has provided a quotation for the warranty extension which is currently being processed by the IT team.

WAST Access

Due to the delays with the CMS System, and as WAST access to Datix will expire on 31-Mar-23, it has been agreed that WAST will need access Virtual Cabinet post 31 March 2023. There is currently an issue with the WAST Team not being able to access VC on their work laptops. DHCW are working with WAST to resolve this.

Project Name	Project Manager	Project Exec/SRO
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Customer Contact Centre - Service Improvement (Website)	Rhiann Cooke	Andrew Evans
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Monthly Update (key/issues (blockages)/risks)

Status	Green (Overall)	Green (Time)	Green (Cost)	Green (Quality)
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Recent Gateway Review? No

Objective

Review and improve how our customers interact with NWSSP.

Progress Update

Information covering the following areas is live on the NWSSP website:

- Employing People (Recruitment activities)
- Payroll
- Car Scheme (Lease Cars)
- Information Rights
- ESR
- Receiving NHS Funding for your Studies (Student Awards)
- Pensions
- Digital Learning
- Find Information on Payment for Goods and Services Purchased by NHS Wales (Accounts Payable)
- Information Rights (Information Governance)

- Welsh Infected Blood Support Services
- Audit and Assurance Services
- Surgical Materials Testing Laboratory (SMTL)
- Supporting the NHS Estate
- Counter Fraud
- Expenses

The section on Primary Care Services is currently being translated and Procurement Services information is with the service for review.

The information will be formally launched throughout the next three months in quarter four.

Main Issues, Risks & Blockers

None.

Project Name	Project Manager	Project Exec/SRO		
Customer Contact Centre - Telephony and Contact Centre Solution	Bethan Clift	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				
Project is in initiation stage, and currently running to schedule.				
Key achievements completed: Agreement for NWSSP to join a joint procurement exercise with DHCW; DHCW issued the Invite To Tender (ITT) with two suppliers submitting a response; Evaluation panel reviewed the responses with contract award ratified;				
nWinning Supplier awarded contract; and Auto Attend and Interactive Voice Response (IVR) flows with corporate guidance have been developed in preparation for setup/test phase.				
Next steps: Review business case with costs provided by awarded supplier; NWSSP project team to develop implementation plans; and Extend current telephony system and Dell server warranty to provide business continuity while the new solution is rolled out.				
<u>Main Issues, Risks & Blockers</u>				
A potential risk was identified, with staff working from home who may have not adequate bandwidth. However, this was deemed as an already existing risk with the current telephony solution, moving to TEAMS telephony will not increase the risk. With TEAMS telephony it will give users an additional option of connecting through their phone network in the event of any internet issues.				

Project Name	Project Manager	Project Exec/SRO
Medicine Value Unit	Peter Elliott	Alex Curley

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

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

Recent Gateway Review? No

Objective

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

- Dedicated procurement resource within Procurement Services
- Supporting Pharmacy resource hosted within NWSSP
- Open a pipeline of work including input from clinical services within Health Boards and Trusts

Progress Update

The Project Board is meeting monthly and has approved the Project Scope document.

Recruitment actions are ongoing for the Procurement resource, supported by a recurrent funding award from Welsh Government. Earliest start dates for staff are not before Mar-23, so expenditure of this budget in the current year will be low.

Onboarding of the specialist Pharmacy resource is also ongoing, via the transfer to NWSSP of an existing All Wales post.

The project is reaching out to clinical commissioning bodies within Wales to seek to establish a pipeline of work proposals for the new service.

During quarter 4 , external consultant resource is being acquired to maintain project progress, this will also support the utilisation of available funding within the project.

NWSSP Finance colleagues are sighted on the potential underspend by this project.

Main Issues, Risks & Blockers

- Until work proposals start to be generated from the clinical service, the specialist procurement resource will not be able to begin work on contracting. Opening this pipeline of work is a key priority.
- The contracts will be based on clinical outcomes. Clear methodology and baselines will need to be established for how these outcomes will be measured and reported in an objective way. A data sharing agreement and methodology will be needed. Care will need to be taken that the reporting requirements of the contracts do not increase the administrative burden on the clinical service.
- There is a risk of significant underspend in the current year, owing to recruitment slippage compared to the timeline originally envisaged by the funding award.

Project Name	Project Manager	Project Exec/SRO
CAF Remediation	Peter Elliott	Neil Jenkins

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

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

Recent Gateway Review? No

Objective

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

Progress Update

The Project Board has been established and is meeting monthly.

Actions accomplished include:

- Creating NWSSP level workflows for Senior Leadership Group (SLG) and senior manager use during Incident Response and Disaster Recovery
- Updating the register of System Owners and ensuring that all system owners understand their role
- DHCW have agreed to support the inclusion of the majority of NWSSP digital assets on their WASP asset management system

Work currently ongoing includes

- Updating the NWSSP Portfolio Management Approach to improve the way we specify and procure digital systems
- Working of the Business Case to implement a Network Monitoring System
- Devising a methodology for Business Impact Assessments associated with the Service Catalogue. This will allow Service Continuity and Disaster Recovery actions to be prioritised in the event of major incidents.

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

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

Main Issues, Risks & Blockers

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

NON PMO Managed Initiatives

Key Individual Project/Programme Updates

Project Name	Project Manager	Project Exec/SRO
All Wales Laundry Transformation	Rhian Cooke	Neil Davies

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

Status Red (Overall) Amber (Time) Red (Cost) Amber (Overall)

Recent Gateway Review? Yes

Objective

The objective of the programme is to develop an all-Wales Laundry Service which will be managed by Shared Services (NWSSP) that complies with BS EN 14065:216 standard.

Details of the programme scope are as follows:-

- Provide three new laundry production facilities for all Wales Laundry Service consisting of two new builds (North & South west) & one refurbished laundry on existing facility (Greenvale).
- Design & construct two new build sites within a 5-mile radius of:
 - Ysbyty Glan Clwyd Laundry Services – Betsi Cadwaladr University Health board.
 - Llansamlet Laundry Service – Swansea Bay University Health Board.
- Refurbish existing laundry facility at South East Wales.
 - Llanfrechfa Grange 'Green Vale' Laundry Service – Aneurin Bevan University Health Board.
- Decommission existing four laundry facilities when new laundry service facilities are commissioned.
 - Ysbyty Glan Clwyd Services – Betsi Cadwaladr University Health Board
 - Glangwilli General Hospital Laundry Service – Hywel Dda University Health Board
 - Llansamlet Laundry Service – Abertawe Bro Morgannwg University Health Board
 - Church Village (old East Glamorgan Hospital) Laundry Service – Cwm Taf University Health Board
 - Llanfrechfa Grange 'Green Vale' Laundry Service – Aneurin Bevan University Health Board.

Progress Update

- Outline Business Cases have been finalised and approved by:
 - AWL Programme Board - 22/06/22
 - NWSSP Senior Leadership Team - 30/06/22
 - SSPC - 21/07/22
- Formal scrutiny of the Business Cases has been completed and we are awaiting Welsh Government sign off.
- Refurbishment BJC1 has been submitted to Welsh Government for information.
- An updated Programme Business Case report has been submitted to Welsh Government.
- Site security still ongoing & agreeing option & development agreements with Legal / Site Owners.

Main Issues, Risks & Blockers

Risks

- Risk of AWL Programme receiving no sign off of Business Cases could leave NWSSP with Laundries that do not comply to standards.
- Risk of no Laundry supply due to aged plant & equipment breaking down causing disruption to supply of safe laundry.

Project Name	Project Manager	Project Exec/SRO
Scan 4 Safety	Andrew Smallwood	Andy Smallwood

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

Status Amber (Overall) Amber (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. Two issues were identified in local testing that did not present in the central test environment, (CAVUHB and HDUHB) both have been addressed and solutions will be included in the next Oracle patch release in February. The team continue the roll-out of the Inventory Management System within Health Boards with pre-existing servers and is currently ahead of target. A significant number of implementations are to begin during Jan-23 which will see the system use increase further beyond target.

Main Issues, Risks & Blockers

Local Patient System interfacing is proving more of a challenge than anticipated. However, work with DHCW on linking a feed from the Master Patient Index to Omnicell will greatly improve tracing of products to patients. This is in addition to interfacing work ongoing with each Health Organisation to ensure that the scanned product data flows back into patient records.

The Theatre environment in all health organisations is highly pressured at present with staff sickness compounding pre-existing staff shortages in the face of COVID recovery activity. This is being worked around with each organisation based on local pressures. However, three implementations have been paused until January due to the additional potential impact of industrial action.

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 IG solutions including a DPIA for each functionality have been established.

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

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

Main Issues, Risks & Blockers

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

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

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

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

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

Project Name	Project Manager	Project Exec/SRO
ESR Transformation Programme	Rebecca Jarvis	Gareth Hardacre

Monthly Update (key/issues (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

Work with and support the NHS Business Services Authority (NHSBSA) with the transformation programme. NHSBSA Governance programme has commenced with two meetings of the People Digital Advisory & Leadership Group; consisting of key leads from NHS England and Wales. The selection questionnaire process as part of the procurement has been completed mid-December. Awaiting outcome to then take to next stage which is invitation to submit initial tender (ISIT).

There has been proactive engagement by NWSSP team with key peer groups including Directors of Digital and Directors of Planning.

A proof of concept as part of the procurement exercise is currently being developed by the NHSBSA where suppliers will be tasked with demonstrating their software and business concepts to meet the draft technical specification. New branding and identity to support the ESR Transformation has been agreed - the new solution will be known as the 'People Portal' which will be communicated across Wales in early 2023.

The NHSBSA have appointed a Transformation and Engagement Lead for Wales. The successful candidate has significant NHS and culture change experience and will work with the Digital Workforce team and NHSBSA Functional Advisor to assess the current level of maturity, organisational optimisation and readiness via annual assessments and implementation plan.

Annual ESR Assessments will take place between January and March 2023 as a baseline for organisational readiness and optimisation. A Wales People Portal Steering Group is currently being established to drive the optimisation work programme, key stakeholders from workforce, digital and finance along with Welsh Government colleagues will need to be engaged.

Main Issues, Risks & Blockers

Significant culture and process change.
 Consideration to existing processes including payroll to ensure no disruption to service.
 No dedicated resource to deliver the ESR Transformation programme within NWSSP or local organisations however this will be monitored via the risk register. Until we have an indication of suppliers / transition requirements, we are unable to quantify the resource requirements org readiness/proof of concept/migration 2024/2025.

Project Name	Project Manager	Project Exec/SRO
Health Roster Implementation	Lloyd Jones	Rebecca Jarvis

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

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

Recent Gateway Review? No

Objective

Progress Update

Project Plan updates:
 Data gathering for Health Courier Service Swansea Bay, Swansea Bay University Health Board Laundry Transport, Health Courier Service Powys and Health Courier Service Hywel Dda is complete.

Denbigh Stores at training stage in readiness for the first Payroll submissions in Jan-23.

The next two units for consultation are Health Courier Service Manager South East and Health Courier Service Cwm Taf Morgannwg.

Full NWSSP roll out plan drafted.

- Services on hold:
- Medical Examiners pending further training
 - Bridgend stores as advised by People and OD
 - Health Courier Service Aneurin Bevan and Aneurin Bevan University Health Board Laundry Transport due to re-structure.
 - Bank Staff, Legal & Risk as they do not think the system is viable at the moment due to time restraints.

Roster Policy:
 The Roster policy was presented at Local Partnership Forum (LPFP) on 18 October 2022. A few queries were raised by Staff Side. Following a meeting with Staff Side, final amends have been agreed. The policy will be presented to the January LPF meeting for final approval. A Welsh translation of the policy will be sought before publishing within NWSSP.

Next Steps

HealthRoster:

Training for Health Courier Service Swansea Bay, Swansea Bay University Health Board Laundry Transport, Health Courier Service Powys and Hywel Dda.

Finalise data gathering for Bridgend Central Stores, Newport IP5, Health Courier Service Wrexham, Betsi Cadwaladr University Health Board Laundry Transport, Health Courier Service Victor Base, Health Courier Service Manager North and Health Courier Service Tywyn.

Finalise training for Denbigh stores in readiness for the first Payroll submissions in Jan-23.

Continue consultation with Health Courier Service South East and Health Courier Service Cwm Taf Morgannwg.

Discussions with Unit heads of future units to agree timescales in line with the plan.

Bank Staff:

Bank services for DHCW set up and ready for use.

Public Health Wales (PHW):

The first Project Board meeting took place on 29 November 2022 at which the Terms of Reference, governance, Service Level Agreement and meeting frequency were discussed with the aim to agree final amendments at the next meeting.

Frequency of project team meetings to be confirmed and aligned with Project Board meetings.

ESRCo, an additional piece of software/module of ESR that automates and speeds up the transfer between ESR and Health Roster, is now activated for PHW.

Project team gathering intelligence on areas with enthusiasm to implement and complex rotas.

Discussions with Information Governance in terms of the Data Privacy Impact Assessment on 5 January 2023 for sign off at the next meeting.

Ongoing updates to the communications and implementation plan.

Main Issues, Risks & Blockers

No issues or blockers reported

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

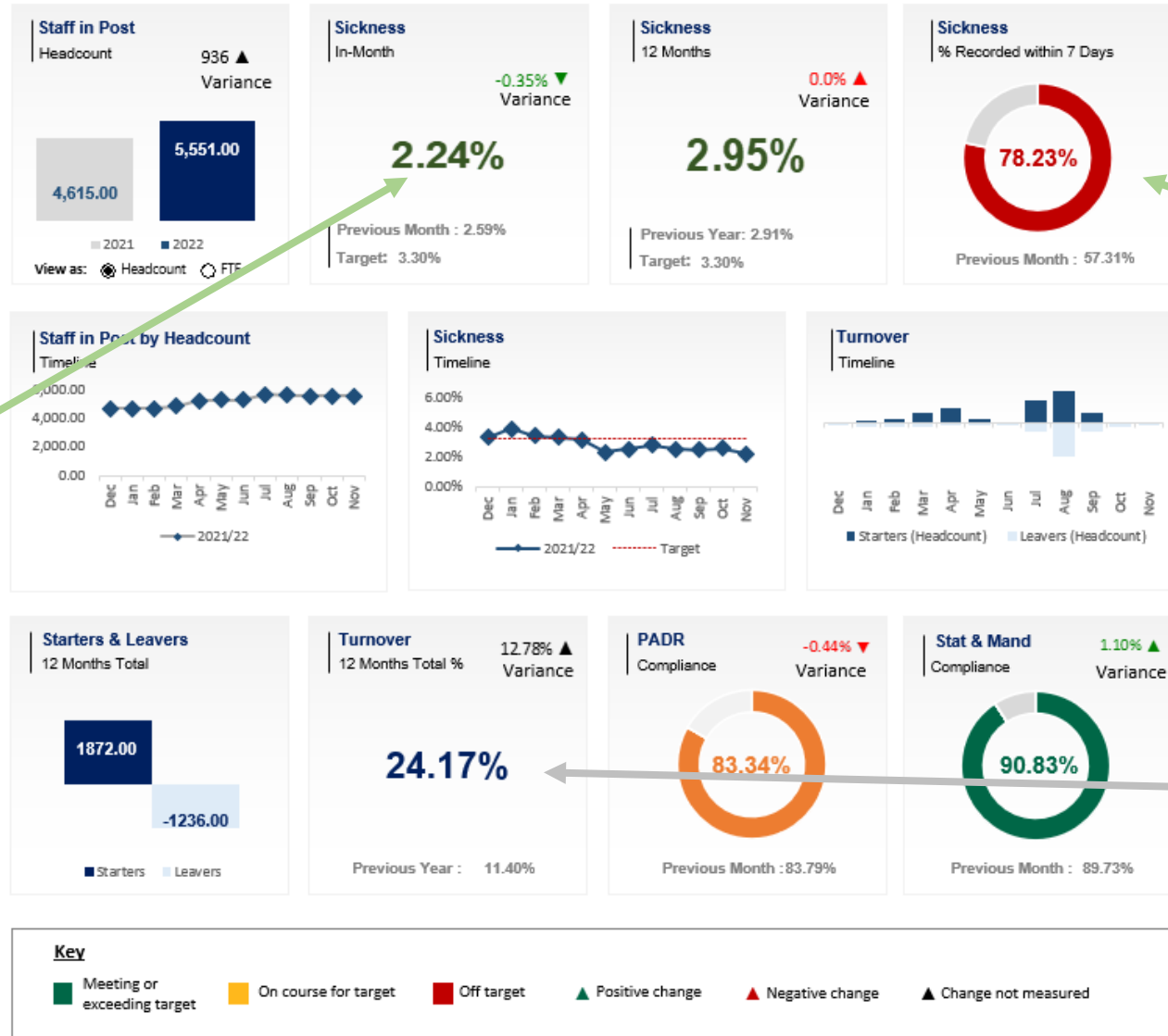
MEETING	Shared Services Partnership Committee (SSPC)
REPORT DATE	4 th January 2023
REPORT AUTHOR	Sarah Evans, Deputy Director of People and OD
RESPONSIBLE DIRECTOR OF SERVICE	Gareth Hardacre, Director of People, OD and Employment Services
TITLE OF REPORT	Report of the Director of People, OD and Employment Services
PURPOSE OF REPORT	<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 30th November 2022. 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 2022.</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 reasons for absence by FTE days Lost

1. Anxiety/Stress/depression/ other psychiatric illness.
2. Chest & respiratory problems.
3. Infectious diseases



Recording Sickness Absence

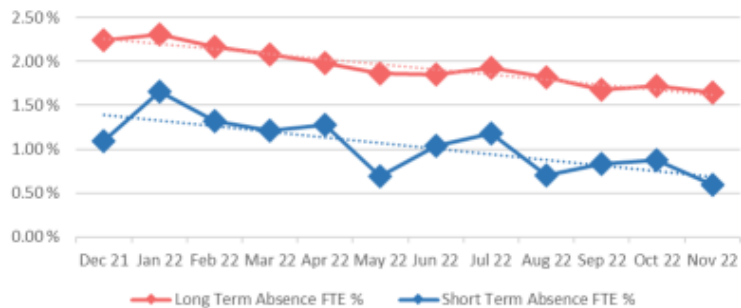
An improvement has been made recording sickness within 7 days when compared to the previous month.

Turnover appears significantly higher for the period (24.17%) due to the completion of training for the trainees on the Single Lead Employer scheme

Excluding Single Lead Employer turnover is 13.64%

FURTHER DETAIL

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



Data Source: ESR

Long Term Vs Short Term Absence

Long Term Absence has decreased from the month of October and is at 1.65%

Short Term Absence has decreased to 0.59% during November when compared to the month of October which was 0.87%

The top reason for Long Term Absence for the period based on FTE Lost is **Anxiety/Stress/Depression**

In Month Sickness Absence Percentage by Division

Division	Oct-22	Nov-22	Change
Accounts Payable Division	2.41%	2.04%	-0.37% ▼
Audit & Assurance Division	3.10%	4.15%	1.05% ▲
Corporate Division	2.02%	2.02%	0.00%
Counter Fraud Division	2.02%	0.00%	-2.02% ▼
Digital Workforce Division	1.66%	4.77%	3.11% ▲
E-Business Central Team Division	2.41%	1.42%	-0.99% ▼
Employment Division	5.33%	5.31%	-0.02% ▼
Finance Division	1.19%	0.93%	-0.26% ▼
Hosted Services Division	7.50%	7.04%	-0.46% ▼
Laundry Division	6.99%	6.69%	-0.30% ▼
Legal & Risk Division	2.48%	2.39%	-0.09% ▼
Medical Examiner Division	5.11%	2.63%	-2.48% ▼
People & OD Division	5.43%	5.45%	0.02% ▲
Planning, Performance and Informatics Division	0.78%	6.08%	5.30% ▲
Primary Care Division	4.25%	4.66%	0.41% ▲
Procurement Division	6.46%	4.88%	-1.58% ▼
Single Lead Employer Division	1.22%	0.92%	-0.30% ▼
Specialist Estates Division	0.00%	0.00%	0.00%
Surgical Materials Testing (SMTL) Division	4.88%	1.79%	-3.09% ▼
Temporary Medicines Unit Division	0.43%	0.00%	-0.43% ▼
Welsh Employers Unit Division	0.00%	1.73%	1.73% ▲
Grand Total	2.59%	2.24%	-0.35% ▼

Source: ESR

In month sickness has decreased from the October position and is now 2.24%.

Hosted Services Division has the highest in Month Sickness Percentage for October at **7.04%**

Appraisal Compliance by Division

Division	Oct-22	Nov-22	Change
Accounts Payable Division	79.70%	85.38%	5.68% ▲
Audit & Assurance Division	88.24%	86.27%	-1.97% ▼
Corporate Division	83.33%	81.82%	-1.51% ▼
Counter Fraud Division	85.71%	85.71%	0.00% ▲
Digital Workforce Division	80.00%	88.24%	8.24% ▲
E-Business Central Team Division	93.33%	84.62%	-8.71% ▼
Employment Division	80.69%	82.39%	1.70% ▲
Finance Division	85.00%	85.00%	0.00%
Hosted Services Division	80.00%	84.62%	4.62% ▲
Laundry Division	83.33%	82.50%	-0.83% ▼
Legal & Risk Division	93.42%	91.28%	-2.14% ▼
Medical Examiner Division	46.67%	40.00%	-6.67% ▼
People & OD Division	65.45%	69.23%	3.78% ▲
Planning, Performance and Informatics Division	89.66%	96.55%	6.89% ▲
Primary Care Division	88.97%	90.68%	1.71% ▲
Procurement Division	86.09%	82.90%	-3.19% ▼
Specialist Estates Division	89.58%	81.63%	-7.95% ▼
Surgical Materials Testing (SMTL) Division	95.45%	95.65%	0.20% ▲
Temporary Medicines Unit Division	41.67%	54.55%	12.88% ▲
Welsh Employers Unit Division	0.00%	0.00%	0.00%
Grand Total	83.79%	83.34%	-0.45% ▼

Source: ESR

A decrease has occurred overall recording appraisal reviews during November which is down by 0.45% on the previous month and is at **83.34%**.

3 Divisions have less than 50% compliance:

1. Welsh Employers Unit Division
2. Temporary Medicine Unit Division
3. Medical Examiner Division

E-Learning Competency Compliance

Division	043 MAND Cyber Awareness Core	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
043 Accounts Payable Division	97.08%	96.35%	94.89%	94.89%	97.81%	94.89%	94.89%	95.62%	97.08%	97.81%	100.00%
043 Audit & Assurance Division	96.23%	100.00%	92.45%	100.00%	100.00%	92.45%	100.00%	94.34%	98.11%	98.11%	100.00%
043 Corporate Division	91.67%	91.67%	91.67%	95.83%	95.83%	95.83%	95.83%	95.83%	95.83%	95.83%	100.00%
043 Counter Fraud Division	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
043 Digital Workforce Division	91.67%	100.00%	91.67%	100.00%	95.83%	91.67%	91.67%	91.67%	91.67%	91.67%	95.83%
043 E-Business Central Team Division	92.86%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
043 Employment Division	90.27%	93.51%	88.38%	90.00%	90.00%	88.92%	89.73%	90.81%	89.46%	88.65%	98.65%
043 Finance Division	100.00%	100.00%	100.00%	100.00%	100.00%	90.91%	95.45%	100.00%	100.00%	100.00%	90.91%
043 Hosted Services Division	100.00%	100.00%	93.33%	93.33%	93.33%	93.33%	93.33%	93.33%	93.33%	93.33%	100.00%
043 Laundry Division	28.68%	58.14%	41.09%	65.89%	68.99%	66.67%	84.50%	67.44%	69.77%	64.34%	76.74%
043 Legal & Risk Division	96.23%	98.74%	94.34%	96.23%	96.23%	93.08%	93.71%	94.97%	97.48%	96.86%	98.11%
043 Medical Examiner Division	44.83%	67.24%	51.72%	62.07%	56.90%	63.79%	51.72%	53.45%	60.34%	58.62%	67.24%
043 People & OD Division	74.55%	80.00%	69.09%	70.91%	76.36%	76.36%	69.09%	70.91%	74.55%	74.55%	85.45%
043 Planning, Performance and Informatics Division	93.55%	100.00%	96.77%	93.55%	96.77%	93.55%	93.55%	93.55%	93.55%	93.55%	100.00%
043 Primary Care Division	96.92%	97.26%	96.58%	97.60%	98.63%	95.89%	97.26%	97.60%	98.29%	98.29%	99.32%
043 Procurement Division	88.48%	94.74%	92.75%	94.59%	95.16%	91.89%	94.45%	93.60%	94.88%	94.31%	96.73%
043 Specialist Estates Division	90.00%	98.00%	92.00%	98.00%	94.00%	92.00%	92.00%	96.00%	98.00%	98.00%	100.00%
043 Surgical Materials Testing (SMTL) Division	100.00%	100.00%	95.65%	100.00%	100.00%	95.65%	100.00%	100.00%	100.00%	100.00%	100.00%
043 Temporary Medicines Unit Division	64.29%	85.71%	71.43%	78.57%	85.71%	71.43%	64.29%	71.43%	78.57%	78.57%	78.57%
043 Welsh Employers Unit Division	57.14%	42.86%	57.14%	57.14%	42.86%	57.14%	57.14%	57.14%	57.14%	57.14%	85.71%
043 NHS Wales Shared Services Partnership Board	86.32%	92.16%	87.87%	91.34%	91.88%	89.42%	91.38%	90.61%	91.70%	91.06%	95.44%

Source: ESR

30-Nov-22

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

- We have completed the data gathering stage for the Employee Value Proposition Project, in partnership with Recruitment Services and have available all advertising data from TRAC recorded between 01/01/22 and 17/11/22.
- Engagement with Divisional Management Teams continues in order to understand the recruitment and retention barriers from each service and draw up relevant action plans for each service.
- We are currently focussing on some quick wins and are working collaboratively with the Communications Team to rebrand some of our external advertising documents such as "About Us" and the "NWSSP Benefits" documents.
- Updated recruitment training focussing on four discreet modules; Preparing to Recruit, Inclusive Recruitment, Selection and Interview and Welcome to NWSSP which looks at the induction experience, is being finalised in readiness to introduce in 2023/24.
- We are working with the Communications team for a proof of concept for a dedicated Job Evaluation SharePoint site to house a centralised Job Description library in 2023/24.

RESOURCE BANK AND AGENCY

General Bank – Monthly Use

- 185 staff actively engaged on the bank in May (39 removed from collaborative bank)
- Total spend of £339,537.49 (once collaborative bank spend of £30,745.12 removed)
- Up £38,973.85 from November 2022 (reflected in increase of Expression of Interest in Bank recruitment below)
- Spend remains broadly at the same level as October adjusting for the 5 week month but higher than the first half of the financial year.

Service	Sum of Cur Month Actual	Sum of WTE Actual
Accounts Payable & E-Enablement	10,515.66	4.81
Audit & Assurance Services	3,367.69	0.97
Collaborative Bank	30,745.12	6.09
Corporate Services	4,117.60	1.12
Employment Services	46,051.14	17.54
Health Courier Services	75,162.63	30.82
Laundry Services	35,701.49	14.68
Legal & Risk Services	7,663.62	1.84
People & OD	3,344.69	0.93
Pharmacy Technical Services	3,052.68	-0.40
Planning, Performance & Informatics	1,862.25	0.94
Primary Care Services	10,323.04	4.22
Procurement services	114,545.14	46.27
SMTL	6,033.01	1.72
Welsh Risk Pool	17,796.85	4.20
Grand Total	370,282.61	135.75

Agency Spend by Reason and Service

Service	£	People Engaged
Audit	16,803	2
Planning, Performance & Informatics	15,454	1
Employment Services	2,795	1
Corporate	832	1
PS - Local Procurement	2,702	1
PS - Supply Chain	2,770	1
Laundry	44,503	25
	85,859	32

Agency Use

- Agency spend for November increased to £85,859 (up from £55,834 in October)
- Increase of £30,025 on agency costs
- 32 x staff engaged via Agency in last month (Up from 20)

Laundry

- Increase from 13 to 25 (Cost increase of £18,291)
- Recruitment drive for Greenvale saw 1 applicant over a 2 week advert who was able to offer 1 day a week
- Follow up on Glangwili and Church Village laundry staff coming onto NWSSP Bank under SLA. No update received from Laundry so chased 08/12/22

Bank Recruitment

- 9 adverts completed in the last month across a range of admin, drivers/stores and also laundry
- This has supported significant increase in EOIs in the last 5 weeks

EMPLOYEE EXPERIENCE

What we mean by Employee Experience:

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

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

Corporate Engagement

People Development

- Communications will be shared with all leaders on Monday 19th December introducing our new approach to our Leading for Excellence and Innovation Programme
- Focused work is being undertaken on establishing a Leadership Hub for all NWSSP leaders which will incorporate the Manager’s Toolkit, Leadership Qualifications, inclusive Leadership & compassionate leadership

Industrial Action

- The Business Partnering team continue to work closely with Divisions, whilst we await the outcome of the Union ballots. In readiness for the Royal College of Nursing strikes on 15th and 20th December, a separate SharePoint site has been created, housing guidance for managers and staff along with relevant support signposting.

Health & Well-being

- The development of a 6-month plan of physical activity provision for colleagues has been signed off by the Health and Well-being Partnership Group.
- Managing Attendance at Work Training will start running again from January 2023 to aid managers in dealing with sickness absence. Compassionate leadership approach and manager's discretion will be discussed as part of the training package.

This is Our NWSSP

- Stakeholder engagement is underway in preparation of the development of a Rising Stars programme and Innovation Network. The outputs of this will be shared with Senior Leadership Group in Quarter 4.
- Following approval of the wording in the Values Behaviour Framework, a selection of images are being prepared for Senior Leadership approval, with a view to launch the framework in January.

Equality, Diversity and Inclusion

- A series of workshops are underway throughout December to enable colleagues from the Equality, Diversity and Inclusion Group, and the Culture Change Champions to contribute to the development of NWSSP’s Equality, Diversity and Inclusion Action Plan. The themes of the workshops are based on the outputs from Talent, Inclusion and Diversity Evaluation (TIDE) benchmarking report. The outputs will be shared with the Equality, Diversity and Inclusion Group in January
- NWSSP has attended the Employer’s Network for Equality and Inclusion’s Annual Inclusivity Excellence Awards on 30th November and were pleased to accept a Highly Commended award in the Category of Enhancing Wellbeing and Belonging at Work. The award recognised the work undertaken to engage Health and Well-being Champions and Culture Change Champions in addition to supporting staff through the Proud Network, Menopause Café and Mental Health Support groups.

EMPLOYEE EXPERIENCE CONTINUED

Divisional Activity Update**Procurement**

- Culture and Engagement focus groups have been undertaken for operational staff in Bridgend Stores. Further sessions are scheduled for January to March to visit all Receipt and Distribution Sites within the Supply Chain.
- A Team Development Session is scheduled for Hywel Dda Local Procurement Team for 16th of February 2023.
- A tailored sickness absence management and team resilience session will be delivered to the Local Procurement Sourcing team in Companies House on the 12th of January 2023. Managing Mental Health for Line Managers Training is also scheduled for the 11th of January 2023 in Bridgend Stores.
- An opportunity to provide apprenticeships within Supply Chain, Logistics and Transport is currently being developed, including Supply Chain Management, and Warehousing and Storage. They will be available for substantive staff and as a widening access opportunity. We are also working with Welsh Government on the development of a Central Procurement apprenticeship.
- Successful recruitment campaigns took place in Supply Chain and within IP5 for permanent posts. The successful candidates were staff currently holding fixed term contracts, from the Kickstart scheme and from our temporary bank.

CIVAS@IP5

- The Head of Technical Services is currently involved in a project group focusing on what measures can be taken to improve the retention of pharmacy staff.

Laundry Service

- Further workforce information has been provided to Welsh Government as part of the overall scrutiny process of the Outline Business Case. Further communication pieces will be undertaken with the workforce once we receive any decisions from Welsh Government

Transforming Access to Medicines (TrAMs)

- The interviews for those who expressed expressions of interest for the Senior Leadership Team (SLT) took place week commencing 5th December 2022.

Medical Examiner Service (MES)

- The Medical Examiner service review has taken place and an action plan has been developed which is being fed back to the service in December.

Specialist Estates Service (SES)

- The Deputy Director of Specialist Estates Service is currently out for advert with an intended selection process taking place in January 2023.



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM: 4.5

19 January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Corporate Risk Update – January 2023

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

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

Llywodraethu/Governance

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

Ymgynghoriad/Consultation:

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

Adduned y Pwyllgor/Committee Resolution (insert ✓):

DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE	✓
Argymhelliad/ Recommendation		The Committee is asked to NOTE the report.		

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	No direct impact
Cyfreithiol: Legal:	Not applicable
Iechyd Poblogaeth: Population Health:	No impact
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
Ariannol: Financial:	Not applicable
Risg a Aswiriant: Risk and Assurance:	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Standard 1.1 Health Promotion, Protection and Improvement
Gweithlu: Workforce:	No impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open. The information is disclosable under the Freedom of Information Act 2000.

NWSSP CORPORATE RISK REGISTER UPDATE

January 2023

1. INTRODUCTION

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

2. RISKS FOR ACTION

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

Current Risk Rating	January 2023
Red Risk	7
Amber Risk	9
Yellow Risk	2
Green Risk	0
Total	18

2.1 Red-rated Risks

Following a detailed review of the Corporate Risk Register at the November SLG, a number of risks have been escalated to red and some new red risks added.

- The existing red risk relating to the inflationary consequences of the situation in Ukraine and the resultant impact on energy prices remains red. This is currently being mitigated through the role of the Energy Price Risk Management Group (EPRMG), but energy prices remain very volatile.
- The above risk has also been articulated into a second risk which considers the role that NWSSP plays as the lead energy purchaser for the whole of NHS Wales, and the reputational risk that is associated with that role.
- The existing risk of the impact of potential industrial action has been escalated from amber to red as strike action has now been confirmed. While the strikes currently called by the RCN are not likely to have a significant impact on NWSSP, the likely industrial action from other Trade Unions will have a greater impact.
- Similarly the existing risk of having insufficient staff resource to meet demand has also been escalated from amber to red. NWSSP have a lot of staff on bank contracts who help to deliver essential services but for whom we are unable to guarantee security of employment due to Welsh Government not confirming whether these posts will be funded into 2023/24.

- The contractual dispute affecting the replacement for the Legal & Risk Case Management system has also been escalated from amber to red. While there are contingency arrangements in place to maintain services, the potential financial loss could be significant.
- The Laundry Transformation Programme has been added as a red risk due to uncertainty over whether the required capital funding for the scheme will be available to complete it.
- The Brecon House roof at Mamhilad has also been added as a red risk due to serious issues with water ingress and falling masonry, making the building unsafe for staff.

2.2 New/Deleted Risks

In addition to the Laundry Transformation Programme and Brecon House risks referred to above, the following risks have been added to the register since the last meeting of the SLG:

- Difficulties in recruiting staff leave us unable to meet the expectations of Welsh Government in playing a leading role in delivering the decarbonisation agenda; and
- The move to agile working, and the relatively imminent expiry of a number of our property leases, require urgent agreement of an Accommodation Strategy.

Two risks were also removed from the Register as follows:

- The failure to engage with appropriate specialists (e.g. H&S/Fire Safety, Information Security/IG) sufficiently early enough when considering major developments may result in actions being taken that do not consider all relevant potential issues; and
- The introduction of new technology and the promotion of the digitisation agenda may impact NWSSP staff in terms of their current roles and responsibilities.

It was considered in both cases that appropriate action had been taken to mitigate the risk.

3. RISKS FOR MONITORING

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

Current Risk Rating	January 2023
Red Risk	0
Amber Risk	0
Yellow Risk	2

Green Risk	6
Total	8

4. RECOMMENDATION

The Committee is asked to:

- **NOTE** to the Corporate Risk Register as at January 2023.

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 (added April 2021)	4	4	16	IP5 Board Additional facilities secured at Picketston	2	4	8	PCS reviewing options for medical records storage - additional space is available from Johnseys on Mamhilad site. Business Case prepared and approved at June SLG and July SSPC. Awaiting formal Welsh Government approval.	Business Case approved at June SLG and July SSPC. Currently with Welsh Government for final approval. There is now also a problem with Brecon House that may impact on current capacity.	➔	31-Mar-23
	Strategic Objective - Service Development									Risk Lead: Programme Director		
A2	Suppliers, Staff or the general public committing fraud against NWSSP. (added April 2019)	5	3	15	Dedicated NWSSP LCFS Counter Fraud Service Internal Audit WAO PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	3	3	9	Develop work plan for dedicated LCFS resource (PS 31/10/2022)	C&V have recruited an additional Band 6 LCFS and an 8A. Dedicated LCFS commenced in post for NWSSP with effect from 6/6/22. Fraud Awareness session held on 16/11/2022.	➔	31-Mar-23
	Strategic Objective - Value For Money									Risk Lead: Director of Finance & Corporate Services		
A3	Risk of cyber attack exacerbated if NWSSP, or other NHS Wales organisations, run unsupported versions of software. (added Apr 2019)	5	5	25	Cyber Security Action Plan BCP Champions Meeting Information Governance training Mandatory cyber security e-learn Internal Audit review Band 6 IT Security Officer appointed Sept 21 BCP Action Cards (updated March 22) 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.	2	5	10	Initial phase of work to review and update the service catalogue and make assessment of risk on existing systems has commenced (w/c 20th June). IT security team attended BCP meeting on 16 June to explain the process and requirements of All Divisions. Given the heightened level of risk promotion of good practice to staff and phishing testing continues. Progress against the CAF will be reported to SLG on a quarterly basis. CRU held a workshop with SIRO and Director of Informatics on 29 June. Agreement for further resource achieved - recruitment underway.	Team was strengthened in Sept 21 with additional member of staff. Following war in Ukraine staff have been reminded of good housekeeping procedures and guidance reissued. All directorates have completed or updated their action cards relating to the potential loss of IT systems and networks. Focus on this topic at May SLG.	➔	31-Mar-23
	Strategic Objective - Service Development									Risk Lead: Director of Planning, Performance & Informatics		
A4	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 poor levels of performance. (added November 2021)	4	4	16	Established working practices governed by Service Level Agreements and measured by reporting of KPIs on monthly basis.	3	4	12	Additional staff being recruited Use of students from Cardiff University Temporary support from other Directorates Modernisation Programme being implemented Accessing KickStart scheme	Focus on training staff on pinch points rather than whole process Backlog in applications in Student Awards reduced from 1800 to <800. Significant reduction in complaints as at March 2022 Deep Dive Presentation to SSPC March 2022	➔	31-Mar-23
	Strategic Objective - Customers									Risk Lead: Director of People and OD		
A5	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. (added January 2022)	5	5	25	Internal Audit Review of Stores Stock Rotation - based on FIFO Donations to India and Namibia	2	3	6	SMTL are meeting Procurement management on the 5th of December to review whether the shelf life of any items can be safely extended.	Wales On-Line Fol request robustly responded to on 31/1. 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. There is a need to write off significant values of PPE	➔	31/03/2023
	Strategic Objective - Service Development									Risk Lead: Director of Finance & Corporate Services		
A6	The increase in energy prices, exacerbated by the war in Ukraine, is likely to lead to significant price increases across the whole range of goods and services resulting in severe cost pressures for NWSSP. (added March 2022)	5	5	25	Energy Price Risk Management Group Forward purchase of energy Briefings to Welsh Government	4	5	20	Assess impact of UK Govt announcement on subsidies for energy prices (EPRMG 31/10/22)	Paper on energy costs to March SSPC, and update provided to August Informal SLG. Daily monitoring of prices and buying ahead at fixed price where possible. Presentation to September SSPC. WG are funding first six months of actual additional costs.	➔	31/03/2023

	Strategic Objective - Value For Money										Risk Lead: Director of Finance & Corporate Services	
A7	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	4	5	20	EPMRG considering an alternative energy partner and supplier.	Risk has been increased due to the withdrawal of British Gas from the market.	☀	31/03/2023
	Strategic Objective - Value For Money									Risk Lead: Director of Finance & Corporate Services		
A8	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 (added August 22)	4	4	16	Good working relationship with Trade Union colleagues - presence on and updates to SLG. Business Continuity Plans and Arrangements.	5	4	20	L&R providing Industrial Action training. BCP Action Cards being updated.	Difficult to assess impact and possible contingencies until details of industrial action known.	↑	31/03/2023
	Strategic Objective - Staff									Risk Lead: Director of People and OD		
A9	The Student Awards software is at end of life and needs replacement without which delays to student bursary payments could be significantly affected. (added May 2022)	5	5	25	Formal project management in place	2	4	8	Phase 1 to be delivered by April 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.	➔	31/03/2023
	Strategic Objective - Customers									Risk Lead: Director of People and OD		
A10	There is a reputational risk associated with the establishment of the Citizens' Voice Body (added July 2022)	4	4	16	Experienced Programme Director Appointment of (Agency) Governance Lead	2	4	8	Provide options for financial systems (PB)	Role is to assist Welsh Government in determining how CVB will operate. Governance advice provided initially by PS but an Agency Governance Lead has now been appointed.	↓	31/03/2023
	Strategic Objective - Service Development									Risk Lead: Director of Finance & Corporate Services		
A11	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. (added back Sept 22)	5	5	25	Identification of all business-critical services Redeployment of staff to business-critical services Increased provision of laptops and VPN Roll-out of Office 365 Use of Bomgar service for PCS Daily monitoring and reporting of absence figures. IT Update also given to weekly COVID-19 Planning & Response Group.	4	5	20	Need to get WG to confirm funding arrangements for 2023/24 and beyond. Staff on bank contracts to given fixed term contracts until end March 2023.	Action agreed at September SLG to move bank staff onto fixed term contracts for this financial year until funding arrangements from WG are clarified. AB is meeting with Steve Elliott and Matt Denham-Jones to get clarity on their funding intentions.	↑	31-Mar-23
	Strategic Objective - Customers									Risk Lead: Senior Leadership Group		
A12	An issue with the supplier of the replacement Legal & Risk Case Management System threatens financial loss and the delivery of the service (added Sept 22)	4	4	16	Formal project managed through PMO	4	4	16	While working with the supplier Management team to resolve the current open issues, it was agreed that all work from the supplier's perspective will pause from 07 July 2022 until all issues have been resolved.	There is currently a significant issue about the scope, duration and cost of the project.	↑	31/03/2023
	Escalated Divisional Risk									Risk Lead: Director, Legal & Risk Services		
A13	The planned development of the Clinical Pharmacy Service is adversely impacted due to financial and staffing challenges (added Sept 22)	4	4	16	CIVAS Board National QA Pharmacist	3	4	12	On-going discussion regarding funding and TUPE of staff from Health Boards.	Update on SSPC Agenda	➔	31/03/2023
	Escalated Divisional Risk									Risk Lead: Service Director		
A14	The lack of available capital threatens the successful implementation of the Laundry Transformation programme, resulting in required service improvements not being achieved.	5	5	25	Business Case signed off at SSPC and Trust Board	5	5	25	Develop alternative plans that do not rely on substantial capital investment.	Welsh Government have confirmed that the required capital funding is not available for the foreseeable future.	☀	30/06/2023
	Strategic Objective - Service Development									Risk Lead: Director, Procurement Services		
A15	Difficulties in recruiting staff leave us unable to meet the expectations of Welsh Government in playing a leading role in delivering the decarbonisation agenda.	5	5	25	Decarbonisation Programme Board Project Execution Plan PMO Support	3	4	12	Continue to recruit to fill vacant posts.	Anticipated that the full team will not be in place until the summer of 2023.	☀	31/08/2023
	Strategic Objective - Service Development									Director, Specialist Estates Services		
A16	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		3	4	12	Work ongoing to re-negotiate leases that are coming up for renewal and/or look for alternative accommodation given the numbers still working from home.	Nantgarw lease currently being negotiated.	☀	30/04/2023
	Strategic Objective - Staff									Director, Specialist Estates Services		
A17	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. (added January 2023)	5	5	25	Majority of staff working from home. Health & Safety Reviews	3	5	15	Structural Engineers appointed Immediate work being undertaken to make building safe for staff. Plan to vacate Brecon House, ideally at end of 2022/23 financial year.	Negotiations being undertaken for alternative accommodation.	☀	30/06/2023
	Escalated Divisional Risk									Director, Primary Care Services		

A18	The transfer of the laundries to NWSSP expose a number of risks including concerns over health and safety and formality of customer relationships. (added April 2021)	4	4	16	All-Wales Programme Business Case Programme Board Regular updates to SLG on progress with Action Plan Draft SLAs approved by SSPC Appointment of Assistant Director for Laundry Services H&S Audits of Laundry Sites	2	3	6	Arrange internal audit review of Laundry service (AB/PS - complete) Prioritised report to be submitted to SLGs to monitor progress. (on-going) - good progress now being made with majority of required actions completed.	Transfer has now taken place for all of the 5 laundries, although arrangements are different for Hywel Dda and Cwm Taf. Updates provided to SLG. IA review focused on Swansea Laundry provides reasonable assurance. Report to Sept 22 H&S Group showed good progress in completing actions.	➔	31-Dec-22
Strategic Objective - Service Development												
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) Review any gaps in security arrangements and address where possible (PS 31/12/2022)	Security Review undertaken and reported to SMT in Dec 2018. No major findings and all agreed actions implemented or superseded.	➔	
											Risk Lead; Director Specialist Estates Services/Director of Finance and Corporate Services	
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 to be 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. Further discrete risk assessments to be undertaken and reported back to Feb 2021 SLT.	➔	
											Risk Lead: Director of People and OD	
M3	The total quantum for funding for addressing Covid-19 across Wales remains fluid and uncertain. There is a risk that the organisation's operational cost of addressing the pandemic cannot be contained within available funding resulting in a potential breach of the planned outturn for 2021-22.	3	3	9	Financial modelling and forecasting is co-ordinated on a regular basis; Financial reporting to Welsh Government on local costs incurred as a result of Covid-19 to inform central and local scrutiny, feedback and decision-making; Oversight arrangements in place at SMT level, and through the command structure. Financial Governance Committee considers VFM in all expenditure	1	3	3	Ensure that the costs directly associated with COVID-19 are identified and accurately captured. Provide regular updates to Welsh Government.	WG issued letter on 24/3/21 setting out funding allocations for 2021/22. The sum of £170m is available but this is being distributed only to HBs in the first instance.	➔	
											Risk Lead: Director of Finance & Corporate Services	
M4	NWSSP are unable to procure sufficient orders of PPE, medical consumables and equipment resulting in clinical staff being able to treat patients safely and effectively.	5	5	25	PPE Winter Plan Finance Governance Committee Streamlined arrangements for Trust Board and WG approvals Increased limits approved for Scheme of Delegation. Regular meetings with UK and Welsh Government. Active involvement in UK Mutual Aid Schemes. Deloitte undertook consultancy work on behalf of WG to assist in this area. Internal Audit Review (Sept 2020)	1	3	3	Audit Wales published their findings on 14 April 2021 and report largely positive but action plan developed to respond to their findings.	The PPE plan has been developed in consultation with key stakeholders. Some pressure from Chief Medical Officers that may lead to Type IIR masks being totally replaced by FFP3 masks. £5m COVID expenditure authorisation limit reinstated.	➔	
											Risk Lead: Director of Procurement Services	
M5	By requiring our staff to continue working we expose them to a greater risk of being infected with COVID-19 which may cause them significant health problems.	5	5	25	Vaccination Programme All staff encouraged to work from home where possible. Risk Assessments undertaken for all staff. Social Distancing measures in place in each office. Any staff displaying any symptoms told not to come into office or go home immediately. Testing for front-line staff Weekly Site Leads' meetings to assess position in each office.	1	3	3	Following the updated guidance issued by Welsh Government on 22 Dec additional communications have been issued to all staff. This provide information regarding access to lateral flow tests as well as signposting to the requirements for self-isolation. SLG agreed to reinforce the key message to work from home unless there is a requirement to attend site.	Current measures seem to be effective, but need to be closely monitored in view of Omicron variant. Large numbers of staff are working from home and social distancing measures are in place for those staff who need to continue to come into work. Daily reporting of absences shows that the numbers of staff reporting COVID-19 like symptoms continues to be low, but are increasing.	➔	
											Risk Lead: Senior Leadership Group	
M6	Staff wellbeing is adversely affected through concerns arising from COVID-19 either directly in terms of their health and that of their families, or financially from loss of income of a family member. This includes the risk of "burn-out" for	5	5	25	Regular communications to all staff Reminders of how to access Employee Assistance schemes Mental Health First Aiders Formal Peer Group with phone surgery times	1	3	3	Implement action plan to respond to findings from staff surveys - monitored and managed through Adapt and Future Change Group.	As previously stated, absence rates are very low. Communications are regularly issued and all Directors and Managers are tasked with regularly checking the health and well-being of their staff.	➔	
											Risk Lead: Director of People and OD	
M7	GP Trainees, who are employed by NWSSP, are exposed to a level of risk of risk of catching COVID-19 but are outside the direct control and influence of NWSSP.	5	5	25	Risk Assessments by Education Supervisor - leads to decision on what PPE is to be provided. Tripartite Agreement	1	3	3	Confirming vaccination rates with staff individually as Health Board reports to total numbers vaccinated suggest under-reporting.	The tripartite agreement was agreed by the Project Board on 7/9/2020 and sets out the general duties of the host organisation for all trainees employed by NWSSP including the general duty to provide a safe working environment. Vaccination of front-line staff further mitigates this risk.	➔	

M8	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 Experian Bank Mandate Checker	1	3	3	Recent spate of attacks (Apr 22) reinforces need to maintain current controls. Review results of further Internal Audit (Sept 2022)	Risk Lead: Director of People and OD 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. Meeting held with Nat West on 22/9/22 to review their payee verification software. Risk Lead: Director of Finance & Corporate Services	→	
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Cydwasaethau
Shared Services
Partnership

AGENDA ITEM: 4.6
SSPC 19 January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Health and Care Standards Self-Assessment

**ARWEINYDD:
LEAD:**

Peter Stephenson, Head of Finance and Business Improvement, NWSSP

**AWDUR:
AUTHOR:**

Roxann Davies, Corporate Services Project Manager, NWSSP

**SWYDDOG ADRODD:
REPORTING OFFICER:**

Andy Butler
Director of Finance & Corporate Services, NWSSP

**MANYLION CYSWLLT:
CONTACT DETAILS:**

Andy Butler
Director of Finance & Corporate Services, NWSSP
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**Pwrpas yr Adroddiad:
Purpose of the Report:**

The purpose of this report is to provide the Committee with an update as to the Health and Care Standards Self-Assessment.

Llywodraethu/Governance

**Amcanion:
Objectives:**

Each of the five key Corporate Objectives.

**Tystiolaeth:
Supporting evidence:**

Health and Care Standards assurances from criteria fulfilled.

Ymgynghoriad/Consultation:

Who has been consulted on the details of the report?

- NWSSP Medical Director, Quality and Safety Lead
- NWSSP Senior Leadership Group
- NWSSP Audit Committee
- Velindre University NHS Trust Quality and Safety Committee

Adduned y Pwyllgor/Committee Resolution (insert ✓):

**DERBYN/
APPROVE**

**ARNODI/
ENDORSE**

✓

**TRAFOD/
DISCUSS**

**NODI/
NOTE**

**Argymhelliad/
Recommendation**

Outline the recommendation of the report
• The Committee is asked to **ENDORSE** the report

**Crynodeb Dadansoddiad Effaith:
Summary Impact Analysis:**

**Cydraddoldeb ac amrywiaeth:
Equality and diversity:**

Ensuring that we meet our obligations under the Health & Care Standards which include equality and diversity responsibilities.

**Cyfreithiol:
Legal:**

Ensuring that we meet our obligations under the Health & Care Standards which include legal responsibilities, notwithstanding that we are a non-statutory hosted organisation.

Iechyd Poblogaeth: Population Health:	Ensuring that we meet our obligations under the Health & Care Standards which include promoting a healthy population in Wales, in line with the Well-being of Future Generations (Wales) Act 2015 and a Healthier Wales; recognising the impact of the Services provided to NHS Wales upon the population of Wales.
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	Ensuring that we meet our obligations under the Health & Care Standards which include quality and safety responsibilities.
Ariannol: Financial:	No direct impact or financial implications arise from the contents of this report.
Risg a Aswiriant: Risk and Assurance:	The report provides assurance that we meet our obligations under the Health & Care Standards which includes managing risks effectively and ensuring that we have robust risk management processes in place.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://gov.wales/docs/dhss/publications/150402standardsen.pdf
Gweithlu: Workforce:	Ensuring that we meet our obligations under the Health & Care Standards, which includes the welfare of our workforce.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open. The information is disclosable under the Freedom of Information Act 2000.

NWSSP Health and Care Standards Self-Assessment

1. INTRODUCTION

The paper is to provide the Committee with an update as to the Health and Care Standards Self-Assessment within NWSSP.

2. BACKGROUND

The Standards for Health Service in Wales provide a framework for consistent standards of practice and delivery across NHS Wales and for continuous improvement. In accordance with the programme of Internal Audits, the process is tested and is an integral part of the organisation's assurance framework process. The Framework comprises seven main themes and sub criteria against which NHS bodies need to demonstrate compliance:

- Governance, Leadership & Accountability
- Staying Healthy
- Safe Care
- Effective Care
- Dignified Care
- Timely Care
- Individual Care
- Staff and Resources



Process for Completion

The process for undertaking the annual self-assessment is that NWSSP Corporate Services undertake an evaluation against the Standards, which is presented to the Senior Leadership Group (SLG) for discussion and consultation at Directorate level, where appropriate. Any feedback provided from Directorates is then reviewed and incorporated into the Self-Assessment and then this is reviewed by the NWSSP Medical Director.

Following completion of the Self-Assessment, an Action Plan to manage and monitor areas whereby we may develop and strengthen our compliance against the Standards has been developed, in consultation with Services, linked to the wider well-being agenda and is presented at a future SLG meeting, for discussion and approval.

In addition, once approved by the SLG, the Self-Assessment and Action Plan is presented to the Partnership Committee, Audit Committee and the Velindre University NHS Trust Quality and Safety Committee, for endorsement and assurance.

3. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

Assessment of Ratings

Each theme is assessed and given an overall rating of between 1 and 5. As a largely non-clinical service provider, not all of the sub-criteria are applicable to NWSSP. A summary of the self-assessment ratings is outlined overleaf:

Theme	Rating
Governance, Leadership & Accountability	4
Staying Healthy	4
Safe Care	4
Effective Care	4
Dignified Care	Not applicable
Timely Care	Not applicable
Individual Care	4
Staff and Resources	4

The overall rating against the mandatory Governance, Leadership and Accountability module and the seven themes reflects NWSSP's overall compliance against the Health and Care Standards and has been rated as a 4, as outlined below. This rating is based on the work undertaken to address staff well-being across the organisation, in line with A Healthier Wales and as a result of the recovery and response work undertaken in relation to the pandemic. An assessment level rating of 4 sets out that *"we have well-developed plans and processes can demonstrate sustainable improvement throughout the organisation"*.

The actions identified in the Action Plan will be monitored by the NWSSP SLG and we are working towards achieving a self-assessment rating of 5, which sets out that *"we can demonstrate sustained good practice and innovation that is shared throughout the organisation, and which others can learn from"*.

Developments

In light of the commencement of the Health and Social Care (Quality and Engagement) (Wales) Act 2020 and the associated duty that this brings upon the organisation, this is likely to alter the way in which we report and approach this Self-Assessment, going forward. It is hoped that the Duty will lend itself better to NWSSP and the Services that we provide to NHS Wales.

The approach supports the five ways of working (Sustainable Development Principle) in the Well-being of Future Generations (Wales) Act 2015, to achieve a Healthier Wales. The Duty will see active consideration of whether decisions will improve service quality and secure improvement in outcomes and applies to all health services functions (not just clinical), requiring health services to demonstrate that quality is at the heart of all we do. There will be a system-wide approach to achieving quality of care in a way that secures continuous improvement and in addressing this, we will consider the domains of quality and how these apply to NWSSP:

- **Safe:** Avoiding harm to patients from the care that is intended to help them;
- **Effective:** Providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit (avoiding underuse and misuse, respectively);
- **Patient-centred:** Providing care that is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions;
- **Timely:** Reducing waits and sometimes harmful delays for both those who receive and those who give care;
- **Efficient:** Avoiding waste, including waste of equipment, supplies, ideas, and energy; and

- **Equitable:** Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.

In recognising the role that NWSSP plays in terms of the Services that we deliver within NHS Wales and our contributions through these Services (both directly and indirectly) towards the well-being of the wider population of Wales, we have chosen to include links to case studies within this year's Self-Assessment, to help to tell the story of the organisation's impact.

4. RECOMMENDATION

The Committee is asked to **ENDORSE** the NWSSP Health and Care Standards Self-Assessment.

TRANSFORMING ACCESS TO MEDICINES (TRAMS)

Progress Report 2023



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Partneriaeth
Cydwasaethau
Shared Services
Partnership

10.01.2023

Adding Value Through Partnership, Innovation and Excellence

TRANSFORMING ACCESS TO MEDICINES (TRAMS) Progress Report



The Transforming Access to Medicines Programme (TrAMs) is continuing in line with its mandate from both the minister for Health and Social Care and the Shared Services Partnership Committee with a broad portfolio of projects to transform Pharmacy Technical Services in Wales. Progress in the last 9 months has included:

- We continue to engage actively with Clinical stakeholders over the product portfolio, standardization agendas, and support for patient pathways
- Definition of the requirements for a digital system to support ordering, workflow, and stock control. A New Service Request has been submitted to DHCW to include this as an integrated part of their medicines management portfolio.
- The first phase of Organisational Change covering 8 national roles in the new service has been carried out in partnership with the impacted staff at 6 Health Boards and 1 Trust. Five staff will initially be seconded to their new roles on a 1 day per week basis. Great care is being taken not to destabilise the service, and to work in partnership to ensure front line units remain staffed and resourced to meet service pressures
- We have worked in close partnership with HEIW to secure apprentice funding for a step change in education and training. Over 20 staff across Wales are now working to become Science Manufacturing Technicians, and we have employed 3 new posts on the Scientist Training Programme. Both initiatives are seen as essential to the short term stability and long term viability of the service.
- We have concluded initial locality selection for the South West Hub in partnership with local stakeholders, so as to be ready to move to site selection at the appropriate time.
- In the North we held an initial locality selection workshop, and are working closely with Health Board stakeholders to understand the strategic context of the clinical service, which will influence locality selection for our northern Medicines Preparation Hub.
- Site selection and OBC preparation for the South East Hub is continuing. Against a challenging background of inflation in the economy and a very demanding set of site requirements we continue to make progress with this, and to be supported by Welsh Government with fees to develop the proposal.



- We have convened a resource working group of Health Board and Trust colleagues to analyse the detail of the revenue budgets of the existing service, to ensure that the OBC documents are prepared accurately and to reduce financial risk around the eventual transfer of service. This group will meet together for the first time in January 2023
- We continue to test some of the TrAMS principles through the NWSSP Medicines Unit, this includes preparing and supplying ready to administer injections, Once for Wales Purchasing and distribution of selective high cost medicines e.g. Rituximab and developing the use of semiautomated filling machines. The recent purchase of an Ionised Hydrogen peroxide generator will allow us to develop this technique for sanitising cleanrooms which will support the existing units in Wales.
- Over the coming months we intend to keep moving forward with a number of initiatives
- We are aiming to complete site selection and OBC development for the South East Hub as soon as possible. The environment remains challenging but we are committed to deliver these benefits for patients.
- The next stage of Organisational Change, impacting around 300 staff will be planned in detail. The consultation stage will be closely co-ordinated with the capital projects to ensure full detail of the site locations is made available to staff at the time of consultation, and if necessary consultation will be postponed until this detail is known.
- We will continue to progress with Digital, Education, Clinical, and Resource engagement work in parallel with the Capital and Organisational projects.

NHS Wales Counter Fraud Arrangements

Draft paper for discussion with Directors of Finance

1. Purpose

This paper outlines the current situation regarding national and local counter fraud services in NHS Wales while identifying some initial considerations for the future provision of these services.

The scope of the discussion paper is to respond to the request from the All Wales Directors of Finance Forum and the NHS Wales Shared Services Partnership Committee to review the arrangements.

2. Background

The current Counter Fraud Operating Framework has been in place since the initial Welsh Government (WG) Directions on Counter Fraud were issued in May 2001. The Directions were subsequently updated in 2005 via WG 2005/57 and 2005/95. In summary, the Directions require that NHS Wales health bodies:

- Co-operate with NHS Counter Fraud Authority and NHS Counter Fraud Service Wales to enable them to carry out their counter fraud functions;
- Nominate a suitably resourced Local Counter Fraud Service (LCFS) for their health body; and
- Comply with the counter fraud responsibilities and functions of NHS bodies and LCFSs in Wales.

There are currently three layers to the Counter Fraud Service in NHS Wales:

- a) NHS Counter Fraud Services (CFS) Wales** – a 7.0 wte team hosted by NWSSP who independently investigate large scale, complex, cross border economic crimes and have specialist financial investigators who are authorised to use restricted powers under the Proceeds of Crime Act (POCA) 2002. The team's head is the professional lead on counter fraud matters and the main point of contact with Welsh Government (WG) and NHS Counter Fraud Authority (NHSCFA) on counter fraud issues in NHS Wales.
- b) Local Counter Fraud Specialists (LCFS)** - the network of 21.71 wte Local Counter Fraud Specialists (LCFS) and 2.6 wte admin support staff are all employed by health bodies in Wales. They generally investigate smaller scale, less complex economic crime cases and also conduct proactive work to identify and raise awareness of NHS fraud risks at their health bodies. There are a number of instances where NHS Wales organisations do not directly employ their own LCFS but buy-in services from another Health Board.
- c) NHS Counter Fraud Authority (NHSCFA)** – a part of NHS England, the NHSCFA provides specialist support services and guidance to NHS Wales under the terms of an annual Service Level Agreement (SLA) with WG.

(Annex A provides a summary of CFS Wales and LCFS resources and operating costs and a ratio of LCFS wte NHS staff at health bodies).

3. Previous reviews

Previous reviews by the Finance Directors' Group and Audit Wales into counter fraud services in NHS Wales have concluded that there have been improvements in provision and resources in recent years and the Audit Wales review in September 2020 highlighted that the NHS Wales counter fraud service is well resourced and effective when compared to similar services in the public sector in Wales. It also identified that the Counter Fraud Steering Group (CFSG), a subgroup of the Finance Directors, has improved the strategic focus of counter fraud services across NHS Wales. However, it did identify that improvements could be made in the areas of capacity, particularly to undertake proactive work, training, sharing of knowledge and using data analytics to inform risk assessments.

4. Case for change

There are a number of issues associated with the current arrangements as follows:

- **Resilience**

The current arrangements can cause significant disruption when staff leave or are absent through long-term sickness. This risk was crystallised last year when a LCFS Manager was absent for over a year on long-term sickness and then never returned. This inevitably resulted in service capacity being severely affected to the six organisations that this Manager was responsible for, albeit that his team did their best to cover. It also highlighted the lack of a deputy LCFS role as there was no experience in the team of attending Audit Committees, compiling quarterly reports, or submitting CFFSR assurance returns to the NHSCFA / Cabinet Office on behalf of their health bodies.

- **Sustainability**

There are currently limited promotion prospects and/or lack of management succession planning. There are some current LCFS staff are close to retirement age and there is an opportunity to enhance succession planning. Current arrangements limit the extent to which staff can specialise in key areas of fraud risk. This is all in the context of an environment where it can be difficult to attract good candidates to apply for roles, and the reality is that vacancies are often filled by taking staff from another NHS Wales organisation.

- **Variation and Inconsistency**

There can be widespread and unwarranted variation in work performed at local health boards and trusts, and the resources and investigative experience at each health body vary widely. The ratio of LCFS wte: NHS employees at annex (a) is often reflected in the proactive work completed, the number of referrals received and the criminal, civil and disciplinary sanctions recorded. Work is often reactive and proactive work can suffer as investigations are prioritised. In addition, limited proactive work has been undertaken on an All-Wales basis.

- **Collaboration and Intelligence**

There is some sharing of intelligence and working with other public sector fraud colleagues in Welsh Government or Local Authorities. There is also a lack of data analytical capacity which significantly limits the extent to which intelligence can be utilised to inform Counter Fraud work programmes and reviews.

- **Effective use of resources**

There are inconsistencies in staff skill mix and complex cases which require financial investigation work or additional resources for investigation are not always referred to CFS

Wales. This can mean that LCFS are unable to progress smaller investigations or complete proactive work. There is also potential for improvements and economies of scale via an all-Wales approach on counter fraud e-training, newsletters, and induction courses rather than a disjointed and often duplicated local approach.

Current Arrangements

- a) **C&V UHB LCFS Team** currently provide an LCFS service to Velindre NHS Trust, PHW NHS Trust, NWSSP, HEIW and DHCW as well as their own health body (NB NWSSP have now also appointed a dedicated LCFS).
- b) **SB UHB LCFS Team** currently provide an LCFS service to CTM UHB and Powys tHB as well as their own health body.
- c) **All** other Health Bodies have their own LCFS provision.
- d) There is no reliance on the **private sector** in Wales – this is a major source of counter-fraud provision in NHS England.
- e) **Cost** - The cost of the total service provision is currently:

CFS Wales	£414,711
LCFSs	£1,207,288
NHSCFA	£227,952
Total	£1,849,951*

(*source Q1 of 2022/23 report on Counter Fraud Services in NHS Wales)

5. Options

An initial review has identified the following options:

Option 1	No change – continue with the current three tier service provided via CFS Wales, LCFS and NHSCFA. Smaller health bodies continue to buy in their LCFS service from the larger health bodies, for example, DHCW and HEIW buy in their LCFS services from C&V UHB.
Option 2	Hybrid system – all health bodies have the option to opt into a NWSSP led service. LCFS services provided by NWSSP would retain a local presence at the health bodies they represent, maintaining a strong operational relationship with the relevant Finance Directors. LCFS would report directly to the Finance Director of each Health Body, but staff would be part of a Counter Fraud Division within the NWSSP Finance Directorate and led by the Head of Counter Fraud Wales.
Option 3	Centralised Model – CFS Wales and all LCFSs move across to an NHS Wales Shared Service Model which retains a strong local presence at the relevant health bodies, similar to the current NWSSP procurement provision. LCFS would report directly to the Finance Director of each Health Body, but staff would be part of a Counter Fraud Division within the NWSSP Finance Directorate and led by the Head of Counter Fraud Wales.

Note - Another option whereby the Counter Fraud division would be part of the NWSSP audit and assurance directorate was considered by the Counter Fraud Steering Group. However, this was rejected due to the potential perception of independence and conflicts of interest issues.

6. Initial Assessment of options

Option 1: No change – continue with current structure

Benefits/Advantages	Disadvantages
Continuity of existing service arrangements and management reporting relationships	<i>The variance in the LCFS resources and provision across health bodies will continue</i>
No major change to current service costs	<i>Continued lack of specialist roles.</i>
Lack of disruption to the existing Audit Committee and Cabinet Office reporting lines	<i>LCFS continue to retain unsuitable cases that could be allocated to CFS Wales for specialist FI work or cross-border work</i>
	<i>LCFS are diverted from their key proactive role due to demands of reactive work on unsuitable cases which involve considerable travel or resources</i>
	<i>No economies of scale on E-learning, newsletters, inductions etc</i>
	<i>Limited LCFS presence at the smaller support type health bodies will continue with no increase in resources</i>
	<i>Staff sickness absences will continue to have a detrimental impact on the LCFS teams, especially if the LCFS Manager is absent with no designated deputy.</i>
	<i>The quality of work at health bodies is inconsistent with different processes for key decisions on investigations and referral to CFS Wales.</i>
	<i>There is no clear staff development route.</i>

Option 2: Hybrid Model – option to buy in LCFS services from a central NWSSP team of Counter Fraud specialists

Benefits/Advantages	Disadvantages
LCFS would continue to report to individual Finance Directors	<i>The variance in the LCFS resources and the lack of sustainability/succession planning would continue at a local level for those who do not take part.</i>
Some potential to develop specialisms.	<i>Possible staff discontent due to changes – reassurance required</i>
Greater resilience to cover staff absences.	<i>Will require job re-evaluation and/or recruitment to new posts in new team structures</i>
Maintain local presence at all health bodies	<i>Disruption to the current service and cost of any changes</i>
Some improvements in skill mix providing economies of scale and an improved service.	
More effective use of resource to address peaks and troughs in activity.	
Greater consistency of working practices.	

Benefits/Advantages	Disadvantages
Some ability to develop talent pipeline improving recruitment and retention.	
Better opportunity to share good practice and knowledge.	
Some additional career and promotion opportunities	

Option 3: Centralised Model – CFS Wales and LCFS move to one team within NWSSP

Benefits/Advantages	Disadvantages
LCFS would continue to report to individual Finance Directors	Possible staff discontent due to changes – reassurance required
Specialist posts created e.g. for Data Analyst, Training and/or Communications roles	May take some time to recruit and set up new specialist roles
Enhanced career and promotion opportunities for existing staff in the new all Wales structure	Disruption to the current service and cost of any changes
Improved management structure across counter fraud services with designated deputies to cover absences	Will require job re-evaluation and/or recruitment to new posts in new team structures
Maintain local presence at all health bodies	
Improvements in skill mix providing economies of scale and an improved service.	
Improvement in succession planning and sustainability of the CFS Wales and LCFS services	
Investigation workloads can be distributed more evenly during staff absences thus ensuring that no cases are rejected by CPS for lack of progress	
Economies of scale – proactive work that applies to all health bodies can be completed more efficiently e.g. risk assessment of NWSSP central processes.	
Staff absences can be managed more effectively as staff or work can be redistributed if staff are absent on long term sickness or maternity leave.	
Sharing of good practice and knowledge.	
Development of talent pipeline improving recruitment and retention	
More effective use of resource to address peaks and troughs in activity.	

7. Other points for consideration

- This paper is for initial consultation only – further work will need to be conducted dependent on response / consensus.
- Lead LCFS are aware of the paper and will be kept informed of developments.

- An earlier version of this paper was taken to the October 2022 meeting of the Counter Fraud Steering Group where an integrated assurance model with internal audit was not supported due to potential issues of independence and conflicts of interest. It was agreed however that a subgroup could develop and flesh out how options 2 and 3 could operate in practice.

8. Recommendation

The Directors of Finance Group are requested to state whether there is the appetite for more work to be undertaken to explore the various options listed in this paper,

Andy Butler,
Chair, Counter Fraud Steering Group
November 2022

Confidential for Discussion

NHS WALES COUNTER FRAUD RESOURCE 2022/23									
Health Body	LCFS Annual WTE	Admin Support Annual WTE	Annual Planned LCFS Days	Q1 LCFS Days	YTD LCFS Days	Salary Costs Q1	Annual Staffing budget	Staff Headcount (at 31/12/21)	LCFS wte per 1,000 NHS staff
AB UHB	2.8	1	535	66	66	£37,019	£148,076	14,471	0.19
BCU HB	2.91	0.6	590	147.5	147.5	£38,030	£154,493	19,610	0.15
C&V UHB *	2.27	0	500	95	95	£33,613	£134,452	16,021	0.14
CTM UHB **	2.6	0.2	616	154	154	£37,818	£151,273	12,726	0.20
DHCW*	0.18	0	40	17	17	£2,689	£10,756	926	0.19
HEIW *	0.24	0	50	27	27	£3,361	£13,445	423	0.57
HD UHB	2.0	0	420	99	99	£23,126	£92,506	11,188	0.18
NWSSP ****	1.35	0	285	41	41	£9,873	£78,128	4,688	0.29
Powys tHB **	1.2	0.2	308	77	77	£18,301	£73,205	2,516	0.47
PHW NHST *	0.46	0	100	17	17	£6,723	£26,890	2,297	0.20
SB UHB **	3.2	0.6	704	176	176	£44,371	£177,485	13,368	0.24
VEL NHST*	0.5	0	110	34	34	£7,395	£29,579	1,420	0.35
WAST	2.0	0	440	110	110	£29,250	£117,000	4,180	0.48
TOTAL	21.71	2.6	4,688	1,060.50	1,060.50	£291,569	£1,207,288	103,834	
CFS WALES ***	6	1	1,314 ***	273.75	273.75	£103,678	£414,711		Average is 0.28
ALL WALES TOTAL	27.71	3.6	6,002	1,334.25	1,334.25	£395,247	£1,621,999		

Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership

Annual Report 2021-2022

1. FOREWORD

I am pleased to present the Annual Report of the Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership. It outlines the coverage and results of the Committee's work for the year ending 31 March 2022.

During the year, I was supported by my independent member colleagues, Gareth Jones and Jan Pickles, who brought substantial knowledge and wide-ranging experience to the Committee. Jan Pickles' term of office as an Independent Member came to an end during the period and I would like to take this opportunity to put on record my sincere thanks for the significant contribution made by both Jan and Gareth during the year. In January 2022 we welcomed Vicky Morris as a replacement for Jan, who again has brought a huge amount of knowledge and experience for the benefit of the Committee.

I would also like to express my thanks to all the Officers of the Committee who have supported and contributed to the work carried out on its behalf and for their commitment in meeting important targets and deadlines. I also wish to record my appreciation for the support and contribution given by Internal Audit at NWSSP, Local Counter Fraud Services and by Audit Wales.

NWSSP has continued to grow and develop during the year, increasing in both size and complexity. The number of employees has more than doubled from approximately 2,000 to over 5,000 in a short space of time. This is primarily due to implementing the Single Lead Employer Scheme, but additionally staff have been recruited in new services such as the Laundry Service, the Central Intravenous Additive Service (CIVAS) and the Medical Examiner. At the same time, NWSSP has continued to play a major role in helping NHS Wales to respond to, and recover from, the COVID pandemic, including through the continued provision of Personal Protective Equipment (PPE) and supporting the vaccination booster campaigns. The development of these services significantly changes the risk profile of NWSSP and require the Committee to work with its auditors in particular, in ensuring that appropriate assurances are in place.

All meetings continue to be held virtually and have worked well. A characteristic of the Committee's work and its related meetings has been the willingness of all parties to raise issues, acknowledge shortcomings and put forward positive suggestions to help bring about meaningful improvements to services, systems, and day-to-day working practices. This approach is to be welcomed and is very much appreciated by the Committee.

I am keen to foster and promote a culture of continual improvement and, as a Committee, we continued to conduct a brief effectiveness review session at the end of each meeting and introduced topical service presentations to the agenda in order to strengthen and engage in a meaningful way with this process. The issuing of electronic papers has contributed to effective sustainable development and has helped to reduce our environmental impact



in line with the NWSSP Decarbonisation Action Plan. Going forward, the Committee intends to continue to pursue a full programme of work covering a wide range of topics and subject areas as part of its long-term aim to help further strengthen the governance arrangements of NWSSP, in order to achieve better value for money and high quality, sustainable outcomes for NHS Wales.

Mr Martin Veale JP
Chair of the Velindre University NHS Trust
Audit Committee for NWSSP

2. INTRODUCTION

The Committee's business cycle runs from the closure of the Annual Accounts in one financial year to the next. This reflects its key role in the development and monitoring of the Governance and Assurance framework for NWSSP, which culminates in the production of the Annual Governance Statement.

This report sets out the role and functions of the Audit Committee and summarises the key areas of business undertaken during the year. In addition, the report sets out some of the key issues, which the Committee will be focussing on over the next few years.

3. ROLE, MEMBERSHIP, ATTENDEES AND COMMITTEE ATTENDANCES

3.1 Role

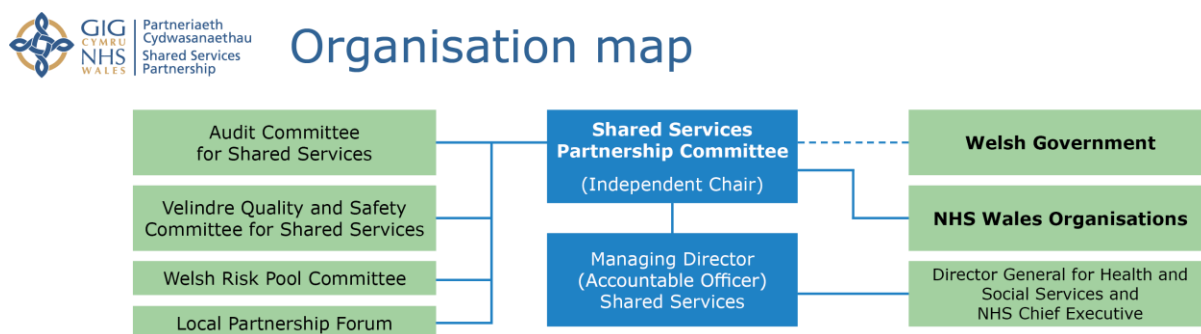
The Audit Committee advises and assures the Shared Services Partnership Committee (SSPC) on whether effective governance arrangements are in place through the design and operation of the SSPC Assurance Framework. This framework supports the SSPC in its decision-making and in discharging its accountabilities for securing the achievement of NWSSP's objectives in accordance with the standards of good governance determined for the NHS in Wales.

The organisation's system of internal control has been designed to identify the potential risks that could prevent NWSSP achieving its aims and objectives. It evaluates the likelihood of the risks being realised, considers the impact should they occur and seeks to manage them efficiently, effectively, and economically. Where appropriate, the Committee will advise the SSPC (and Velindre University NHS Trust, where appropriate) and the Accountable Officer(s) on where and how the Assurance Framework may be strengthened and developed further.

The Committee's Terms of Reference are reviewed annually and are included within the Standing Orders for the SSPC and Velindre University NHS Trust.

Detail of the overall Assurance Framework is set out in **Figure 1** overleaf:

Figure 1: Overall Assurance Framework



Underpinned through the overarching Velindre University NHS Trust legal and assurance framework

3.2 Membership

Given the hosting and specific governance responsibilities of Velindre in relation to NWSSP, Velindre University NHS Trust’s Audit Committee also acts as the Audit Committee for NWSSP. As such, the same three Independent Members sit on both Audit Committees, with one being the Chair.

3.3 Attendees

The Committee’s work is informed by reports provided by Audit Wales, Internal Audit, Local Counter Fraud Services and NWSSP personnel. Although they are not members of the Committee, auditors, and other key personnel from both Velindre University NHS Trust and NWSSP are invited to attend each meeting of the Audit Committee. Invitations to attend the Committee meeting are also extended where appropriate to staff where reports relating to their specific area of responsibility are discussed.

3.4 Attendance at Audit Committee 2021-22

During the year, the Committee met on four occasions. All meetings were quorate and were well attended as shown in **Figure 2** overleaf:

Figure 2: Meetings and Member Attendance 2021-22

In Attendance	April 2021	June 2021	Oct 2021	Jan 2022	Total
Committee Members					
Martin Veale, Chair & Independent Member	✓	✓	✓	✓	4/4
Gareth Jones, Independent Member	✓	✓	✓	✓	4/4
Janet Pickles, Independent Member (to June 2021)	✓	✓	x	-	2/3

In Attendance	April 2021	June 2021	Oct 2021	Jan 2022	Total
Vicky Morris, Independent Member (from January 2022)	-	-	-	✓	1/1
Audit Wales					
Audit Team Representative	✓	✓	✓	✓	4/4
NWSSP Audit Service					
Director of Audit & Assurance	✓	✓	✓	✓	4/4
Head of Internal Audit	✓	✓	✓	✓	4/4
Counter Fraud Services					
Local Counter Fraud Specialist	✓	✓	✓	✓	4/4
NWSSP					
Margaret Foster, Chair NWSSP (to December 2021)	✓	✓	✓	-	3/3
Tracy Myhill, Chair NWSSP (From January 2022)	-	-	-	x	0/1
Neil Frow, Managing Director	✓	✓	✓	✓	4/4
Andy Butler, Director of Finance & Corporate Services	✓	✓	✓	✓	4/4
Peter Stephenson, Head of Finance & Business Development	✓	✓	✓	✓	4/4
Carly Wilce Interim Corporate Services Manager	✓	✓	✓	✓	4/4
Velindre University NHS Trust					
Mark Osland, Director of Finance (to June 2021)	✓	✓	-	-	2/2
Matthew Bunce Director of Finance (from October 2021)	-	-	✓	✓	2/2
Lauren Fear, Director of Corporate Governance	✓	x	✓	✓	3/4

3.5 AUDIT COMMITTEE BUSINESS

The Audit Committee provides an essential element of the organisation's overall assurance framework. It has operated within its Terms of Reference in accordance with the guidance contained within the NHS Wales Audit Committee Handbook.

The Audit Committee agenda broadly follows a standard format, comprising four key sections; External Audit, Internal Audit, Counter Fraud Services and 'Internal Control and Risk Management'. These are discussed further below.

3.5.1 EXTERNAL AUDIT (AUDIT WALES)

Audit Wales provides an Audit Position Statement at each meeting, summarising progress against its planned audit work. The following additional reports were presented during the year:

- Review of PPE Procurement – Covid 19
- Audit Wales Nationally Hosted NHS IT Systems Assurance Report

- Audit Wales Management Letter
- Audit Wales Audit Assurance 2022
- Audit Wales Stock/Inventories Report 2021/22

Audit Wales have stated that the findings of their work enable them to place reliance on the services provided by NWSSP.

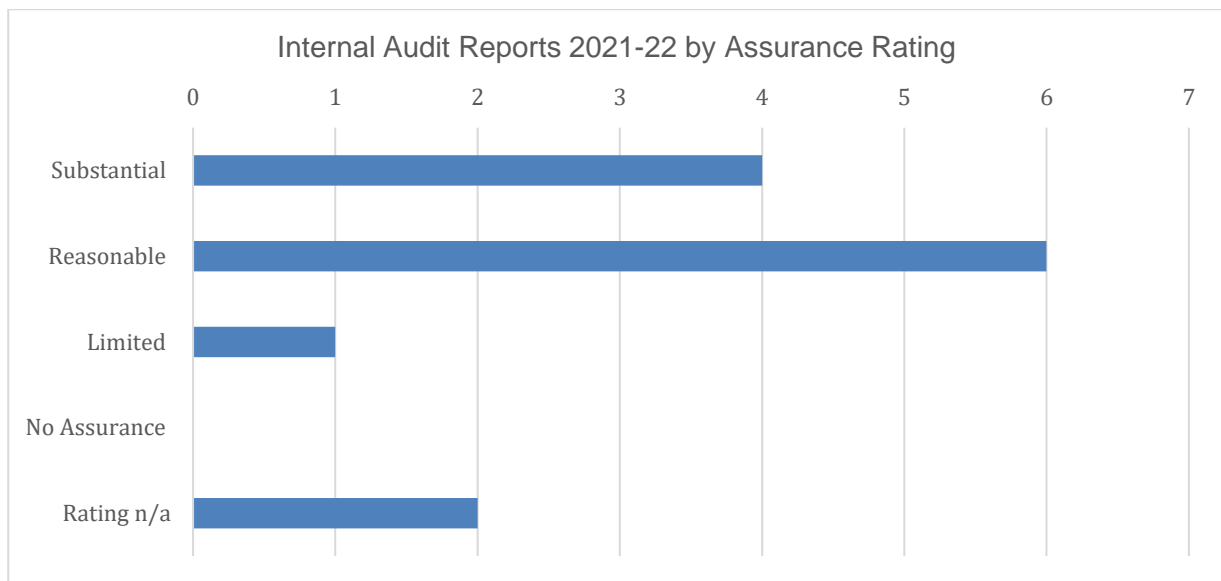
3.5.2 INTERNAL AUDIT

Internal Audit have continued to support the organisation in the development and improvement of its governance framework by providing proactive advice and support on new developments and ensuring that the existing systems and processes of control are reviewed, weaknesses identified, and suggestions for improvement made.

13 Internal Audit reports were generated during 2021-22 and they achieved assurances as follows:

- Four reports achieved Substantial assurance;
- Six reports achieved a Reasonable assurance;
- One achieved Limited Assurance; and
- Two reports were advisory with no formal assurance given.

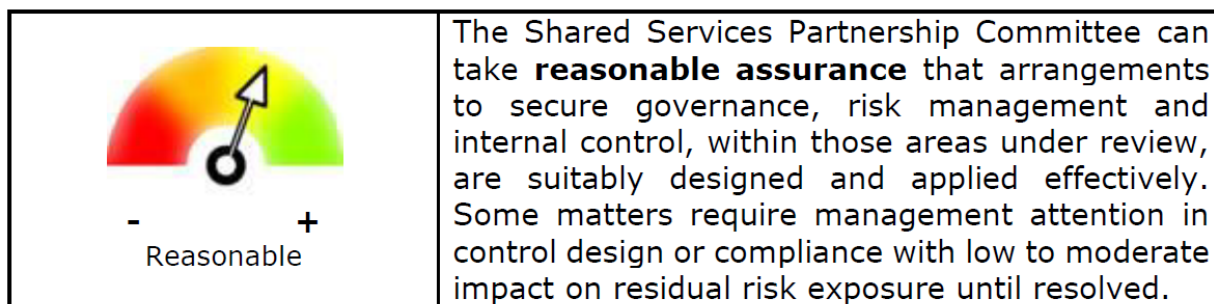
Figure 3: Internal Audit Reports 2021-22 by Assurance Rating



During 2021-22, the reports to Committee on Internal Audit’s programme of work included:

- Internal Audit Position Statement at each meeting;
- Head of Internal Audit Opinion and Annual Report;
- Quality Assurance and Improvement Programme Report;
- Internal Audit Operational Plan; and
- Internal Audit Reports, as detailed in Appendix A.

Figure 4: Head of Internal Audit Opinion: Reasonable Assurance



3.5.3 LOCAL COUNTER FRAUD SERVICES

The work of the Local Counter Fraud Services is undertaken to help reduce and maintain the incidence of fraud (and/or corruption) within NWSSP to an absolute minimum. Regular reports were received by the Committee to monitor progress against the agreed Counter Fraud Plan, including the following:

- Counter Fraud Work Plan 2021/22
- Counter Fraud Progress Update at each meeting;
- Counter Fraud Annual Report 2021/22; and
- Counter Fraud Newsletter.

As part of its work, there is a regular annual programme of raising fraud awareness, for which a number of days are allocated and included as part of a Counter Fraud Work Plan which is approved annually by the Audit Committee. In addition to this a quarterly newsletter is produced which is available to all staff on NWSSP’s intranet; all successful prosecution cases are publicised to obtain the maximum deterrent effect.

There was a recognition by the Committee that the amount of resource available from the Local Counter Fraud Service was less than ideal, primarily due to the long-term sickness absence of the Local Counter Fraud Manager. The shortfall in resource was covered in-year by drawing on staff from Counter Fraud Services Wales and Internal Audit where appropriate. Going forward, a dedicated Local Counter Fraud Specialist has now been recruited by NWSSP and commenced in post in June 2022.

3.5.4 INTERNAL CONTROL AND RISK MANAGEMENT

In addition to the audit reports dealt with by the Committee during the reporting period, a wide range of internally generated governance reports/papers were produced for consideration by the Audit Committee including:

Annual Governance Statement: During 2021-22, the NWSSP produced its Annual Governance Statement which explains the processes and procedures

in place to enable NWSSP to carry out its functions effectively. The Statement was produced following a review of NWSSP's governance arrangements undertaken by the NWSSP Senior Leadership Group and the Head of Finance and Business Development. The Statement brings together all disclosures relating to governance, risk, and control for the organisation.

Tracking of Audit Recommendations: The Committee has continued focus on the timely implementation of audit recommendations. The overall position with this is very positive but occasionally requests are made to extend the date of an agreed action due to a change in circumstance. All such requests have to be approved by the Committee and an action can only be extended once.

Audit Committee Effectiveness Survey: An anonymised Committee Effectiveness Survey was undertaken to obtain feedback from Committee members on performance and potential areas for development. The statements used in the survey were devised in accordance with the guidance outlined within the NHS Audit Committee Handbook and aligned with the statements used by Velindre University NHS Trust for its Effectiveness Survey.

The results of the survey were very positive and highlighted that 80% of respondents agree that their experience of remote meetings have been effective and that 100% agree that the content of the organisations system of assurance are robust. Operating an e-board software system has allowed us to significantly reduce our paper/printing usage reducing our carbon footprint and impact on the Environment, supporting our commitments to ISO 14001 certification and Wellbeing of Future Generations goals.

A full list of the internal reports/papers considered by the Audit Committee in 2021-22 is attached at **Appendix B** for information.

a. Private Meeting with Auditors

In line with recognised good practice, an annual private meeting was held in January 2022 between Audit Committee members, Internal Audit, External Audit, and the Local Counter Fraud Specialist. This provided an opportunity for any matters of concern to be raised without the involvement of Executives. No issues of concern arose from the meeting. All auditors are also aware that they can directly approach the Chair at any time with any matters that concerns them.

5. REPORTING AND COMMUNICATION OF THE COMMITTEE'S WORK

The Committee reports a summary of the key issues discussed at each of its meetings to the Senior Leadership Group, Shared Services Partnership Committee and to Velindre University NHS Trust Board by way of an Assurance Report. In addition, this Annual Report seeks to bring together details of the work carried out during the reporting period, to review and test NWSSP's Governance and Assurance Framework. The outcome of this work has helped

to demonstrate the effectiveness of NWSSP's governance arrangements and underpins the assurance the Committee was able to provide.

6. CONCLUSION AND FORWARD LOOK

The work of the Audit Committee in 2021-22 has been varied and wide-ranging. The Committee has sought to play its part in helping to develop and maintain a more effective assurance framework in a constantly changing and developing organisation, and improvements have been evidenced by the findings of internal and external audit.

Looking forward to 2022-23 the Audit Committee will continue to explore the financial, management, governance and quality issues that are an essential component of the success of NWSSP.

Specifically, the Audit Committee will:

- Continue to examine the governance and internal controls of NWSSP;
- Monitor closely risks faced by NWSSP;
- Work closely with the Chairs of Audit Committee group on issues arising from financial governance matters affecting NHS Wales and the broader public sector community;
- Work closely with external and internal auditors, on issues arising from both the current and future agenda for NWSSP;
- Work with the newly appointed Local Counter Fraud Specialist for NWSSP to develop an appropriate work plan;
- Ensure the SSPC is kept aware of its work including both positive and adverse developments; and
- Request and review a number of deep dives into specific areas to ensure that it provides adequate assurance to both the Audit Committee and the SSPC.

APPENDIX A
List of Internal Audits Undertaken and Assurance Ratings

Internal Audit Assignment	Assurance Rating 2021-22	Date Presented To Audit Committee
NWSSP - PCS Contractor Payments	Substantial	June 2021
Wales Infected Blood Support Scheme	Substantial	January 2022
Salary Sacrifice	Substantial	January 2022
Legal and Risk Directorate Review	Substantial	January 2022
Payroll Services	Reasonable	July 2022
P2P Final Internal Audit Report	Reasonable	June 2021
Laundry Services	Reasonable	October 2021
Student Awards Follow Up Review	Reasonable	October 2022
Stores	Reasonable	January 2022
Medical Examiner Service	Reasonable	July 2022
NWSSP Operational ICT Infrastructure	Limited Assurance	January 2022
Single Lead Employer	Advisory	June 2021
Capital Project Governance	Advisory	October 2022
<i>Substantial Assurance Rating</i>	4	
<i>Reasonable Assurance Rating</i>	6	
<i>Limited Assurance Rating</i>	1	
<i>No Assurance Rating</i>	0	
<i>Assurance Not Applicable</i>	2	
Total	13	

APPENDIX B**Internally Generated Assurance Reports/Papers**

Report/Paper	Every Meeting	Annually	As Appropriate
Tracking of Audit Recommendations	✓		
Governance Matters	✓		
Corporate Risk Register	✓		
Audit Committee Forward Plan	✓		
Annual Governance Statement		✓	
Audit Committee Effectiveness Review and Results		✓	
Audit Committee Annual Report		✓	
Audit Committee Terms of Reference		✓	
Assurance Mapping		✓	
Freedom of Information (FOI) Annual Report		✓	
NWSSP Integrated Medium Term Plan (IMTP)		✓	
NWSSP Annual Review		✓	
Welsh Language Annual Report		✓	
Review of Stores Write-Offs		✓	
Review of the Shared Services Partnership Committee's Standing Orders (SSPC SOs)			✓



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM:
SSPC 19 January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Audit Committee Assurance Report – October 2022

ARWEINYDD:

Peter Stephenson

LEAD:

Head of Finance & Business Development, NWSSP

AWDUR:

Carly Wilce

AUTHOR:

Interim Corporate Services Manager, NWSSP

SWYDDOG ADRODD:

Andy Butler

REPORTING OFFICER:

Director of Finance & Corporate Services, NWSSP

MANYLION CYSWLLT:

Andy Butler

CONTACT DETAILS:

Director of Finance & Corporate Services, NWSSP
01443 848552 / Andy.Butler@wales.nhs.uk

Pwrpas yr Adroddiad:

Purpose of the Report:

The purpose of this paper is to provide the SSPC with assurance and details of the key issues considered by the NWSSP Audit Committee, at its meeting on 11 October 2022.

Llywodraethu/Governance

Amcanion:

Each of the five key Corporate Objectives

Objectives:

Tystiolaeth:

Individual reports submitted to Audit Committee

Supporting evidence:

Ymgynghoriad/Consultation:

Who has been consulted on the details of the report?

- NWSSP Audit Committee

Adduned y Pwyllgor/Committee Resolution (insert ✓):

**DERBYN/
APPROVE**

**ARNODI/
ENDORSE**

**TRAFOD/
DISCUSS**

**NODI/
NOTE**

✓

**Argymhelliad/
Recommendation**

Outline the recommendation of the report

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

Crynodeb Dadansoddiad Effaith:

Summary Impact Analysis:

**Cydraddoldeb ac amrywiaeth:
Equality and diversity:**

No direct impact

**Cyfreithiol:
Legal:**

No direct impact

**Iechyd Poblogaeth:
Population Health:**

No direct impact

**Ansawdd, Diogelwch a Profiad
y Claf:**

No direct impact

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

VELINDRE UNIVERSITY NHS TRUST AUDIT COMMITTEE FOR NWSSP ASSURANCE REPORT

1. CEFNDIR/BACKGROUND

The Velindre University NHS Trust Audit Committee for NHS Wales Shared Services Partnership (Audit Committee) provides assurance to the Shared Services Partnership Committee (SSPC) on the issues delegated to them through the Trust and NWSSP Standing Orders. A summary of the business matters discussed at the meeting held on 11 October 2022, is outlined below:

ALERT	No matters to alert/escalate.
ADVISE	No matters to advise.
ASSURE	<p>NWSSP Update</p> <p>The Managing Director gave the Committee an update on key developments within NWSSP. Main highlights discussed were as follows-</p> <ul style="list-style-type: none"> • The Integrated Medium-Term Plan (IMTP) acceptance letter has been received. The letter confirmed acceptance of the NWSSP IMTP which was described as robust and ambitious, and identified that NWSSP needs to become the catalyst for change in leading on the transformation agenda. • The Financial position is on track and the forecast outturn remains at a break-even position. The 2022-23 Welsh Risk Pool Risk Sharing Agreement will be invoked in line with the IMTP. Capital continues to be a challenge, as the allocation of capital funding was not increased following the transfer of the All Wales Laundries. • Technology is being introduced from the 1st of October in line with Home Office guidance which allows NWSSP to continue to undertake virtual pre-employment checks for successful applicants with a UK or Irish passport. All other new staff will now have to attend a face-to-face check. • 198 surplus critical care beds have been sent to a hospital in Moldova to support Ukrainian refugees following a request from a Charity which was authorised by Welsh Government. • A recruitment exercise had recently taken place for the role of Director of Specialist Estates Services, the current Director has announced his intention to retire at the end of the financial year. Interviews took place recently and from a strong field and the current Deputy Director, was appointed.
ASSURE	External Audit Position Statement

	Audit Wales provided a detailed update as to current and planned audit work. It was confirmed that the audit work for NWSSP would not commence until January 2023, as Local Authority audits are currently taking priority.
ASSURE	<p>Internal Audit Position Statement</p> <p>Head of Internal Audit presented the Position Statement together with an overview of other activity undertaken since the previous meeting. Four audits from the 2022-23 audit plan were complete and on the agenda, together with the one remaining report from 2021-22. Fieldwork on the Recruitment services audit is complete, and the report would be brought to the next Audit Committee.</p>
ASSURE	<p>Internal Audit Reports</p> <p>The following reports were presented to the Committee for consideration:</p> <p>Capital Governance Arrangements The scope of the review was to assess the governance arrangements over two major investment programmes, Transforming Access to Medicine (TrAMS) and the All-Wales Laundry service. The review of the programmes was generally positive, and the report contained a number of recommendations, which would be monitored through the relevant Programme Governance Boards.</p> <p>Health Courier Service The report was awarded reasonable assurance, with one high priority recommendation relating to the reporting, recording and investigation of road traffic incidents, where inconsistencies were noted in current practice at the time of the audit, but which have now been addressed.</p> <p>Laundry Services The objective of the review was to establish a baseline position for Green Vale Laundry following the transfer of services to NWSSP. The audit report achieved a rating of reasonable assurance with five medium recommendations for action. The audit was in line with last year's review of the Llansamlet Laundry and management are aware of the issues identified in the report, which will be addressed as part of the Laundry Modernisation Programme.</p> <p>Surgical Materials Testing Laboratory The review assessed the governance, financial and risk management arrangements. The audit achieved substantial assurance with no recommendations were raised.</p> <p>Decarbonisation Advisory report A review of decarbonisation is to be undertaken at all NHS Wales organisations. To date five reviews, including NWSSP, have been concluded. The audit was an early-stage review intended to provide advice and share best practice. The report included both overall national recommendations and a set of NWSSP-specific recommendations. Of the specific recommendations raised in the report, it was noted that NWSSP need to ensure that sufficient resource is in place to undertake the work detailed in the NWSSP Decarbonisation Action Plan.</p>
ASSURE	Counter Fraud Position Statement

	<p>The Counter Fraud Position Statement was presented to the Committee, with an overview of other activity. A fraud awareness survey has been issued to all staff together with an informative video, and over 300 responses have been received to date. This will provide a useful benchmark to monitor the effectiveness of fraud awareness training.</p> <p>An update on progress for the Counter Fraud national e-learning training module was provided. The module is nearing completion, and discussions are continuing to assess whether this training can be made mandatory, at least for certain groups of staff, by the end of the financial year. Bank Mandate fraud is still prevalent across the NHS, but NWSSP have robust controls in place and there have been no successful fraud attempts for over 18 months. Salary overpayments are a concern, and this is a particular area of focus at present.</p>
<p>ASSURE</p>	<p>NWSSP Audit Committee Annual Report 2021-22</p> <p>The 2021-22 Audit Committee Annual report outlines the areas reviewed during the year and the results of all audit activity. The majority of audits were positive achieving a rating of reasonable or substantial assurance, with the exception of one audit, which was rated as limited. No audits were given no assurance and the vast majority of audit actions were implemented within agreed timescales. The Head of Internal Audit Opinion provided a rating of reasonable assurance.</p>
<p>ASSURE</p>	<p>Audit Committee Effectiveness Survey Results 2022</p> <p>The results of the recent 2022 Audit Committee Effectiveness Survey were presented. The anonymised survey was undertaken to obtain feedback from Committee members on performance and potential areas of development and was issued to all members in August 2022. The number of responses received was up from the previous year and were very positive with no significant areas to address.</p>
<p>ASSURE</p>	<p>Governance Matters</p> <p>The Governance Matters paper detailed the contracting activity for the last quarter, highlighting there had been no departures from Standing Orders. 21 contracts had been let for NWSSP and 22 further contracts for NHS Wales. There have been three declarations made as to gifts, hospitality or sponsorship and no internal audits reports have received limited or no assurance since the last meeting. 77% of NWSSP have now completed a Declaration of Interest – the first time that all NWSSP staff have been asked to participate in this exercise.</p> <p>Of 244 audit recommendations, 234 have been implemented, 6 are not yet due, four are not in the gift of NWSSP and none were overdue. Recommendations dependant on third parties to complete an action would be shared with the Shared Services Partnership Committee to obtain appropriate updates.</p> <p>The Corporate Risk Register contains one red risk, relating to the inflationary impact on goods and services, particularly relating to energy. New risks have been added as follows:</p> <ul style="list-style-type: none"> • The threat of industrial action and the resulting impact on delivery of services;

	<ul style="list-style-type: none"> • A current dispute with the supplier of the new Legal & Risk Case Management system which may have both a financial and service delivery impact; and • Difficulties in obtaining sufficient financial and staff resource to take forward the agreed plans for the Clinical Pharmacy service.
ASSURE	<p>Utilisation of Surplus Beds</p> <p>The report was presented to the Audit Committee providing members with an update on the utilisation of surplus bed stock that resulted from the NHS Wales Covid response. In 2021 the Audit Committee were asked to approve on behalf of Welsh Government the write-off of £5.7 million for surplus beds. 2,328 beds were held in storage, and Welsh Government were recently approached by a Charity who wanted to repurpose 198 critical care beds and transport them to Moldova for Ukrainian refugees. Welsh Government agreed to the donation and all governance documentation was completed in conjunction with the Legal and Risk team. NWSSP staff are working with local authorities to see whether the remaining beds could be utilised elsewhere.</p>
INFORM	<p>Items for Information</p> <p>The following items were provided for information:</p> <ul style="list-style-type: none"> • NWSSP Annual Review 2021-22; • Information Governance Annual Report 2021-22; • IMTP Outcome letter; and • Audit Committee Forward Plan.

2. ARGYMHELLIAD/RECOMMENDATION

The Committee is asked to:

- **NOTE** the Assurance Report



NHS WALES SHARED SERVICES PARTNERSHIP

Annual Counter Fraud Report 01/04/2021- 31/03/2022

**GARETH LAVINGTON
COUNTER FRAUD
CARDIFF & VALE UNIVERSITY HEALTH BOARD**

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2. Summary of compliance
3. Allocation of Resources
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6. Sanctions and Recoveries
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8. Lines of Reporting
9. Director sign off / Declaration

1. INTRODUCTION

This Counter Fraud Annual Report has been written in accordance with Welsh Government Directions on Fraud and Corruption, which requires Local Counter Fraud Specialists (LCFS') to provide a written report at least annually to NHS Wales Shared Services Partnership (NWSSP) on Counter Fraud work undertaken. All NHS organisations, in compliance to their service conditions of their NHS standard contract, must comply with the NHS Counter Fraud Authority's (NHSCFA's) fraud, bribery and corruption standards for providers.

This annual report will highlight the activities undertaken by the LCFS team, and demonstrate how they have delivered their counter fraud, bribery and corruption activities. Additionally, in compliance to the NHSCFA's standards for providers, this annual report will also document and present the following details,

- Days used to deliver counter fraud, bribery and corruption work
- The cost of counter fraud, bribery and corruption work carried out during the year
- Details of any risk based proactive exercises conducted during the year
- The number of information reports and cases recorded on the NHSCFA Case management system
- Number and type of sanctions imposed, including recoveries made

This report has been complimented throughout the year with detailed progress reports presented to the Audit Committee and additional briefings being presented to the Executive Director of Finance. Following acceptance and approval by the Audit Committee, this Counter Fraud Annual Report is distributed to the NHS Counter Fraud Service (Wales) and is available to the NHSCFA Quality Assurance Team for review if requested.

The NHSCFA is a Special Health Authority charged with identifying, investigating and preventing fraud within the NHS and the wider health groups. The legislation which created the NHSCFA transferred all functions and powers from NHS Protect to the NHSCFA. The NHSCFA is independent from other NHS bodies and is directly accountable to the Department of Health and Social Care (DHSC). For more information, the NHSCFA website is www.cfa.nhs.uk. For the purposes of this report, the term 'fraud' refers to a range of economic crimes, such as fraud, bribery and corruption or any other illegal acts committed by an individual or group to make a financial or professional gain, or to cause an economic loss.

2. SUMMARY OF COMPLIANCE

In January 2021, the NHS rolled out new counter fraud requirements for NHS-funded services in relation to the Government Functional Standard GovS 013: Counter Fraud. The NHSCFA worked closely with a wide range of stakeholders to ensure that the NHS Counter Fraud Requirements had greater consistency and remained fit for purpose for organisations, including providers and commissioners. The standards apply to all NHS funded services (those receiving partial or full NHS funding). The purpose of the Government Functional Standard is to set expectations for the management of fraud, bribery and corruption risk across government and wider public services, and to reinforce the government's commitment to fighting fraud against the public sector. The final engagement which sealed the implementation of the Government Functional Standard GovS 013: Counter Fraud occurred at the All Wales DoF's meeting on 19th February 2021.

The LCFS' has demonstrated compliance towards the recognised standards as detailed below.

Compliance is Measured as follows:

Green – fully compliant

Amber – partially compliant

Red – non-compliant

(A comprehensive breakdown of the actions undertaken by the LCFS team in direct measurement against the Standard requirements for 2021-2022 will be recorded in the NHS CFA Functional Standard Return. This is due for completion by 31st May 2022. This document will be completed by the Counter Fraud Manager and is required to be submitted to the Director of Finance and the Audit Committee Chair for sign-off prior to submission to the NHS CFA. This document will be made available to the Audit and Assurance Committee upon sign -off.)

- **Accountable Individual and Audit Assurance**

The LCFS' overall governance is held by the NWSSP Director of Finance and Corporate Services. The LCFS' has ensured to notify him of any referrals received and regular updates are provided throughout the investigation process. Additional to this, the LCFS' makes sure to extend this exchange of information to ensure that where appropriate, the senior workforce members are briefed where aspects of a Counter Fraud

investigation may overlap with that of a disciplinary concern. During the course of the year regular updates are provided to the DoF, the Counter Fraud Champion and other senior managers where appropriate.

The LCFS is a member of the Audit Committee and as such provides regular progress reports of Counter Fraud work undertaken throughout the year. All quarterly progress reports have been provided and presented to committee. The Annual Report has now been completed and submitted. The Annual Plan has now been completed in draft form and awaits approval from DoF and Audit Committee. The Govt Standard Functional return has not yet been completed but the aim is to do so by 31st May 2022. There has been a delay in the reporting of in this end of year period due to the change of management within the counter fraud department.

GREEN

- [Counter Fraud Bribery and Corruption Strategy / Policy and Response Plan](#)

The organisation has a Counter Fraud, Bribery and Corruption Policy. This policy is due for review in April 2022. This review to ensure that it is fully aligned to the NHS CFA strategy. The policy is available to staff via the Intranet and has been promoted during fraud awareness work carried out by the team throughout the year. Further work will be carried out in the year ahead to ascertain if possible to make the relevant documents more visible. The LCFS team this reporting period has ensured to align its counter fraud, bribery and corruption work to the recent changes in NHSCFA counter fraud, bribery and corruption requirements.

GREEN

- [Risk Assessment](#)

The LCFS' team have, where appropriate continued to effectively work across the service to share expertise and guidance around fraud proofing, risks and vulnerability. Counter Fraud maintain a direct review and input role in relation to policy which aims to strengthen the wider practices to reducing the risk of fraud through poor policy or governance controls. Throughout the upcoming year this will be strengthened further with a full review into the relevant policies related to Counter Fraud Work. Where local risks are identified, assessment work is been carried out accordingly. During the course of the year work has been undertaken also in relation to a review of Mandate Fraud Risk, Invoice Fraud Risk, Supplier Fraud Risk (this has been informed by a Thematic Assessment exercise implemented by the NHS CFA.) Work has also been carried out in relation to Pre-employment checks involving the use of agency staff. This work is now complete and has been

reported earlier via the counter fraud progress reports. Due to the implementation of a new risk management reporting style adopted by the NHS CFA, a delay in training, and the service being stretched for a significant part of the year not all of this work has been recorded in the new format. All new risk work will now align to this methodology and be reported upon the CLUE case management system and locally through the AAC process, and recorded on the local risk register. Relationships and information sharing has continued throughout the year between LCFS and key contacts in key areas of risk including Workforce and OD, Procurement, and Internal Audit. A review of the joint working protocols in place between LCFS and these departments will take place throughout the year ahead.

AMBER

- **Annual Action Plan**

An annual action plan has been completed for the year ahead that has been produced in direct alignment to the new Government Standard 13. This document currently awaits agreement and sign off from the DoF and subsequent ratification by the Audit Committee. Progress of the LCFS teams work will be reported periodically at the Audit Committee. Due to the nature of Counter Fraud work the plan remains broad, flexible and subject to change throughout the year as new risks and requirements are identified.

GREEN

- **Outcome Based Metrics**

Throughout the year the work of the LCFS team has constantly been measured and statistics produced. This has been carried out in the areas of raising awareness, investigation, risk, awareness, strategic planning, sanctioning, and financial loss and recovery. The service has been successful in documenting some direct results e.g. reporting of management of investigation on CLUE, National Fraud Initiative reporting and feedback following awareness. However, there is little evidence of testing and reporting upon the effectiveness of counter fraud activity and work. Improvement is required in this area. Further work is being implemented in Q1 of the year ahead to routinely collect data in relation to areas that will assist in being able to directly measure the effectiveness of strategies implemented and work carried out. For example, the effectiveness of a new interactive internal Fraud Enquiry / Reporting tool being implemented, promoted and publicised, will be directly measured against a rise or fall in the amount of contact that is made by staff members that are automatically directed to a new dedicated email address. Further

monitoring of risk work carried out will be implemented to introduce periodic review in order to assess any savings made.

AMBER

- **Reporting Routes**

Staff have been made aware throughout the year of the reporting routes available to them. In the last year these included direct contact with the team via email, phone and in person, the use of the online CFA reporting tool, the National Reporting Hotline maintained by Crime stoppers, and an internal reporting form. All instances of fraud reporting have been initially assessed and those that are furthered to formal investigation have been recorded on the case management system (CLUE) and reviewed accordingly. New reporting methods are being introduced this year as laid out in the annual plan. Further work to signpost staff and others is required and the development of a fit for purpose communications strategy publicising and advertising the CF team and its work will aid in raising its profile.

AMBER

- **Reporting Identified Loss**

The CF team has reported all incidents of suspected fraud, bribery using the CLUE management system that was introduced on 9th April 2021. This reporting tool is used to record all investigations, sanctions, recoveries and losses and also has a mechanism to record system weakness and Local Proactive Exercise work. This system has been supervised by CFS Wales and all information has been used to inform progress reporting to Audit Committee and CFS Wales. In the upcoming year this will be added to with the reporting of savings made as a result of counter fraud work undertaken.

GREEN

- **Access to trained investigators**

At the start of the year the organisation employed three fully trained and accredited investigators that were supported by a full-time administrative support assistant. One of these investigators was off work on sickness leave and remained so throughout the year. The administrative support assistant left in September 2021. The team were joined by a further investigator in January 2022. This team member is at the time of reporting three quarters of the way into an accreditation qualification. This is due to be completed in

June 2022. The team have been under staffed for the majority of the year and have provided extra time and been bolstered throughout the year with assistance from the CFS Wales team and members of other NHS Wales teams on an ad hoc basis in order to ensure successful provision of the Counter Fraud Plan for 2021-2022.

GREEN

- **Undertake Detection Activity**

Where anomalies are identified through counter fraud work e.g. investigations, the CF team strives to carry out detection activity to assess whether there are any weaknesses present. Where this is the case corrective activity is proactively undertaken to mitigate the identified risk. Regular liaison takes place with internal audit in order to understand risks identified by them in order to identify and inform upon Fraud Risk. Data mining has also been undertaken within the context of the NFI database. The majority of matches have now been closed in relation to this year's exercise. No NFI investigations have identified fraud. All actions taken by the CF team in relation to work in this area are reported accordingly on CLUE inclusive of any recoveries made. There has been a lack of proactive detection work undertaken looking for outlying data that can inform on the occurrence of fraud. Improvement to be made in the upcoming year in carrying out informed detection data mining exercises into areas of locally identified risk and subsequent reporting and review to be carried out in line with Cabinet office supplied methodology and local risk procedures.

AMBER

- **Access to and Completion of Training**

Due to the COVID situation fraud awareness sessions to staff members have been significantly disrupted. However remotely delivered sessions have been created and delivered where possible. The plan for the year ahead is to get back to in room presenting alongside virtual presentation and to make sure that Fraud Awareness is mandatory at corporate induction. All wales fraud awareness training has remained available throughout via ESR but this is not a mandatory module. As a result, figures for completion among staff remain comparatively low against organisations where it is. This should be a priority objective for the upcoming year in order to improve fraud awareness and learning. A counter fraud newsletter has been published quarterly in order to keep staff apprised of ongoing issues. CF team staff have attended all sessions of training provided by CFS Wales and NHS CFA and a number of webinars from NHS CFA have also been

undertaken in relation to update training into areas such as risk assessment and CLUE implementation.

GREEN/AMBER

- **Policies and Registers for Gifts and Hospitality and Conflicts of Interest**

The organisation has in place policies and registers in compliance with this requirement. The register of Conflicts is managed by the Director of Governance and where appropriate liaison with CF can be sought.

GREEN

3. Allocation of Resources

At 31st March 2022 75 days of Counter Fraud work have been completed against the agreed 75 days in the Counter Fraud Annual Work-Plan for the 2021/22 financial year as shown below. The days have been used investigating allegations of fraud; interviewing witnesses; preparing, delivering and analysing the feedback from the fraud awareness presentations; preparing quarterly and annual reports for, and attending, the organisation's audit committee meetings; interviewing suspects; and carrying out a risk assessment work including an exercise on pre-employment checks conducted by agencies which supply staff to the organisation, and addressing the areas of risk raised in the CFA Thematic assessment document.

Strategic Requirements **12 Days**

(inclusive of corporate governance undertaking, attendance of departmental team at staff training events, report writing, planning and attendance all wales meetings.)

Proactive Work **38 Days**

(inclusive of fraud awareness sessions, and publicity work such as newsletters and bulletins, system weakness reviews and reporting, Local Proactive work eg pre-employment Risk Assessment. NHSCFA procurement exercise, and National Fraud Initiative work.)

Reactive Work **25 Days**

(inclusive of the investigation of all referrals, preparation of reports for disciplinary processes.)

4. Summary of Costs

Proactive Costs	£ 14,107
Reactive Costs	£ 7,268
Total Costs	£ 21,375

5. Breakdown of Investigative work areas

There have been two referrals promoted to investigation during the reporting period. (1) Information was received that an employee of NWSSP was in receipt of overpayment of salary and was suspected of committing theft. The CF fraud investigation found no wrong doing on behalf of the subject and that they had contacted Payroll to inform previously but his was not noted. NFA. (2) Student bursary fraud – student nurse suspected of making false claims in relation to childcare arrangements. Case ongoing and file to be submitted to CPS for charging decision.

A brief summary of allegations received throughout the year is provided in the table below.

Offence	No. of Referrals	Type
False Representations	1	Student Bursary Fraud
Theft	1	Overpayment

6. Sanctions and Recoveries

During the financial year the team has achieved the following sanctions and recoveries.

Disciplinary Sanctions	0
Criminal Sanctions	0
Civil Sanctions	0
Recoveries	NA

In the upcoming year savings attributed to fraud risk identification and remedy will also be recorded.

7. Fraud Awareness

During the period 1st April 2021 – 31st March 2022 a total of 14 awareness sessions were delivered to 306 staff members across the organisation. The feedback from these presentations was positive.

8. Lines of Reporting

MD	Neil Frow
Director of Finance & Corporate Services	Andrew Butler
Head of Counter Fraud	Gareth Lavington
LCFS	Nigel Price
LCFS	Emily Thompson

9. Executive Sign Off / Declaration

I declare that the Counter Fraud work carried out on behalf of NWSSP for the year 2021/2022 has been reviewed against the NHSCFA requirements (as stipulated in the Government Functional Standard 13). The ratings that have been achieved are reported above and meet that standards set as shown.

Head of Counter Fraud: Gareth Lavington
Director Finance & Corporate Services : Andry Butler
Date: 8/7/ 2022



Cynllun Cynorthwyo Gwaed
wedi'i haentio Cymru

Wales Infected Blood
Support Scheme



ANNUAL REPORT 2021/2022

WALES INFECTED BLOOD SUPPORT SCHEME (WIBSS)

VELINDRE UNIVERSITY NHS TRUST

THROUGH

NHS WALES SHARED SERVICE
PARTNERSHIP (NWSSP)

AND

VELINDRE CANCER CENTRE (VCC)

ANNUAL REPORT 2021/2022



Cynllun Cynorthwyo Gwaed
wedi'i haentio Cymru

Wales Infected Blood
Support Scheme

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Introduction

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

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

WIBSS supports 217 beneficiaries, including bereaved spouses and partners. However, the welfare and psychological support is also provided to wider family members of our beneficiaries.



Purpose of Report

The purpose of this report is:

- to provide an update on the finance and support services during 2021-22 as part of the Wales Infected Blood Support Scheme;
 - to detail the proactive work carried out by WIBSS during 2021-22;
- and
- to look ahead to WIBSS priorities relating to 2022-23.



Matters arising during 2021-2022

COVID-19 – The Pandemic

In March 2020 the UK entered its first lockdown, because of the global COVID-19 pandemic. Everybody who could work at home, was told to work at home, this included the staff at WIBSS. We successfully made this transition and operated on a “business as usual” basis throughout 2021-22.

We continued to make all regular payments and to offer help and support to all our beneficiaries, many of whom were shielding because of their condition. We provided updates and advice on our website and were available throughout, to help with any queries, provide benefit checks etc. Whilst we did need to stop home visits, to comply with Government guidance, we adapted to offer the well-being and counselling services remotely, over the telephone, on Microsoft Teams or via skype calls.

Public Inquiry – The Infected Blood Inquiry

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

In 2021-2022 we responded to four Rule 9 requests from the Infected Blood Inquiry. The requests were seeking clarification of information contained in the witness statement previously provided by Alison Ramsey, Director of Planning, Performance, and Informatics at NWSSP, prior to her appearance before the inquiry in May 2021.

<https://www.infectedbloodinquiry.org.uk/evidence/transcript-london-thursday-20-may-2021-vaughan-gethering-and-alison-ramsey>, and following her appearance.

In providing evidence to the Inquiry, the WIBSS team committed to take stock, and review all our procedures, documentation, communication channels e.g., our website and newsletters etc. This review identified a few areas where we needed to update our advice and guidance to reflect changes since the service was first established. This included updating a few our application forms and improving the guidance to completing some of those forms. The website and documentation have now been refreshed to provide an accurate reflection of how the service is provided.

Matters arising during 2021-2022

Parity across the four UK nations

When the four devolved infected blood schemes were established in 2017, three of the four operated largely on similar terms and payment rates. Scotland adopted a slightly different model. WIBSS introduced a welfare rights service, which the other schemes did not have, but the payment rates were initially comparable to those in England and Northern Ireland.

With effect from 1 April 2019, the UK Government directed EIBSS to significantly increase the payment rates for their beneficiaries, leading to disparity between the schemes. This subsequently then triggered a series of meetings between government officials across all four nations with the aim to reach an agreement on parity across the four schemes.

The WIBSS finance team worked closely with UK government colleagues to model the estimated costings, including back dated elements and an estimate for future years.

On 25th March 2021 the then Welsh Minister for Health and Social Care announced agreement on parity had been reached and payments would be made by the end of the calendar year (December 2021).

<https://gov.wales/written-statement-infected-blood-update-financial-parity>

Under the parity model, provided by Welsh Government in March 2021, the overall additional funding required, totalled £13.1m in 2021/22. This also included some backdated elements relating to 2019/20 and 2020/21.

Following the announcement, WIBSS staff worked closely with Welsh Government to clarify the likely detail of the agreement, and then calculate the individual payments to be made to each beneficiary on the WIBSS.

This was complex work, requiring attention to detail to ensure that accurate payments could be made promptly to the WIBSS beneficiaries.

Welsh Government issued the final directions on 13 August 2021 and the payments were made on 20 August 2021. During the latter half of 2021-22, two further parity adjustments were made:

- Co-infected HIV and Hep C Stage 1 widows were
- paid the additional £30,000 lump sum payment.
- Widows received the winter fuel payments.

Matters issues arising during 2021-2022

Compensation Framework

In May 2021, it was announced that Sir Robert Francis QC had been appointed to consider a compensation framework for those people infected and affected by the infected blood scandal.

The Terms of Reference of the Framework were:

- Give independent advice to the Government regarding the design of a workable and fair framework for compensation for individuals infected and affected across the UK to achieve parity between those eligible for compensation regardless of where in the UK the relevant treatment occurred or place of residence. While the Study is to take into account differences in current practice and/or law in the devolved nations, it is not asked to consider whether delivery of that framework should be managed centrally or individually by the devolved administrations.
- To Submit to the Government its report and recommendations as quickly as possible and no later than the end of February 2022 [amended to 14 March 2022], to provide the Government with advice on potential options for compensation framework design.

In January 2022, the WIBSS Manager, together with the policy manager from Welsh Government, met with Sir Robert and his staff to discuss the operation of WIBSS and what the beneficiaries wanted from the framework.

The WIBSS Manager explained the operation of the scheme and highlighted the fact that WIBSS operates a “wraparound” holistic service, providing, not only financial support, but also welfare rights support and a bespoke psychology and wellbeing service, staffed by people who have a good knowledge of the subject area, who can empathise and understand the issues our beneficiaries are facing on a daily basis.

Whilst we felt that the financial support was important, many of our beneficiaries have commented how they value the face-to-face support, the personal interactions with them and the fact that the service is easily accessible. They would not want to lose that, in any revised service that was proposed.

Sir Robert Francis submitted his report to UK Government in March 2022 for consideration. He also appeared in front of the Infected Blood Inquiry to discuss the report in July.

On 29 July 2022, it was announced that interim payments of £100,000 would be made to all who were currently registered with one of the 2 UK Infected Blood Support Schemes by October 2022. The schemes all wrote to their beneficiaries notifying them of this fact.

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

Governance Group

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

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

- Investigate or have investigated any activity within its Terms of Reference, and in performing these duties, shall have the right, at all reasonable times, to inspect any books, records or documents of the Trust, relevant to the Governance Teams remit, subject to any restrictions imposed by General Data Protection Regulations (GDPR). It can seek any relevant information it requires from any employee, and all employees are directed to co-operate with any reasonable request made by the Board.

It is empowered with the responsibility for:

- Reviewing and advising on the management of the WIBSS budgets, including running costs, the annual beneficiaries budgets and provisions
- Advising Welsh Government on rate changes and the potential financial and service implications of policy changes, both within Wales and other areas within the UK
- Implementation of Welsh Government policy
- Ongoing negotiation and partnership with Welsh Government to ensure the smooth running of the service.

Governance Group

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

- Director of Corporate Governance, Velindre University NHS Trust (Chair)
 - Director of Operations, VCC
- Director of Planning, Performance and Informatics, NWSSP
 - WIBSS Service Manager
- Welsh Government Finance Representative
- Welsh Government Policy Representative
 - Senior Welfare Rights Manager
 - Consultant Psychologist

In 2021-22 the Governance Group met on 21st July and 14th December and 29th March 2022, postponed to 5th April 2022.



Financial Support

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

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

There are varying levels of financial support available to beneficiaries of the scheme. These were set out in our 2020-2021 Annual Report and are on the WIBSS website Home - WIBSS (wales.nhs.uk).



Appeals Process

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

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

During 2021-22, two appeals were submitted, and an appeals panel was convened in March 2022. One appellant decided to postpone her appeal, prior to the Appeal Panel considering it. The Panel considered the remaining appeal.

The panel considered all the documentation received by WIBSS and detailing the decision-making process of WIBSS. The appellant also appeared in front of the panel to present their case. The panel then considered all the evidence, and upheld the original decision made by WIBSS to reject the application and the appellant was notified of the panel's decision.

The appeals panel process does not cover appeals regarding the Discretionary Small Grants process. At the inception of WIBSS we did not think a formal appeals process was proportionate given the value of these grants. To date we have not declined any small grant applications, however, as this was queried during WIBSS appearance at the Inquiry, we considered the issue and have introduced a less formal system of reconsideration for any applications for small grants that may be declined in the future.

The approach allows an applicant, unhappy with the outcome of their grant application, to resubmit it to WIBSS for reconsideration. The WIBSS Manager will arrange for the decision to be considered by somebody independent of the original decision-making process. As part of our overall review of our documentation and guidance, we have amended the small grants section to reflect these changes.



Welfare Rights Service

The Welfare Rights Service offers a bespoke service to the individual beneficiary and their family. The welfare rights advisors are Advice Quality Standards (AQS) accredited and undertake continuing professional education with specialist welfare training providers.

Although not exhaustive, the list below demonstrates some of the things we may be able to assist with:

- liaising with social services to ensure complex beneficiary needs are met. i.e. support from a social worker or occupational therapy to obtain safety adaptations to the home of the beneficiary.
- signposting to free NHS dental care and prescription services, for those eligible.
- assisting with applying to join WIBSS - including requesting medical records or chasing medical professionals to provide necessary evidence to support an application.
- undertake benefit and welfare checks, debt signposting, budgeting advice, navigating financial products etc.
- applying for a parking badge (Blue Badge), free bus travel and concessions.
- accessing health services, such as additional care requirements and health care transportation.

WIBSS also recognises a beneficiary's health not only impacts them. It can also have a significant impact on those caring for them. Our welfare rights advisors can also consider the circumstances of immediate family members and carers. They can check their entitlement to benefits and additional support requirements, which may help to improve overall financial circumstances.

Key worker support

Another service provided is key worker support, which includes:

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

The welfare rights service is often the first point of contact for updates and reassurance on issues impacting WIBSS.



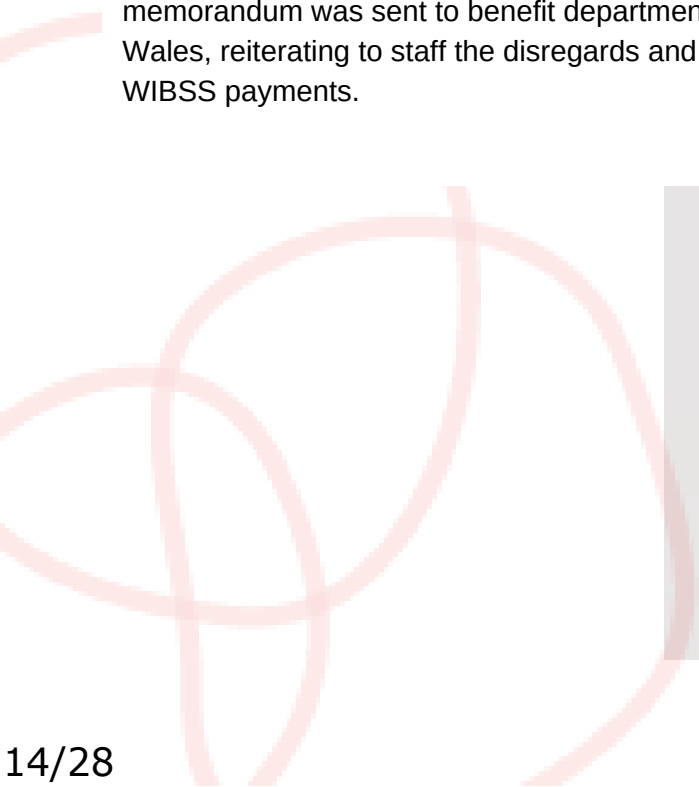
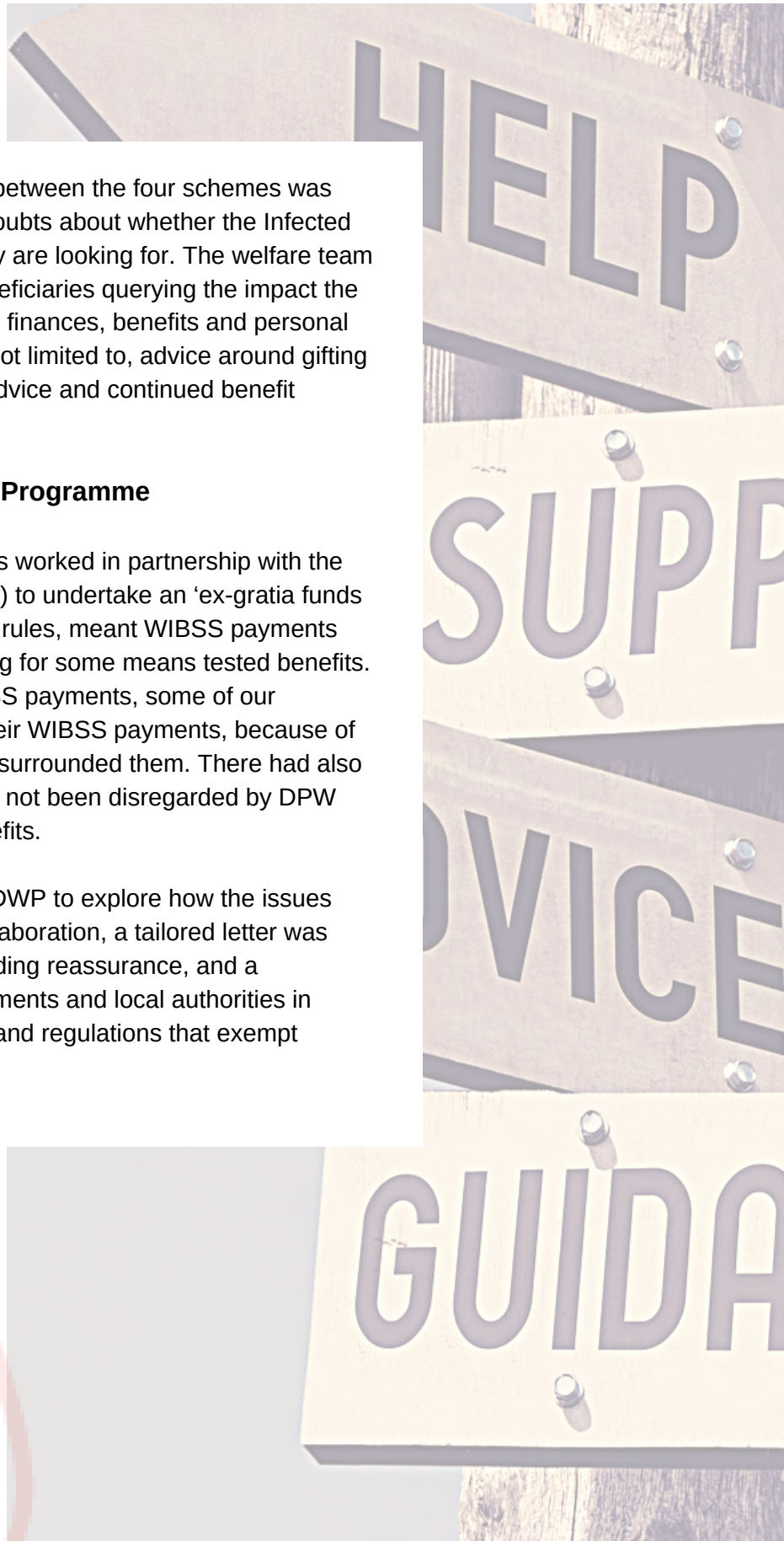
Welfare Rights Service

The lack of parity in the payment values between the four schemes was provoking feelings of anger, along with doubts about whether the Infected Blood Inquiry would find the answers they are looking for. The welfare team provided reassurance and advice for beneficiaries querying the impact the back payments would have on their other finances, benefits and personal circumstances. These included, but are not limited to, advice around gifting money to family and friends, budgeting advice and continued benefit entitlement.

DWP 'Ex-gratia Funds Declaration' Programme

In March 2022, the welfare rights advisors worked in partnership with the Department of Work and Pensions (DWP) to undertake an 'ex-gratia funds declaration' programme. A change in the rules, meant WIBSS payments now needed to be declared when applying for some means tested benefits. However, due to the sensitivities of WIBSS payments, some of our beneficiaries were reluctant to declare their WIBSS payments, because of the perceived stigma that has previously surrounded them. There had also been cases where WIBSS payments had not been disregarded by DPW staff, when assessing entitlement to benefits.

The WIBSS welfare team contacted the DWP to explore how the issues could be alleviated. As a result of the collaboration, a tailored letter was issued to beneficiaries by the DWP providing reassurance, and a memorandum was sent to benefit departments and local authorities in Wales, reiterating to staff the disregards and regulations that exempt WIBSS payments.



Welfare Rights Service

Case Study

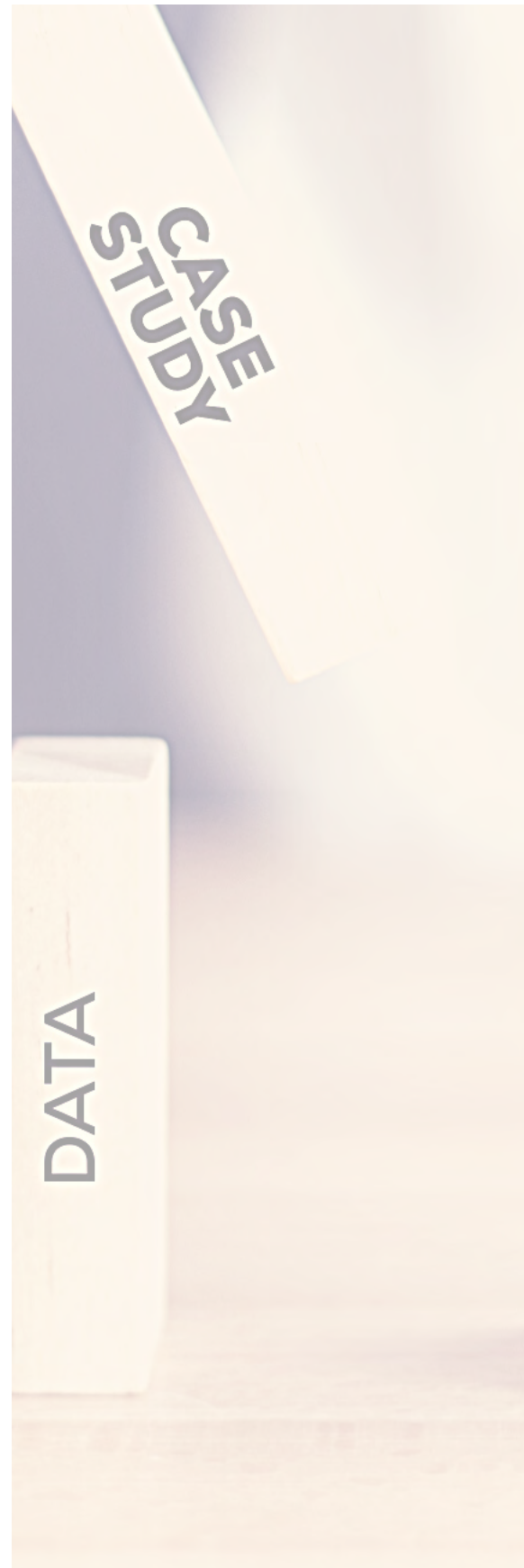
To provide an equitable service to our beneficiaries, our welfare rights advisors travel throughout the UK to provide assistance.

Case study A involved a 455-mile round trip, as the beneficiary had requested a home visit. Although, we continued to provide our services remotely during the pandemic, as soon as COVID restrictions were lifted, we arranged to visit this beneficiary. They had been reluctant to receive support remotely, due to their nervousness and limited knowledge of technology.

The benefit check undertaken resulted in the following eligibility:

- a full claim for Universal Credit, including housing costs to help towards rent,
- a review of PIP entitlements due to deterioration of health,
- a claim for free NHS prescriptions in England
- a full reduction of Council Tax payable that year.

Prior to the visit, the beneficiary's household had been living solely on WIBSS funds. With the cost of living rising, the additional benefits identified by the welfare rights advisor, has provided our beneficiary with financial peace of mind. This, in turn, has eased their physical and mental health pressures.

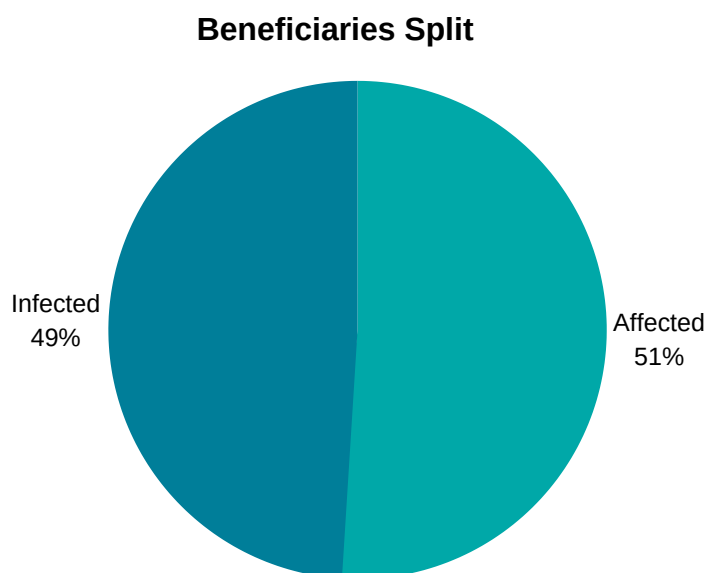


Psychology and Emotional Well-being Service

Operation and Delivery

The Wellbeing and Psychology Service continues to provide specialist one to one psychological support to those infected and affected.

The split between those infected and affected who have accessed the service is shown in the chart below 49% (infected):51% (affected).



To date, over 80 people have accessed the service. The current caseload is 34.

For most of 2021/2022, therapy was delivered virtually or via telephone, due to COVID restrictions. As soon as the COVID restrictions were eased, face-to-face appointments were reintroduced. Where possible, upon request, the team also provide home visits for those with mobility issues and/or chronic co-morbidities commonly related to Hep C, HIV/AIDS or the treatment received, such as Interferon.

Therapy is heavily focussed on developing the therapeutic relationship with the client. It strives to deliver consistency and to promote trust and reliability, in a support service that is allied with the NHS system that provided the infected blood and blood products that have had such a devastating effect on their lives.

Feedback from those accessing the service would suggest that this approach is successful.

Psychology and Emotional Well-being Service

The team have been able to offer effective therapeutic interventions around a raft of themes including trauma (panic attacks and flashbacks), hypervigilance, loss and bereavement, stigma (secrecy), fear and isolation, misplaced guilt and responsibility, living with related life-limiting health issues, anger, mistrust, distress caused by a lack of understanding expressed by NHS staff as to the causes of chronic health conditions (e.g. the assumption that someone with Hep C is an alcoholic and the implication that they are lying about the causal factor of a cirrhosis diagnosis), carrier status, imposed infertility (the fear of passing on HIV or Hep C), relationship difficulties, anxiety and depression.

The ongoing proceedings of the Infected Blood Inquiry, the contentious evidence presented by some of those who have participated, and the creation and dissemination of the Compensation Framework have complicated the trauma responses of many. It has caused secondary and continued psychological trauma, resulting in many being stuck within a loop of psychological distress and reliving painful and traumatic events of the past.

Subsequently, therapy is having to address the immediate psychological and emotional responses to minimise further psychological harm, in the first instance, whilst addressing historic trauma is a secondary task in some cases.

The team feel that meaningful resolution-focussed therapy, to address historic trauma, might be more effective once the Inquiry is concluded and Compensation Framework has been agreed. In addition, preparatory therapy is underway around people's expectation of the Inquiry's findings and outcome (realistic vs unrealistic, what would justice look like? etc) to minimise further psychological harm in the future.

Developments

The team hosted an online focus group event earlier this year. It was held via Zoom, due to Covid restrictions. All WIBSS members were invited, and a small but lively group attended.

Attendees were asked for their ideas to help develop the Psychology and Wellbeing Service now that the specialist one to one support had been firmly established. WIBSS believe it is important the service users have a say in shaping the service to meet their needs.

There was a consensus around creating peer support opportunities and bringing together people as a community through shared experience. As a result, it was agreed the following ideas should be presented to the wider WIBSS community for their input and opinion:

- 1) Regular Zoom and/or face to face regional meetings to allow people to come together and discuss common themes and topics around wellbeing and share individual experiences.
- 2) A group regional and/or All-Wales social event to bring together all those infected and affected with the aim of creating a common community. The event could potentially encompass workshops with psychoeducational opportunities, links to promote peer support and guest speakers.

Psychology and Emotional Well-being Service

3) The creation of a 'buddy' system where people can register their interest in being paired with others within their community (small groups or one-to-one) to reduce isolation and create links with others through shared experience and friendship.

All WIBSS members have been asked for their expressions of interest in relation to these ideas, which the team intend to implement later this year, based on feedback.

In addition, the team have established the Infected Blood Psychology Network with colleagues from the Irish and Scottish psychology services. The group meet bi-monthly to share ideas, information, best practice, common themes and potential opportunities for research and cross-border work.

The network has also been consulted by colleagues from NHS England to help shape the English Infected Blood Support Scheme (EIBSS) psychology service, with emphasis on the importance of delivering a specialist service.

The Network are also examining and discussing published research around the cognitive impact of Hep C with the aim of creating a common assessment framework across the network to assess those members who present with cognitive impairment. The framework could also be applied to those with HIV.

Testimonials

Feedback was requested from those who has accessed the service, and they have given consent for their testimony to be shared.

Testimonial 1

A friend suggested that I contact WIBSS, as he was aware that attending the public inquiry in Cardiff had affected my health. I had tried counselling, via my workplace, but found that it was time restrictive i.e., six sessions, and was not that helpful. Eventually I couldn't cope with my emotions, so I contacted WIBSS, and am so glad I did. I now have help and support from my counsellor, who not only has great insight of the Infected Blood issue, but also appreciates that our suffering has been endured for a considerably long time, and so it will take time to be able to overcome the difficulties.

This counselling is tailored to suit my needs and I don't feel pressured to make a fast recovery. I have made progressive steps and also taken retrograde steps, but I know that no matter what I have the full support and encouragement of my counsellor which gives me strength to keep going. Every session leaves me feeling more able to cope with my issues. COVID 19 has impacted on my mental health, however, once again the counselling has been tailored to suit my current needs. I would advise anyone who is thinking about seeking counselling to approach WIBSS. This counselling is so different. It is helpful, supportive and adapts to the individual.

Psychology and Emotional Well-being Service

Testimonial 2

I'm a normal person, I live a normal life, but I sometimes find myself crying myself to sleep and I hide it. I'm in the car, and the tears just come from nowhere. Why do I feel so so sad and alone when I have so many people around me, friends and family?

It hasn't always been easy, not just the bad blood and everything that brings with it, but many other things that a person shouldn't cope with endure or experience, but I'm a strong person and I can cope, I'm the one everyone needs to help them, and then one day I can't anymore, and I need someone.

It's not easy to get help, it's not easy to ask.

WIBSS is there. I just filled out a form a couple of years ago, to say how I felt, and they came to help me. Just having someone to talk to about something or nothing is a safety net, I don't know why but it is. I look forward to the calls, it helps me. It could help you too.

Testimonial 3

The treatment I received for Hepatitis C had a devastating effect on my life. I found that talking to the WIBSS Wellbeing Service was reassuring and helped me understand some of the emotional and psychological issues that I have been dealing with. In particular, talking about some problems I have had with my relationships, with my family and friends, has enabled me to put things into context and enabled me to improve things. Talking to someone outside my circle has been very helpful.

In addition, some mindfulness exercises that she introduced me to have helped me with my sleeping difficulties.

Testimonial 4

The service has been helping our son, who has been struggling with issues relating to his dad's health, giving him ways to help cope with this and other anxiety and problems he is facing. He is finding the sessions really helpful.

Psychology and Emotional Well-being Service

Testimonial 5

I first decided to utilise The Wellbeing Service at WIBSS about a year ago. I have benefited enormously and have welcomed the support and reassurance that I have experienced during the last twelve months.

It has been a difficult year for all of us, especially so if you have been feeling isolated in your own home. Added to this, has been The Infected Blood Inquiry hearings, which may have transported many of us back to very traumatic and heart-breaking times, recreating difficult memories.

The Wellbeing service has provided me with a crutch to lean on and a safety net, giving me the support that I have needed for a very long time. I wish that this service had been available thirty years ago when I lost my Husband to AIDS.

I would encourage anyone to use this service which is confidential. Use it and don't suffer alone help is available to you.

Further testimonials are available on the [WIBSS website](#).



Beneficiaries activity

2021-2022

There are 217 beneficiaries & bereaved partners registered for support through the scheme. This is broken down into the following groups. (Valid as at 31 March 2022).

Beneficiary Group	Number of registered Beneficiaries
Hepatitis C Stage 1	40
Hepatitis C Enhanced Stage 1+	77
Hepatitis C Stage 2	41*
HIV	2
HIV & Hep C Stage 1 (Co-infected)	3
HIV & Enhanced Stage 1+ (Co-infected)	11
HIV & Hep C Stage 2	2
Bereaved spouse/partner	41*

*2 beneficiaries are classified as both existing beneficiaries and as bereaved spouse/partners.

**2 beneficiaries and 1 bereaved spouse passed away during Q4 2021/22. However, they are still included in the above numbers they continue to receive payments until the end of the quarter in which they pass away i.e., the 31st March 2022.

Payments Rates 2021-2022

The levels of payments available to beneficiaries in 2021/2022 are set out in the table below.

Beneficiary Group	Annual Payments
Hepatitis C Stage 1	£18,912
Hepatitis C Enhanced Stage 1+	£28,680
Hepatitis C Stage 2	£28,680
HIV	£28,680
HIV & Hep C Stage 1 (Co-infected)	£38,928
HIV & Enhanced Stage 1+ (Co-infected)	£45,072
HIV & Hep C Stage 2 (Co-infected)	£45,072

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

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

A beneficiary who moves from Hep C Stage 1 to Hep C Stage 2 would receive an additional £20,000 lump sum payment.

A new applicant who has already developed to Hepatitis C Stage 2 would receive a £70,000.

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

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

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

WIBSS Structure

The main WIBSS team consists of eight members of staff, led by the WIBSS Manager.

Alison Ramsey
Director of Planning,
Performance and Informatics
NWSSP

Lisa Miller
Head of Operational Service and
Delivery
Velindre Cancer Centre

Mary Swiffen-Walker
WIBSS Manager

Psychology and Well-being

Caroline Coffey
Clinical Psychologist

Julie Armytage
Counsellor

Finance

Stefan Dakovic
Finance Officer

Welfare

Hayley Price
Welfare Rights Manager,
Deputy WIBSS Manager

Rebecca O'Callaghan
Welfare Rights Advisor

Sarah Ferrier
Welfare Rights Advisor

Admin Support

Ryan Clappe
Support Officer

Finance Report

The table below summarises the claims expenditure for 2021-22, which includes full year payments paid at parity rates, and includes £9m of backdated payments, relating to 2019/20 and 2020/21 that were paid in 2021/22 as a result of the parity agreement. Announced in March 2021 and actioned in August 2021. These costs include ad-hoc, widows and small grants payments.

WIBSS Claims Expenditure	2021-22	2020-21 Comparative
No. of Beneficiaries	217*	176
Regular Payments	£7,294,727	£3,382,927
Backdated Parity Payments	£0	£8,996,254
Total Payments to Beneficiaries	£7,294,727	£12,379,181

**Please note the 2021-22 No of Beneficiaries difference of 41 relates to the on-going payments to bereaved spouses/partners as result of Parity.*

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

NWSSP provide the NHS Wales Finance Team within Welsh Government with regular updates on forecasts throughout the year. The administration of the scheme is cost neutral to both NWSSP and Velindre Cancer Centre, with Welsh Government funding the scheme in full.

Running costs for 2021/22

A summary of the running costs for 2021-22 is set out below with a 2020-21 comparative:

WIBSS Running Costs	2021-22	2020-21 Comparative
Pay	£215,298*	£218,749
Expenditure	£11,328	£10,372
Total	£226,626	£229,121

**Note the 2021-22 running cost spend is not a full comparative to 2020-21, the reduction in pay is due to the impact of maternity leave within the team during the year.*

Performance Report

WIBSS performance against Key Performance Indicators is set out below.

Description of key performance indicator	20/21 Target	Status
Responding to correspondence within set time limits	Within 4 working days	100%
Responding to Freedom of Information requests within required deadlines	In line with Trust policy	100%
Dealing with applications within required timescales	Within 28 days from receipt of complete information	100%
Dealing with applications within required timescales	100% 2 appeals were lodged, but one was withdrawn by the appellant prior to the panel taking place, as they were unable to obtain the evidence they required. The other appeal was heard within the required timescale. However, we acknowledge that this appeal was postponed and needed to be re-arranged due to COVID-19 related pressures faced by clinicians on the panel.	100%
Payments made on a timely basis	100% of payments to be made 0-2 days before the due date	100%
Advising WG on CPIH Uplifts and the cost implications for the next financial year	In February each year	100%

Performance Report

Description of key welfare rights indicators	Status
Total Welfare Rights cases opened in previous 12 months	62
No of Key Worker Advice Only	34
No of welfare rights casework	28
Income Generated for beneficiaries (1 Apr 2021 - 31March 2022)	£45,928.62
Outstanding outcomes March 2022	1 PIP review 1 PIP claim 1 Pension Credit claim 1 ESA claim

New Applications for Financial Support

WIBSS received 9 applications in 2021-22.

Application Type	Applications received	Outcome
Hepatitis C Stage 1	5	1 Accepted, 4 Declined
HIV	1	Accepted
Widows' application	3	Accepted
Total	9	5 Accepted, 4 Declined

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

Support and Assistance Grants Scheme

In 2021-22 we received 12 applications for a support Grant. This is an increase a 50% increase from 2020-21. We believe this increase is as a result of promoting the support and assistance grants in a WIBSS Newsletter issued to all beneficiaries.



Forward Look 2022 -2023

The workplan for 2022-2023 will include the following –

- Progress the work started by the Psychology and wellbeing team around focus groups etc.
- Launch an outbound campaign, aimed at assisting beneficiaries during the cost-of-living crisis i.e., identify schemes to provide new boilers, reduce heating costs etc.
- Respond promptly to any future and additional directions of Ministers in their response to the Inquiry recommendations.
- Process interim compensation payments, as directed to do so by Welsh Government
- Respond to the Rule 9 request received in July 2022 and any subsequent Rule 9 requests received.
- On the 29 July the Chair of the Inquiry also published an interim report, with a recommendation to make interim payments, but at the time of writing this report, no decision has been taken by UK or Welsh Ministers. Respond to any action required as a result of response.





NHS Wales Shared Services Partnership

Welsh Language Annual Performance Report 2021-2022

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Introduction

This report is NHS Wales Shared Services Partnership's (NWSSP) third Welsh Language Annual Performance Report, reporting on the period from 1st of April 2021 to 31st March 2022.

NHS Wales Shared Services continues in its commitment to deliver our services in both languages and also to encourage confidence in the use of the Welsh language day to day at work in NWSSP.

Circumstances remained challenging for us as an organisation during 2021/22 where staff have been working to achieve the delivery of its goals in the context of the COVID19 pandemic, whilst catching up with operations, project and plans that were put on hold during the previous year. We continue to have to review our priorities to address, respond and support other NHS organisations during the pandemic.

NWSSP continued to work during difficult and challenging times during 2021/22, where plans were made, were rapidly implemented, and are reassessed daily to meet shifting and changing demands. Staff have demonstrated, and are still demonstrating, dedication and commitment to ensuring that our service-users receive their service in their language of choice and that a bilingual service is provided.

Background – The Duty of the Welsh Language Standards

The Welsh Language (Wales) Measure 2011 establishes a legal framework that places a duty on NHS Wales Shared Services Partnership (NWSSP) to comply with the Welsh Language Standards (no.7) in relation to the Welsh language.

The individual standards explain how we are expected to:

- Develop and deliver our services through the medium of Welsh.
- Develop and implement policies and protocols that support the use of the Welsh language.
- Ensure that the Welsh language is considered and incorporated into our operational plans.
- Report on our performance annually.

The Language Standards are divided into five specific areas:

- service delivery
- policy making
- operational standards
- record keeping

As a hosted organisation of Velindre NHS Trust, NWSSP received a compliance notice from the Welsh Language Commissioner under Section 4 of the Welsh Language (Wales) Measure 2011, on 30 May 2019. This notice specifies the precise standards the NWSSP is required to comply with.

This is the third Welsh Language Standards Annual Report to be published by NWSSP.

We are immensely proud of our achievements during 2021/22, where we've been able to adapt our plans to meet the ever-changing circumstances we've found ourselves during the Covid 19 pandemic. The majority of our services continued to be delivered through the medium of Welsh, despite staff working from home, and having to prioritise and re-focussing our resources to address the challenges the pandemic presented to us as an organisation and the wider NHS in Wales. The year ahead still remains uncertain and undoubtedly will present further challenges. We intend to retain an agile working model as part of our plans for the future and the Welsh language is at the heart of our future plans.

Accountability and Support

Alongside the Welsh Language Services Manager, the Director of People and Organisational Development is the executive lead for the Welsh language in NWSSP.

There is a network of Welsh Language Co-ordinators in each division who work closely with the Welsh Language Unit and the Translation Team in providing advice, guidance and support regarding the Welsh Language Standards and promoting the use of the Welsh language internally.

We also have a team of Translators at NWSSP to support us as an organisation in delivering Welsh language services as well as supporting other NHS organisations. During this year, we've also established a bank of translators in order to deliver our translation services to a wider client base within NHS Wales

Service Delivery Standards

We have continued to comply with the service delivery standards during the year under the challenges of the pandemic.

- Written Correspondence (Standards 1 – 7)
- Telephone Services (Standards 8 – 20)
- Meetings and events (Standards 21 – 33)
- Producing and Publishing Documents (Standards 34 – 38)
- Website, social media, Apps (Standards 39 – 46)
- Signage (Standards 47- 49)
- Reception Services (Standards 50 – 53)
- Procurement and Contracts (Standards 57 – 59)
- Communications and Corporate Identity (Standards 60 – 62)
- Public Address systems – (Standard 64)

Several guidelines have been published and reviewed/updated for staff outlining the requirements in relation to compliance with the Standards. The guidelines are available on our Welsh support page on the intranet. Managers are aware of the availability of the guidelines and continue to advise their teams to familiarise themselves with the information and guidance made available to them. The Guidelines include:

- Protocol on written correspondence
- Protocol for answering and phone bilingually and handling Welsh calls received
- A guide for reception staff in welcoming visitors to our buildings/offices across Wales
- A Protocol on arranging and conducting meetings and public meetings bilingually
- Writing in Welsh – handy phrases
- Templates – signs, forms etc
- Guidance for web authoring and the use of social media
- Guidance on signage and public address systems
- Communications and corporate identity
- Welsh language considerations in the publication of procurement documents and specification of tenders detailing contractual obligations on the contracting/sub-contracting of services on behalf of NHS Wales.

Regular communication is distributed to staff across the organisation about the Welsh language standards, the importance of offering a Welsh language service, respecting the customer's choice. Staff are referred to the intranet Welsh language support page for this information. Since the implementation of the Welsh language standards, the demand on our Welsh language translation team has continued to increase, and 2020/21 has been no exception.

The demand for our translation services are increasing to unprecedented levels, and have been greater than ever ensuring that communication directly associated with the pandemic has been available from NWSSP. We have also been supporting other NHS organisations in communicating effectively with the public, and patients directly about Covid-19 through the medium of Welsh.

Complaints/Concerns received regarding services:

A complaint was received through the Welsh Language Commissioner's office in April 2021, about the lack of Welsh language services in our payroll division.

Following an internal investigation, we ensured that all staff were aware that a protocol is in place to respond to enquiries received through the medium of Welsh and all members of staff must follow that protocol.

Additional training was given to all Payroll staff across our offices in north, south east and south west Wales.

We reported to the Commissioner's Office on the steps we were taking to address the complaint and no further investigation was required by the Commissioner's Office at that time.

Policy Making Standards

All NWSSP policies are provided by Velindre NHS Trust.

Any protocols that we develop locally are required to undergo a comprehensive equality impact assessment. This provides the opportunity to give specific reference to the Welsh language, where the protocol would influence the use of the Welsh language as part of the organisations service delivery. The Welsh language is embedded in the decision-making processes across the organisation. The Welsh Language Services liaises with the Corporate Services Manager with regards to protocols and EQIA's for service development proposals.

We have ensured that all relevant documents related to employment are available through the medium of Welsh. Contracts of employment are sent to staff in both Welsh and English. A review of all People & OD documents has been undertaken during 2021-22, and all documents are compliant with the requirements of the Welsh language standards.

Operational Standards:

Internal Administration (Standards 79 – 82)

Complaints (Standards 83 – 85)

Disciplinary Cases (Standards 86 – 88)

Information Technology, the intranet and apps (89 – 95)

Developing Welsh language skills (Standards 96 – 105)

Recruiting and appointing (Standards 106 – 109)

Signage and notices in the workplace (Standards 111 – 113)

Internal Administration:

As previously mentioned, there are designated pages on the organisation's intranet page on the internal use of the Welsh language that staff can access to promote and increase the use of the Welsh language at work.

Documentation relating to staff employment as well as documentation such as performance objective setting, and career planning documents are available bilingually. All Wales policies such as Behaviour in the workplace, Absence from work and Health and well-being at work are available in both Welsh and English and published on intranet. The Welsh Language Services Manager has been supporting NHS Employers Wales on bilingual matters and translation support for all Wales policies.

Technology, Intranet and Apps.

The intranet pages outlined in our compliance notice are available in Welsh.

There is a Welsh language support page for staff to access on our intranet site.

A review of the People and Organisational Development pages will be undertaken in 2022/23 to ensure that any new policies/reviewed policies are available through the medium of Welsh.

Cysgliad is available to all staff to download to their computers/laptops and the use of Cysgliad by Welsh learners or those members of staff who are less confident in using the language.

We continuously update staff of any apps that are available to them to support them in using the Welsh language at work on a daily basis.

TRAC/NHS Jobs 3

We continue to update the interfaces, documents, notifications and forms on the TRAC recruitment system, the Student Awards System, the Student Streamlining System and the GP Wales System. NHS Jobs3 was launched during 2021/22 and this launched successfully in both languages at the same time.

ESR – Electronic Staff Record

ESR is the Electronic Staff Record that manages staff annual leave, pay, sickness absence and training across the NHS in Wales. NHS Wales has a 6% share in ESR across the UK, and the current ESR system, which was originally developed to manage payroll payments, has been extended on to such a point where it is technologically challenging to translate the whole system.

However, in the autumn of 2021, NWSSP's Workforce Information Systems and the Welsh Language Unit worked in collaboration with the NHS Business Authority and IBM to translate the portlets on ESR, by creating a skin over the existing portlets. We are pleased to report that Health Boards and Trusts have welcomed this development.

Training and Learning Welsh at Work:

During 2021/2021, we recruited 110 staff into vacancies at NWSSP. All new members of staff have received Corporate Induction, which includes Welsh Language awareness training. Training is now provided on two platforms, TEAMS or Zoom.

Microsoft TEAMS has been the platform used for training and learning Welsh at work. This platform has made learning Welsh and enabling staff to commit to completing the course much easier. It has also enabled tutors to record sessions so that staff can re-visit the learning and classes that they may have missed. Staff attendance and retention rates have improved, due to the courses being available online. However, prioritising workload remains challenging to managers and staff.

The following courses were offered to staff during 2021/22:

- Entry Level 1, 2 x 30-week courses. 32 members of staff attending
- Entry Level 2, 1 x 30-week course. 6 members of staff attending
- Foundation Level 2, 1 x 2 30-week course. 6 members of staff attending
- Intermediate Level 30-week course. 10 members of staff
- Higher Level 30-week course. 8 members of staff.

In addition to these mainstream courses, we've offered staff the opportunity to meet and use their Welsh language skills in 'Clybiau Clonc' to practice their Welsh in those sessions in order to support

staff who are learning Welsh or staff wanting to increase confidence in using their Welsh. We've hosted a number of those sessions for each level during the year, resulting in 52 members of staff attending those sessions.

We have also responded and supported staff wishing to learn Welsh in their own time, enabling them to attend Welsh courses in the community outside of work hours, as this arrangement suits these members of staff better than learning Welsh during working hours.

We recognise the importance to offer flexibility to our staff to learn Welsh and to make the learning of the language accessible and easy to reach. We have a number of staff who wish to learn some basic practical phrases, and we've tailored some sessions to cover the following areas and provided learning opportunities to a number of staff by providing these:

- 10 Welsh Language Taster courses during year (one off 2 hour courses) 37 members of staff attended.
- 6 Welsh Language Opening/Closing and chairing meetings in Welsh (one off 2 hour courses) 42 members of staff attended.
- 6 Greeting and welcoming (on off 2 hour courses) to 22 members of staff

We regularly promote the opportunities to learn Welsh to all our staff across all our sites.

We also regularly promote opportunities to use the Welsh language at work and socially in local communities.

Recruiting and appointing staff

In the later part of 2021/22 we've undertaken a consultation on a local protocol on the advertising, recruiting and appointing staff. This piece of work has been considerable, with stakeholders from People and OD, Employment Services and the NWSSP Welsh Language Unit.

The protocol will be launched in the 1st quarter of 2022/23, where all NWSSP vacancies will be advertised bilingually. This will enable us to be compliant with Standards 106, 106A, 107, 107A.

Record Keeping Standards:

Welsh Language Skills Across the Workforce:

All members of staff are required to complete a Welsh language skills assessment on the electronic staff record platform. During 2020/21 we saw a drop in the number of staff recording their skills during the year, this was in most part due to the pandemic, and staff working from home and the establishment of the single lead employer programme.

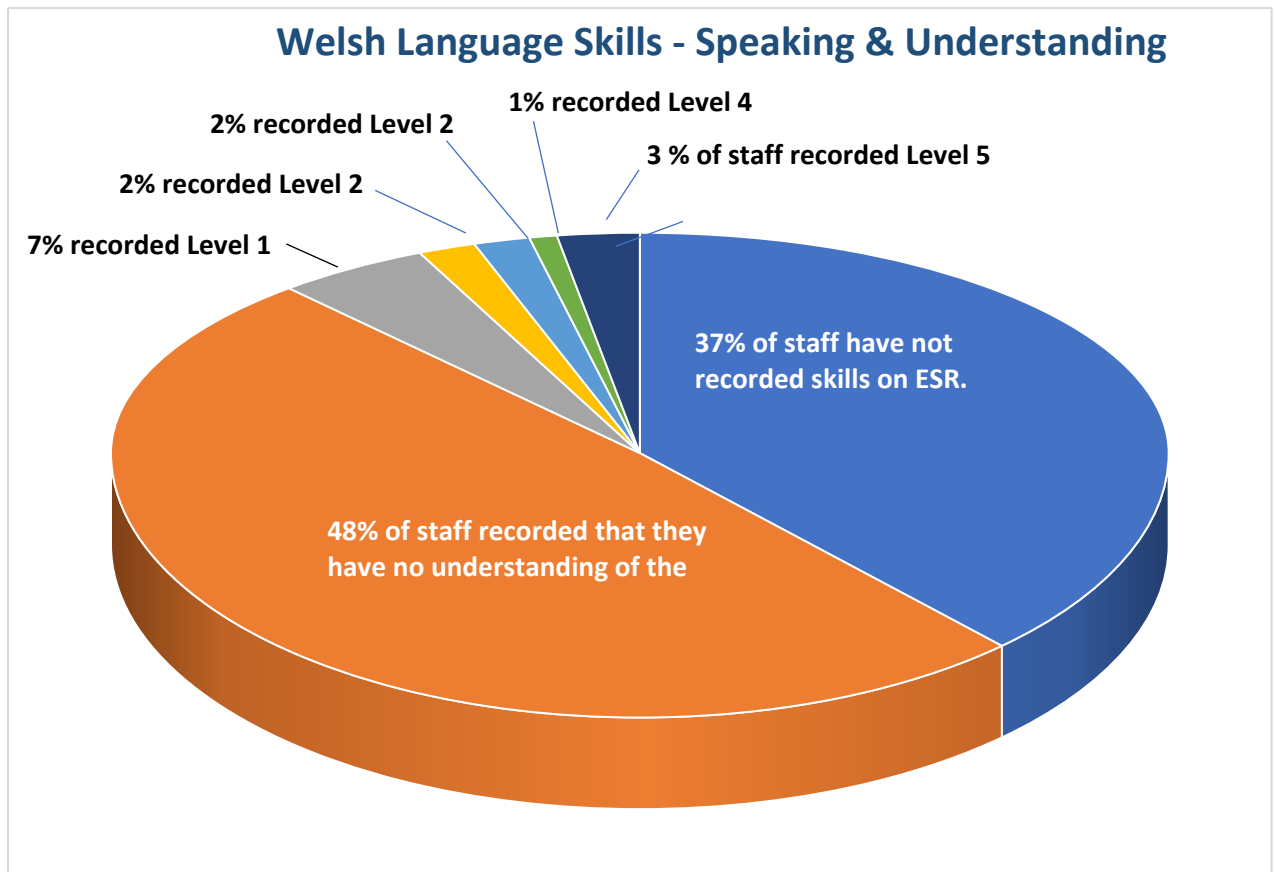
We have been addressing this by taking the following steps to improve skills recording:

- 1) Reduce the number of staff not recorded on ESR – deteriorating position due to Covid-19 mass recruitment. The Welsh Language Services Manager and the People and Organisational Development team intend to identify any gaps and reach out to managers and supervisors in order to capture the missing data.
- 2) Identify members of staff who have not recorded their skills and communicate directly with those members of staff with a 'how to' guide to record their skills on ESR.
- 3) To put in place a strategy to encourage those on level 0 to move to level 1.

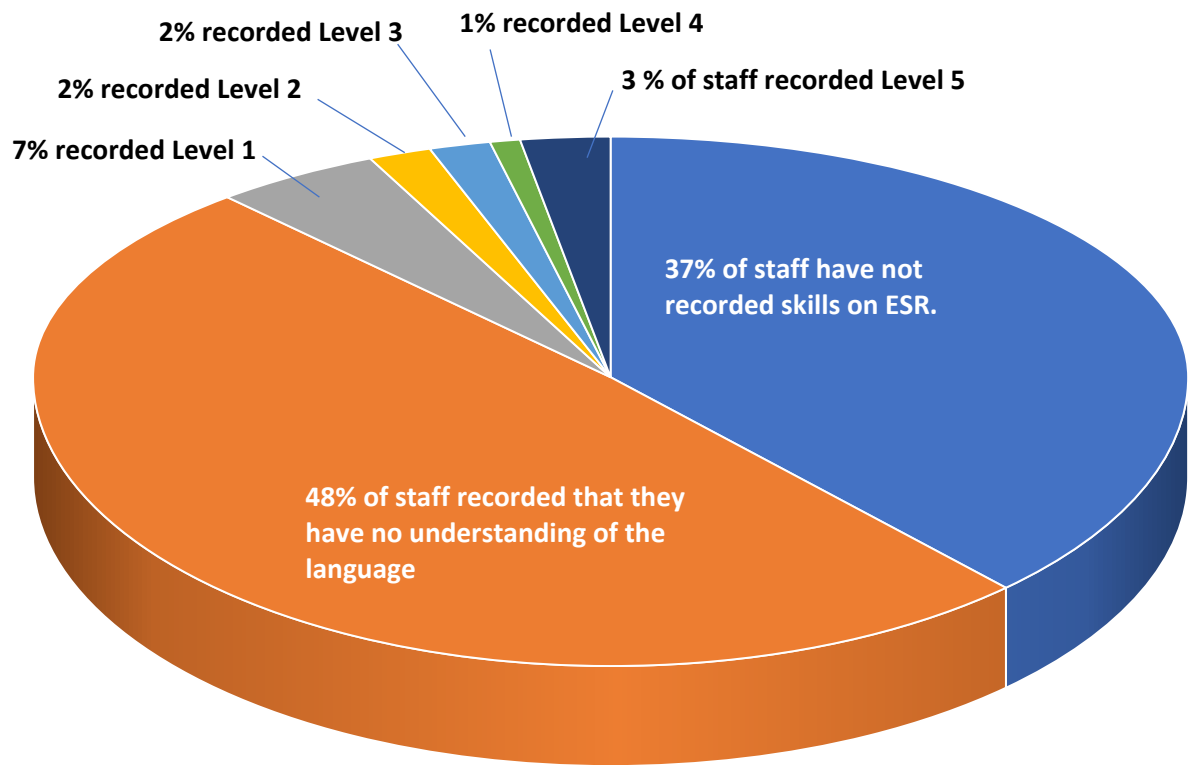
We have publicised the online taster sessions and have put on taster sessions for staff during the year to enable them to record their speaking level as Level 1.

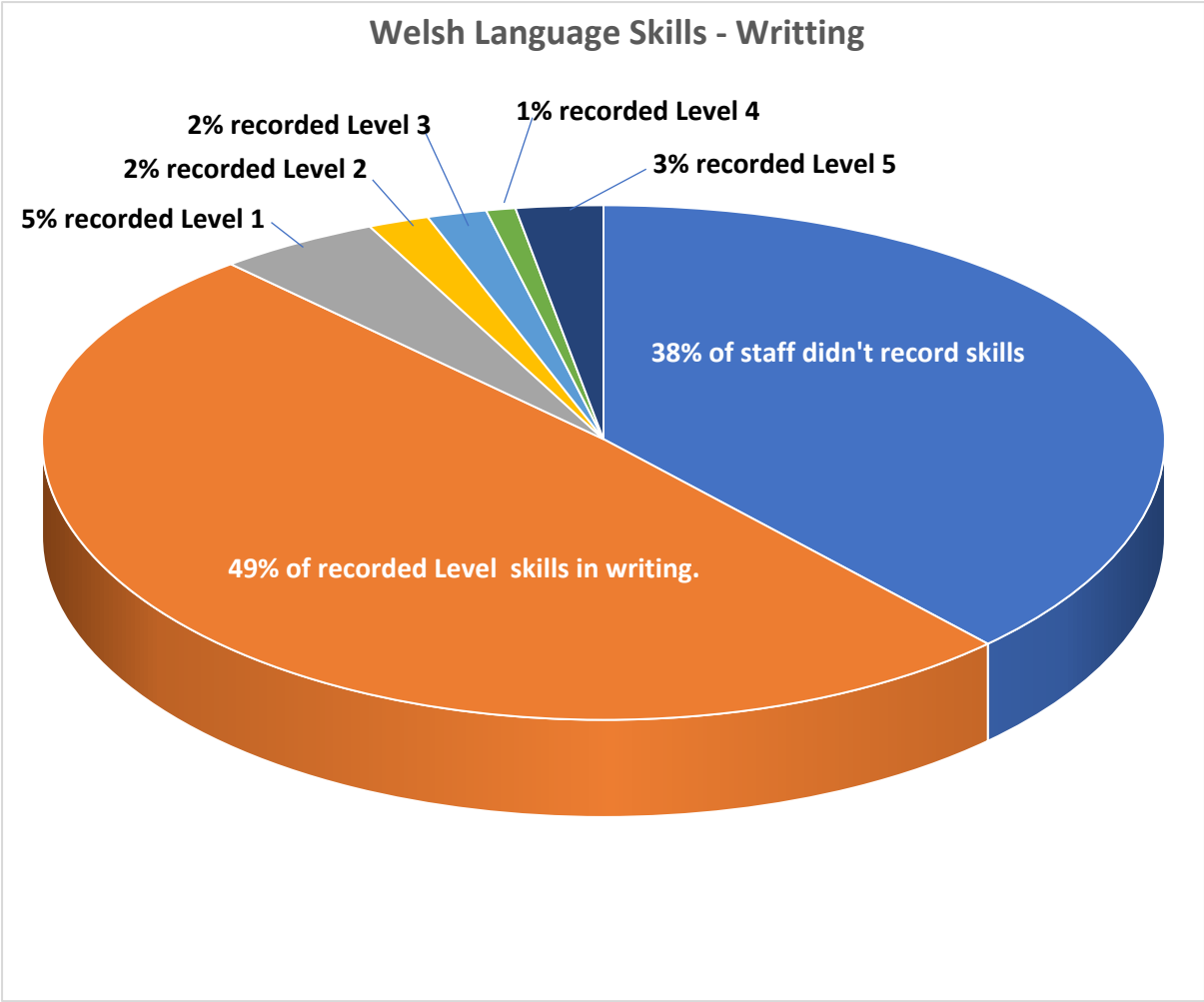
- 4) To put in place a strategy to encourage those on level 1 to move to level 2.
- 5) To put in place a strategy to encourage those on level 2 to move to level 3.

We have produced an animation in both Welsh and English to enable staff to identify the correct level to record on ESR. We've also produced a guide to help staff find where to record Welsh language skills on ESR. We've identified that the majority of staff do have level 1 speaking skills, but they have a confidence issue in terms of using the Welsh language skills that they have.



Welsh Language Skills - Reading





New and vacant posts:

The table below details posts that were advertised between 1st of April 2021 and 31st of March 2022:

Total Number of vacancies advertised 01/04/2020 to 31/03/2021	735
Total Number of vacancies advertised as Welsh Essential	8
Total Number of vacancies advertised as Welsh Desirable	682
Total Number of vacancies advertised as Welsh Needs to be Learnt	0
*Total Number of vacancies advertised as Welsh not a required skill	45

*The vacancies that were advertised as 'Welsh not a required skill' were internal vacancies for internal candidates within the organisation and had been assessed for language skills requirements.

Projects and Translation Services 2021/22:

- **Translation Support Services**

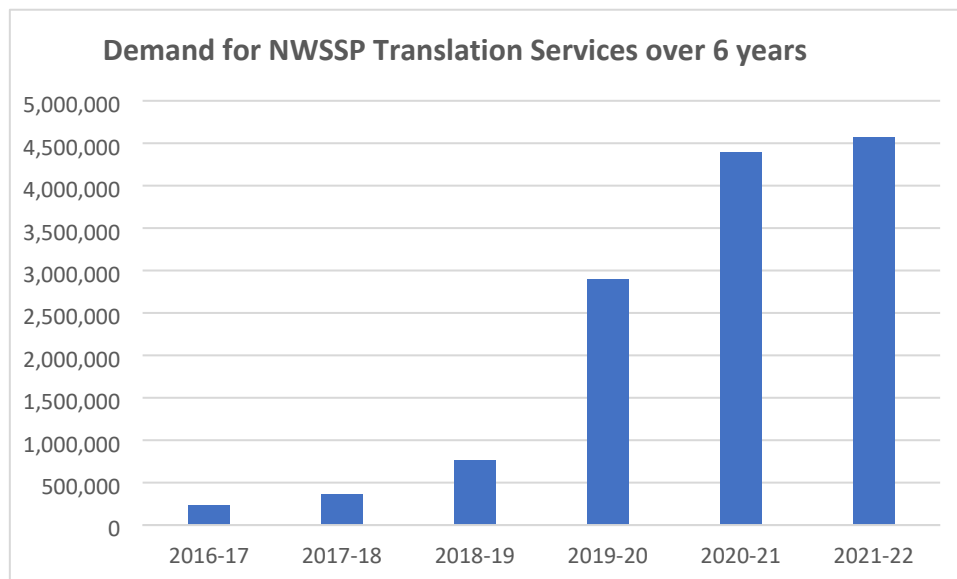
The Welsh Language Unit, in NHS Wales Shared Services Partnership have provided translation services for the following NHS organisations during 2021/22:

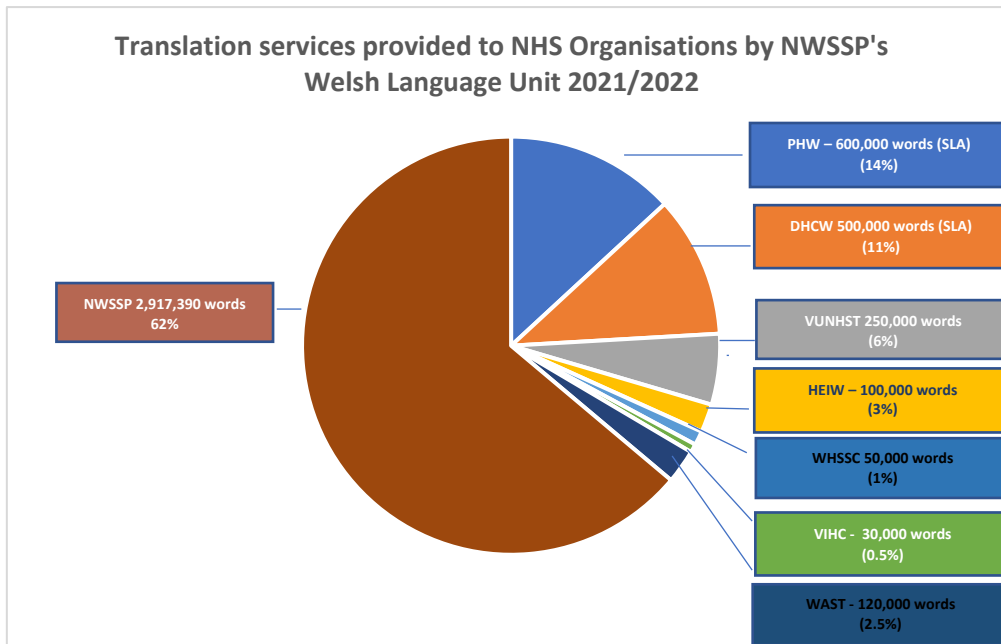
- NHS Wales Shared Services Partnership's divisions and hosted programmes
- Public Health Wales NHS Trust
- Digital Health and Care Wales
- Velindre University NHS Trust
- Health Education Improvement Wales
- Wales Ambulance Service Trust in the translation of the 111 Website
- Welsh Health Specialised Services Committee
- The All Wales Value in Health Care programme
- Supported NHS Employers in the translation of Job Descriptions and Person Specifications

Totalling over 4.5million words translated during 2021/22, through 2437 separate requests.

Over the last 6 years there has been a significant increase in the demand for Welsh Language translation services. The diagram below shows an increase of 1878.59% increase between 2016-17 and 2021-22.

We intend to invest further in our translation resources in 2022/23 which will enable us to provide further support to NHS organisations in 2023/24 onwards.





We had an a SLA in place to support PHW, DHCW and VUNHST during 2021/22 and will continue to support these organisations in 2022/23.

We took on work for WHSSC in Q3 and Q4 of the financial year to assist with enabling compliance.

We took on work for HEIW and WAST in Q4 to assist with additional translation requirements.

- ### Establishment of a Translation Bank

The NHS is facing unprecedented demand for translation services, this is in response to meeting the requirements of the Welsh language standards in the most part, but also to respond to the need/demand amongst patients and the public.

It is becoming increasingly difficult to recruit qualified and experienced translators to full-time permanent vacancies, and it is also becoming challenging to retain staff, due to the recruitment market being extremely competitive.

In order to be able to respond to this situation we've established a bank of translators who can work flexibly for us as we require their services. The bank was established in autumn 2021, and our existing arrangements are working well to date. Our approach to agile working also means that we are able to recruit translators from different parts of Wales and beyond to assist us with our ability to respond to the demand for translation services.

- ### Student Streamlining

NHS Wales Shares Services have improved the customer journey through Student Streamlining Service by ensuring that the system provides a Welsh language journey throughout the process.

We audited and reviewed our processes, automated services, and templates to ensure that there is now a seamless Welsh language offer to students engaging with our service.

As part of this project, we also translated adverts and job descriptions to enable Health Boards to be able to advertise the opportunities through the Student Streamlining programme through both the medium of Welsh and English.

- **All Wales Patient Information Leaflets**

We undertook a comprehensive audit and review of over 350 Patient Information Leaflets during 2021/22. The leaflets are given to patients as part of the consent process. The audit and review enabled us to make improvements to the language used in the leaflets, to have consistency in terminology as well as making the leaflets wholly bilingual for patients in Wales. Previously Welsh and English versions were available separately. This work will continue in 2022/23 with work being undertaken in partnership with Eido Healthcare to translate easy read versions of the leaflets.

- **ESR Portlets available in Welsh**

The Welsh Language Unit and the Workforce Information Systems team at NHS Wales Shared Services Partnership worked collaboratively with the NHS Business Services Authority and IBM on the development of Welsh Language Portlets on ESR in the autumn of 2021. This now means that the portals on ESR are available to NHS Staff in both Welsh and English in order to satisfy the requirements of Standard 81 of the Operational Standards.

- **Contact Centre Review Project**

The purpose of this review project was to audit our existing centre services, establish how our customers currently engage with us, identify improvements, and to increase and improve the self-serve element of the services we provide.

As part of this work, the Welsh language provision of services was also scrutinised, and a survey circulated to NHS staff identified that between 10% and 20% of NHS staff wished to engage with us through the medium of Welsh.

Further work will be undertaken with contact centres throughout NWSSP over the coming year, with a view to create local action plans to increase capacity within customer service/helplines to offer more of our services through the medium of Welsh.

- **TRAC Recruitment system updates**

We have continued to work with the developers of the TRAC system to ensure that the interface for the system continues to be up-to-date and consistent in both Welsh and English.

- **Informed Consent & Capacity Course for NHS Wales Staff**

The Welsh Risk Pool and the All Wales Committee have created an educational module about patient consent for NHS staff. The course's focus is on critical elements of informed consent, and we have ensured that there is a specific section on making staff aware about the importance and the right of a patient to be able to consent in their language of choice. We worked in collaboration with Betsi Cadwaladr University Health Board on the production of a video that outlines the importance of communication in the consent and capacity course for NHS clinicians across NHS Wales.

- **The Foundational Economy in Wales**

Over the course of the last two years, the focus on the ability to offer hybrid working for staff and looking closer at the foundational economy has become an important part of service planning and delivery. We are looking closer at the opportunities that the

Foundational Economy will bring and capitalise on this in order to increase our capacity in delivering bilingual services.

Priority Areas for 2022/23

- Increase capacity to train more staff in language awareness.
(We eagerly await the launch of the Welsh Government funded Welsh Language Awareness Module for ESR for NHS Staff, we are currently awaiting launch date).
- Create a Croeso Cymraeg booklet for all new members of staff to NWSSP.
- Increase interest in learning Welsh and up-skilling the workforce, targeting areas where we need to increase capacity to deliver more robust bilingual services.
- Promote a 10 hour online self-taught course to all staff scoring 0 Skills to Skill level 1.
- Review our communication plan to engage with staff across the organisation
- To become fully compliant with Standards 106A and 107A(Ch).
- A communications and training programme for recruitment managers regarding Standards 106, 106A, 107, 107A.
- Procurement of a system that will support Student Streamlining and Student Awards to offer a fully bilingual service to customers.
- A review of our Contact Centres and how we respond to customers through the medium of Welsh, with a view to increase capacity and resource to deliver more robust bilingual services.
- Continue to support NHS Organisations with translation services.
- Recruitment Identification System that will function bilingually.
- Occupational Health System that will operate with bilingual functions
- Translation of easy read patient information leaflets for Welsh Risk Pool, Health Boards and Trust from English to Welsh.
- More Than Just Words Strategy 2022 – 2027 Action Plan for NWSSP, integrated with the Welsh Language Standards.
- Capitalise on the Foundational Economy Agenda in Wales to be able to optimise our bilingual services.
- Work with the People and Organisational Development team and external stakeholders to expand on the widening access to us as an employer of choice.



Adroddiad Perfformiad Blynyddol yr Iaith Gymraeg 2021-2022 Partneriaeth Cydwasanaethau GIG Cymru

Cynnwys:

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Cyflwyniad

Dyma drydydd Adroddiad Perfformiad Blynnyddol yr Iaith Gymraeg Partneriaeth Cydwasanaethau GIG Cymru (PCGC). Mae'n adrodd ar y cyfnod rhwng 1 Ebrill 2021 a 31 Mawrth 2022.

Mae Partneriaeth Cydwasanaethau GIG Cymru yn parhau i ymrwymo i ddarparu ein gwasanaethau yn y ddwy iaith a hefyd i annog hyder wrth ddefnyddio'r Gymraeg yn y gwaith o ddydd i ddydd yn PCGC.

Roedd amgylchiadau'n parhau i fod yn heriol i ni fel sefydliad yn ystod 2021/22. Bu'r staff yn gweithio tuag at gyflawni nodau'r Partneriaeth yng nghyd-destun pandemig COVID19, a hynny wrth ddal i fyny â gweithrediadau, prosiectau a chynlluniau a gafodd eu gohirio yn ystod y flwyddyn flaenorol. Mae'n rhaid i ni barhau i adolygu ein blaenoriaethau er mwyn ystyried gofynion sefydliadau eraill y GIG, ymateb iddynt a'u cefnogi yn ystod y pandemig.

Parhaodd PCGC i weithio yn ystod cyfnod anodd a heriol drwy gydol 2021/22. Gwnaethpwyd cynlluniau, cawsant eu gweithredu'n gyflym a'u hailasesu'n ddyddiol i fodloni gofynion cyfnewidiol. Mae'r staff wedi dangos, ac yn parhau i ddangos, ymroddiad ac ymrwymiad i sicrhau bod ein defnyddwyr gwasanaeth yn derbyn eu gwasanaethau yn eu dewis iaith a bod gwasanaeth dwyieithog yn cael ei ddarparu.

Cefndir – Dyletswydd Safonau'r Gymraeg

Mae Mesur y Gymraeg (Cymru) 2011 yn sefydlu fframwaith cyfreithiol sy'n gosod dyletswydd ar Bartneriaeth Cydwasaethau GIG Cymru (PCGC) i gydymffurfio â Safonau'r Gymraeg (rhif 7) mewn perthynas â'r Gymraeg.

Mae'r safonau unigol yn egluro sut y disgwylir i ni wneud y canlynol:

- Datblygu a darparu ein gwasanaethau drwy gyfrwng y Gymraeg.
- Datblygu a gweithredu polisiau a phrotocolau sy'n cefnogi'r defnydd o'r Gymraeg.
- Sicrhau bod y Gymraeg yn cael ei hystyried a'i hymgorffori yn ein cynlluniau gweithredol.
- Adrodd ar ein perfformiad yn flynyddol.

Rhennir y Safonau Iaith yn bum maes penodol:

- darparu gwasanaethau
- llunio polisi
- safonau gweithredu
- cadw cofnodion

Fel sefydliad a letyir gan Ymddiriedolaeth GIG Felindre, derbyniodd PCGC hysbysiad cydymffurfio gan Gomisiynydd y Gymraeg o dan Adran 4 o Fesur y Gymraeg (Cymru) 2011, ar 30 Mai 2019. Mae'r hysbysiad hwn yn nodi'r union safonau y mae'n ofynnol i PCGC gydymffurfio â nhw.

Dyma drydydd Adroddiad Blynyddol yr Iaith Gymraeg a gyhoeddir gan Bartneriaeth Cydwasaethau GIG Cymru.

Rydym yn hynod falch o'r hyn yr ydym wedi'i gyflawni yn ystod 2021/22. Rydym wedi gallu addasu ein cynlluniau i gwrdd ag amgylchiadau cyfnewidiol pandemig Covid-19. Parhaodd y mwyafrif o'n gwasanaethau i gael eu darparu drwy gyfrwng y Gymraeg, er bod staff yn gweithio o gartref. Bu'n rhaid blaenoriaethu ac ail-ffocysu ein hadnoddau i fynd i'r afael â'r heriau a wynebom fel sefydliad a'r GIG ehangach yng Nghymru yn sgil y pandemig. Mae'r flwyddyn i ddod yn parhau i fod yn ansicr ac yn ddi-os bydd yn dod â heriau pellach. Rydym yn bwriadu cadw model gweithio ystwyth fel rhan o'n cynlluniau ar gyfer y dyfodol ac mae'r Gymraeg wrth galon y cynlluniau hynny.

Atebolrwydd a Chymorth

Ochr yn ochr â Rheolwr Gwasanaethau'r Gymraeg, y Cyfarwyddwr Pobl a Datblygu Sefydliadol yw arweinydd gweithredol y Gymraeg yn PCGC.

Mae rhwydwaith o Gydlynwyr Iaith Gymraeg ym mhob isadran sy'n gweithio'n agos gyda'r Uned Iaith Gymraeg a'r Tîm Cyfieithu i ddarparu cyngor, arweiniad a chefnogaeth ynghylch Safonau'r Gymraeg a hyrwyddo'r defnydd o'r Gymraeg yn fewnol.

Mae gennym hefyd dîm o Gyfieithwyr yn PCGC i'n cefnogi ni fel sefydliad i ddarparu gwasanaethau Cymraeg yn ogystal â chefnogi sefydliadau eraill y GIG. Yn ystod y flwyddyn hon, rydym hefyd wedi sefydlu banc o gyfieithwyr er mwyn darparu ein gwasanaethau cyfieithu i sylfaen ehangach o gleientiaid yn GIG Cymru.

Safonau Cyflenwi Gwasanaethau

Rydym wedi parhau i gydymffurfio â'r safonau cyflenwi gwasanaethau yn ystod y flwyddyn yn sgil heriau'r pandemig.

- Gohebiaeth Ysgrifenedig (Safonau 1 – 7)
- Gwasanaethau Ffôn (Safonau 8 – 20)
- Cyfarfodydd a Digwyddiadau (Safonau 21 – 33)
- Creu a Chyhoeddi Dogfennau (Safonau 34 – 38)
- Y Wefan, Cyfryngau Cymdeithasol, Apiau (Safonau 39 – 46)
- Arwyddion (Safonau 47- 49)
- Gwasanaethau'r Dderbynfa (Safonau 50 – 53)
- Caffael a Chontractau (Safonau 57 – 59)
- Cyfathrebu a Hunaniaeth Gorfforaethol (Safonau 60 – 62)
- Systemau Annerch Cyhoeddus – (Safon 64)

Mae nifer o ganllawiau wedi'u cyhoeddi a'u hadolygu/diweddaru sy'n amlinellu'r gofynion mewn perthynas â chydymffurfio â'r Safonau ar gyfer staff. Mae'r canllawiau ar gael ar ein tudalen cymorth Cymraeg ar y fewnwyd. Mae rheolwyr yn ymwybodol bod y canllawiau ar gael ac yn parhau i gynghori eu timau i ymglyfarwyddo â'r wybodaeth a'r arweiniad sydd ar gael iddynt. Mae'r Canllawiau'n cynnwys:

- Protocol ar ohebiaeth ysgrifenedig
- Protocol ar gyfer ateb y ffôn yn ddwyieithog ac ymdrin â'r galwadau Cymraeg a dderbynnir
- Canllaw i staff y derbynfeydd ar gyfer croesawu ymwelwyr i'n hadeiladau/swyddfeydd ledled Cymru
- Protocol ar drefnu a chynnal cyfarfodydd a chyfarfodydd cyhoeddus yn ddwyieithog
- Ysgrifennu yn Gymraeg – ymadroddion defnyddiol
- Templedi – arwyddion, ffurflenni ac ati
- Canllawiau ar gyfer ysgrifennu cynnwys ar gyfer y we a defnyddio'r cyfryngau cymdeithasol
- Canllawiau ar gyfer arwyddion a systemau annerch cyhoeddus
- Cyfathrebiadau a hunaniaeth gorfforaethol
- Ystyriaethau'r Gymraeg wrth gyhoeddi dogfennau caffael a manylebau tendrau sy'n manylu ar rwymedigaethau cytundebol ar contractio/is-contractio gwasanaethau ar ran GIG Cymru.

Cyfathrebir â staff ar draws y sefydliad yn gyson am Safonau'r Gymraeg, pwysigrwydd cynnig gwasanaeth Cymraeg a pharchu dewis y cwsmer. Cyfeirir staff at dudalen cymorth iaith Gymraeg y fewnwyd i gael yr wybodaeth hon.

Ers cyflwyno Safonau'r Gymraeg, mae'r galw ar ein tîm cyfieithu wedi parhau i gynyddu, ac ni fu 2020/21 yn eithriad.

Mae'r galw am ein gwasanaethau cyfieithu yn cynyddu i lefelau digynsail, ac wedi bod yn fwy nag erioed. Mae hyn wedi sicrhau bod cyfathrebiadau sy'n gysylltiedig yn uniongyrchol â'r pandemig wedi bod ar gael gan Bartneriaeth Cydwasanaethau GIG Cymru. Rydym hefyd wedi bod yn cefnogi sefydliadau eraill y GIG i gyfathrebu'n effeithiol â'r cyhoedd a chleifion yn uniongyrchol am Covid-19 drwy gyfrwng y Gymraeg.

Cwynion/Pryderon a dderbyniwyd ynghylch gwasanaethau:

Derbyniwyd cwyn drwy swyddfa Comisiynydd y Gymraeg ym mis Ebrill 2021, am y diffyg gwasanaethau Cymraeg yn is-adran y gyflogres.

Yn dilyn ymchwiliad mewnol, sicrhawyd bod yr holl staff yn ymwybodol bod protocol yn ei le i ymateb i ymholiadau a dderbynnir trwy gyfrwng y Gymraeg a bod yn rhaid i bob aelod o staff ddilyn y protocol hwnnw.

Rhodddwyd hyfforddiant ychwanegol i holl staff y Gyflogres ar draws ein swyddfeydd yng ngogledd, de-ddwyrain a de-orllewin Cymru.

Gwnaethom hysbysu Swyddfa'r Comisiynydd ar y camau yr oeddem yn eu cymryd i fynd i'r afael â'r gŵyn ac ni fu angen i Swyddfa'r Comisiynydd gynnal ymchwiliad pellach bryd hynny.

Safonau Llundio Polisi

Darperir holl bolisiau PCGC gan Ymddiriedolaeth GIG Felindre.

Mae'n ofynnol i unrhyw brotocolau a ddatblygwn yn lleol gael asesiad cynhwysfawr o'u heffaith ar gydraddoldeb. Mae hyn yn rhoi'r cyfle i gyfeirio'n benodol at y Gymraeg, pan fyddai'r protocol yn dylanwadu ar y defnydd o'r Gymraeg fel rhan o ddarpariaeth gwasanaeth y sefydliad. Mae'r Gymraeg wedi'i gwreiddio yn y broses o wneud penderfyniadau ar draws y sefydliad. Mae Rheolwr Gwasanaethau'r Gymraeg yn cysylltu â'r Rheolwr Gwasanaethau Corfforaethol mewn perthynas â phrotocolau ac Aseidiadau o'r Effaith ar Gydraddoldeb ar gyfer cynigion i ddatblygu gwasanaethau.

Rydym wedi sicrhau bod yr holl ddogfennau perthnasol sy'n ymwneud â chyflogaeth ar gael trwy gyfrwng y Gymraeg. Anfonir cytundebau cyflogaeth at staff yn Gymraeg ac yn Saesneg. Cynhaliwyd adolygiad o holl ddogfennau Pobl a Datblygu Sefydliadol yn ystod 2021-22, ac mae pob dogfen yn cydymffurfio â gofynion Safonau'r Gymraeg.

Safonau Gweithredol:

Gweinyddu Mewnol (Safonau 79 – 82)

Cwynion (Safonau 83 – 85)

Achosion Disgyblu (Safonau 86 – 88)

Technoleg Gwybodaeth, y Fewnrwyd ac Apiau (89 – 95)

Datblygu Sgiliau Iaith Gymraeg (Safonau 96 – 105)

Recriwtio a Phenodi (Safonau 106 – 109)

Arwyddion a Hysbysiadau yn y Gweithle (Safonau 111 – 113)

Gweinyddu mewnol:

Fel y soniwyd eisoes, mae tudalennau dynodedig ar dudalen fewnrwyd y sefydliad ar y defnydd mewnol o'r Gymraeg y gall staff eu darllen i hyrwyddo a chynyddu'r defnydd o'r Gymraeg yn y gwaith.

Mae dogfennau sy'n ymwneud â chyflogi staff yn ogystal â dogfennau megis gosod amcanion perfformiad, a dogfennau cynllunio gyrfya ar gael yn ddwyieithog. Mae polisiau Cymru Gyfan megis Ymddygiad yn y Gweithle, Absenoldeb o'r Gwaith ac Iechyd a Llesiant yn y Gwaith ar gael yn Gymraeg ac yn Saesneg ac maent wedi'u cyhoeddi ar y fewnrwyd. Mae Rheolwr Gwasanaethau'r

Gymraeg wedi bod yn cefnogi Cyflogwyr GIG Cymru ar faterion dwyieithog a chymorth cyfieithu ar gyfer polisiau Cymru Gyfan.

Technoleg, Mewnwyd ac Apiau.

Mae'r tudalennau mewnwyd a amlinellir yn ein hysbysiad cydymffurfio ar gael yn Gymraeg. Mae tudalen cymorth iaith Gymraeg y gall staff gael mynediad iddi ar ein safle mewnwyd. Cynhelir adolygiad o'r tudalennau Pobl a Datblygiad Sefydliadol yn 2022/23 i sicrhau bod unrhyw bolisiau newydd/polisiau sydd wedi cael eu hadolygu ar gael drwy gyfrwng y Gymraeg.

Mae Cysgliad ar gael i'r holl staff ei lawrlwytho i'w cyfrifiaduron/gliniaduron a gall y sawl sy'n dysgu'r Gymraeg neu aelodau staff sy'n llai hyderus wrth ddefnyddio'r iaith ei ddefnyddio hefyd.

Rydym yn diweddarau staff yn barhaus am unrhyw apiau sydd ar gael iddynt i'w cefnogi i ddefnyddio'r Gymraeg yn y gwaith yn ddyddiol.

TRAC/NHS Jobs 3

Rydym yn parhau i ddiweddarau'r rhyngwynebau, dogfennau, hysbysadau a ffurflenni ar system recriwtio TRAC, y System Dyfarniadau Myfyrwyr, y System Symleiddio i Fyfrwyr a System GPWales. Lansiodd NHS Jobs3 yn ystod 2021/22 ac fe'i lansiodd yn llwyddiannus yn y ddwy iaith ar yr un pryd.

ESR – Cofnod Staff Electronig

ESR yw'r Cofnod Staff Electronig sy'n rheoli gwyliau blynyddol, tâl, absenoldeb salwch a hyfforddiant staff ar draws GIG Cymru. Mae gan GIG Cymru gyfran o 6% yn y Cofnod Staff Electronig ar draws y DU. Mae'n dechnegol heriol i gyfieithu'r system ESR gyfan sydd ohoni, a ddatblygwyd yn wreiddiol i reoli taliadau'r gyflogres, gan ei bod wedi cael ei hystmyn gymaint.

Fodd bynnag, yn hydref 2021, gweithiodd Systemau Gwybodaeth y Gweithlu PCGC ac Uned y Gymraeg ar y cyd ag Awdurdod Busnes y GIG ac IBM i gyfieithu pyrth ESR, drwy roi croen dros y pyrth presennol. Mae'n bleser gennym adrodd bod Byrddau Iechyd ac Ymddiriedolaethau wedi croesawu'r datblygiad hwn.

Hyfforddiant a Dysgu'r Gymraeg yn y Gweithle:

Yn ystod 2021/2022, fe wnaethom recriwtio 110 o staff i swyddi gwag yn PCGC. Mae pob aelod newydd o staff wedi derbyn sesiwn Ymsefydlu Corfforaethol, sy'n cynnwys hyfforddiant ymwybyddiaeth o'r Gymraeg. Bellach, darperir hyfforddiant ar ddau blatfform, sef TEAMS neu Zoom.

Defnyddir y platfform Microsoft Teams ar gyfer rhoi hyfforddiant ynglŷn a'r Gymraeg ac ar gyfer dysgu'r Gymraeg yn y gweithle. Mae'r platfform hwn wedi galluogi staff i ymrwymo i gwblhau'r cwrs yn llawer haws ac wedi hwyluso dysgu'r Gymraeg yn sylweddol. Mae hefyd wedi galluogi tiwtoriaid i recordio sesiynau fel y gall staff ailymweld â'r hyn a ddysgwyd a'r dosbarthiadau nad oedd modd iddynt fod yn bresennol ynddynt. Mae cyfraddau presenoldeb a chadw staff wedi gwella, oherwydd bod y cyrsiau ar gael ar-lein. Fodd bynnag, mae blaenoriaethu'r llwyth gwaith yn parhau i fod yn heriol i reolwyr a staff.

Cynigwyd y cyrsiau canlynol i staff yn ystod 2021/22:

- 2 gwrs 30 wythnos Lefel Mynediad 1 Mynychodd 32 aelod o staff
- 1 cwrs 30 wythnos Lefel Mynediad 2 Mynychodd 6 aelod o staff
- 1 cwrs 30 wythnos Lefel Sylfaen 2 Mynychodd 6 aelod o staff
- Cwrs Lefel Canolradd 30 wythnos. 10 aelod o staff
- Cwrs Lefel Uwch 30 wythnos. 8 aelod o staff.

Yn ogystal â'r cyrsiau prif ffrwd hyn, rydym wedi cynnig y cyfle i staff gwrdd â'i gilydd a defnyddio ac ymarfer eu sgiliau Cymraeg mewn sesiynau Clybiau Clonc er mwyn cefnogi staff sy'n dysgu Cymraeg neu staff sydd eisiau gwella eu hyder wrth ddefnyddio'r Gymraeg. Rydym wedi cynnal nifer o'r sesiynau hynny ar bob lefel yn ystod y flwyddyn a daeth 52 aelod o staff i'r sesiynau hynny.

Rydym hefyd wedi ymateb i staff sy'n dymuno dysgu Cymraeg yn eu hamser eu hunain a'u cefnogi, gan eu galluogi i fynychu cyrsiau Cymraeg yn y gymuned y tu allan i oriau gwaith, gan fod y trefniant hwn yn haws i'r aelodau hyn o staff na dysgu'r Gymraeg yn ystod oriau gwaith.

Rydym yn cydnabod pwysigrwydd cynnig hyblygrwydd i'n staff ddysgu'r Gymraeg a'i gwneud yn hygyrch ac yn hawdd ei chyrraedd. Mae gennym nifer o staff sy'n dymuno dysgu ymadroddion ymarferol sylfaenol ac rydym wedi teilwra sesiynau i gwmpasu'r meysydd canlynol ac wedi darparu cyfleoedd dysgu i nifer o staff drwy ddarparu'r canlynol:

- 10 cwrs Blasu'r Gymraeg yn ystod y flwyddyn (cyrsiau 2 awr untro) bu 37 aelod o staff yn bresennol.
- 6 chwrs untro dwy awr o hyd ar Agor/Cau a chadeirio cyfarfodydd yn y Gymraeg. Bu 42 aelod o staff yn bresennol.
- 6 chwrs cyfarch a chroesawu untro 2 awr o hyd i 22 aelod o staff

Rydym yn hyrwyddo'n rheolaidd y cyfleoedd i ddysgu Cymraeg i'n holl staff ar draws pob safle. Rydym hefyd yn hyrwyddo'n gyson gyfleoedd i ddefnyddio'r Gymraeg yn y gwaith ac yn gymdeithasol mewn cymunedau lleol.

Recriwtio a phenodi staff

Yn ystod rhan olaf 2021/22 rydym wedi cynnal ymgynghoriad ar brotocol lleol ar hysbysebu, recriwtio a phenodi staff. Gwnaed y darn sylweddol hwn o waith gyda rhanddeiliaid o'r Gyfarwyddiaeth Pobl a Datblygu Sefydliadol, Gwasanaethau Cyflogaeth ac Uned Iaith Gymraeg PCGC.

Bydd y protocol yn cael ei lansio yn ystod chwarter cyntaf 2022/23, pan fydd holl swyddi gwag PCGC yn cael eu hysbysebu'n ddwyieithog. Bydd hyn yn ein galluogi i gydymffurfio â Safonau 106, 106A, 107 a 107A.

Safonau Cadw Cofnodion:

Sgiliau Cymraeg ar draws y Gweithlu:

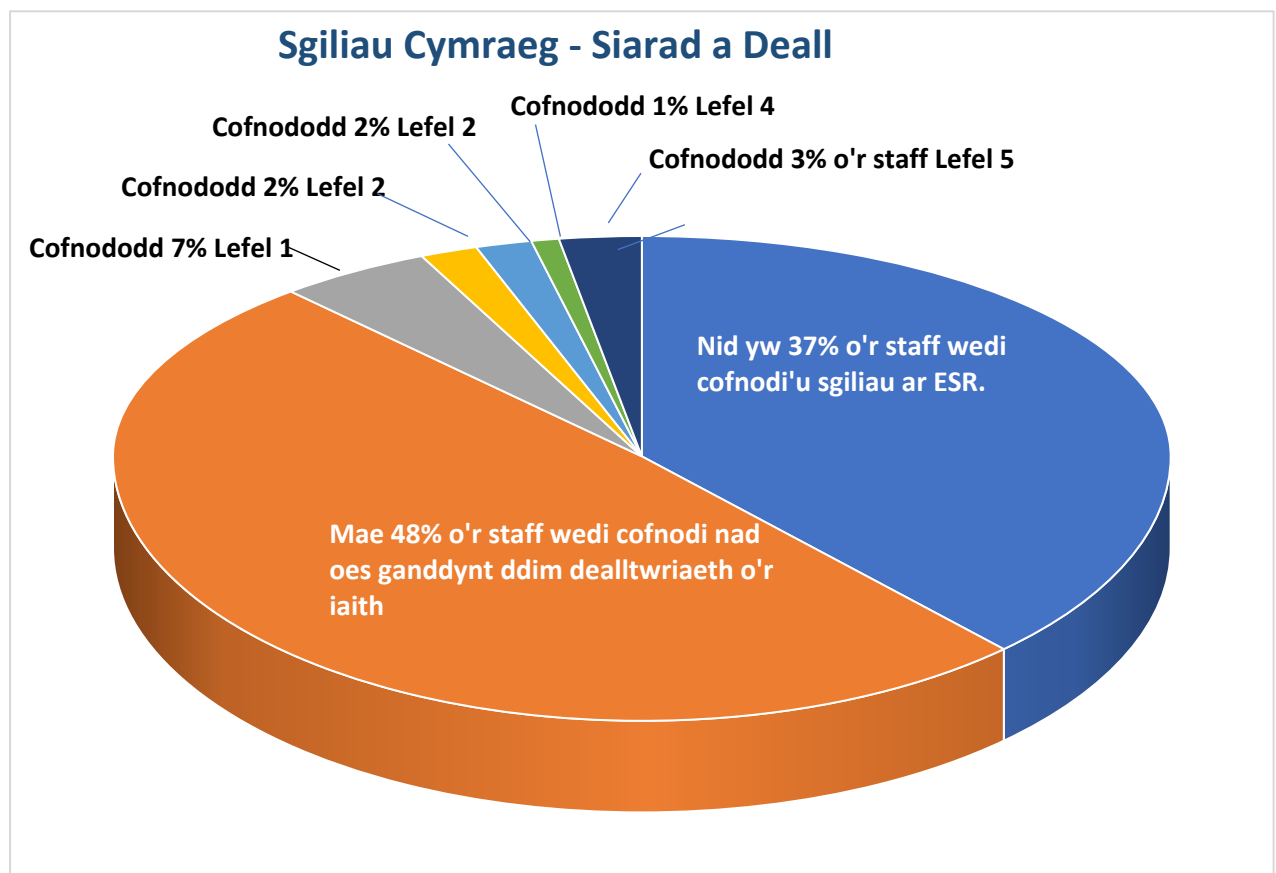
Mae'n ofynnol i bob aelod o staff gwblhau asesiad sgiliau iaith Gymraeg ar blatfform y cofnod staff electronig. Gwelsom ostyngiad yn nifer y staff a gofnododd eu sgiliau yn ystod y flwyddyn 2020/21.

Roedd hyn yn bennaf oherwydd y pandemig, ac oherwydd bod staff yn gweithio gartref a sefydlu'r rhaglen Un Cyflogwr Arweiniol.

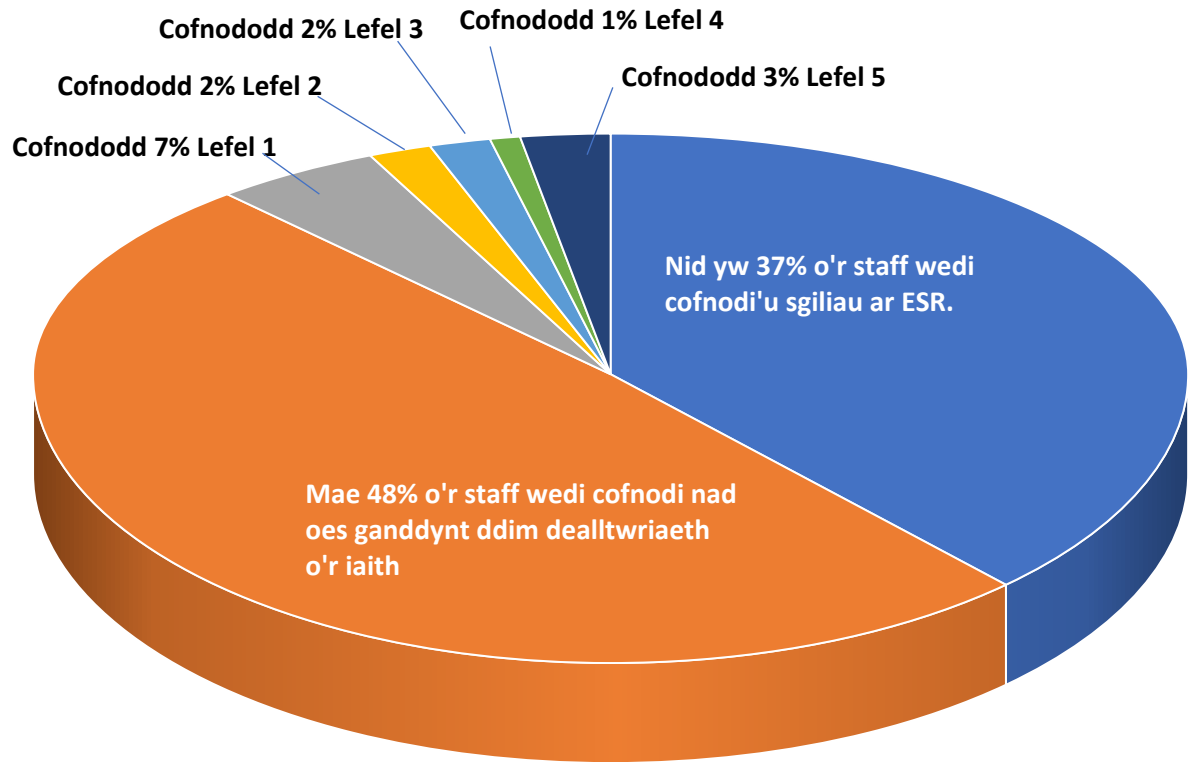
Rydym wedi bod yn mynd i'r afael â hyn drwy gymryd y camau canlynol i wella cofnodi sgiliau:

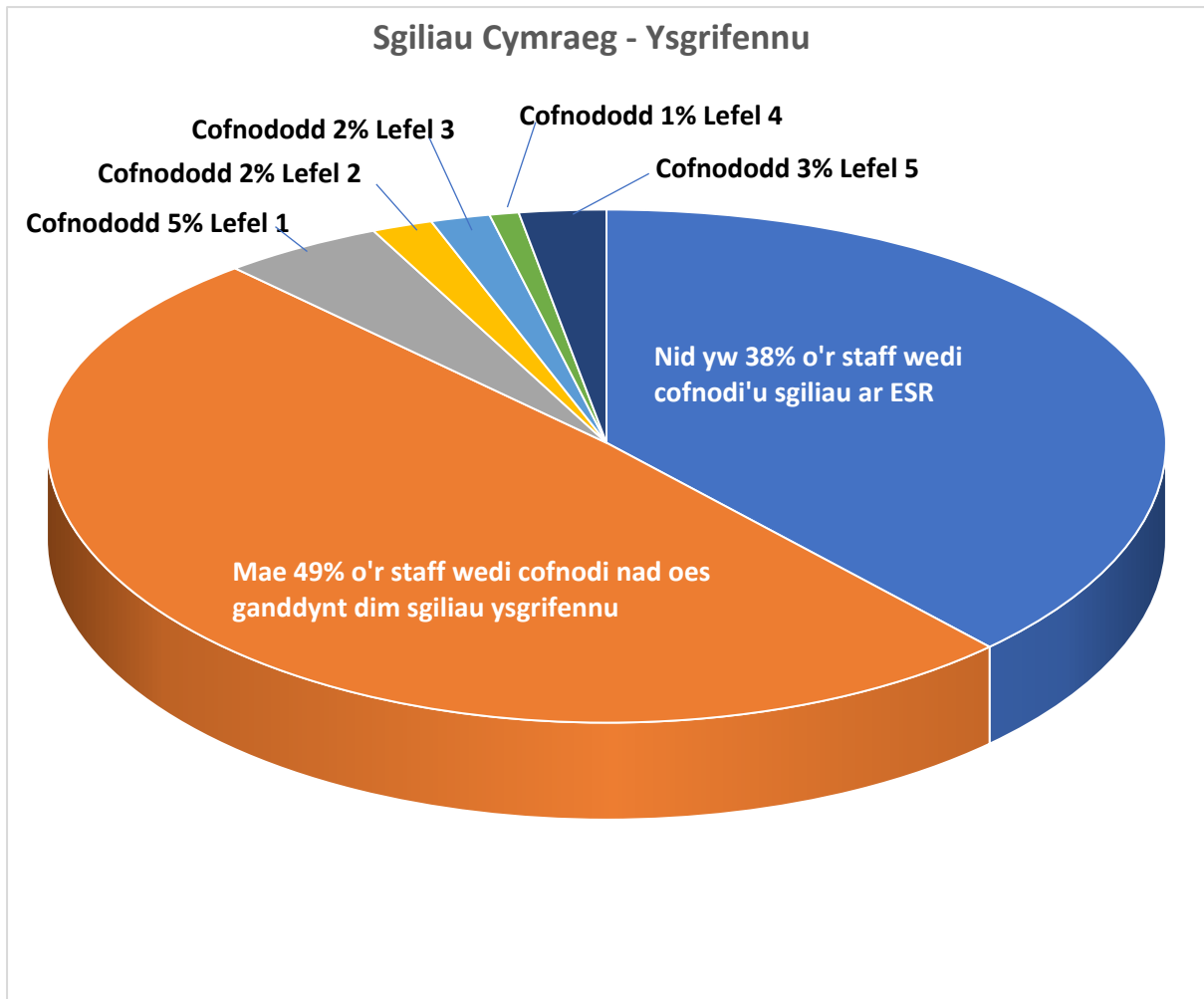
- 1) Lleihau nifer y staff nad ydynt wedi'u cofnodi ar yr ESR - sefyllfa sy'n gwaethygu o ganlyniad i'r recriwtio torfol a wnaed oherwydd Covid-19. Mae Rheolwr Gwasanaethau'r Gymraeg a'r tîm Pobl a Datblygu Sefydliadol yn bwriadu nodi unrhyw fylchau ac estyn allan at reolwyr a goruchwylwyr er mwyn casglu'r data sydd ar goll.
- 2) Nodi aelodau o staff nad ydynt wedi cofnodi eu sgiliau a chyfathrebu'n uniongyrchol â'r aelodau hynny o staff gan roi canllawiau iddynt allu cofnodi eu sgiliau ar ESR.
- 3) Rhoi strategaeth ar waith i annog y rhai sydd ar lefel 0 i symud i lefel 1.
Rydym wedi rhoi cyhoeddusrwydd i'r sesiynau blasu ar-lein ac wedi cynnal sesiynau blasu ar gyfer staff yn ystod y flwyddyn i'w galluogi i gofnodi bod ganddynt Gymraeg Lefel 1.
- 4) Rhoi strategaeth ar waith i annog y rhai ar lefel 1 i symud i lefel 2.
- 5) Rhoi strategaeth ar waith i annog y rhai ar lefel 2 i symud i lefel 3.

Rydym wedi creu animeiddiad yn y Gymraeg a'r Saesneg i alluogi staff i ddewis eu lefel yn gywir a'i chofnodi ar ESR. Rydym hefyd wedi creu canllaw i helpu staff i ddod o hyd i'r man iawn i gofnodi eu sgiliau Cymraeg ar ESR. Rydym wedi nodi bod gan fwyafrif y staff sgiliau siarad lefel 1, ond nid oes ganddynt ddigon o hyder i ddefnyddio'r sgiliau Cymraeg sydd ganddynt.



Sgiliau Cymraeg - Darllen





Swyddi newydd a gwag:

Mae'r tabl isod yn manylu ar y swyddi a hysbysebwyd rhwng 1 Ebrill 2021 a 31 Mawrth 2022:

Cyfanswm nifer y swyddi gwag a hysbysebwyd 01/04/2020 hyd at 31/03/2021	735
Cyfanswm nifer y swyddi gwag a hysbysebwyd fel rhai Cymraeg yn Hanfodol	8
Cyfanswm nifer y swyddi gwag a hysbysebwyd fel Cymraeg yn Ddymunol	682
Cyfanswm nifer y swyddi gwag a hysbysebwyd fel Angen Dysgu Cymraeg	0
*Cyfanswm nifer y swyddi gwag a hysbysebwyd fel rhai Cymraeg ddim yn sgil gofynnol	45

*Roedd y swyddi gwag a hysbysebwyd fel 'Cymraeg ddim yn sgil gofynnol' yn swyddi gwag mewnol ar gyfer ymgeiswyr mewnol o fewn y sefydliad ac roeddent wedi eu hasesu ar gyfer gofynion sgiliau iaith.

Prosiectau a Gwasanaethau Cyfieithu 2021/22:

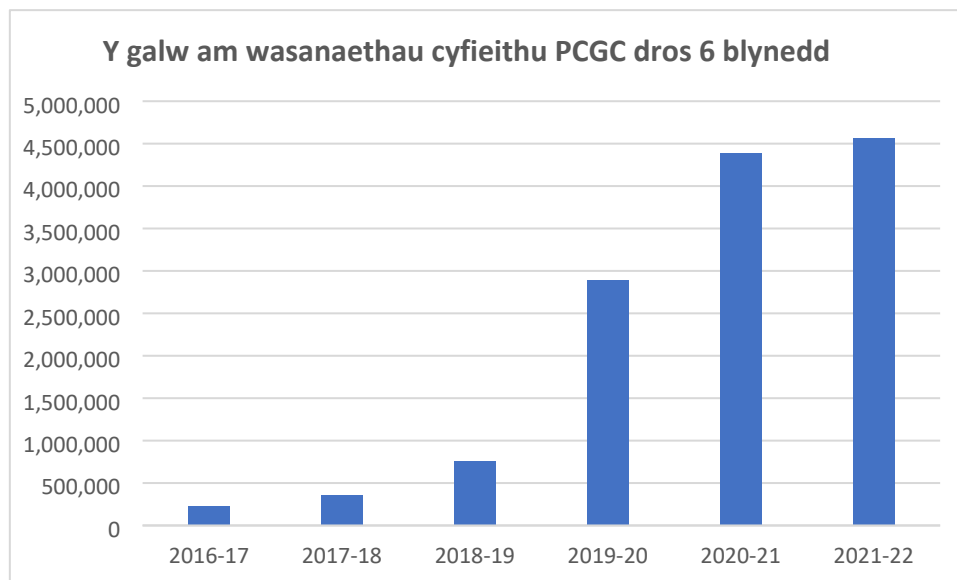
- **Gwasanaethau Cymorth Cyfieithu**

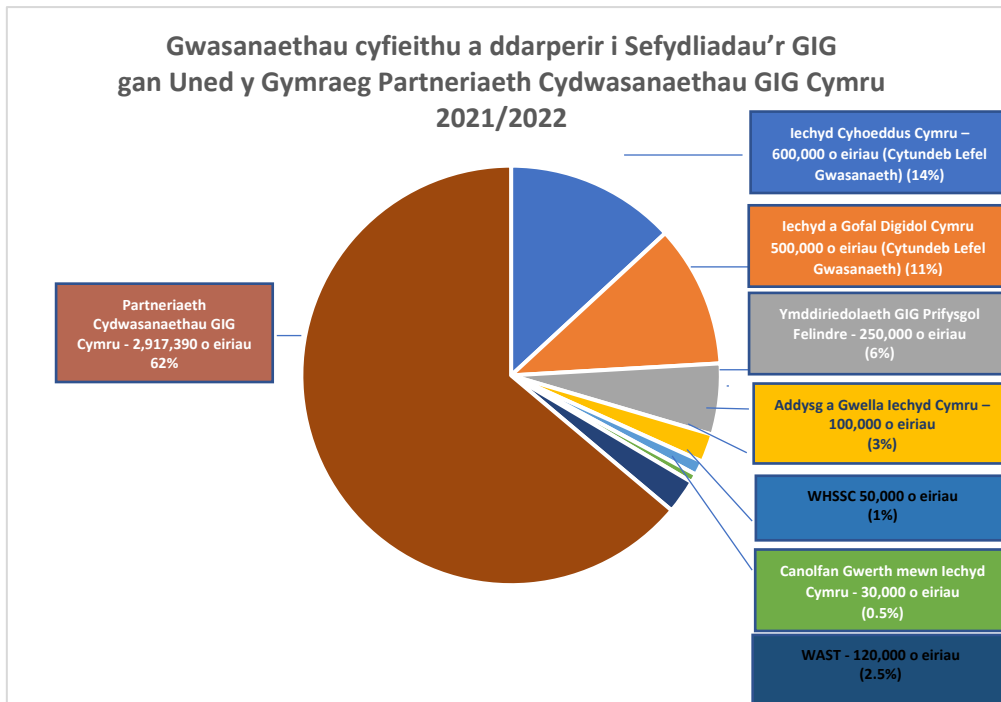
Mae Uned y Gymraeg Partneriaeth Cydwasaethau GIG Cymru wedi darparu gwasanaethau cyfieithu ar gyfer y sefydliadau GIG canlynol yn ystod 2021/22:

- Is-adrannau a rhaglenni a letyir gan Bartneriaeth Cydwasaethau GIG Cymru
- Ymddiriedolaeth GIG Iechyd Cyhoeddus Cymru
- Iechyd a Gofal Digidol Cymru
- Ymddiriedolaeth GIG Prifysgol Felindre
- Addysg a Gwella Iechyd Cymru
- Ymddiriedolaeth Gwasanaeth Ambiwlans Cymru o ran cyfieithu Gwefan 111
- Pwyllgor Gwasanaethau Iechyd Arbenigol Cymru
- Rhaglen Gwerth mewn Gofal Iechyd Cymru
- Cefnogwyd Cyflogwyr y GIG i gyfieithu Swydd-ddisgrifiadau a Manylebau'r Person Cyfieithwyd cyfanswm o dros 4.5 miliwn o eiriau yn ystod 2021/22, a ddaeth i law drwy 2,437 o geisiadau ar wahân.

Dros y 6 blynedd diwethaf, bu cynnydd sylweddol yn y galw am wasanaethau cyfieithu Cymraeg. Mae'r diagram isod yn dangos cynnydd o 1878.59% rhwng 2016-17 a 2021-22.

Rydym yn bwriadu buddsoddi ymhellach yn ein hadnoddau cyfieithu yn ystod 2022/23 a fydd yn ein galluogi i ddarparu cymorth pellach i sefydliadau'r GIG yn 2023/24 ymlaen.





Roedd gennym ni Gytundeb Lefel Gwasanaeth ar waith i gefnogi Iechyd Cyhoeddus Cymru, Iechyd a Gofal Digidol Cymru ac Ymddiriedolaeth GIG Prifysgol Felindre yn ystod 2021/22 a byddwn yn parhau i gefnogi'r sefydliadau hyn yn ystod 2022/23.

Gwnaethom ymgymryd â gwaith i Bwyllgor Gwasanaethau Iechyd Arbenigol Cymru yn ystod chwarter 3 a chwarter 4 y flwyddyn ariannol i'w helpu i gydymffurfio.

Gwnaethom dderbyn gwaith gan Addysg a Gwella Iechyd Cymru ac Ymddiriedolaeth GIG Gwasanaeth Ambiwlans Cymru yn ystod chwarter 4 i'w cynorthwyo gyda'u gofynion cyfieithu ychwanegol.

- **Sefydlu Banc Cyfieithu**

Mae'r GIG yn wynebu galw digynsail am wasanaethau cyfieithu. Mae hyn mewn ymateb i fodloni gofynion Safonau'r Gymraeg yn bennaf, ond hefyd i ymateb i'r angen/galw ymysg cleifion a'r cyhoedd.

Mae'n dod yn fwyfwy anodd recriwtio cyfieithwyr cymwys a phrofiadol i swyddi gwag parhaol llawn amser, ac mae cadw staff yn mynd yn heriol hefyd, oherwydd bod y farchnad recriwtio yn hynod gystadleuol.

Er mwyn gallu ymateb i'r sefyllfa hon rydym wedi sefydlu banc o gyfieithwyr sy'n gallu gweithio'n hyblyg i ni wrth i ni fod angen eu gwasanaeth. Sefydlwyd y banc yn hydref 2021, ac mae ein trefniadau presennol yn gweithio'n dda hyd yma. Mae ein dull o weithio'n ystwyth hefyd yn golygu y gallwn recriwtio cyfieithwyr o wahanol rannau o Gymru a thu hwnt i'n cynorthwyo gyda'n gallu i ymateb i'r galw am wasanaethau cyfieithu.

- **Y Cynllun Symleiddio i Fyfyrrwyr**

Mae Partneriaeth Cydwasanaethau GIG Cymru wedi gwella taith y cwsmer drwy Wasanaeth Symleiddio i Fyfyrrwyr drwy sicrhau bod y system yn darparu taith Gymraeg drwy gydol y broses.

Gwnaethom archwilio ac adolygu ein prosesau, ein gwasanaethau awtomataidd a'n templedi er mwyn sicrhau bod cynnig Cymraeg di-dor bellach ar gael i fyfyrwyr sy'n ymgysylltu â'n gwasanaeth.

Fel rhan o'r prosiect hwn, gwnaethom hefyd gyfieithu hysbysebion a swydd ddisgrifiadau i alluogi Byrddau Iechyd i hysbysebu'r cyfleoedd drwy'r rhaglen Symleiddio i Fyfyrwyr drwy gyfrwng y Gymraeg a'r Saesneg.

- **Taflenni Gwybodaeth i Gleifion Cymru Gyfan**

Gwnaethom gynnal archwiliad ac adolygiad cynhwysfawr o dros 350 o Daflenni Gwybodaeth i Gleifion yn ystod 2021/22. Mae'r taflenni yn cael eu rhoi i gleifion fel rhan o'r broses gydsynio. Galluogodd yr archwiliad a'r adolygiad i ni wneud gwelliannau i'r iaith a ddefnyddir yn y taflenni, sicrhau cysondeb o ran terminoleg yn ogystal â gwneud y taflenni yn gwbl ddwyieithog i gleifion yng Nghymru. Cyn hynny roedd fersiynau Cymraeg a Saesneg ar gael ar wahân. Bydd hyn yn parhau yn 2022/23 gyda gwaith yn cael ei wneud mewn partneriaeth ag Eido Healthcare i gyfieithu fersiynau hawdd eu deall o'r taflenni.

- **Pyrth ESR ar gael yn Gymraeg**

Gweithiodd Uned y Gymraeg a thîm Systemau Gwybodaeth y Gweithlu ym Mhartneriaeth Cydwasaethau GIG Cymru ar y cyd ag Awdurdod Gwasanaethau Busnes y GIG ac IBM ar ddatblygu Pyrth Cymraeg ar ESR yn hydref 2021. Mae hyn bellach yn golygu bod y pyrth ar ESR ar gael i Staff y GIG yn Gymraeg ac yn Saesneg er mwyn bodloni gofynion Safon 81 y Safonau Gweithredol.

- **Prosiect Adolygu'r Ganolfan Gyswllt**

Diben y prosiect adolygu hwn oedd archwilio gwasanaethau ein canolfannau presennol, sefydlu sut mae ein cwsmeriaid yn ymgysylltu â ni ar hyn o bryd, nodi gwelliannau, a chynyddu a gwella elfen hunanwasanaethu'r gwasanaethau a ddarparwn.

Fel rhan o'r gwaith hwn, craffwyd hefyd ar y gwasanaethau Cymraeg a ddarperir, a nododd arolwg a ddosbarthwyd i staff y GIG fod rhwng 10% ac 20% o staff y GIG yn dymuno ymgysylltu â ni drwy gyfrwng y Gymraeg.

Bydd gwaith pellach yn cael ei wneud gyda chanolfannau cyswllt ar draws PCGC yn ystod y flwyddyn i ddod. Bwriedir creu cynlluniau gweithredu lleol i gynyddu capasiti o fewn gwasanaethau cwsmeriaid/llynellau cymorth i gynnig mwy o'n gwasanaethau drwy gyfrwng y Gymraeg.

- **Diweddariadau i System Recriwtio TRAC**

Rydym wedi parhau i weithio gyda datblygwyr system TRAC i sicrhau bod y rhyngwyneb ar gyfer y system yn parhau i fod yn gyfoes ac yn gyson yn y Gymraeg a'r Saesneg.

- **Cwrs Cydsynio ar sail Gwybodaeth a Galluedd ar gyfer staff GIG Cymru**

Mae Cronfa Risg Cymru a'r Pwyllgor Cymru Gyfan wedi creu modiwl addysgol am gydsyniad cleifion ar gyfer staff y GIG. Mae ffocws y cwrs ar elfennau hollbwysig o gydsynio ar sail gwybodaeth, ac rydym wedi sicrhau bod adran benodol ar wneud staff yn ymwybodol o bwysigrwydd a hawl claf i allu cydsynio yn ei ddewis iaith. Buom yn gweithio ar y cyd â Bwrdd Iechyd Prifysgol Betsi Cadwaladr ar gynhyrchu fideo sy'n amlinellu pwysigrwydd cyfathrebu yn y cwrs cydsynio a galluedd ar gyfer clinigwyr ar draws GIG Cymru.

- **Yr Economi Sylfaenol yng Nghymru**

Yn ystod y ddwy flynedd diwethaf, mae ffocysu ar gynnig cyfleoedd gweithio hybrid i staff ac edrych yn agosach ar yr economi sylfaenol wedi dod yn rhan bwysig o gynllunio a darparu gwasanaethau. Rydym yn edrych yn agosach ar y cyfleoedd a ddaw yn sgil yr Economi Sylfaenol ac yn manteisio ar hyn er mwyn cynyddu ein capasiti i ddarparu gwasanaethau dwyieithog.

Meysydd Blaenoriaeth ar gyfer 2022/23

- Cynyddu'r capasiti i hyfforddi mwy o staff ym maes ymwybyddiaeth iaith. (Rydym yn aros yn eiddgar am lansiad y Modiwl Ymwybyddiaeth Iaith a ariennir gan Lywodraeth Cymru ar ESR ar gyfer staff y GIG. Rydym yn aros am ddyddiad lansio ar hyn o bryd).
- Creu llyfryn Croeso Cymraeg i bob aelod newydd o staff PCGC.
- Creu mwy o ddi-ddordeb mewn dysgu'r Gymraeg ac uwchsgilio'r gweithlu, gan dargedu meysydd lle mae angen i ni gynyddu capasiti i ddarparu gwasanaethau dwyieithog mwy cadarn.
- Hyrwyddo cwrs hunanddysgu 10 awr ar-lein i bob aelod o staff sy'n sgorio 0 am eu sgiliau Cymraeg er mwyn iddynt gyrraedd Sgil lefel 1.
- Adolygu ein cynllun cyfathrebu i ymgysylltu â staff ar draws y sefydliad
- Cydymffurfio'n llawn â Safonau 106A a 107A(Ch).
- Rhaglen gyfathrebu a hyfforddi ar gyfer rheolwyr recriwtio ynghylch Safonau 106, 106A, 107 a 107A.
- Caffael system a fydd yn cefnogi'r Cynllun Symleiddio i Fyfrwyr a Gwasanaethau Dyfarniadau Myfyrwyr i gynnig gwasanaeth cwbl ddwyieithog i'w cwsmeriaid.
- Adolygu ein Canolfannau Cyswllt a sut rydym yn ymateb i gwsmeriaid drwy gyfrwng y Gymraeg, gyda'r bwriad o gynyddu capasiti ac adnoddau i ddarparu gwasanaethau dwyieithog mwy cadarn.
- Parhau i gefnogi Sefydliadau'r GIG drwy ddarparu gwasanaethau cyfieithu iddynt.
- System Adnabod Recriwtio a fydd yn gweithredu'n ddwyieithog.
- System Iechyd Galwedigaethol a fydd yn gweithredu gyda swyddogaethau dwyieithog
- Cyfieithu taflenni gwybodaeth hawdd eu deall o'r Saesneg i'r Gymraeg i gleifion ar gyfer Cronfa Risg Cymru, Byrddau Iechyd ac Ymddiriedolaethau.
- Strategaeth Mwy Na Geiriau 2022 – 2027 Cynllun Gweithredu ar gyfer PCGC, wedi'i integreiddio â Safonau'r Gymraeg.
- Manteisio ar Agenda'r Economi Sylfaenol yng Nghymru i allu optimeiddio ein gwasanaethau dwyieithog.
- Gweithio gyda'r tîm Pobl a Datblygu Sefydliadol a rhanddeiliaid allanol i ehangu mynediad i ni fel cyflogwr o ddewis.



GIG
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Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM: 5.9

19 January 2023

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Integrated Medium Term Plan Progress Report
– Quarter 2

ARWEINYDD: LEAD:	Alison Ramsey, Director of Planning, Performance, and Informatics
AWDUR: AUTHOR:	Helen Wilkinson, Planning and Business Change Manager
SWYDDOG ADRODD: REPORTING OFFICER:	Helen Wilkinson, Planning and Business Change Manager
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**Pwrpas yr Adroddiad:
Purpose of the Report:**

The purpose of this report is to provide the Partnership Committee with an update on the progress of our Integrated Medium-Term Plan (IMTP) for Quarter 2.

This report has also been shared with the Welsh Government.

Llywodraethu/Governance

Amcanion: Objectives:	<p>Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement.</p> <p>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.</p> <p>Customers and Partners – Open and transparent customer-focussed culture that supports the delivery of high quality services.</p>
Tystiolaeth: Supporting evidence:	The NWSSP IMTP 2022/2025, as approved by the Partnership Committee in January 2022 and submitted to the Welsh Government.

Ymgynghoriad/Consultation :

Supporting evidence provided by NWSSP Divisions.

Adduned y Pwyllgor/Committee Resolution (insert ✓):

DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE	✓
Argymhelliad/ Recommendation				
The committee is asked to note the content of the paper and provide feedback to inform future reports.				

**Crynodeb Dadansoddiad Effaith:
Summary Impact Analysis:**

Cydraddoldeb ac amrywiaeth: Equality and diversity:	Not applicable
Cyfreithiol: Legal:	Not applicable
Iechyd Poblogaeth: Population Health:	Not applicable
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	
Ariannol: Financial:	Not applicable
Risg a Aswiriant: Risk and Assurance:	Assurance that NWSSP are on track to achieve the 2022/23 IMTP objectives.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Governance, Leadership and Accountability
Gweithlu: Workforce:	Not applicable.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open.

NWSSP Integrated Medium Term Plan 2022/25 Progress Report

-

2022/23 Quarter 2



Report author: Helen Wilkinson
Version: 1.0
Date: 7th October 2022

*Adding Value
Through Partnership,
Innovation and Excellence*

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1. Background

This is our second report to provide an update on progress relating to our delivery of our IMTP objectives for 2022/23.

The monitoring system, via Microsoft Lists (MS Lists) has continued to be an effective way of tracking our progress against each of the objectives we set for year 1.

We understand that this is still a new way of working for our teams and that we need to continue to provide, agility, flexibility, and adaptability to this approach, which we have adopted throughout Quarter 2 with amendments made to Reporting Tracker and provision of continued support to those Divisions who need it.

We are still working towards embedding the process fully and understand this will take time. We are hopeful that through the utilisation of MS Lists to inform our planning and objective setting for the next IMTP cycle this will improve.

Moving into Quarter 2 reporting, we have developed a greater rigour to our reporting with a focus on those objectives that are being reported as 'off track', with scrutiny being applied through our Quarterly Review process.

2. Key Messages

All our plans within the IMTP are aligned to Ministerial Priorities and NWSSP Strategic Objectives, to ensure we have organisational focus, as described in Quarter 1.

In Quarter 2 we have seen further progress being made towards achieving our IMTP objectives for Year 1, 2022/23.

During 2022/23 we are reviewing how we measure our performance and impact, through more of an outcome-based approach. And within this look at how we can add value alongside our historical approach of cost reduction, cost avoidance and savings generation. We are continuing to develop our thinking and have completed work during the recent SLG Development Sessions which will be taken into our next IMTP Planning cycle.

3. Quarter 2 analysis

Overview analysis

In Quarter 1 we reported on **135 divisional objectives across 15 divisional level IMTPs**. Quarter 2 has seen an increase in objectives via approval at the Quarter 1 Review meetings in July to **143 divisional objectives** across the 15 divisions. The split of objectives can be seen below in **Figure 1**.

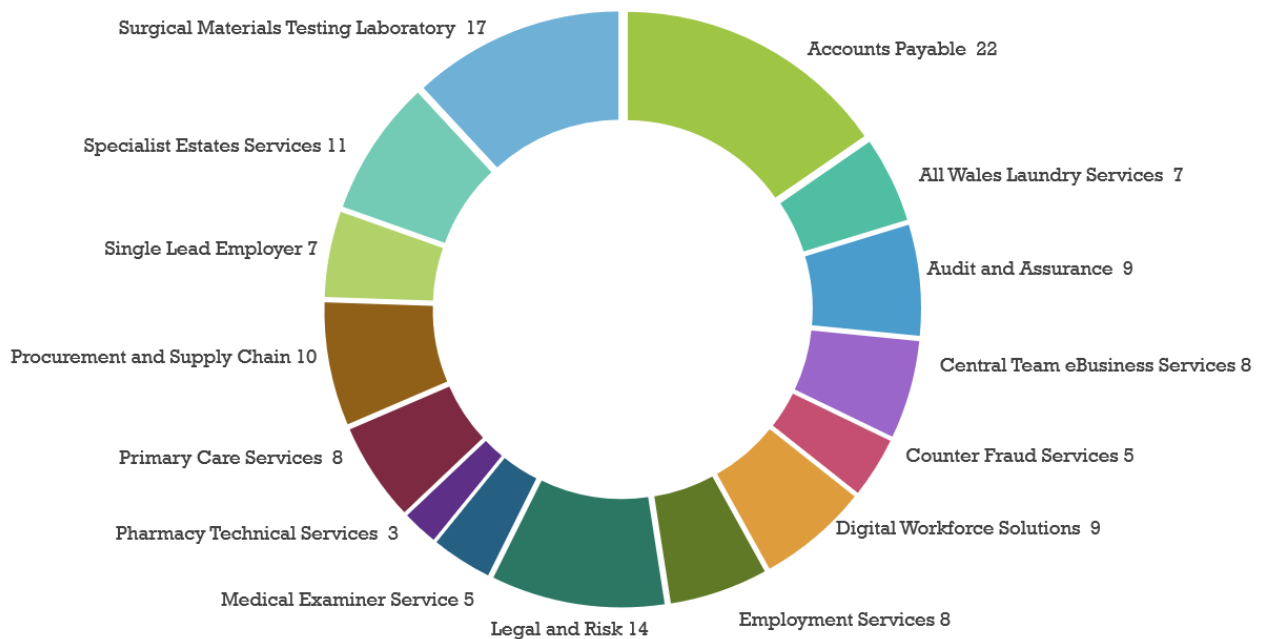


Figure 1 – Split of Divisional Objectives

The reporting is based on a self-assessment by the divisional Heads of Service, and this will be scrutinised through the quarterly review process later in October.

At the end of Quarter 2, **Figure 2** shows the objectives status overall, and **Figure 3** shows the break down by division.

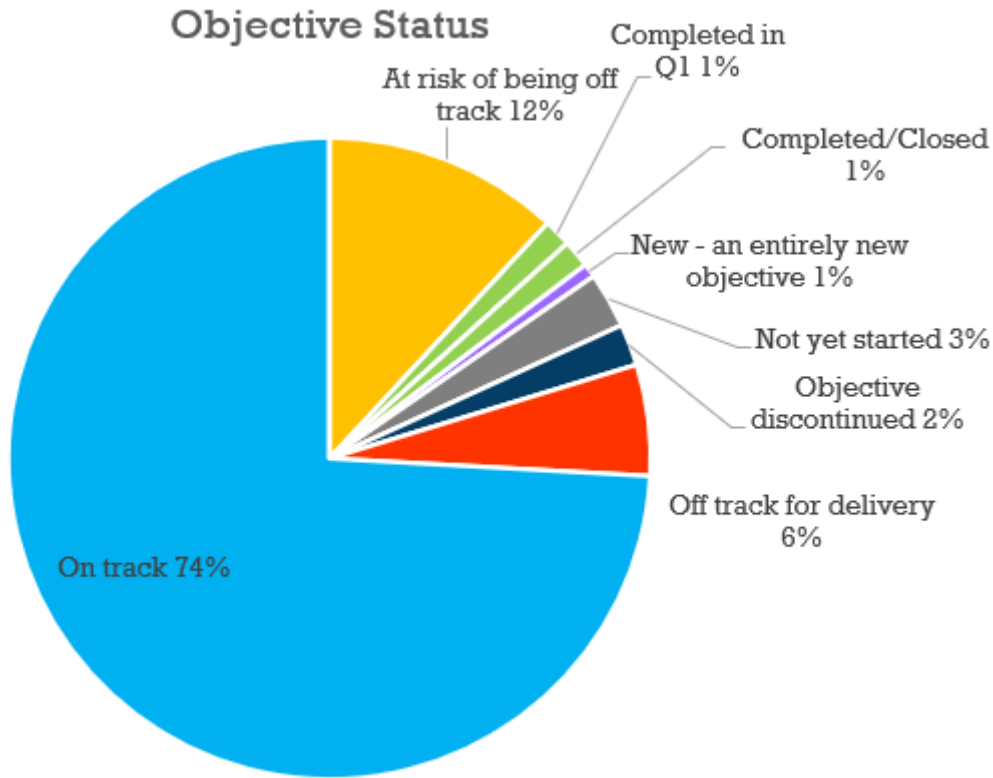


Figure 2 – Objective Status

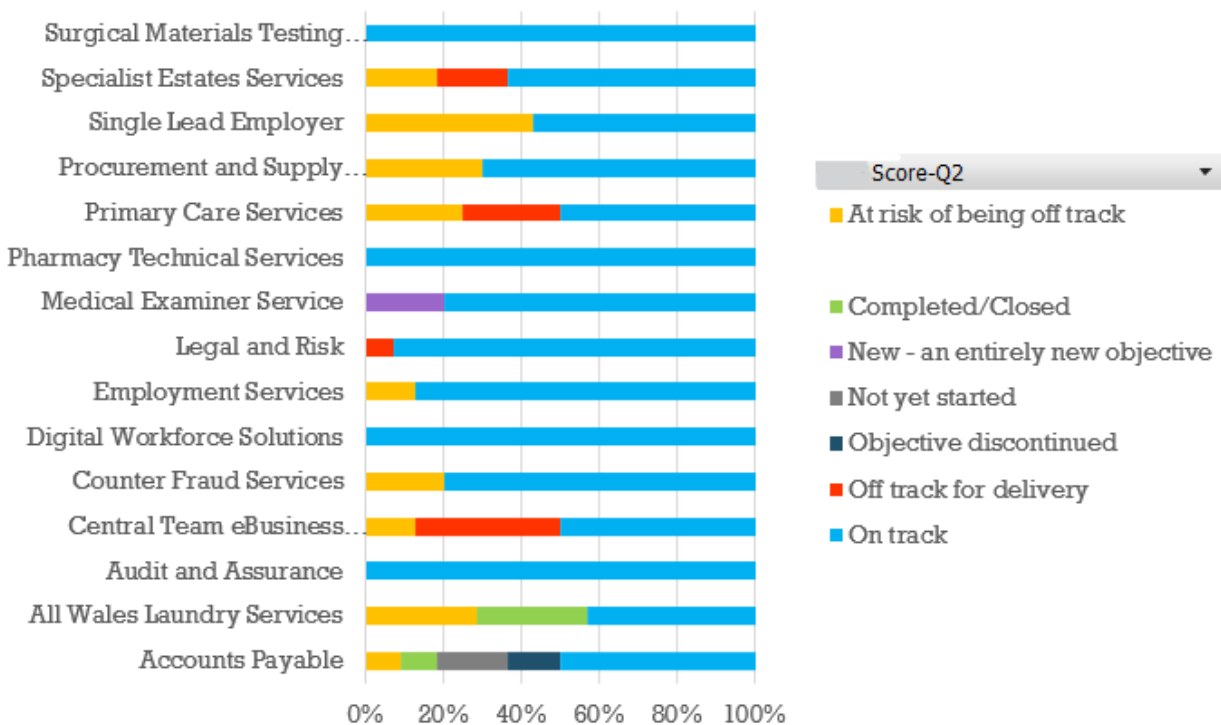


Figure 3 – Objective Status breakdown by division

The **6%** of **divisional objectives** that are **'off track for delivery'** are made up of **8 objectives** over **4 divisions**. As shown in **Figure 4** below.

Division	Desired Objective	Progress Update – Q2
Central Team eBusiness Services	Power BI solution/implementation.	Investigations are ongoing with Health Organisations following the initial 1 million project costs. Alternative options are being considered by the Strategy and Development Group (STRAD).
Central Team eBusiness Services	Scan for safety (S4S) implementation.	There have been serious IT issues to address and the National close of N3 (NHS network access) due to Omnicell cyber breach. Servers are now installed and plans to mitigate risk to NHS. Service Desk docs are in place to support operational use. Cyber mitigation issues are now in place for servers, and operational and end-user testing is underway. Servers are up and running and Implementation plans are active. CTeS support provided via the Service Desk. CTeS roll now is the support of the S4S Implementation team.
Central Team eBusiness Services	Software as a Service (SaaS) readiness - commence change programme.	All Directors of Finance Group (DoF) supported the decision NOT to progress with the SaaS project on Sep 22. Therefore, the DoF need to agree on whether to remove from IMTP immediate objectives for 2022/23.
Legal and Risk	Test, deploy and develop new case/document management system.	There is currently a significant issue about the scope, duration, and cost of the project. Work is being undertaken with supplier management team to resolve the current issues; it has been agreed that all work from the supplier's perspective will be paused from 07 July 2022 until all issues have been resolved. Risk added to corporate risk register.
Primary Care Services	Assess the impact of new Contractor payment system.	The new contractor payment system, Family Practitioner Payment Service (FPPS), the minimum viable product included Enhanced Services, Childhood Immunisation Claims and Pensions (Estimate of Earnings and deductions. The year-end process to be developed). Following the deployment of the system inconsistencies in the quality and format of evidence submitted to support Enhanced Service claims identified impacting post-payment verification processes. Development and resource have focussed on correcting evidence submitted to date and modifying the system to mitigate the issue going forward and meet Welsh requirements for post-payment verification. The solution was developed/tested and deployed at the end of Q2. Focus in Q3 on the development of the Common Practitioner Module and scoping other system requirements for development.
Primary Care Services	Decommission NHAIS (National Health Authority Information System) in Wales.	Delays in England due to their inability to remove the cervical screening dependency from NHAIS until a replacement system can be developed/deployed. An implementation plan from NHS Digital remains outstanding. In Wales, Breast Screening services remain dependent on NHAIS. A replacement system has been identified, Breast Select, a memorandum of understanding has been signed with an indicative date for delivery in early 2023/24.
Specialist Estates Services	Agile Working Estates Strategy.	Phase 2 report complete. Phase 3 - Detailed Estates Option Appraisal is currently on hold, awaiting the completion and analysis of a new staff survey.
Specialist Estates Services	Transformation of the existing laundry service.	OBCs for North Wales and Southwest Wales is completed and currently being scrutinised by Welsh Government. Site visits were requested and arranged for Welsh Government representatives to attend the laundry at West Wales General Hospital. A decision on capital funding is expected imminently. On the request of the Welsh Government scheme, development has been paused awaiting the funding decision.

Figure 4 – Divisional Objectives 'Off track' for delivery

The **12%** of **Divisional Objectives** that are **'at risk of being off track'** are made up of **17 objectives** over **9 divisions**. As shown in **Figure 5** (pages 9 to 10).

Division	Desired Objective	Progress Update – Q2
Accounts Payable	Commence an e-Trading trial using PEPPOL. PEPPOL (Pan-European Public Procurement On-Line) is a standard that enables your company to send electronic invoices to public sector clients.	The test supplier changed due to the original supplier's technical issues. This links into the Basware exit strategy.
Accounts Payable	Increase monthly Robotic Process Automation (RPA).	Delayed due to staffing and issues with RPA currently being reviewed by the RPA team. Consideration has now been given to utilising an external product. The RPA statement reconciliations are carried out by Data & Payments team. The team have struggled due to staffing issues i.e., movement and recruitment, which has impacted our ability to reconcile more statements. In addition, we have encountered issues with the RPA process itself, resulting from the Oracle upgrade, so resources in the RPA team have been impacted in resolving these. Both issues have resulted in a delay in increasing the number of supplier statements reconciled using this process and consequently, we are looking into the possibility of using a third-party solution.
All Wales Laundry Services	Roll out of the All-Wales cloud-based dispatch system.	We are experiencing issues due to the local IT systems at each laundry site not installing the software. Each laundry site has a different IT service provider, and we continue to request that they install the systems.
All Wales Laundry Services	Roll out of the All-Wales Planned Preventative Management (PPM) system.	There has been a delay with local it teams installing software on laundry sites as the support is provided by health boards.
Central Team eBusiness Services	ISO7000 Service Desk Accreditation /SO20000IT Service Desk Management /National Information System (NIS).	A procurement tender is in process for ISO2000 and there is active work to achieve this. ISO270001 is suggested to be delayed until ISO20000 is achieved due to resources.
Counter Fraud Services	Apply for Cabinet Office Government Professional Counter Fraud Standards (GCFPS).	Reminders were sent to Cabinet Office in Q2, awaiting a response.
Employment Services	Review and implement a management structure across Employment Services (ES) division.	Refocus through P&OD Business Partner during Q3.
Primary Care Services	Automate the Performers List process.	There has been slippage from the original timescales (end of September) due to resource capacity and conflicting Programmes of work. However, the project is now on track based on the revised timescales (31st Oct 22).
Primary Care Services	Implement the national e-prescribing programme with DHCW.	Solution design has been agreed upon for Smartcards. The impact assessment was not completed due to Programme Board having ongoing discussions with Pharmacy Suppliers for the Electronic Prescription Service (EPS) & the Electronic Transfer of Claims (ETC) functionality combined.
Procurement and Health Courier Services	Improve supply chain logistics, distribution, and facilities management at Regional Stores to reduce carbon emissions.	Charging points installed. Delay with the UK project as pilot vehicles have not yet received accreditation.

Procurement and Health Courier Services	Introduction of Scan4Safety (S4S) as part of modernisation programme for Wales.	Now have cyber sign-off. Connections with HBs now successfully tested (exception of Cwm Taf Morgannwg UHB). Hywel Dda UHB, Powys to go live Oct 2022. Cardiff & Vale UHB TBC while HB resolve wi-fi issue.
Procurement and Health Courier Services	Modernisation of our transport and logistics operations.	Capital funding from WG is still not guaranteed.
Single Lead Employer (SLE)	Enhanced and improved partnership working with current trainees to continue development and improve the current service provision.	<p>Some capacity and technological issues have been identified as a result of the Zendesk Pilot which means that the Zendesk may not be the appropriate tool SLE. Zendesk is a customer service system which the SLE Team were piloting. It was hoped that the system would improve our responsiveness in answering queries and calls from Trainees, but the call system has not worked effectively when call handlers have tried to pick up calls when working from the Office. When answered calls disappear and are lost. A short-term solution is to revert to the previous Micollab call system. We are currently looking at outlook is being reconfigured as the main point of contact – by adding specific inboxes for specialties and or specific purposes such as return of contracts, less than full time (LTFT), lists from HEIW, PEC documents etc</p> <p>Weekly meetings are currently taking place with British Medical Association to problem solve any difficulties experiences by the Trainees as a result of the onboarding process.</p>
Single Lead Employer	Improve operational systems and processes between HEIW, SLE team and host organisations.	There still remain issues relating to late notification of bandings for trainees from some Health Boards, the notification from HEIW of trainees opting to reduce their working hours and the late notification from trainees and HEIW that the trainee is terminating their employment. This is particularly true of those trainees who receive their certificate of completion of training (CCT) and leave at very short notice. A new process is currently being developed for less than full time (LTFT) trainees to reduce the number of late notifications. The process for HEIW notifying NWSSP of terminations is also being looked at. In quarter 1 new "Business As Usual Arrangements" have been agreed. There will be a monthly operational meeting between the NWSSP SLE Team and HEIW to monitor arrangements and problem solve any issues.
Single Lead Employer	To provide a professional People and Organisational Development Service to trainees, HEIW and host organisations.	Regular monitoring arrangements are in place for the increasing number of cases. Business Partner for SLE is now involved in a number of cases from a professional advice perspective. The challenge remains the volume cases at any one time and the identification of suitable Case Managers by Host Organisations to carry out Informal Assessment of Facts. Where delays occur, the issue is escalated to the Medical Director NWSSP to raise with Medical Director colleagues across Wales.
Specialist Estates Services	Refresh the fire safety web-based systems covering fire audits, fire risk assessments and fire related unwanted signals.	Digital Health Care Wales Service Request Form submitted. DHCW resource already committed for 22/23. Therefore, it's unlikely the development will commence before 23/24 Q1. The detailed brief is being refined in collaboration with DHCW. Initial indication £40k will be sufficient.

Specialist Estates Services	Support Health Boards/Trusts and other NHS Wales organisations in the development and implementation of decarbonisation plans.	Recruitment for the programme management resource has proved challenging, although some progress has been made. The resignation of SES's Decarbonisation lead has compounded the resource issue. Some early actions were completed. EVCP guidance will now be managed through a Task and Finish Group following approval of the National Programme Board on Decarbonisation and Climate Change to its establishment.
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Figure 5 – Divisional Objectives 'at risk of being off track' for delivery

4. Decarbonisation

Our local Decarbonisation Action Plan for 2022-23 is continuing to be embedded in NWSSP and we have made progress in moving our local action plans forward.

Activity in Quarter 2 includes:

- ✓ An interim Programme Lead has been appointed to provide support for the management of the programme and further recruitment activity is ongoing.
- ✓ Appointments to Procurement and Programme Management team to support the delivery of national work programme.
- ✓ The distribution of a decarbonisation newsletter to all NWSSP staff;
- ✓ Continued work is being carried out and promoted by our ISO Green Team. Maintenance of the ISO 14001 and embedding decarbonisation within it is ongoing with the next external audit (surveillance visit) due in Quarter 3.
- ✓ Welsh Government requested a Task & Finish group led by NWSSP, to take forward the full set of transport related actions within the Strategic Plan (not including WAST specific responsibilities). Further clarification from Welsh Government on the proposal and requirements is being sought;
- ✓ The Specialist Estates Services team have completed their evaluation on proposals for Photovoltaics, solar panels, at IP5, Newport and Picketston, St Athan. The report has been summarised and presented to Procurement Services (who own/operate the relevant buildings) for their consideration. Conclusions are that (at the time of evaluation) the financial payback was unattractive as considerable work is required to the building structures before proceeding.
- ✓ Procurement Services have provided all necessary data to Health Boards which would have enabled them to submit their 2021-22 returns.
- ✓ In Quarter 3 NWSSP will be presenting a Deep Dive to the National Programme Board on Decarbonisation and Climate Change on our system leadership role. We will also be updating the SSPC in January 2023.

5. Foundational Economy

We recognise the need to deliver sustainable and responsible products, provisions, and services as part of our Foundational Economy plans. We are continuing to focus on delivering our agreed work plan where we are actively exploring opportunities beyond the already agreed contracts and build employment opportunities into our work.

We are continuing to provide employment opportunities through continued recruitment of Network 75 Students. We have recruited a Specialist Organisational Development Facilitator, who has a focus on widening access to support our work around bringing under-represented groups into the organisation from within the communities we work in. We are also providing support to Kick Start trainees to join our bank staff and apply for internal roles.

In Quarter 2, we continued to deliver and monitor the award of Welsh contracts to Welsh suppliers, developed opportunities for increased revenue in new areas of expenditure into Wales, with over £7.4m contracts awarded to Welsh Suppliers in Quarter 2. The average overall spend within Wales for 2022/23 is currently at 33%. Refinements are also being made to the way in which we report to Welsh Government, to ensure we have additional visibility of all organisations that spend within the Welsh Economy, including those with Head Offices in England.

Our continued work to realign and integrate procurement services activity to deliver the objectives of the National Operating Model at a local, regional, and national level are on-track.

6. People and Organisational Development

Work continues within our People and Organisational Development plan, which is currently all on track with all objectives at the end of Quarter 2.

Our plan is split into key focus areas:

- Resourcing
- People, insights, and analytics
- Organisational development
- Employee relations
- Excellence
- Organisational Design:
 - Business Agility
 - Agile Working

7. Digital Plan

Our Digital Plan is linked through to our key digital themes which are: to support cloud first, agile working strategy and enable digital empowerment. We continue to work closely with our partner Digital Health and Care Wales on several objectives within this plan.

Our digital plan has been developed since Quarter 1 to provide an overarching view of progress against our digital plan through broader objectives rather than cross cutting project specific activity already captured through our Divisional Objectives. Good progress is also being made with the design of our Digital Strategy to support our medium- and longer-term objectives.

We have **7 digital objectives** in place of which **3** are '**at risk of being off track**', as shown in **Figure 8** below, the remainder are '**on track**'.

Division	Desired Objective	Progress Update – Q2
Informatics	Complete migration of NWSSP staff onto NWSSP platform supported by DHCW.	<ol style="list-style-type: none"> 1. Complete migration of procurement teams at Swansea Bay by May 2022 - users migrated and awaiting firewall fix to enable migration of documents to SharePoint. 2. Complete migration of procurement teams at Cwm Taf by May 2022 - Complete. 3. 3 Personal Computers to be upgraded to Windows 10 - 1 migrated to a virtual environment, 2 in the process of being decommissioned.
Informatics	Deliver remediation actions to support the recommendations of the CRU Cyber Assessment Framework (CAF) report	<ol style="list-style-type: none"> 1. Create NWSSP level workflows for Senior Leadership Group (SLG) and senior managers to use during Incident Response and Disaster Recovery - Work flows have been produced for consideration and they are to be presented to informal SLG in October. 2. Updating the register of System Owners and ensuring that all system owners understand their role - First round of service updates complete with ongoing work to update and expand the scope. 3. Identifying a cost-effective solution managing the lifecycle of assets - Project request with DHCW, awaiting resource to be allocated. 4. Update the NWSSP P3M approach to build in better Digital Foundations each time we replace applications - Draft has been completed and reference included in the digital strategy.
Informatics	Provide advice and support on proposed business systems utilised by NWSSP Divisions.	<ol style="list-style-type: none"> 1. Develop stakeholder engagement and communications strategy as part of overall digital strategy development. - Not started. 2. Deeper dive into IMTP projects to identify specific requirements in collaboration with delivery partners (e.g., DHCW) - Initial review complete.

Figure 7 – Digital Objectives 'at risk of being off track

8. What do our Quarter 2 plans mean to our partners?

Primary Care Services

- ✓ The Quality Improvement programme to support Customer Service Excellence is progressing.
- ✓ Strengthening of collaborative / partnership working continues as part of the Sustainable Primary Care National Programme.



Legal & Risk and Welsh Risk Pool Services

- ✓ Continued support to Health Boards and Trusts with Covid-19 related claims and the Covid-19 inquiry.
- ✓ Work is progressing on the development of our high input complainant service/dispute resolution to support Health Boards. Cases are continuing and new instructions arriving.

Digital Workforce Solutions

- ✓ The ESR transformation programme is on track with specifications being developed and the first Business Change Group meeting scheduled for Quarter 3 with varied representation from NHS Organisations.

Employment Services

- ✓ The Recruitment Modernisation Programme continues with digital pre-employment checks launched for those with an in-date UK/Irish passport.
- ✓ Changes to reduce the number of mandatory pre-employment checks has been implemented in two Health Boards with a streamline internal fast track process.

Accounts Payable

- ✓ NWSSP successfully launched the Cycle to Work scheme for 6 NHS Wales Organisations, with 222 cycles already ordered.
- ✓ £1.5m of early payment rebates have been generated since launching the Priority Payment Scheme. The programme is on track to deliver in excess of £2.5m of cash rebates by 31st March 2025.

Procurement and Health Courier Services

- ✓ We are continuing to maintain an agreed stock range and stockholding volume of Personal Protective Equipment.
- ✓ The Scan for Safety programme has successfully tested connections with several Health Boards with the first to go 'live' scheduled for October.
- ✓ We have made progress against our Foundational Economy plan with over £7.4m contracts awarded to Welsh Suppliers within Quarter 2 and we continue to develop employment opportunities into our work.

9. Conclusion

In Quarter 2 we have seen further progress being made towards achieving our IMTP objectives for Year 1, 2022/23. We continue to progress our work with focussed alignment to our NWSSP Strategic Objectives and Ministerial Priorities.

Where progress with the planned objectives are considered off track or at risk of being off track then mitigation is in hand. The issues will be scrutinised in more detail during quarterly review meetings planned in October with responsible Directors and the Managing Director.

NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 6 – SEPTEMBER 2022

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for September 2022 and should be read in conjunction with the Monitoring Return tables submitted for Month 6.

Thank you for your letter of 26th September 2022 responding to the Month 5 monitoring return. The action points raised are addressed within this return and additional information provided where requested.

Overview of Performance and Financial Position

NWSSP's forecast outturn financial position at Month 6 is reported at break-even. This is based on the continued assumption per the IMTP financial assumptions letter issued on 14th March 2022 and recent discussions with senior Welsh Government finance officials that we can anticipate income from Welsh Government for energy pressures and the National Insurance increase. The position assumes that certain costs related to Covid recovery amounting to £1.060m will be non-recurrently funded internally within NWSSP for 2022/23. We have commenced conversations with Welsh Government regarding the recurrent funding position in recent weeks and await an update on this.

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A has been amended in month to revise the additional Welsh Government 'at risk' funding for the amended energy pressure following receipt of the most recent energy forecast. This was received from British Gas on 7th October which included the impact of the Energy Billing Relief Scheme (EBRS). £2.843m is now anticipated which is a reduction from £4.520m forecast in Month 5. This forecast is £0.843m more than the £2.000m originally assumed in our IMTP in January 2022.

The table has also been populated with the updated Covid expenditure forecast and equivalent funding anticipated which remains broadly in line with the forecast reported in Month 5.

Year to date over-achievement of savings and income generation of £1.843m are included in Table A which are negated by forecast expenditure on NWSSP investments in areas to accelerate benefits, funding of pressures and/or distribution to NHS Wales. The over-achievement of savings and income generation is forecast to reach £2.000m by the end of the financial year after

utilising £1.060m of these savings to fund the Covid recovery costs we are incurring.

We are reviewing the level of our distribution to NHS Wales based on the continued assumption of full funding for all the income anticipated in Table E1.

2. Overview of Key Risks & Opportunities (Table A2)

This table has been populated with the risks and opportunities per our IMTP which have been reviewed and updated further during September. The key changes from the Month 5 submission are:

- The risk regarding additional funding for energy cost pressures has reduced from £4.520m to £2.843m following the updated forecast from British Gas including an assessment of the savings from the Energy Billing Relief Scheme.
- The risk that energy increases are more than forecast has reduced from £1.000m to £0.500m due to the impact of the EBRS. Some uncertainty remains as we enter the winter months and the laundries, our biggest user of utilities, may see an increased expenditure trend above what is currently anticipated. In addition some of the laundries use heating oil which is increasing in price but which isn't covered by the EBRS.
- The risk that funding for the additional 1.25% national insurance increase will not be received has been reduced to £0.285m in month as a result of the announcement that the increase will be reversed from 6th November 2022. This includes the pro-rata NIC element relating to the backdated pay award. The income anticipated has also been reduced in Table E1 **(Action Point 5.3)**
- The opportunities have both been reviewed in month and reduced slightly following the increase in the savings forecast and review of the financial position.

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

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

- The full year income forecast for 2022/23 has increased from £631.846m as forecast in Month 5 to £635.362m in Month 6. This is due to the net effect of an increase in the SLE pay award and locum shifts (£1.000m),

energy funding decrease (-£1.678m) and an increase in the pharmacy rebate income forecast (£4.2m)

- The NHS income profile increased in Month 2 as the final cohort of trainees transferred to SLE in May. This spiked again in August due to the new SLE rotation intake and again in September with the payment of the pay award and arrears. These movements are also evidenced in the phased increase of pay costs in Table B and the Medical/Dental pay costs in Table B2.

The revised forecast annual SLE income is £235.622m and is detailed below. Additional pay costs are still anticipated in future months as the payment of locum shifts to SLE trainees expands.

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	15.978	16.607	16.662	16.699	18.382	23.292	19.390	19.390	19.390	19.390	19.390	19.420	223.988
NON PAY	0.711	0.957	0.962	1.068	1.206	1.159	0.929	0.929	0.929	0.929	0.929	0.929	11.635
TOTAL	16.689	17.564	17.624	17.766	19.588	24.451	20.319	20.318	20.318	20.318	20.318	20.348	235.622

- The August SLE intake anticipated funding of £9.318m was lower than the expenditure increase of £10.649m as reported in Month 5 due to the anticipated element relating to September to March only. The difference is the additional income that was accounted for in August and formed part of the budgeted and agreed income per UHB/Trust in the Month 5 return, so it was only the £9.318m that was being anticipated for future months **(Action Point 5.7)**
- We continue to work with HEIW regarding the recurring funding bid for further investment in the SLE Workforce team to enhance the service provided to medical, dental and pharmacy trainees. HEIW have confirmed they will fund the additional costs in 2022/23 only, however we are keen to secure recurrent funding for the additional posts which we understand HEIW are progressing **(Action Point 5.2)**
- The Other income spikes in Months 6, 9 and 12 due to the timing of the quarterly pharmacy rebates which are received one quarter in arrears. Corresponding spikes in the non pay also occur in these months to match the income as the funds are repatriated to NHS Wales.
- Forecast non-cash charges of £5.835m are included and continue to exclude the new IFRS16 leases depreciation so that only the agreed transitioning leases impact of £1.213m is included. The income over our £1.551m baseline funding has been anticipated in Table E1.

- £27.696m income and expenditure is included to Month 6 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 £134.780m (£132.521m WRP DEL and £2.259m Redress which forms part of the DEL expenditure from 2022/23) as included in our IMTP and is phased on a straight-line basis over remaining months. This is primarily why the Welsh Government income profile increases significantly from Month 7.

The WRP forecast position continues to assume that the risk share agreement will be invoked for £25.345m.

An updated review of the full year forecast, which includes a number of high level assumptions on case settlements, indicates that the potential forecast range is £129m - £141m. The range continues to be large due to the number of assumptions and variables which will impact this forecast at this early stage of the financial year

- £2.843m funding is now anticipated from Welsh Government for the exceptional energy costs following a review of actual invoices received to date and the revised forecast from British Gas which now includes the impact of the EBRS.

A number of our sites have energy provided and recharged by the Landlords. We continue to work with our Landlords to understand any fixed rate charges and the period these are fixed from and to so that we can assess our eligibility for any pass through savings from EBRS from external suppliers and also to forecast costs for the remainder of the financial year. We still await confirmation from Landlords due to the recent announcements in respect of this. No benefits from the EBRS have been assumed in the updated forecast for external energy suppliers whilst we assess eligibility. A number of our laundries also use heating oil which isn't covered by the EBRS.

As part of the request for us to reconcile the laundry energy charges we are including, and the UHBs are excluding, we are working to reconcile the forecasts as far as possible. Given the late request and late issue of the updated British Gas forecast we will need to refine this further during October. Within our return we have projected recharges for Laundry energy costs of £3.5m, however UHBs are only forecasting to recharge £2.9m. We will continue to work with UHB colleagues to understand more about the energy forecasts and assess for robustness across all sites during October and will update in the Month 7 return. Please note that the energy charges relate to both gas and electric from British Gas and heating oil from other suppliers. Due to forecast increased oil charges in future months and likely additional demand during the winter, our energy

forecast has only reduced by 37% against the 48% reduction in the British Gas forecast this month.

- £0.090m of agency expenditure was reported in Month 6 which is a small increase on the Month 5 usage. Expenditure continues to be incurred as we utilise more agency to cover the increasing number of vacancies to ensure service continuity.
- Table B3 details the in month and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level.

The mass vaccination and other covid expenditure sections have been populated. The overall forecast of Covid funding required has slightly reduced from £18.681m in Month 5 to £18.481m in Month 6 primarily due to reduced PPE issues in month to Primary & Social Care. Expenditure spiked in Month 6 due to the impact of the pay arrears that have been charged to Covid.

£0.768m Primary & Social Care PPE was issued in September. The forecast for future months has been held at £1.000m per month in the anticipation of potential increased demand during the winter months. We will continue to monitor this and reduce the forecast where possible **(Action Point 5.1)**

A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD	22/23 Forecast
	£m	£m
Operational Costs	2.328	4.652
Mass Vacc – PPE	-	0.225
Mass Vacc – Pay & Non Pay (non PPE)	0.675	1.527
Social Care/Primary Care PPE	6.078	12.078
TOTAL	9.081	18.481

The reduction in the mass vaccination forecast in Month 5 was due to a combination of the reduction of both staff and consumable/PPE costs. This is due to the chosen delivery model of the autumn boosters being different from first anticipated and the use of the Pfizer bi-valent vaccine which does not require the provision of PPE or consumable packs **(Action Point 5.4)**.

It should be noted that the mass vaccination section of Table B3 does not reconcile to the supplementary mass vaccination table due to the inclusion of PPE in the supplementary table but the PPE costs being reported under other covid costs in Table B3.

At the end of 2021/22 we accrued a credit note to Welsh Government totalling £41.749m to provide NWSSP with the continued cash coverage for the increased stock balance we hold. £3.535m has now been returned to Welsh Government in respect of the Quarter 1 PPE costs for Primary and Social Care so that the credit note accrual now totals £38.214m. 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.

CREDIT NOTE BALANCE @ 31.03.2022	41.749
Quarter 1 PPE – Primary & Social Care	-3.535
CREDIT NOTE BALANCE @ 31.08.2022	38.214

- Further to meeting with Welsh Government colleagues in early October regarding the Ukraine donation invoice, the original losses form submitted to Welsh Government in March 2022 has been provided to support the invoiced value together with a detailed breakdown of the two shipments sent to date. We have identified the items of the second donation that are for PPE and for which the credit note needs to be adjusted – a credit note will be raised in October when confirmation that the requirements of the new approval process have been met **(Action Point 5.6)**
- No changes have been made in month to our annual leave accrual which remains at £0.535m. We will review leave outstanding during October and note that further information will be issued on this shortly **(Action Point 4.2)**

4. Savings (Tables C & C3)

Table C3 has been populated with the savings schemes and income generation opportunities per our IMTP, and has been updated with additional in year schemes and actual and forecast achievements. Over achievement of savings and income generation total £1.843m to Month 6 after internally funding the year to date Covid recovery costs. At Month 6 we are continuing to forecast a potential £3.060m over achievement of savings and income generation based on performance to date, with £1.060m to be utilised to fund the full year forecast Covid recovery costs. We will continue to refine this as we progress throughout the financial year.

5. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

6. Invoiced Income Streams (Table E1)

Line 1 of this table 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 2-23 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The Covid and energy costs have been updated to reflect the most recent funding assumptions as noted in the sections above.

Pay award funding has been updated in Month 6 to £3.783m. This is the funding we require to increase all budgeted posts to the new 2022/23 pay rates. This excludes the element that relates to the 1.25% NIC on the pay award that has been separately reported in the exceptional costs table and included in Table A2.

7. Cash Flow (Table G)

Not required for completion.

8. PSPP (Table H)

This table is not required for NWSSP.

9. Capital Expenditure Limit Management and Disposals (Tables I, J & K)

Tables I & J have been completed to reconcile to our most recent CEL of £1.947m.

We have now fully allocated all our discretionary capital funding and Table I and J have been updated in line with the planned approved expenditure and profile. This will be refined further as orders are placed and lead times confirmed.

We are in discussions with the WG Capital Team regarding funding for the Laundry and TRAMS schemes. To the end of September, expenditure totalling £0.210m has been incurred (£0.143m TRAMS, £0.067m Laundry) for which we await confirmation of capital funding. We await the outcome from the scrutiny of our two Laundry OBCs and one BJC and will resubmit a revised fees estimate for TRAMS imminently as discussed with WG capital colleagues.

All other schemes remain on course to enable us to meet our Capital Expenditure Limit.

We submitted a list of additional capital schemes that we could progress to Welsh Government capital colleagues on 30th September and await the outcome of the allocation of any capital slippage monies.

10. Aged Debtors (Table M)

At 30th September 2022 we had three invoices outstanding over 17 weeks, two of which were paid in early October and the other one credited.

Invoice number 1112408 has now been paid by Aneurin Bevan in September
(Action Point 5.5)

11. GMS (Table N)

Not required for completion by NWSSP.

12. Dental (Table O)

Not required for completion by NWSSP.

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 6 Financial Monitoring Return along with the Month 7 return at the November meeting.

14. Authorisation of Return



.....
NEIL FROW
MANAGING DIRECTOR
NWSSP



.....
ANDREW BUTLER
DIRECTOR OF FINANCE &
CORPORATE SERVICES

12th October 2022

NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 7 – OCTOBER 2022

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for October 2022 and should be read in conjunction with the Monitoring Return tables submitted for Month 7.

Thank you for your letter of 20th October 2022 responding to the Month 6 monitoring return. The action points raised are addressed within this return and additional information provided where requested.

Overview of Performance and Financial Position

NWSSP's forecast outturn financial position at Month 7 is reported at break-even. This is based on the continued assumption per the IMTP financial assumptions letter issued on 14th March 2022 and recent discussions with senior Welsh Government finance officials that we can anticipate income from Welsh Government for energy pressures and the National Insurance increase. The position assumes that certain costs related to Covid recovery amounting to £1.066m will be non-recurrently funded internally within NWSSP for 2022/23. We have commenced conversations with Welsh Government regarding the recurrent Covid recovery funding position in recent weeks and await an update on this.

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A has been amended in month to revise the additional Welsh Government funding for the amended energy pressure following receipt of the most recent energy forecast. This was received from British Gas in early November which continues to include the impact of the Energy Billing Relief Scheme (EBRS). £2.774m is now anticipated which is a reduction from £2.843m forecast in Month 6. This reduction is due to the inclusion of reduced market rates in the forecast which are all below the EBRS maximum discount threshold. The forecast is £0.774m more than the £2.000m originally assumed in our IMTP in January 2022.

The table has also been populated with the updated Covid expenditure forecast and equivalent funding anticipated.

Year to date over-achievement of savings and income generation of £1.792m are included in Table A. The over-achievement of savings and income generation is forecast to reach £2.000m by the end of the financial year after utilising £1.066m

of these savings to fund the Covid recovery costs we are incurring. These savings will be utilised for NWSSP investments in areas to accelerate benefits, to fund pressures and to increase the distribution to NHS Wales.

These Covid recovery costs are being incurred to support the ongoing increased and further increasing recruitment and accounts payable activity that the Health Boards and Trusts are requiring us to support. There has been no decline in activity during 2022/23 only further increases, it is therefore likely that these costs are going to become the new baseline service costs rather than being non-recurrent in nature **(Action Point 6.2a)**

The value of £1.060m for Covid recovery costs included in the Month 6 narrative differed to the £0.934m in Table A as Line 30 also needed to be included as part of Covid recovery costs. This was for £0.126m for the ID check software credits which we have had to implement to manage the increased pre-employment checks as a result of the increased recruitment activity **(Action Point 6.2b)**

Table A has been amended in Month 7 to indicate that the covid recovery costs have not been recharged to UHBs/Trusts as requested **(Action Point 6.2c)**

We are reviewing the level of our distribution to NHS Wales based on the continued assumption of full funding for all the income anticipated in Table E1. We would also be keen to explore potential brokerage opportunities.

2. Overview of Key Risks & Opportunities (Table A2)

This table has been populated with the risks and opportunities per our IMTP which have been reviewed and updated further during October. The key changes from the Month 6 submission are:

- The risk regarding additional funding for energy cost pressures has reduced from £2.843m to £2.774m following the updated forecast from British Gas.
- The risk of not achieving income generation targets has been reduced to £0.150m as we progress through the financial year with more certainty of income achievement
- The risk of the funding for the Medical Examiner has been reduced from £2.600m to £2.410m following a review of the profile of recruitment during the remainder of the financial year
- The opportunities have both been reviewed in month and reduced slightly following a review of the year to date and forecast financial position.

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

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

- The full year income forecast for 2022/23 has increased from £635.362m as forecast in Month 6 to £658.667m in Month 7. This is primarily due to the interim WIBSS payments totalling £21.400m that were made in October.
- The NHS income profile increased in Month 2 as the final cohort of trainees transferred to SLE in May. This spiked again in August due to the new SLE rotation intake and again in September with the payment of the pay award and arrears. These movements are also evidenced in the phased increase of pay costs in Table B and the Medical/Dental pay costs in Table B2.

The refreshed forecast annual SLE income is £236.095m and is detailed below. There were one-off GP incentive payments made in October which increased the expenditure above the forecast profile. Additional pay costs are still anticipated in future months as the payment of locum shifts to SLE trainees expands.

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	15.978	16.607	16.662	16.699	18.382	23.292	19.387	19.390	19.390	19.390	19.390	19.420	223.985
NON PAY	0.711	0.957	0.962	1.068	1.206	1.159	1.404	0.929	0.929	0.929	0.929	0.929	12.109
TOTAL	16.689	17.564	17.624	17.766	19.588	24.451	20.791	20.318	20.318	20.318	20.318	20.348	236.095

- HEIW will fund up to £0.299m additional SLE workforce team costs in 2022/23 to enhance the service provided to medical, dental and pharmacy trainees. We have been informed by HEIW that we will need to make a funding bid direct to Welsh Government with regard to the recurrent funding position. We will be looking to arrange a meeting between NWSSP, HEIW and Welsh Government in the foreseeable future.
- The Other income spikes in Months 6, 9 and 12 due to the timing of the quarterly pharmacy rebates which are received one quarter in arrears. Corresponding spikes in the non pay also occur in these months to match the income as the funds are repatriated to NHS Wales.
- Forecast non-cash charges of £5.842m are included which reconciles to our November non-cash submission excluding IFRS16 estimated additions/renewals. There is a year to date adjustment in Month 7 now that the DV quinquennial valuation and indexation adjustments have been processed through the fixed asset register. The income over our £1.551m baseline funding has been anticipated in Table E1.

- £41.192m income and expenditure is included to Month 7 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 £134.780m (£132.521m WRP DEL and £2.259m Redress which forms part of the DEL expenditure from 2022/23) as included in our IMTP and is phased on a straight-line basis over remaining months. This is primarily why the Welsh Government income profile increases significantly each month from Month 8.

The WRP forecast position continues to assume that the risk share agreement will be invoked for £25.345m.

An updated review of the full year forecast, which includes a number of high level assumptions on case settlements, indicates that the potential forecast range is £128m - £140m. The range continues to be large due to the number of assumptions and variables which will impact this forecast.

- £2.774m funding is now anticipated from Welsh Government for the exceptional energy costs following a review of actual invoices received to date and the revised forecast from British Gas which continues to include the impact of the EBRs.
- £0.056m of agency expenditure was reported in Month 7 which is a reduction from the £0.090m reported in Month 6. Expenditure continues to be incurred as we utilise more agency to cover the increasing number of vacancies to ensure service continuity.
- Table B3 details the in month and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level.

The mass vaccination and other covid expenditure sections have been populated. The overall forecast of Covid funding required has slightly reduced from £18.481m in Month 6 to £17.985m in Month 7. This is primarily due to reduced PPE issues in month to Primary & Social Care and the removal of forecast costs for mass vaccination PPE issues.

£0.655m Primary & Social Care PPE was issued in October which is the lowest cost of monthly issues this financial year. The forecast for future months has been held at £1.000m per month in the anticipation of potential increased demand during the winter months. We will continue to monitor this and reduce the forecast where possible (**Action Point 6.1**)

£0.258m for the Ukraine PPE donation has been included in Table B3 as requested (**Action Point 5.6**)

A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD	22/23 Forecast
	£m	£m
Operational Costs	2.642	4.535
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay (non PPE)	0.804	1.460
Social Care/Primary Care PPE	6.733	11.733
Ukraine PPE donation	0.258	0.258
TOTAL	10.437	17.985

At the end of 2021/22 we accrued a credit note to Welsh Government totalling £41.749m to provide NWSSP with the continued cash coverage for the increased stock balance we hold. £3.660m has now been returned to Welsh Government in 2022/23 so that the credit note accrual now totals £38.089m. 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.

CREDIT NOTE BALANCE @ 31.03.2022	41.749
Quarter 1 PPE - Primary & Social Care	-3.535
Ukraine donation - PPE elements	-0.125
CREDIT NOTE BALANCE @ 31.08.2022	38.089

- No changes have been made in month to our annual leave accrual which remains at £0.535m. We are continuing to review this to estimate the potential value at 31st March 2023. Prior to Covid our annual leave accrual was circa £0.100m which would suggest a potential £0.435m release of funds into our financial position. At present this hasn't been included in our forecast until we can assess in more detail. Any release of funds would either be reinvested within NWSSP to further accelerate project benefits or used to increase the distribution to NHS Wales and Welsh Government (**Action Point 6.3**)

4. Savings (Tables C & C3)

Table C3 has been populated with the savings schemes and income generation opportunities per our IMTP, and has been updated with additional in year schemes and actual and forecast achievements. Over achievement of savings

and income generation total £1.792m to Month 7 after internally funding the year to date Covid recovery costs. At Month 7 we are continuing to forecast a potential £3.066m over achievement of savings and income generation based on performance to date, with £1.066m to be utilised to fund the full year forecast Covid recovery costs. We will continue to refine this as we progress throughout the financial year.

5. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

6. Invoiced Income Streams (Table E1)

Line 1 of this table 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 2-23 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The Covid and energy costs have been updated to reflect the most recent funding assumptions as noted in the sections above.

Pay award funding has been updated in Month 7 to £3.720m per the funding confirmation circulated.

7. Cash Flow (Table G)

Not required for completion.

8. PSPP (Table H)

This table is not required for NWSSP.

9. Capital Expenditure Limit Management and Disposals (Tables I, J & K)

Tables I & J have been completed to reconcile to our most recent CEL of £1.947m.

We have fully allocated all our discretionary capital funding and Table I and J have been updated in line with the planned approved expenditure and profile. This will be refined further as orders are placed and lead times confirmed.

We are in discussions with the WG Capital Team regarding funding for the Laundry and TRAMS schemes. To the end of October, expenditure totalling £0.245m has been incurred (£0.167m TRAMS, £0.078m Laundry) for which we await confirmation of capital funding. We await the outcome from the scrutiny of our two Laundry OBCs and one BJC. We have submitted a revised fees estimate for TRAMS and await further discussions to confirm the 2022/23 and 2023/24 split of costs.

All other schemes remain on course to enable us to meet our Capital Expenditure Limit.

We submitted a list of additional capital schemes that we could progress to Welsh Government capital colleagues on 30th September with amendments submitted during October as requested. We have been informed of the successful outcome of the racking and decarbonisation requests and await the outcome of the allocation of any additional capital slippage monies in November.

10. Aged Debtors (Table M)

At 30th September 2022 we had one invoice outstanding over 17 weeks. This is in the process of being credited and re-raised as two separate invoices as requested by BCU.

We have escalated debt collection efforts during October so that payments are received before the 17 week deadline (**Action Point 6.4**)

11. GMS (Table N)

Not required for completion by NWSSP.

12. Dental (Table O)

Not required for completion by NWSSP.

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 7 Financial Monitoring Return along with the Month 6 return at the January meeting (due to the November meeting being cancelled).

14. Authorisation of Return



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NEIL FROW
MANAGING DIRECTOR
NWSSP



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ANDREW BUTLER
DIRECTOR OF FINANCE &
CORPORATE SERVICES

10th November 2022

NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 8 – NOVEMBER 2022

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for November 2022 and should be read in conjunction with the Monitoring Return tables submitted for Month 8.

Thank you for your letter of 23rd November 2022 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

NWSSP's forecast outturn financial position at Month 8 is reported at break-even. This is based on the continued assumption per the IMTP financial assumptions letter issued on 14th March 2022 and recent discussions with senior Welsh Government finance officials that we can continue to anticipate income from Welsh Government for Month 7 to 12 energy pressures. The position assumes that certain costs related to Covid recovery estimated at £1.226m will be non-recurrently funded internally within NWSSP for 2022/23. We have commenced conversations with Welsh Government regarding the recurrent Covid recovery funding position in recent weeks and await an update on this.

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A has been amended in month to revise the additional Welsh Government funding for the amended energy pressure following a review of the forecast in early December. An increase to the forecast energy costs is reported this month due to an increase in laundry energy costs being forecast by the UHBs that recharge these costs to us. £3.181m is now anticipated which is an increase from £2.774m forecast in Month 7. The forecast is £1.181m more than the £2.000m originally assumed in our IMTP in January 2022. There remains a lot of uncertainty in our forecast due to the lack of historic energy analysis for the laundries and the delays incurred in receiving energy recharges from UHBs.

The table has also been populated with the updated Covid expenditure forecast and equivalent funding anticipated.

Year to date over-achievement of savings and income generation of £1.964m are included in Table A. The over-achievement of savings and income generation is forecast to reach £2.200m by the end of the financial year after utilising £1.226m

of these savings to fund the Covid recovery costs we are incurring. These savings will be utilised for NWSSP investments in areas to accelerate benefits, to fund pressures and to increase the distribution to NHS Wales.

The recurring nature of these Covid recovery costs has been reflected in Table A as requested and Table A1 completed (**Action Point 6.2a**)

We are reviewing the level of our distribution to NHS Wales based on the continued assumption of full funding for all the income anticipated in Table E1. We would also be keen to explore potential brokerage opportunities.

2. Overview of Key Risks & Opportunities (Table A2)

This table has been populated with the risks and opportunities per our IMTP which have been reviewed and updated further during November. The key changes from the Month 7 submission are:

- The risk regarding additional funding for energy cost pressures has been amended to reconcile to the £3.181m pressure reduced by the £1.217m funding for April to September that has been invoiced to date.
- The risk of not receiving additional funding for the 1.25% National Insurance costs has been reduced to zero in month given we have now received confirmation to invoice for this funding.

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

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

- The full year income forecast for 2022/23 has increased from £658.667m as forecast in Month 7 to £663.109m in Month 8. This is primarily due to an increase to the pharmacy rebate income following confirmation of the end of year Vertex settlement rebate of £6m which caused the spike in the Month 8 other income and non pay totals. The overall increase is reduced by a £1m reduction in the SLE income forecast as detailed below.
- The NHS income profile increased in Month 2 as the final cohort of trainees transferred to SLE in May. This spiked again in August due to the new SLE rotation intake and again in September with the payment of the pay award and arrears. These movements are also evidenced in the phased increase of pay costs in Table B and the Medical/Dental pay costs in Table B2.

The refreshed forecast annual SLE income is £235.072m and is detailed below. This is circa £1.000m less than was forecast last month due to reduced costs in November. Due to the ad hoc locum payments that are now processed through SLE some variability between months is to be expected. We will review the forecast again at the end of quarter 3.

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	15.978	16.607	16.662	16.699	18.382	23.292	19.387	18.479	19.390	19.390	19.390	19.420	223.075
NON PAY	0.711	0.957	0.962	1.068	1.206	1.159	1.404	0.816	0.929	0.929	0.929	0.929	11.997
TOTAL	16.689	17.564	17.624	17.766	19.588	24.451	20.791	19.295	20.318	20.318	20.318	20.348	235.072

- HEIW will fund up to £0.299m additional SLE workforce team costs in 2022/23 to enhance the service provided to medical, dental and pharmacy trainees. We have been informed by HEIW that we will need to make a funding bid direct to Welsh Government with regard to the recurrent funding position. We have progressed a funding submission to Emma Coles in Welsh Government in early December.
- The Other income spikes in Months 6, 9 and 12 due to the timing of the quarterly pharmacy rebates which are received one quarter in arrears. Corresponding spikes in the non pay also occur in these months to match the income as the funds are repatriated to NHS Wales.
- Forecast non-cash charges of £5.842m are included which reconciles to our November non-cash submission excluding IFRS16 estimated additions/renewals. The income over our £1.551m baseline funding has been anticipated in Table E1. The small adjustment has been made between our baseline and strategic depreciation charges to reconcile back to the November non-cash submission (**Action Point 7.2**)
- £52.852m 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 £134.780m (£132.521m WRP DEL and £2.259m Redress which forms part of the DEL expenditure from 2022/23) as included in our IMTP and is phased on a straight-line basis over remaining months. This is primarily why the Welsh Government income profile increases significantly each month from Month 9.

The WRP forecast position continues to assume that the risk share agreement will be invoked for £25.345m.

An updated review of the full year forecast, which includes a number of high level assumptions on case settlements, indicates that the potential forecast range is £128m - £142m. The range continues to be large due to the number of assumptions and variables which will impact this forecast.

- £3.181m funding is now anticipated from Welsh Government for the exceptional energy costs following a review of actual invoices received to date, the revised forecast from British Gas which continues to include the impact of the EBRs and updated forecasts from UHBs for the charges they anticipate making to us for laundry energy costs. There have been some increases to the laundry energy forecasts from UHBs this month which has led to an increase in our overall forecast. The laundry recharges from UHBs reflect the largest risk to our forecast given our lack of historic energy usage trends, apportionment of costs from UHBs, the large volume of energy consumed and the delays in receiving these recharges/accurate forecasts from UHBs. We continue to work with UHB finance colleagues to mitigate these risks as far as possible.
- £0.086m of agency expenditure was reported in Month 8. Expenditure continues to be incurred as we utilise more agency to cover the increasing number of vacancies to ensure service continuity.
- Table B3 details the in month and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level.

The mass vaccination and other covid expenditure sections have been populated. The overall forecast of Covid funding required has slightly reduced from £17.985m in Month 7 to £17.826m in Month 8.

£0.872m Primary & Social Care PPE was issued in November which is an increase on previous months. The forecast for future months has been held at £1.000m per month in the anticipation of potential further increased demand during the winter months.

A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD	22/23 Forecast
	£m	£m
Operational Costs	3.011	4.522
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay (non PPE)	0.919	1.442
Social Care/Primary Care PPE	7.605	11.605
Ukraine PPE donation	0.258	0.258
TOTAL	11.793	17.826

At the end of 2021/22 we accrued a credit note to Welsh Government totalling £41.749m to provide NWSSP with the continued cash coverage

for the increased stock balance we hold. £3.660m has now been returned to Welsh Government in 2022/23 so that the credit note accrual now totals £38.089m. 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.

CREDIT NOTE BALANCE @ 31.03.2022	41.749
Quarter 1 PPE - Primary & Social Care	-3.535
Ukraine donation - PPE elements	-0.125
CREDIT NOTE BALANCE @ 30.11.2022	38.089

- No changes have been made in month to our annual leave accrual which remains at £0.535m. We are commissioning an organisation wide exercise in early January to identify the likely annual leave carry forward request. We aim to provide a further update in the Month 10 monitoring return. Any release of the accrual will be included in the tracker as an Accountancy Gain together with details of how it will be utilised (**Action Point 6.3**)

4. Savings (Tables C & C3)

Table C3 has been populated with the savings schemes and income generation opportunities per our IMTP, and has been updated with additional in year schemes and actual and forecast achievements. Over achievement of savings and income generation total £1.964m to Month 8 after internally funding the year to date Covid recovery costs. At Month 8 we are continuing to forecast a potential £3.426m over achievement of savings and income generation based on performance to date, with £1.226m to be utilised to fund the full year forecast Covid recovery costs. We will continue to refine this as we progress throughout the financial year.

5. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

6. Invoiced Income Streams (Table E1)

Line 1 of this table 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 2-23 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The Covid and energy costs have been updated to reflect the most recent funding assumptions as noted in the sections above and have been reduced by any invoices raised to date.

Employers NI increase, Holiday Pay Arrears, 21/22 Band 1 & 2 uplift and 2022/23 Pay Award funding have all been removed in month now that confirmation of the values to be funded has been received and invoices raised to claim the funding in month.

7. Cash Flow (Table G)

Not required for completion.

8. PSPP (Table H)

This table is not required for NWSSP.

9. Capital Expenditure Limit Management and Disposals (Tables I, J & K)

Tables I & J have been completed to reconcile to our most recent CEL of £4.968m issued on 1st December 2022.

We have fully allocated all our discretionary capital funding and Table I and J have been updated in line with the planned approved expenditure and profile. This will be refined further as orders are placed and lead times confirmed.

All schemes remain on course to enable us to meet our Capital Expenditure Limit.

10. Aged Debtors (Table M)

At 30th November 2022 we had seven invoice outstanding over 17 weeks. Five have been paid or credited in early December, with two outstanding for payment. The UHBs have confirmed that there is no dispute with these invoices and are urgently progressing for payment. We continue best efforts to recover all dates

and escalate issues as early as possible to avoid invoices breaching the 11 week deadline although we continue to face issues with approval of payment and/or generation of purchase order numbers with UHBs/Trusts (**Action Point 6.4**)

11. GMS (Table N)

Not required for completion by NWSSP.

12. Dental (Table O)

Not required for completion by NWSSP.

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 Financial Monitoring Return along with the Month 6 and 7 return at the January meeting (due to the November meeting being cancelled).

14. Authorisation of Return



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NEIL FROW
MANAGING DIRECTOR
NWSSP



.....
ANDREW BUTLER
DIRECTOR OF FINANCE &
CORPORATE SERVICES

12th December 2022

NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 9 – DECEMBER 2022

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for December 2022 and should be read in conjunction with the Monitoring Return tables submitted for Month 9.

Thank you for your email of 19th December 2022 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

NWSSP's forecast outturn financial position at Month 9 is reported at break-even. This is based on the continued assumption per the IMTP financial assumptions letter issued on 14th March 2022 and recent discussions with senior Welsh Government finance officials that we can continue to anticipate income from Welsh Government for Month 7 to 12 energy pressures.

The position assumes that certain costs related to Covid recovery, estimated at £1.215m, will be non-recurrently funded internally within NWSSP for 2022/23. We have commenced conversations with Welsh Government regarding the recurrent Covid recovery funding position in recent weeks and have a meeting arranged with Sioned Rees on 12th January to discuss this and other Covid funding further following the submission of a paper detailing the ongoing Covid activities and associated costs (**Action Point 6.2a**).

1. Movement of Opening Financial Plan to Forecast Outturn (Table A)

Table A has been amended in month to reflect the Month 9 update. Energy costs continue to be forecast at £5.500m with £3.182m income anticipated for the funding shortfall. The forecast is £1.182m more than the £2.000m originally assumed in our IMTP in January 2022. There remains a lot of uncertainty in our forecast due to the lack of historic energy analysis for the laundries and the delays incurred in receiving energy recharges from UHBs. We continue to communicate with UHB colleagues regularly to understand the various issues and ensure our accruals are as accurate as possible.

The table has also been populated with the updated Covid expenditure forecast and equivalent funding anticipated which remains in line with the Month 8 forecast.

Year to date over-achievement of savings and income generation of £2.152m are included in Table A. The over-achievement of savings and income generation is forecast to reach £2.311m by the end of the financial year after utilising £1.215m of these savings to fund the Covid recovery costs we are incurring. These savings will be utilised for NWSSP investments in areas to accelerate benefits, to fund pressures and to increase the distribution to NHS Wales to £2.000m in 2022/23.

We also can confirm that we submitted a formal request for brokerage of £1.000m to Welsh Government on 5th December 2022 (**Action Point 8.1**)

2. Overview of Key Risks & Opportunities (Table A2)

This table has been populated with the risks and opportunities per our IMTP which have been reviewed and updated further during December. The key changes from the Month 8 submission are:

- The risk of energy increases being more than forecast has been reduced to £0.250m now we have more certainty on the forward purchases of energy below the EBR5 maximum discount threshold plus we have received updated forecasts from UHB colleagues for Laundry energy usage. An opportunity that the forecast for energy could also reduce by £0.250m has also been included from Month 9.

We are liaising with Welsh Government Colleagues regarding invoicing for the Medical Examiner Service costs and will also progress the IP5 funding shortfall issue if this cannot be covered non-recurrently within our in year financial position. If the 2022/23 funding shortfall can be managed internally, it will remain an issue recurrently and will increase further from 2023/24 as the current shortfall excludes any pressure for energy price increases which are being funded in 2022/23 (**Action Point 8.2**)

3. Actual Year to Date Monthly Position (Tables B, B2 & B3)

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

- The full year income forecast for 2022/23 has increased from £663.109m as forecast in Month 8 to £666.146m in Month 9. This is primarily due to a further increase (£4.2m) in the pharmacy rebate income we are forecasting to achieve this year. The overall income increase is reduced

by £2.4m for SLE due to pay costs in recent months being less than anticipated. This is noted in the detailed profile below.

- Welsh Government income increased in Month 9 due to the increased Welsh Risk Pool costs in month relating to the annual payments and ASHE uplifts paid in December.
- The NHS income profile increased in Month 2 as the final cohort of trainees transferred to SLE in May. This spiked again in August due to the new SLE rotation intake and again in September with the payment of the pay award and arrears. These movements are also evidenced in the phased increase of pay costs in Table B and the Medical/Dental pay costs in Table B2.

The refreshed forecast annual SLE income is £232.420m and is detailed below. This is less than the £235.072m that was forecast last month following a review of pay costs over the last few months. Due to the ad hoc locum payments that are now processed through SLE and the February rotation some variability between months is to be expected.

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	TOTAL
PAY	15.978	16.607	16.662	16.699	18.382	23.292	19.387	18.479	18.534	18.590	18.590	18.620	219.819
NON PAY	0.711	0.957	0.962	1.068	1.206	1.159	1.404	0.816	1.533	0.929	0.929	0.929	12.601
TOTAL	16.689	17.564	17.624	17.766	19.588	24.451	20.791	19.295	20.067	19.518	19.518	19.548	232.420

- HEIW will fund up to £0.299m additional SLE workforce team costs in 2022/23 to enhance the service provided to medical, dental and pharmacy trainees. We progressed a submission for recurrent funding to Emma Coles in Welsh Government in early December and await an update with regard to the funding position.
- The Other income spikes in Months 6, 8, 9 and 12 due to the timing of the annual settlement and quarterly pharmacy rebates which are received one quarter in arrears. Corresponding spikes in the non pay also occur in these months to match the income as the funds are repatriated to NHS Wales and Welsh Government.
- Forecast non-cash charges of £5.842m are included which reconciles to our November non-cash submission excluding IFRS16 estimated additions/renewals. The income over our £1.551m baseline funding has been anticipated in Table E1 with the small adjustment between our baseline and strategic depreciation charges made as requested (**Action Point 7.2**)
- £75.840m 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 £134.780m (£132.521m WRP DEL and £2.259m Redress which forms part of the DEL expenditure from 2022/23) as included in our IMTP and is phased on a straight-line basis over remaining months.

The WRP forecast position continues to assume that the risk share agreement will be invoked for £25.345m.

An updated review of the full year forecast, which includes a number of high level assumptions on case settlements, indicates that the potential forecast range is £129m - £142m. The range continues to be large due to the number of assumptions and variables which continue to impact the forecast as we enter Quarter 4.

- £3.182m funding continues to be anticipated from Welsh Government for the exceptional energy costs following a review of actual invoices received to date, the revised forecast from British Gas which continues to include the impact of the EBRS and updated forecasts from UHBs for the charges they anticipate making to us for laundry energy costs.

There have been some reductions to the forecast costs for Laundries but these have been offset by increased costs for IP5 utilities which have seen significant increased costs following the end of the previous fixed rate contract which is managed through the site Landlord.

- £0.039m of agency expenditure was reported in Month 9 which is a reduction on previous months. Expenditure continues to be incurred as we utilise more agency to cover the increasing number of vacancies to ensure service continuity.
- Table B3 details the in month and forecast Covid19 additional expenditure. This has been collated and reviewed on a service by service basis within NWSSP and will continue to be monitored at this level.

The mass vaccination and other covid expenditure sections have been populated. The overall forecast of Covid funding required has slightly reduced from £17.826m in Month 8 to £17.716m in Month 9.

£0.884m Primary & Social Care PPE was issued in December which is in line with the November issues. The forecast for future months has been held at £1.000m per month in the anticipation of potential further increased demand during the winter months.

A summary of the year to date and forecast expenditure is detailed below:

Covid Costs	YTD	22/23 Forecast
	£m	£m
Operational Costs	3.396	4.533
Mass Vacc - PPE	-	-
Mass Vacc - Pay & Non Pay (non PPE)	1.037	1.437
Social Care/Primary Care PPE	8.489	11.489
Ukraine PPE donation	0.258	0.258
TOTAL	13.180	17.716

At the end of 2021/22 we accrued a credit note to Welsh Government totalling £41.749m to provide NWSSP with the continued cash coverage for the increased stock balance we hold. £3.660m has now been returned to Welsh Government in 2022/23 so that the credit note accrual now totals £38.089m. We are arranging a meeting with Welsh Government colleagues in January and we will review if any further cash can be returned to Welsh Government, although this is dependent upon overall stock balances reducing and/or additional stock purchase requirements.

CREDIT NOTE BALANCE @ 31.03.2022	41.749
Quarter 1 PPE - Primary & Social Care	-3.535
Ukraine donation - PPE elements	-0.125
CREDIT NOTE BALANCE @ 31.12.2022	38.089

- No changes have been made in month to our annual leave accrual which remains at £0.535m. We have commissioned an organisation wide exercise in early January to identify the likely annual leave carry forward request. We aim to provide a further update in the Month 10 monitoring return.

4. Savings (Tables C & C3)

Table C3 has been populated with the savings schemes and income generation opportunities per our IMTP, and has been updated with additional in year schemes and actual and forecast achievements. Over achievement of savings and income generation total £2.152m to Month 9 after internally funding the year to date Covid recovery costs. At Month 9 we are continuing to forecast a potential £3.526m over achievement of savings and income generation based on performance to date, with £1.215m to be utilised to fund the full year forecast Covid recovery costs. We will continue to refine this as we progress throughout the financial year.

5. Welsh NHS Assumptions (Table D)

Table D has been left blank as requested.

6. Invoiced Income Streams (Table E1)

Line 1 of this table 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 2-23 have been populated with anticipated income streams for which we have yet to receive formal funding confirmation.

The Covid and energy costs have been updated to reflect the most recent funding assumptions as noted in the sections above and have been reduced by any invoices raised to date.

The IFRS Revenue Recovery value has been updated to £1.111m in Month 9 **(Action Point 8.3)**

7. Cash Flow (Table G)

Not required for completion.

8. PSPP (Table H)

This table is not required for NWSSP.

9. Capital Expenditure Limit Management and Disposals (Tables I, J & K)

Tables I & J have been completed to reconcile to our most recent CEL of £4.968m issued on 1st December 2022.

We have fully allocated all our discretionary capital funding and Table I and J have been updated in line with the planned approved expenditure and profile. This will be refined further as more detailed delivery timelines are confirmed.

Following discussion with Welsh Government capital colleagues the All Wales Laundry salary costs for 2022/23 have been reduced to zero as these have been covered off within the overall All Wales Laundry OBC funding and the release of an accounting gain from 2021/22.

The funding of TRAMS OBC Fees continue to be under discussion with Welsh Government Capital colleagues regarding the potential to progress test to fit works and incur all the forecast expenditure within 2022/23 (**Action Point 8.4**)

Negative discretionary IT expenditure is reported in month due to an accounting gain from a VAT rebate that was capitalised in 2021/22.

All schemes remain on course to enable us to meet our Capital Expenditure Limit.

10. Aged Debtors (Table M)

At 31st December 2022 we had twelve invoices outstanding over 17 weeks. Four have been paid or credited in early January, with the breaches primarily due to leave over the Christmas period and the authorisation of invoices being delayed. The UHBs have confirmed that there is no dispute with these invoices and are urgently progressing for payment, although we continue to face issues with approval of payments and/or generation of purchase order numbers with UHBs/Trusts (**Action Point 8.5**)

11. GMS (Table N)

Not required for completion by NWSSP.

12. Dental (Table O)

Not required for completion by NWSSP.

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 9 Financial Monitoring Return along with the Month 6, 7 and 8 returns at the January meeting (due to the November meeting being cancelled).

14. Authorisation of Return



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NEIL FROW
MANAGING DIRECTOR
NWSSP



.....
ANDREW BUTLER
DIRECTOR OF FINANCE &
CORPORATE SERVICES

12th January 2023