

## Shared Services Partnership Committee - PART A

21 May 2020, 10:30 to 12:00  
By Skype

### Agenda

<b>1</b>		
<b>Agenda</b>		
<b>1.1</b>		
<b>Welcome and Introductions</b>		Margaret Foster
<b>1.2</b>		
<b>Apologies for absence</b>		Margaret Foster
<b>1.3</b>		
<b>Declarations of Interest</b>		Margaret Foster
<b>1.4</b>		
<b>Draft minutes of meeting held on 16 January 2020</b>		Margaret Foster
 Reviewed Minutes Part A 16.01.20 (002).pdf	(7 pages)	
<b>1.5</b>		
<b>Action Log</b>		Margaret Foster
 1.5 Action Log May 2020.pdf	(1 pages)	
<b>2</b>		
<b>COVID-19 Update</b>		
<b>2.1</b>		
<b>General Update</b>		Andrew Butler
 SSPC COVID-19 Update.pdf	(14 pages)	
<b>2.2</b>		
<b>Workforce Update</b>		Gareth Hardacre
 21052020 SSPC Committee Report - COVID Workforce Data.pdf	(6 pages)	
<b>3</b>		
<b>Chair/Managing Director's Report</b>		
<b>3.1</b>		
<b>Chair's Report</b>		Verbal
<b>3.2</b>		
<b>Reappointment of Chair</b>		
 SSPC Chair's Extension May 2020 (002).pdf	(3 pages)	

### 3.3

#### Managing Director's Update

 SSPC MD Update May 20.pdf	(7 pages)
 NWSSP Service Area Infograph-updated.pdf	(13 pages)

## 4 Items for Approval/Endorsement

### 4.1

#### Temporary Medical Unit

Neil Frow

 Temporary Medicines Unit for COVID19 Governance Paper 15 05 20 v10.pdf	(13 pages)
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### 4.2

#### Updated SOs and SFIs

Andrew Butler

 SSPC Review of Standing Orders 18052020.pdf	(4 pages)
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#### 4.2.1

##### Change to Scheme of Delegation - Existing Liabilities GMPI

Alison Ramsey

 SSPC ELS Change to Scheme of Delegation.pdf	(9 pages)
 Appendix A_Delegation letter for MDDUS.pdf	(2 pages)
 Appendix B - Financial Delegations NWSSP.pdf	(2 pages)

#### 4.2.2

##### Declarations of Interest - Single Tender Actions

Andrew Butler

 NWSSP Committee 21-05-20 DOI STA FINAL.pdf	(4 pages)
 SQA_-_STA_REQUEST_FORM v2 150520.pdf	(6 pages)

### 4.3

#### Once for Wales Concerns Management Database - Funding Split

Alison Ramsey

 SSPC Update Datix Paper May 2020.pdf	(8 pages)
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## 5

### Project Updates

#### 5.1

##### Laundry Services

Neil Frow

 Laundry SSPC MAY 20 Paper final1.0.pdf	(6 pages)
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#### 5.2

##### Single Lead Employer

Gareth Hardacre

 Paper re SLE update .pdf	(7 pages)
 Appendix A SLE (PID - Medical and Foundation trainees) draft 14 05 20.pdf	(17 pages)

#### 5.3

##### NHAIS

Andrew Butler

 NHAIS Report for SSPC - May 2020.pdf	(6 pages)
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## 6

### Governance, Performance & Assurance

#### 6.1

## Finance & Performance Report

Andrew Butler



SSPC Finance and Corporate Services May 20  
FINAL.pdf

(19 pages)

### 6.2

#### Annual Governance Statement

Peter Stephenson



SSPC Cover Sheet Annual Governance Statement.pdf

(4 pages)



FINAL Annual Governance Statement 2019-20.pdf

(37 pages)

### 6.3

#### Corporate Risk Register

Peter Stephenson



SSPC Corporate Risk Register May 2020.pdf

(5 pages)

#### 6.3.1

##### Appendix 1 - Corporate Risk Register



Corporate Risk Register 20200514.pdf

(5 pages)

#### 6.3.2

##### Appendix 2 - COVID-19 Risk Register



COVID-19 Risk Register 20200514.pdf

(4 pages)

### 6.4

#### Issues and Complaints Annual Report

Peter Stephenson



SSPC Annual Report Issues and Complaints 2019-  
20.pdf

(8 pages)

## 7

### Items for Information

#### 7.1

##### Finance Monitoring Reports

Andrew Butler



Jan 20 Monitoring Returns.pdf

(15 pages)



February 20 Monitoring Returns.pdf

(14 pages)



March 20 Monitoring Returns.pdf

(13 pages)

#### 7.2

##### Audit Committee Highlight Report

Peter Stephenson



28042020 SSPC Audit Committee Assurance  
Report.pdf

(5 pages)

## 8

### Any Other Business

## MINUTES OF THE SHARED SERVICES PARTNERSHIP COMMITTEE (SSPC)

Thursday 16<sup>th</sup> January 2020

10:00 – 13:00

NWSSP HQ, BOARDROOM

### Present:

Attendance	Designation	Health Board / Trust
Margaret Foster (MF)	Chair	NWSSP
Neil Frow (NF)	Managing Director	NWSSP
Gareth Hardacre (GH)	Director of Workforce & OD	NWSSP
Bob Chadwick (BC)	Executive Director of Finance	Cardiff & Vale UHB
Huw Thomas (HT)	Executive Director of Finance	HDUHB
Mark Osland (MO)	Executive Director of Finance	Velindre
Hazel Robinson (HR)	Executive Director of Workforce & OD	Swansea Bay UHB
Alison Ramsey (AR)	Interim Director of Finance & Corporate Services	NWSSP
Other Attendees		
Steve Elliott (SE)	Deputy Director of Finance	Welsh Government
Martyn Pennell (MP)	Head of Financial Accounting	HEIW
Mark McIntyre (MM)	Deputy Director of Workforce & OD	Powys tHB
Rob Nolan (RN)	Finance Director, Commissioning and Strategy	BCUHB
Peter Stephenson (PS)	Head of Finance & Business Development	NWSSP
Maria Newbold (MN)/Gareth Price (GP)	Board Secretariat	NWSSP
Andrew Evans (AE) (item 2.1 only)	National Programme Manager, Medical Examiner Service	NWSSP

### 1. PRELIMINARY MATTERS

#### WELCOME AND INTRODUCTIONS

No.	Minute	Action
1.1	The Chair welcomed attendees to the January 2020 Shared Services Partnership Committee (SSPC) meeting.	
APOLOGIES FOR ABSENCE		
1.2	Apologies for absence were <b>received</b> from the following:	

	<ul style="list-style-type: none"> <li>• Phil Bushby, Director of People, PHW</li> <li>• Anne Phillimore, Director of Workforce, Cwm Taf Morgannwg</li> <li>• Eifion Williams, Director of Finance, HEIW</li> <li>• Geraint Evans, Director of Workforce &amp; OD, ABUHB</li> <li>• Chris Turley, Director of Finance, WAST</li> <li>• Pete Hopgood, Director of Finance, Powys tHB</li> <li>• Steve Ham, Chief Executive, Velindre University NHS Trust</li> <li>• Darren Dupre, Unison</li> <li>• Andy Butler, Director of Corporate and Finance, NWSSP</li> </ul>	
<b>DECLARATIONS OF INTEREST</b>		
<b>1.3</b>	<b>Declarations of Interest</b> There were no declarations of interest.	
<b>1.4</b>	<b>Previous Minutes</b> Draft Minutes of meeting held on 2 <sup>nd</sup> December 2019 were reviewed and accepted with no issues raised.	
<b>1.5</b>	<b>Action Log</b> All actions to be discussed are complete or on the agenda.	
<b>1.6</b>	<b>Other Matters Arising</b> No other matters arising.	
<b>2. SERVICE DEEP DIVE</b>		
<b>2.1</b>	<p><b>Medical Examiner service</b></p> <p>Andrew Evans gave a comprehensive update on the Medical Examiner Service. The service is a UK-wide approach to addressing the issues raised in scandals such as the Shipman case, Morecambe Bay, and Mid-Staffs. The vision for NHS Wales is a single Medical Examiner service, working on behalf of HBs and Trusts that strengthens safeguards for the public, improves the quality of death certification, and avoids unnecessary distress for the bereaved. The service will be run by the Office of the Lead Medical Examiner for Wales, and will be delivered by Medical Examiners (ME) (approx. 8 WTE) supported by Medical Examiner Officers (MEO) (approx. 27 WTE). Initially MEs will work on a regional basis with the ultimate intention of being employed on an all-Wales basis. MEOs will be locally based, largely on DGH sites. The implementation will be split over two phases, with Phase One focusing on four hub sites with one in each of the following regions (North: Mid and West: South Wales Central: South Wales East). Phase Two, due for completion by March 2021, will cover 15 spoke sites, with full implementation of the service from April 2021.</p>	
<b>3. CHAIR AND MANAGING DIRECTOR'S REPORTS</b>		
<b>3.1</b>	<p><b>Chairman's Report</b></p> <p>MF reported that there have been no recent meetings with Health Boards and NWSSP are waiting for ABUHB to reschedule their meeting.</p> <p>MF had attended the Chairs meeting where there was significant discussion on the Welsh Risk Pool financial position. NWSSP is trying to ensure that the outturn for 2019/20 is managed as closely as is possible to ensure that it is consistent with forecasts. Regular updates are being provided to DoFs and to the WRPC.</p>	

	<p>The Committee: <b>NOTED</b> the update.</p>	
<b>3.2</b>	<p><b>Managing Director's Report</b></p> <p>NF presented his report and commented on the following:</p> <p><b>Medical Examiner Service</b> - there are outstanding issues regarding the finances and software, which are being dealt with by Welsh Government.</p> <p><b>Brexit</b> – much of the preparatory work completed to date is being stood down, although this may need to be reinstated dependent on the outcome of UK Government discussion with the EU. NWSSP continues to liaise closely with Welsh Government on both Brexit preparations and the future intentions for IP5, for which the Strategic Outline Case came to the SSPC in early December. It was confirmed that any specific programmes suggested for hosting within IP5 would be subject to their own business case type process which would require appropriate approval.</p> <p><b>NHAIS</b> – notification has been received from Welsh Government that the capital funding has been approved to allow NWSSP to procure the system from Northern Ireland. Questions were asked as to whether the reinstatement of the devolved government in Stormont would impact the joint working, but this is regarded as a positive development rather than a threat. Work is also progressing well on the separate Ophthalmic system that is being developed in-house.</p> <p><b>Lead Employer</b> – The programme of work is on track, and discussions are on-going with HEIW. HR enquired about numbers, GH stated that Pharmacy and Dental has been completed and the rest is now being progressed. Further clarity on the arrangements and implications for this initiative should be available shortly.</p> <p>The Committee: <b>NOTED</b> the Report</p>	
<b>4. ITEMS FOR APPROVAL/ENDORSEMENT</b>		
<b>4.1</b>	<p><b>IMTP</b></p> <p>AR presented the latest version of the Plan, together with an accompanying presentation.</p> <p>The IMTP is a balanced plan and there will also be a presentation to Audit Committee next week ahead of the final submission IMTP before the 31<sup>st</sup> January. The plan has been subject to substantial stakeholder engagement and should therefore accurately reflect the needs of NWSSP, its staff and its partners.</p> <p>Discussions with Welsh Government to date have demonstrated that they are supportive of the plan but are keen for NWSSP to demonstrate leadership in driving through all-Wales initiatives, and in seeking and acting on customer feedback. Themes of continuous improvement and the well-being of our staff, partners and the wider population are embedded throughout the document.</p> <p>Monitoring of achievement of the plan is primarily through the Quarterly Review process held with each Directorate, and regular</p>	

	<p>reporting of progress will continue to the SSPC as well as ongoing discussions at a local level with peer groups and operational teams.</p> <p>It was noted that a number of the initiatives were predicated on receiving a large capital investment over the plan cycle. There are a number of agile working pilots, linked to future investment in ICT, and there is a Programme Board for the O365 implementation. Income will significantly increase with HCS agreeing more work and the impact of the Single Lead Employer Scheme.</p> <p>The Vision and Mission statements have been reviewed and a revised statement approved; 'Adding Value through Partnership, Innovation and Excellence.'</p> <p>Key challenges are to ensure a return on investments and to have clarity over, and monitoring of, benefits realisation. The savings target is £1.8m, which relates mostly to pay savings linked to vacancy management, automation, use of robotics and process reviews linked to skill mix changes.</p> <p>HT stated that it is a well written plan as usual. He noted our request to help get NWSSP's voice heard at Regional Partnership Boards and is happy to help us to achieve that. However he also mentioned that the reputational risk for the Health Boards is increased if they promote NWSSP in these meetings and we fail to deliver.</p> <p>HT also commented on the Once-for-Wales approach. He acknowledged the difficulties that NWSSP may face in getting all HBs and Trusts to sign up to a consistent approach at the same time. He stated that if certain HBs or Trusts were keen to outsource specific services to NWSSP, this could be done with that particular HB or Trust, and then the remaining organisations could monitor the effectiveness of the new arrangements and choose whether or not to participate in them.</p> <p>The Committee:</p> <p><b>APPROVED</b> the Plan for submission to Welsh Government</p>	
4.2	<p><b>Motor Fleet Insurance Renewal</b></p> <p>PS presented a paper produced by Procurement.</p> <p>The paper requested approval for NWSSP to go out to tender for a 3 year insurance policy, with the option to extend for a further year. The tender will use a current framework to negotiate on an all-Wales basis but lotted by organisation so that there is no risk-sharing between organisations and each will have its own Policy.</p> <p>The Committee:</p> <p><b>APPROVED</b> the paper</p>	
4.3	<p><b>Legal &amp; Risk Online Resource Library Subscription</b></p> <p>PS presented the paper produced by Legal &amp; Risk Services.</p> <p>The paper seeks approval to use the Ministry of Justice Framework for the provision of Legal Publications. The Framework is used by Welsh Government and Legal &amp; Risk estimate savings of £56k + VAT on total expenditure of £185k + VAT over a four year period.</p>	

	The Committee: <b>APPROVED</b> the paper	
<b>5. PROJECT UPDATES</b>		
<b>5.1</b>	<p><b>NHAIS Update</b></p> <p>The paper was not discussed in detail as it had been largely covered in the Managing Director's update earlier on the agenda.</p> <p>The Committee: <b>NOTED</b> the Update</p>	
<b>5.2</b>	<p><b>Laundry Services</b></p> <p>NF presented an update report.</p> <p>Initial workshops have been held regarding the locations of the new Laundries, and further events are planned for early February to help finalise the locations. There will be one in the north and two in the south. The Committee agreed that once the locations had been agreed at the workshops, formal consultations would start with staff and the outcomes would feed into the final OBC which would be brought to the May Committee for final approval and then submission to Welsh Government. It was envisaged that the consultation process would begin in mid February 2020.</p> <p>The Committee: <b>NOTED</b> the Report and <b>AGREED</b> to begin formal staff consultation once the three sites had been agreed through the workshop process.</p>	
<b>5.3</b>	<p><b>TRAMS Update</b></p> <p>NF gave a verbal update. The final Programme Business Case (PBC) was originally scheduled for this committee but has been delayed slightly as there had been a number of last minute questions raised by the Chief Pharmacists. Given that there were a number of valid points raised it was felt that these needed to be working through and addressed within the PBC.</p> <p>NF has been asked by the Director General / Chief executive of NHS Wales to provide an update to Welsh Government Efficiency Group. He stated that he hoped that the PBC would be available to be included in the May Committee agenda for approval. The project team would make sure that the document would be available as soon as possible in advance of the Committee meeting to give organisations a chance to review internally.</p> <p>MF noted that the Chief Pharmaceutical Officer for Wales in Welsh Government had already written to CEOS, Workforce and Planning Directors to make sure they were aware of the project and she asked for attendees to discuss the strategic issues around this project within their own health boards before the next meeting</p> <p>The Committee: <b>NOTED</b> the Report</p>	
<b>5.4</b>	<b>PMO Highlight Report</b>	

	<p>AR advised that there are no concerns to highlight with the report, other than those already highlighted in the IMTP presentation.</p> <p>The Committee: <b>NOTED</b> the Report</p>	
<b>6. GOVERNANCE, PERFORMANCE &amp; ASSURANCE</b>		
<b>6.1</b>	<p><b>Finance, Performance Report</b></p> <p>AR advised that NWSSP continues to forecast a break-even position which includes the £2m re-distribution to Health Boards.</p> <p>Aged debts and timely payment of NHS invoices remain a concern although positive progress had been made over the last few months, more work was still needed.</p> <p>Some of the KPI information in the report was not available at point of issuing due to staff sickness, but these have now been updated and will be resent to all present after the meeting.</p> <p>The WRP risk-sharing position now stands at £9.7m and has been notified through the DoFs Group. MF reiterated the difficulties in landing on an accurate forecast for the WRP.</p> <p>Sickness figures are higher than previous periods due to increases in short-term sickness, but NWSSP has a lower level of sickness than the rest of NHS Wales. Retention rates are stabilising following significant efforts to ensure that NWSSP is seen as an employer of choice. Many of the staff that have left NWSSP have done so on the basis of a promotion within NHS Wales. There have been a number of deaths in service as well this year, which is unusual for NWSSP. PADR compliances is at 83% which is improving but more work is being done by the divisions.</p> <p>The Committee: <b>NOTED</b> the Report</p>	
<b>6.2</b>	<p><b>Corporate Risk Register</b></p> <p>PS stated that the two red risks on the Corporate Risk Register have already been discussed earlier in the meeting. One new risk has been added relating to the potential development of the Mamhilad site by the Landlord. Two risks have been removed as follows:</p> <ul style="list-style-type: none"> <li>• Security – this has been reviewed and improved at all sites, so the risk has now moved to monitoring.</li> <li>• Demonstrating Value – significant work on the Performance Framework and on KPIs has been undertaken allowing this risk to be removed.</li> </ul> <p>The Committee: <b>NOTED</b> the Report</p>	
<b>6.3</b>	<p><b>Audit Committee Highlight Report</b></p> <p>PS stated that the next Audit Committee is next week. During the last meeting a presentation was given on cyber security. There continue to be no limited or no assurance reports and at the time of the last meeting there was one outstanding audit action which has since been completed.</p>	

	The Committee: <b>NOTED</b> the Report	
<b>7. ITEMS FOR INFORMATION</b>		
<b>7.1</b>	<p><b>Finance Monitoring Reports</b></p> <p>The Finance Monitoring reports for months 6, 7 and 8 were provided to the Committee Members for information in accordance with Welsh Government requirements.</p> <p>The Committee: <b>NOTED</b> the Reports</p>	
<b>8. Any Other Business</b>		
<b>8.1</b>	<p><b>Part B Minutes</b></p> <p>Draft Minutes of Part B meeting held on 2<sup>nd</sup> December 2019 were reviewed and accepted with no further issues raised.</p>	

Item 1.5

**ACTION LOG**

**SHARED SERVICES PARTNERSHIP COMMITTEE (SSPC)**

**UPDATE FOR 21 MAY 2020 MEETING**

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS MAY 2020
1.			Not applicable – all actions complete as at last meeting and no further actions required.			



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:  
21 May 2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**NWSSP COVID-19 Update**

**ARWEINYDD:  
LEAD:**

**Andy Butler, Director of Finance &  
Corporate Services**

**AWDUR:  
AUTHOR:**

**Andy Butler, Director of Finance &  
Corporate Services**

**SWYDDOG ADRODD:  
REPORTING  
OFFICER:**

**Andy Butler, Director of Finance &  
Corporate Services**

**MANYLION  
CYSWLLT:  
CONTACT DETAILS:**

**Andrew.Butler@wales.nhs.uk**

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

To update the Committee on the measures taken to protect the supply of services from NWSSP to NHS Wales.

**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 :**

N/a

**Adduned y Pwyllgor/Committee Resolution (insert √):**

**DERBYN/  
APPROVE**

**ARNODI/  
ENDORSE**

**TRAFOD/  
DISCUSS**

**NODI/  
NOTE**

✓

<b>Argymhelliad/ Recommendation</b>	The Committee is asked to note the contents of this update report.
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<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	N/a – update report only
<b>Cyfreithiol: Legal:</b>	N/a – update report only
<b>Iechyd Poblogaeth: Population Health:</b>	N/a – update report only
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	N/a – update report only
<b>Ariannol: Financial:</b>	N/a – update report only
<b>Risg a Aswiriant: Risk and Assurance:</b>	N/a – update report only
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> Governance, Leadership and Accountability
<b>Gweithlu: Workforce:</b>	N/a – update report only
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open

## 1. CEFNIDIR/BACKGROUND

A number of requests have been received from other NHS organisations requesting information regarding the business continuity arrangements NWSSP have in place to ensure continuity of services in view of the COVID19 position.

A summary report was provided through the Directors of Finance group during March and has been updated in this paper for the current position. Further information can be provided if requested.

## 2. CRYNODEB/SUMMARY

NWSSP already had comprehensive business continuity plans that included action cards for each directorate in response to various scenarios that have the potential to impact on business resilience. One of the scenarios was a flu pandemic, and business continuity measures are tested on a regular basis.

The NWSSP Planning and Response Group, comprising of Directors and senior managers, was created. This group has met on a regular basis to develop the response to COVID19. In addition various sub-meetings group meetings, e.g. IT, building managers, have taken place on a very regular basis and where appropriate have included external stakeholders such as NWIS.

Each service was required to implement their respective business continuity plans and the main initiatives, issues and matters arising within individual services are set out in **Appendix A** of this report

### **Corporate Initiatives to ensure business continuity**

The Planning and Response Group agreed at an early stage that there were a number of services that were business critical for NHS Wales. These services included Accounts Payable, Payroll, Recruitment, Payments to independent contractors and Procurement. There were three major challenges in maintaining these services:

1. Staff operating these services initially utilised desktop computers and were unable to work remotely;
2. Social distancing was potentially difficult to achieve amongst transactional staff; and
3. There was a significant risk that Companies House could close their building.

### **Business Systems and Information**

In the last two months, the pace of delivery of IT equipment and support has been ramped up significantly to enable key staff across the organisation to work remotely. At the start of May 2020, the needs of all identified priority users had been addressed and in total approximately 350 laptops and 400 VPN tokens had been issued in the last two months. At the same time NWSSP took the decision to significantly accelerate the planned roll-out of Office365 and we now have over 1500 staff able to use that facility.

Staff in Primary Care Services have also been supported with the help of

NWIS to implement the Bomgar solution, which enables them to access their work desktops from home. NWSSP are also working with Health Boards and NWIS to implement a Citrix facility which would enable staff to access NWSSP systems using their home devices.

## **Buildings Management**

The Site Leads' sub-group was created covering all main NWSSP sites including Stores. Daily monitoring of staff numbers at each site was undertaken and social distancing measures were put in place to keep staff safe. Staff were encouraged to work from home where possible and the investment in technology referred to above helped to facilitate this. Site opening times were extended to support greater flexibility of working and cleaning procedures have been enhanced.

NWSSP worked closely with Companies House management to keep the building open. An undertaking to keep the building open was provided after written assurances were provided by Andrew Goodall that essential services were operating from the building.

Attention is now turning to a phased return to work of larger numbers of staff and the additional measures that will need to be put in place to maintain safety such as Perspex screens for receptionists and enhanced handwashing facilities.

## **Communications**

Communication Team members attend the COVID19 Planning and Response Group, and a number of the supporting work streams, to ensure that key messages are disseminated to staff accurately and promptly.

Formal daily communication briefs have been issued to NWSSP staff since the start of the outbreak and a Frequently Asked Questions page set up on the intranet.

## **Overall Conclusion**

In common with other health bodies the past two months have proved to be particularly challenging and have required many staff to work long hours to maintain business continuity and to meet the additional demands placed on NWSSP by the Service. Notwithstanding this, all core services have been delivered and quality has been maintained throughout. Staff have adapted well to the new ways of working which in turn have led to improvements in productivity.

A number of the key IMTP initiatives have been put on hold and a Recovery Group has now been established to oversee the return to business as usual, recognising that this may be very different from how things were done

before (i.e. adopting new ways of working for the longer term). This group will report to the NWSSP SMT and will meet every two weeks. It includes representation from all Divisions and our TU partners

### **Recommendation**

The Committee are asked to note the initiatives taken to deal with COVID 19

## **Appendix A – Service initiatives**

### **Payroll**

Payroll is obviously a high risk service but essentially the service provided is a positive payroll meaning that if no action is taken, all existing staff would still receive their basic pay. Relevant staff in payroll have laptops and VPNs and it is possible to update and action payroll information from alternative locations (in the event of a building closure) or from staff at working at home. Some of the recent measures introduced by UK Government such as the payment of Standard Sick Pay from Day 1 cannot be processed automatically through ESR, and therefore need manual intervention, which adds complexity to the process.

April payrolls were successfully run and the revised tax codes, AfC pay award and annual leave purchase requests implemented. Business continuity was maintained due to a significant IT programme to support home working through the procurement of lap-tops, VPNs and migration onto Office-365. The teams have also implemented home/base weekly rotation and shift working where required (e.g. to support contact centre calls) and ensure social distancing is applied.

### **Recruitment**

Specific plans are in place to maintain services in the light of COVID19. A significant proportion of recruitment staff have laptops and VPNs allowing them to work from home. All-Wales Recruitment mailboxes have been mapped to these staff. Recruitment staff can also switch between NWSSP sites, should a specific location become unavailable. Access to TRAC is possible without a VPN. If the situation became critical and significant numbers of staff were unable to attend work or work from home, a basic recruitment service would be provided. In this instance, recruitment for essential staff groups would be prioritised. Staff attending pre-employment checks are being asked to confirm whether they have recently visited affected countries, and notices are displayed to remind staff to cover uniforms when attending their checks.

Processes have been urgently revised to facilitate virtual Pre-employment checks and changed DBS reporting parameters and the team have also met the challenges of home working.

Both Payroll and Recruitment teams have maintained business as usual and are continuing to meet the demands of COVID19 additional Health Board/Trust activity.

## Accounts Payable and Enablement

All staff working in the Accounts Payable and Enablement services are now working from home, with the exception of a small team who are maintaining the Accounts Payable Helpdesk. Call volumes are averaging 30 a day which is significantly down from the historic average of 200+ calls a day. Three staff have been placed on the redeployment register.

There has been no deterioration of service since staff have been homeworking, in fact, there are early signs of increased productivity. In February approx. 83% of invoices received were input onto Oracle within 4 working days, the April figure has risen to 93.5%.

In response to the COVID19 pandemic and the importance of maintaining cash flow to the NHS Wales supply base, the Directors of Finance agreed that any invoice containing a purchase order number with a value of up to £500 excluding VAT could be released for payment by AP. It was agreed that some retrospective checks would be undertaken with regards this and guidance will be issued to Procurement Services and Health Organisation P2P leads shortly.

As a result of releasing invoices that are over 30 days old and where no dispute had been raised, this has resulted in a dip in the Non NHS PSPP for April only. Of the 11,214 invoices released below for payment, some 84.7% (9,548) did not have a dispute raised against them, all of which would fail the Non-NHS PSPP.

The table below details the volume and value of invoices released for payment during April that met the above criteria.

<b>Org</b>	<b>Value excl. VAT</b>	<b>Number of Invoices</b>
AB	£316,836.70	2,041
ABM	£368,733.84	2,072
BCU	£70,970.39	446
CTT	£335,832.78	2,091
CVT	£382,587.81	1,964
HDT	£266,557.75	1,775
PHW	£39,945.09	160
POW	£676.58	5
VEL	£82,216.11	565
WAS	£8,726.35	95
<b>Grand Total</b>	<b>£1,873,083.40</b>	<b>11,214</b>

The latest guidance from the Cabinet Office suggests that NHS organisations must aim to:

1. Pay all invoices within 7 days of receipt,

2. Resolve all invoice queries within 7 days and
3. Look to pay the no disputed elements of an invoice

Due to so few queries being raised by our Supply Base, it has been decided that we will not make any further changes to our payment approach at the present time.

The Accounts Payable and Enablement services have also been supporting the advance payments for critical PPE equipment. During April, some £49 million has been paid to 12 suppliers and required a re-build of the Oracle Purchase Order hierarchy.

We are starting to see an increase in requests from Health Boards to change the location of services e.g. Wards and the staff permitted to authorise. This is likely to become more prevalent as Health Boards bring elective and cancer/diagnostic services back up in the next few weeks, which could lead to 'clean' and COVID19 site separation e.g. Llandough as clean and the Heath as COVID19, along with the use of field/surge hospitals.

In addition, we anticipate a number of change requests for approvers and authorisers as staff are moved between hospital sites. These changes will be managed either via local system support teams or via the NWSSP Enablement service.

### **Central Team eBusiness Services – Oracle Finance & Procurement system**

Since early March 2020, the division successfully implemented its tried and tested business continuity plan. The plan ensured that all key staff have VPN facilities to support home working to undertake their core duties. The main focus in the present business continuity situation is twofold:

- In conjunction with our main managed service provider, to ensure the Oracle Finance and Procurement systems continue to operate on a 24-7 basis to support stock replenishment activities for NWSSP and Health Boards/Trusts as well all remaining business critical and business-as-usual operational activities. This arrangement continues to work well. Over the past month we have assisted NWSSP and Health Boards with the creation of new suppliers for the placing of emergency PPE orders, including during out of hours. Separately, in partnership with Health Boards and key suppliers, we have fast tracked and implemented a development that notifies key Health Board users of COVID19 related orders that require their urgent approval. For NWSSP divisions we have assisted with delivering simplified and accurate stock reporting in QlikView.
- To deliver the BACS Bureau service and the processing of supplier payment files from Accounts Payable and Primary Care Services. The

BACS activity is heavily dependent on staff in NWSSP-AP, NWSSP-PCS and Health Boards and Trusts being available. The remote processing of live payment files has continued to work well, with no issues to report.

Separately to the above activities, working in partnership with NWIS, NWSSP, CTM UHB IT and Health Boards Oracle leads, have implemented a solution that allows the 37 WAO auditors with remote access to the Oracle Finance and the Qlikview reporting systems to undertake their activities for each Health Board/Trust. This is undergoing final testing and it is envisaged full rollout will be completed by Monday 11th May.

## **Primary Care Services**

Essential members of staff have now been identified, and cross-cover arrangements are in place for a number of key staff.

A number of changes based on national contract variations have now been implemented and contractors have been remunerated based on this criteria across GMS, GOS, GDS and Community Pharmacy. Initially PCS requested that Health Boards follow the Welsh Government route in terms of suspending local GMS enhanced services. However, whilst this was initially implemented through dialogue with Health Boards, local services are to be re-introduced from mid-May. In doing so PCS want, where possible, to harmonise similar services on a once-for-Wales basis, which is an aim acknowledged by Heads of Primary Care.

In terms of community pharmacy payments, there have again been a number of Welsh Government initiatives put in place to support pharmacies across Wales. The processing of the increased amount of prescription forms enabled contractor payments to be made in line with monthly targets and this is being maintained. A key plank into ensuring payments are maintained has been the commitment of staff who have attended site on a daily basis. In the last week however we have been able to provide 20 staff who are shielding/in isolation with the means to be able to process prescriptions from home. This is the first time this has been done and whilst early days, in doing so this enables PCS to continue to meet Welsh Government targets and may emerge as a significant development post-pandemic. The March prescription volumes were around 7% higher than the same month last year.

Working alongside the Delivery Unit and NWIS, PCS has been pivotal in the back-end print and distribution process for the sending of a second string of shielding letters to vulnerable members of the Welsh public. Transformational projects remain ongoing, with the requirement to implement the Northern Ireland GMS Payments System by August 2020. Simultaneously we are in the development stage of an interim in-house Ophthalmic Payments system which is due to go live from September 2020. This work is being driven due to NHS Digital decommissioning these services

in England as part of the broader NHS England transformation programme in PCSE (CAPITA).

## **Procurement**

Procurement activity has been focused on maintaining stock availability for PPE through active sourcing at an international level. The sourcing activity has been successful in securing significant volumes of critical PPE products such as Fluid Resistant Surgical Masks and Fluid Repellent Isolation Gowns in an extremely competitive manufacturing and trading environment. The volumes supplied have also allowed NHS Wales to provide Mutual Aid to other UK nations when requested. PPE continues to be supplied on a weekly basis from central stock to Social Care Joint Equipment Stores in large volumes and this continues to be an area of operations subject to increasing demand.

Work was undertaken with Deloitte to map future demand profiles across Health and Social Care for PPE. This will be crucial in determining the future supply challenges and ensuring that sufficient product is available to meet demand.

Procurement continues to work with the All-Wales medical equipment requirements and is now actively co-ordinating with WG to understand the future equipment profiles required to match demand to inward supply. This work has also involved procurement activity for Field Hospital requirements and continues to be closely monitored.

The work with Industry Wales is also running in parallel with the procurement response to COVID19. Procurement and SMTL are active in this network which is identifying new sources of manufacture for PPE and critical equipment. Recent successes have been in establishing manufacture and supply of face visors and hand sanitiser products within Wales. The challenge now moves to ensuring that Wales can develop a PPE manufacturing base to support future, long term requirements which will reduce dependence on global supply chains.

## **Specialist Estates Services (SES)**

The workforce are able to work very flexibly with all having access to laptops, VPNs and mobile phones. Specialist advisory services will continue to be provided although one aspect of the work involves specialist engineers visiting NHS Wales's sites and this work could be postponed or delayed subject to discussion with clients and the outcome of local risk assessments. The other main risk for SES services is that teams of individual specialists are very small and therefore the loss of a particular member of staff could result in that particular service becoming unavailable for a period of time.

SES has been particularly active in providing advice and support for the

repurposing of major acute sites, including improvements to oxygen supply systems; the commissioning of field hospitals and helping to formalise the arrangements with landlords for non-NHS properties used to support COVID19 patients and related activity such as testing stations.

### **Legal and Risk Services**

All Legal and Risk staff are working successfully from home with no drop in service provision or demand. A small amount of mail is being received each week, but one of the administrators attends the office weekly for about an hour to scan this post.

### **Audit & Assurance Services**

All staff have the ability to work remotely using laptops and VPN and so are working from home progressing with audits remotely where possible and agreed with management. Some organisations understandably asked for audits to be postponed and deferred during March and April 2020, however, Audit & Assurance still expect to be able to issue year end opinions for 2019/20 for each health body with explanations of what has and has not been completed where appropriate. The NWSSP annual opinion has been issued with a Reasonable assurance rating.

Plans have been produced for 2020/21 for all health bodies although it is recognised all of them will change during the course of the year. We are looking to start fieldwork on this year's plans where this is practical and relevant to do so and in the meantime planning work continues remotely. We intend to update Board Secretaries formally on our audit approach and coverage for 2020/21 at their June meeting.

Senior staff are also working on a number of specific projects, with support from other Audit staff, to continue to drive improvement and deliver our Integrated Medium Term Plans (IMTP) commitments.

Audit and Assurance staff have made themselves available to assist other areas of NWSSP such as Employment Services, and other NHS organisations where it is appropriate and practical to do so.

### **Medical Examiner**

While progress on the appointment of Medical Examiners has been temporarily paused, the existing appointed team have diverted their skills and knowledge to develop and provide a different but related facility, the Shared Services Death Certification Central Hub which contains all the relevant information relating to death certification, coroner guidance, cremation regulation etc. all in one web site. Advice is also available to Health Boards by email and telephone.

The site can be accessed here:

<http://www.nwssp.wales.nhs.uk/covid-19-death-certification-central-hub>

## **Workforce**

The Workforce Function established an internal redeployment hub to facilitate the redeployment of internal staff to support essential services, either within NWSSP, or across the wider NHS Wales. There are currently 190 staff on the redeployment hub. Fifty staff have been redeployed to support essential services on an as and when required basis. Consideration is continually being given to how staff across NWSSP can be redeployed to support essential services, either within NWSSP, or across the wider NHS Wales. Liaison with Trade Union representatives has been undertaken and there is significant effort to ensure that all staff are being given a clear and consistent message on what they should and should not be doing with respect to the virus.

Homeworking arrangements are in place for all WOD and Digital WorkForce Solutions (DWS) staff. There are rosters in place to ensure social distancing rules are complied with if WOD staff need to attend the workplace.

Support helpdesks have been maintained at full capacity and there has been a significant increase in customer contacts. In the event of a building closure, business continuity plans remain in place to continue to provide a support desk service for ESR and Learning @ Wales via emails and live chat. An ESR notice has been issued to all Health Boards & Trusts concerning the recording of COVID-19 related absence on ESR, and helpdesk staff trained to support in the event of queries.

- **E-Learning**

Working remotely, the TEL team have undertaken an accelerated work programme to support both Health and Social care in accessing a variety of e-learning through both ESR and Learning @ Wales. This has involved opening up access to the platforms to identified staff groups and volunteers across both sectors, including nursing/residential homes, re-engaged and re-deployed health care workforce and more recently staff in the Regional Testing Centres. See more detail on this below.

- **Single Lead Employer**

At the request of Health Boards, NWSSP's Single Lead Employer Model has been expanded to encompass the employment of Interim Foundation Doctors as well as Foundation Doctors. A Programme Board has been established to oversee the work programme. In addition sub groups have been created to work through the operational detail and ensure the engagement of all parties.

It should be noted that there is a requirement to employ the Interim

Foundation doctors as soon as they become registered within hospitals. This work is progressing well with significant numbers of newly qualified doctors (300 approx.) to be employed by 1st June 2020. The Governance Structure already established for the GP Trainees will be followed for the Interim F1s and F1s until the work to adapt this to encompass Foundation Trainees is completed.

- **Collaborative Bank**

Despite the disruption to services, the Collaborative Bank Partnership has maintained momentum and progressed to go live at the end of April. In the first week, 24 requests to join the bank were received and successfully enrolled. The first collaborative bank shifts will be available to be worked in both Cwm Taf and Swansea Bay w/c 11<sup>th</sup> May 2020.

## **Digital Workforce Solutions**

Guidance has been developed to standardise COVID related absence in both ESR and rostering systems to support central reporting, alongside a dashboard to effectively report from ESR. Support has been provided to Velindre University NHS Trust in the procurement of Allocate HealthRoster System. The pilot of the NHS Wales Collaborative Bank is progressing, with it having gone live 20<sup>th</sup> April and currently 44 signed up. Support has also been given to the accelerated roll-out of O365 and Microsoft Teams, liaising with the PMO for controlled release of comms.

Other key achievements:

- Supported the procurement of additional COHORT licences on behalf of NHS Wales in line with the current All Wales contract.
- Streamlined access to key courses has been provided in ESR for identified staff groups: COVID-19 Additional Training, Redeployment training for AHP staff, and Redeployment training for registered nurses being redeployed.
- Local Induction sites built with training for mass volunteers for LHBs: Aneurin Bevan, Cardiff & Vale, Hywel Dda, Betsi, Velindre, and Swansea Bay on Learning@Wales for c6,000 users via streamlined process.
- Piloted key e-learning programmes to support Covid with Nursing/Residential Homes in Swansea Bay with subsequent rollout pan-Wales c1450 users.
- Support provided to Welsh Government in opening access to Violence against Women module due to rise in incidents - c1800 users accessed in 10 days.
- Support provided to HEIW with update of patient care assistant training modules.
- Update and launch of HCSW Code of Conduct Training.

- Create training platform for redeployed Dental workers to access training on Learning@wales.
- Delivered webinars to Local Authorities across Wales to highlight available resources to support Covid-19. Medical Gases e-Module developed (awaiting sign off)
- Updated Nutritional Skills module to support Covid-19.
- Working with Employment Services Covid Hub for temp workers to access training prior to commencing work.
- Increase of activity on Learning@Wales by 334% (68,374-297.385).
- Increase in calls to Learning@Wales helpdesk by 50%



**GIG**  
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**NHS**  
WALES

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:**  
**SSPC 21/05/2020**

**The report is not Exempt**

**Teitl yr Adroddiad/Title of Report**

**NWSSP Workforce Update – COVID 19 Responses**

<b>ARWEINYDD: LEAD:</b>	Gareth Hardacre Director of Workforce & OD, NWSSP
<b>AWDUR: AUTHOR:</b>	Zoe Grainger Head of Workforce & OD, NWSSP
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Gareth Hardacre Director of Workforce & OD, NWSSP
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	Gareth Hardacre Director of Workforce & OD, NWSSP 01443 848552 / <a href="mailto:Andy.Butler@wales.nhs.uk">Andy.Butler@wales.nhs.uk</a>

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

The purpose of this paper is to provide the SSPC with details of workforce related matters, in response to the organisations workforce responses to the COVID 19 Pandemic.

**Llywodraethu/Governance**

<b>Amcanion: Objectives:</b>	Each of the five key Corporate Objectives
<b>Tystiolaeth: Supporting evidence:</b>	Data contained within the report and ESR

**Ymgynghoriad/Consultation:**

Who has been consulted on the details of the report?  

- NWSSP Senior Management Team

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

<b>DERBYN/ APPROVE</b>		<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	✓
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**Argymhelliad/  
Recommendation**  

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

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

<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact
<b>Cyfreithiol: Legal:</b>	No direct impact
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact
<b>Ansawdd, Diogelwch a Profiad y Claf:</b>	No direct impact

<b>Quality, Safety &amp; Patient Experience:</b>	
<b>Ariannol: Financial:</b>	No direct impact
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides assurance to the Committee that NWSSP has robust measures in place to support its workforce.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://gov.wales/docs/dhss/publications/150402standardsen.pdf">http://gov.wales/docs/dhss/publications/150402standardsen.pdf</a>
<b>Gweithlu: Workforce:</b>	No direct impact
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open or closed (i.e. is the information exempt) Assess if the information can be disclosed into the public domain, if not it will need to be presented as a part 2 agenda item.

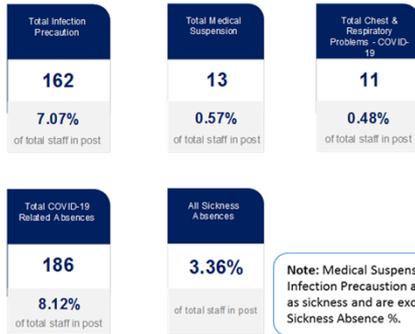
## NWSSP WORKFORCE REPORT – COVID 19

### 1. CEFNDIR/BACKGROUND

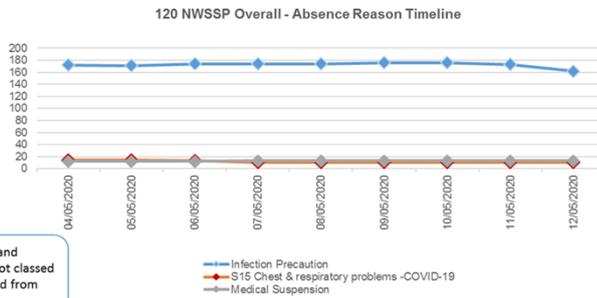
The NHS Wales Shared Services Partnership Committee has an active oversight of workforce matters within NWSSP. This report provides data directly related to workforce impacts as a result of responding to the COVID 19 Pandemic.

### 2. DATA GWEITHLU/WORKFORCE DATA

#### COVID RELATED ABSENCES



Note: Medical Suspension and Infection Precaution are not classed as sickness and are excluded from Sickness Absence %.



#### Key trends

- COVID-19 related absences continue to reduce (197 to 186 in the last week)
- The number of staff sick with COVID-19 related infections has reduced by a further 3 over the last week from 14 to 11
- The number of staff self-isolating has reduced from 171 to 162

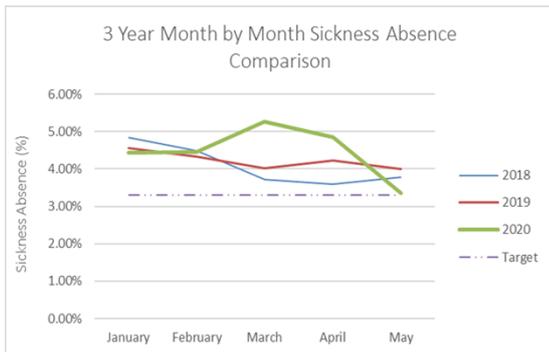
**Key**

'Medical Suspension' (Fit but Symptomatic, reported to Manager)

'Infection Precaution' (Fit and NOT Symptomatic, e.g. member of the household has symptoms)

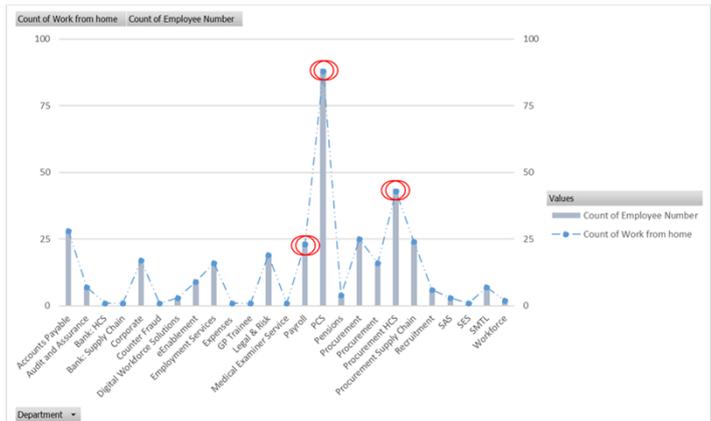
'Chest and respiratory problems - COVID-19' Coronavirus (COVID-19) Reason recorded

Absence Reason	04/05/2020	05/05/2020	06/05/2020	07/05/2020	08/05/2020	09/05/2020	10/05/2020	11/05/2020	12/05/2020
Infection Precaution	172	171	174	174	174	176	176	173	162
S15 Chest & respiratory problems - COVID-19	14	14	13	11	11	11	11	11	11
Medical Suspension	12	12	12	13	13	13	13	13	13
<b>Total Open Cases</b>	<b>198</b>	<b>197</b>	<b>199</b>	<b>198</b>	<b>198</b>	<b>200</b>	<b>200</b>	<b>197</b>	<b>186</b>

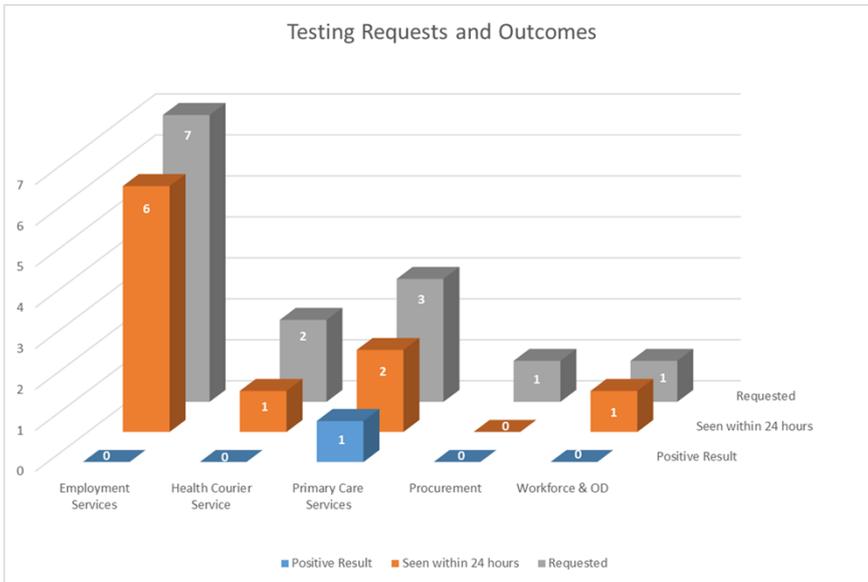


Interestingly, having reviewed the risk assessments for those self-isolating as a result of the virus, 98.2% are working from home

When considering the impact of COVID-19 on the overall sickness absence of NWSSP, there appears to be a significant downward trajectory from the previous two years - 3.78% in 2018 to 4% in 2019 and 3.36% in 2020. It should be noted that the May 2020 figure is only indicative at this point (accurate as at 12<sup>th</sup> May 2020).



## TESTING



As at 12<sup>th</sup> May 2020, we have received 14 requests for testing, one of which was for a family member.

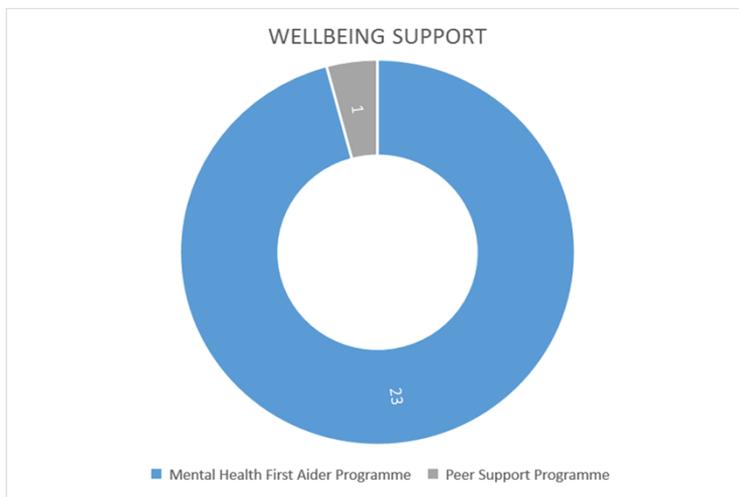
From receipt of request to appointment (on those that we have data for at the minute) is around 24 hours (71.42%). Results are then available less than 48 hours after this.

One employee has tested positive and they are currently recovering at home.

Further work will be undertaken to follow up on results over the coming week

**Please note**, these figures are as accurate as the information we have available to us in any one day, as we are reliant on the communications from the employee, to management and then into Workforce & OD of the test date and outcome

## WELLBEING SUPPORT

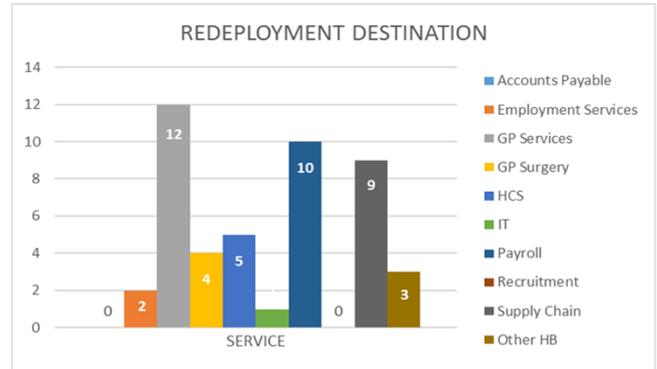
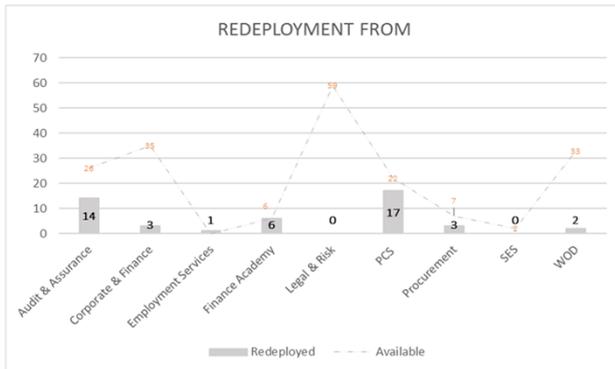


95.8% of our wellbeing support has been provided by the Mental Health First Aiders through the organisation.

The Peer Support Programme set up in response to the COVID-19 pandemic to provide support staff has to date received one call.

Mental Health Awareness Week commences on 18<sup>th</sup> May 2020. With its focus on kindness we will be publishing stories of extreme acts of kindness, felt and given by our NWSSP colleagues. We will continue to promote our Peer Support Service and Mental Health First Aid Programmes to ensure colleagues have the support they need during this challenging time, as well as direct colleagues to EAP and external support services

## REDEPLOYMENT

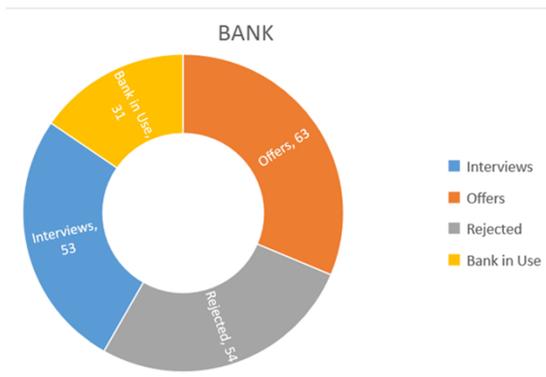


We currently have 190 staff on the Deployment Register

Of these 24.2% (46) are currently being deployed, a reduction of 2% points (4) on the previous week.

A reduction of 4 redeployment opportunities (Accounts Payable; Recruitment and one Payroll) is evident this month with 26% of those deployed supporting GP Services; 22% Payroll; 20% Supply Chain ; and 11% HCS

## BANK AND AGENCY

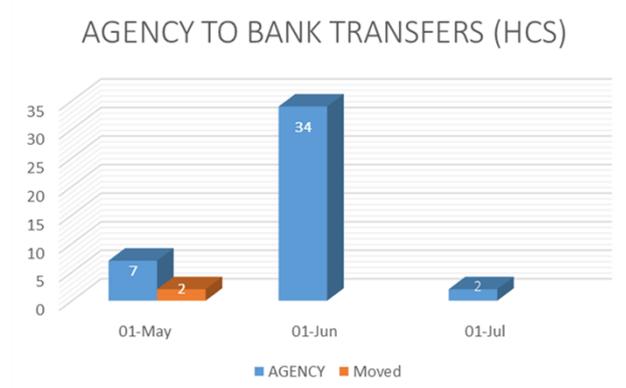
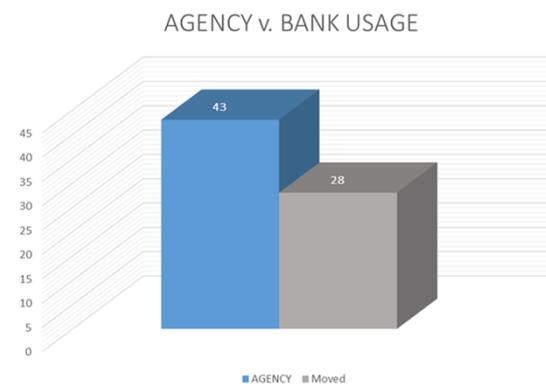


Bank usage is increasing daily and we are seeing reductions in the use of agency staff.

Further work is being undertaken to transfer those on an agency contract over to the NWSSP bank, but we are restricted by the 6-12 week introduction fee.

By the end of May 2020, a further 7 agency workers will be moved across.

We are currently working on systems of regular data collection from the services on their agency usage to aid reporting and plans for reducing this usage and associated spend.



## WELSH GOVERNMENT SUMMARY

Date	Organisation	Staff Group	COVID-19 Sickness (Headcount)	Self-Isolation (Headcount)	Organisation Headcount
11/05/2020	NWSSP	Add Prof Scientific and Technic	0	0	19
11/05/2020	NWSSP	Additional Clinical Services	0	0	0
11/05/2020	NWSSP	Administrative and Clerical	3	140	1459
11/05/2020	NWSSP	Allied Health Professionals	0	0	1
11/05/2020	NWSSP	Estates and Ancillary	0	28	308
11/05/2020	NWSSP	Healthcare Scientists	0	0	0
11/05/2020	NWSSP	Medical and Dental	8	18	502
11/05/2020	NWSSP	Nursing and Midwifery Registered	0	0	3
11/05/2020	NWSSP	Students	0	0	0
11/05/2020	NWSSP	Other	0	0	0

Number of staff off sick - all sickness absence reasons (headcount)	Organisation Headcount
77	2292
92	2158

11/05/2020	NWSSP	All Staff Groups	77	2292
11/05/2019	NWSSP	All Staff Groups	92	2158

### 3. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

- **NOTE** the Workforce Data Report



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:**

21 May 2020

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Approval of Extension of Chair**

**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 recommend, subject to relevant legislation being introduced, the extraordinary continuation of the tenure of the Chair for a further year to 30 November 2021.

**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 proposal has been informally discussed with Welsh Government, but is subject to the introduction of appropriate legislation.

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

DERBYN/ APPROVE	✓	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	
<b>Argymhelliad/ Recommendation</b>		That the Committee approves, subject to the approval of the relevant legislation, the continuation of the tenure of the current Chair to 30 November 2021.					

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact.
<b>Cyfreithiol: Legal:</b>	The approval of this paper is subject to the introduction by Welsh Government of the legislation to allow the term to be further extended.
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct impact.
<b>Ariannol: Financial:</b>	No direct impact.
<b>Risg a Aswiriant: Risk and Assurance:</b>	No direct impact.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> Governance, Leadership and Accountability
<b>Gweithlu: Workforce:</b>	No direct impact.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open.

## Potential Extension of Term of Office of NWSSP Chair

### 1. CEFNDIR/BACKGROUND

The 2<sup>nd</sup> four year term of the NWSSP Chair comes to an end on 30 November 2020. Regulation 8(5) of The Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012 state that the chair may not hold office for a total period of more than eight years. The current post holder reaches the maximum eight year tenure on 30 November 2020.

Whilst the appointment is made by the Committee, the process is similar to that for other public appointments. This would usually take six months from advertisement to appointment. However, due to the impact of COVID-19, Welsh Government have suspended all new public appointment campaigns until September at the earliest, and there is therefore insufficient time to recruit a new Chair before the end of November.

Ordinarily, there is no mechanism to extend the tenure of the Chair beyond eight years; however, to avoid operational and governance pressures Welsh Government are progressing temporary amendments to the legislation to allow for an extended tenure.

Subject to the approval of the temporary legislation it will be possible for the current Chair to have their tenure extended whilst arrangements are made to seek a successor.

### 2. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to **APPROVE, subject to the necessary amendments to the legislation coming into force**, the continuation of the tenure of the current NWSSP Chair to 30 November 2021.



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CYMRU  
**NHS**  
WALES

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:3.2**

**21 May 2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Managing Director's Report**

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

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

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

**Llywodraethu/Governance**

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

**Ymgynghoriad/Consultation :**

Shared Services Partnership Committee

**Adduned y Pwyllgor/Committee Resolution (insert √):**

<b>DERBYN/ APPROVE</b>	<b>ARNODI/ ENDORSE</b>	<b>TRAFOD/ DISCUSS</b>	<b>NODI/ NOTE</b>	<b>√</b>
<b>Argymhelliad/ Recommendation</b>		The Partnership Committee is to <b>NOTE</b> the report.		

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

## **Introduction**

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

Over recent months, the impact of COVID-19 has obviously resulted in a huge change in the way that NWSSP has had to operate but I am pleased to say that staff have responded fantastically to the challenge. The majority of our main services have not been stood down and we have continued to operate in these difficult times. The rapid roll out of Office 365 has been instrumental in achieving a safer working environment for staff with many now able to work from home and allowing greater flexibility for socially distancing measures to be implemented at our main hubs and sites.

The Procurement and Supply Chain staff have particularly been impacted by the requirements to quickly source medical consumables and equipment, and particularly in respect of delivering significant levels of Personal Protective Equipment (PPE) in line with changing guidance and rules. Many of the divisions have been involved in helping support the set up and kit out of the new field hospitals. Our Surgical Materials Testing Laboratory have a critical role in ensuring that the equipment is safe to use. HCS staff are also key in terms of collecting and delivering tests so that staff are able to return to the front line as soon as possible. Recruitment staff have been heavily involved in helping to on-board both medical students and returners to aid the fight against COVID-19. Behind the scenes, payrolls are still being run, legal advice dispensed, and suppliers and contractors continue to be paid.

## **Financial Position**

As at 31 March 2020, NWSSP have reported a planned surplus of £11k. As previously confirmed, an additional £1.250m was distributed to NHS Wales and Welsh Government to bring the total NWSSP 2019/20 distribution up to £2.000m. This was achieved after internally funding the Laundry and TRAMS projects and the re-negotiated Microsoft Enterprise Agreement in addition to making non-recurrent reinvestments within NWSSP. The Welsh Risk Pool outturn was in line with the target agreed with Welsh Government and for the first time the risk sharing agreement needed to be invoked. The 2019/20 Capital Expenditure Limit of £3.068m was utilised in full.

## **Finance Governance Committee**

The impact of COVID-19 has been particularly evident in terms of the demands placed upon our Procurement staff to obtain significantly higher volumes of medical supplies and equipment at increasingly short notice. The availability of PPE has been a highly emotive topic throughout the UK, and indeed most of the globe in recent months. Given the additional demands

from Health Boards, Trusts, Primary Care Contractors and Social Care a revised and streamlined approvals process has been established. My own authorisation limit has been significantly increased, along with that of the Chair and the Director of Finance. A Finance Governance Committee has been established, comprising not only senior finance staff, but also representatives from Procurement, Legal & Risk, Governance, Accounts Payable and Counter-Fraud. The Committee is chaired by the Director of Audit & Assurance, and the membership also includes the Director of Finance of Velindre University NHS Trust and the Vice-Chair of the Velindre Trust Board. The Committee meets as required to review proposed orders, many of which now require a substantial up-front payment. If approved by the Committee, these are then fast-tracked for Velindre Trust Board approval where appropriate, and are also separately approved by Welsh Government. The Committee has already approved expenditure in excess of £150m covering 23 separate orders. Many of the suppliers are both new to NWSSP, and also new to these markets, and the Committee therefore has to take into account a range of factors including the validity and safety of the product, the track record and stability of the supplier, and whether the price provides value for money in a market where costs are increasing daily.

### **Personal Protective Equipment (PPE)**

As stated above, the market for PPE is incredibly challenging and competitive, with prices often significantly inflated compared to pre-pandemic. Many new agents have entered the market and many traditional routes of supply have been affected by countries being in lockdown and also through the huge reduction in air freight traffic. At the same time, NWSSP has been inundated with offers of support from closer to home. Whilst most of this is welcome, a number have been fraudulent, and there is a concern to ensure both the efficacy of the product and that the volumes available are sufficient to make it worthwhile. Our Surgical Materials Testing Laboratory have been heavily involved in making sure that equipment is safe to use, and there have been many successes, such as the agreement for the Royal Mint to manufacture face masks. There has also been close liaison with the military in terms of the logistics of arranging air freight, such as the recent delivery of gowns from Cambodia, that were procured through a Coffee and Chocolate importer based in Belfast! The military have also assisted in unloading aircraft and in helping our HCS staff to get items to the frontline as quickly as possible. NWSSP works with the other home nations in securing new supplies on a collaborative basis and have just led on a contract with an agency in Cardiff that will see 65m face masks delivered to the UK over the coming months. The agency is also keen to develop a manufacturing base within Wales and this is something we are keen to support. We are also currently working with Deloitte and the Finance Delivery Unit (FDU) to look at demand and forecasting models and supporting arrangements for PPE.

## Temporary Medical Unit

There is a detailed paper on the agenda but as a result of the current COVID-19 pressure, there has been a big increase in demand for injectable medicines. While the existing pharmacy services are doing their best to meet this immediate need, much of the additional demand has been met by nurses drawing up syringes from ampules on the wards. This is widely accepted as being neither an efficient use of resource, nor the safest or lowest risk way to prepare medicine.

The Medical Directors of the Health Boards and Trusts, together with the Chief Pharmacists, have drawn up a list of the Top 12 Injectable Medicines for the COVID-19 outbreak. Welsh Government has requested an immediate increase in pharmaceutical capacity for syringe filling of the Top 12, in order to reduce the amount of drawing up being carried out by nurses. The Chief Pharmacists Group (CPG) have proposed that this capacity should be provided on an All Wales basis, including a Temporary Medicines Unit in South Wales (a syringe filling machine is already in use in North Wales), and strategic control of key materials on an All Wales basis. These activities are seen as comprising a Pharmacy Technical Service (i.e. supply activity), rather than Clinical Pharmacy.

A Project Team has been mobilised by NWSSP to scope this All Wales service:

- The Senior Responsible Owner is Professor Malcolm Lewis, NWSSP Medical Director.
- The Project Manager is Peter Elliot, who has previous experience of working with the Chief Pharmacist community across Wales, and relevant Welsh Government officials.
- A nominated Accountable Pharmacist – Paul Sparks
- Professional lead for the service – Chief Pharmacist for Wales – Andrew Evans
- All Wales Specialist Quality Assurance Pharmacist – Laura-Jane Keating
- Other available members of the existing Transforming Access to Medicines (TRAMs) Project Board.

Work is ongoing both on the physical creation of the Temporary Medicines Unit (TMU) and to define its role, work portfolio, and method of operation. This is being done in the context of the UK having passed the first peak of COVID-19 infections. We are therefore focusing our consideration on two operating modes:

- During a potential second peak in late summer and early autumn
- During the “new normal” of ongoing COVID cases at a sub-peak intensity, with other services also resuming and experiencing a surge of suppressed demand

## **Informed Consent Guidance**

Legal & Risk has sent legal advice to all Health Boards setting out the law governing informed consent and what this will require when routine treatment is resumed. The landscape will be different from that which existed before COVID-19 and therefore the risks associated with treatments are likely to be different. The consent process will need to include an explanation of the additional risks that may exist with regard to the proposed treatment for a particular patient specifically relating to COVID-19. The importance of ensuring that the consent process is tailored to a particular patient means that standardised documentation alone is likely to be insufficient to evidence that a patient has been properly consented. Only if a patient is aware of the specific risks to them (rather than general risks to the population) can they make an informed decision. The legal advice also considers remote consultations and the practical difficulties of evidencing that informed consent has been given at the time of the consultation. It also reminds health boards that the patient information leaflets accessed via the EIDO Download Centre are expected to be used.

## **Medical Examiner Service**

While progress on the appointment of Medical Examiners has been temporarily stalled, the existing appointed team have diverted their skills and knowledge to develop and provide a different but related facility, the Shared Services Death Certification Central Hub which contains all the relevant information relating to death certification, coroner guidance, cremation regulation etc. in one web site. Advice is also available to Health Boards by email and telephone.

## **Laundry Service**

There is a formal update on the agenda but in summary the formal consultation process has been paused due to COVID-19 and dates pushed back to June at which point we will review the situation.

## **Business-as-Usual**

As Wales and the rest of the UK considers the first steps out of lockdown (at the time of writing), we have been thinking about what this means for NWSSP and have established a Recovery Group chaired by the Deputy Director of Finance and including a senior representative from each of the Directorates to lead on this. The outbreak of COVID-19 has not seen a significant reduction in the services provided by NWSSP but rather has led to an increase in the things that we have been asked to do. An infographic setting out both the business-as-usual and additional services that have been delivered in recent weeks is attached as an appendix to this document.

**Neil Frow,  
Managing Director, NWSSP,  
May 2020**

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## PRIMARY CARE SERVICES

Primary Care Services have **continued** to maintain primary care payments and introduced COVID-19 support payments to Primary Care contractors including:

- Community Pharmacy
  - Payments made to **715** pharmacy contractors and **4** appliance contractors - **£60,927,435**
  - Plus an additional one-off advance payment to **715** pharmacy contractors - **£47,149,661**
- General Medical Services –
  - Payments made to **411** GP practices - **£37,571,088**
- General Ophthalmic Services
  - Payments made to **410** ophthalmic accounts - **£4,177,621**
- General Dental Services –
  - Application of **521** dental contract adjustments

## WE HAVE

supported the delivery of **105,000** patient letters with Welsh Government

## Reviewed

and **tested** IT solutions that has enabled staff to maintain prescription processing requirements whilst working from home

This has enabled Primary Care Services to maintain business as usual to successfully process

**3,155,876** prescription forms and priced **6,405,465** items within the last month to ensure there was no compromise to contractor cash flow

Developed an emergency on-boarding pathway for **250** GP returners to apply for re-inclusion to the Medical Performer list

Over **80%** of our staff have remained in the service, working diligently to support Health Boards and contractors in ensuring 'Business As Usual' principles are maintained

These staff have worked within government guide lines to accommodate social distancing whilst retaining an office presence and have also supported Primary Care Services with home working and changes to normal hours and routines thus ensure we continue to provide necessary services

Supporting Aneurin Bevan University Health Board to manage a surgery closure and dispersal of **4,000** patients to surrounding practices

## Ophthalmic survey -

developed a survey to allow Welsh Government to understand the workforce profile of Ophthalmic Practices across Wales to inform its response to the COVID-19 pandemic

The survey was distributed electronically to all contractors and **313** responses were received

Primary Care Services then worked with Welsh Government and HEIW to interpret the responses and cleanse the data.

This involved direct contact with **56** contractor representatives to clarify and cleanse the data for **120** of the practices' responses



# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## SURGICAL MATERIALS TESTING LABORATORY

### OUR BUSINESS AS USUAL

We are continuing to provide medical device testing and technical services regarding medical devices to the Welsh NHS, enabling Procurement Services and others in the NHS to undertake evidence based purchasing.

We are also continuing to provide commercial testing services to the international medical device industry, who use the test reports to tender for new business, submit to notified bodies and to develop new medical devices and technologies.



**WE ARE** supporting procurement through **certification** and test report checks for **PPE** and **devices**

Ensuring that fraudulent applications are dealt with **appropriately**

We have had **222** submissions, **38** fraudulent documents from **28** submissions, **19** suspected fraudulent documents from 16 submissions

In total: **57** documents which are either confirmed as fake or are suspect from **222** submissions, **40** submissions that contained suspected fraudulent documents

Primary focus on ensuring that purchased products provide the appropriate level of **protection** to staff

**Partnership** working with **CERET** (COVID-19 Emergency Response Engineering Team), **Welsh Government, CEDAR** and **HTW**

Turning submissions around within hours for **urgent cases** and within the day for others

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## SPECIALIST ESTATES SERVICES



**WE ARE** supporting the creation of up to **50** surge hospital and COVID-19 testing facilities across NHS Wales

Produced an **Advisory Note** for Welsh Government and NHS Wales on framework contractual issues in relation to COVID-19

**Integral** to the development and validation of surge hospital engineering solutions

**Advised** on the provision of oxygen, medical gases, fire safety, legionella, clinical waste and the safety and adequacy of electricity systems

### OUR BUSINESS AS USUAL

Our chartered architects, engineers, surveyors and other specialists, are continuing to use their expertise to advise the Welsh Government and NHS Wales organisations on a wide range of building, estates and facilities matters.

In addition, Specialist Estates Services continues to deliver specialist engineering services to NHS Wales – such as the provision of Authorising Engineers for a range of disciplines including: decontamination, high voltage, low voltage, ventilation, water, medical gases and fire safety.



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ADDING VALUE THROUGH PARTNERSHIP, INNOVATION AND EXCELLENCE

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## LEGAL & RISK and WELSH RISK POOL SERVICES

The **Personal Injury** team have been providing **advice** and **assistance** across Wales regarding the use / availability of PPE and Public liability and employers liability for temporary premises/new sites

The **Property Team** have been advising Health Boards about the agreements that they have entered to establish **field hospitals**

The **Putting Things Right** team has dealt with queries including the issue of **documenting** consent where there are complaints by third parties

The **GP/GMPI team** has managed a high volume of queries, including cluster working and setting up COVID-19 treatment hubs

## Indemnity Issues

There have been a number of queries in respect of NHS indemnity, particularly due to the new and evolving NHS workforce including the provision of advice on the following:

NHS **engaging** private providers; **Staff** carrying out different roles; Staff working in different **premises**; Staff working for different **organisations**; **Volunteers**; **PL/EL** temporary premises / new sites; **Military** personnel driving ambulances etc; **Medical students**; Prescribing **oxygen** at home

**WE HAVE** worked with and provided **advice** to **Health Boards** and **Trusts**, **Directors of Workforce & OD, HR teams** and **Director of NHS Confederation** to support the **First Minister, Welsh Government**



**Worked** collaboratively with **Local Authorities** and **private enterprises**

The **Clinical Negligence** teams have focused on litigated cases and have been fielding queries in respect of: Issues re consenting **patients** remotely; Using anaesthetic machines for long term ventilation; Vicarious liability/indemnity

A COVID-19 **strategy** group and **Hub** has been established to manage staff and client issues at a high level and to guide the directorate and to provide a panel of experts from each practice area to decide how best to manage new queries arising from the pandemic and to advise on **best practice** respectively

**Court of Protection / Medical Ethics** has been providing clear advice to clinicians and managers, including: End of life disputes re COVID-19; Decision making around allocating ventilators; Debunk fake news on social media

The **Employment team** have provided advice to NHS Wales and NHS Confederation; assisted with All Wales FAQs; Agreements on Mutual Aid; Advised on potential discriminatory issues regarding rotas and PPE; COVID-19 specific employment contracts; Engaging staff on furlough from their substantive employers; Advice on the Working Time Directive, junior doctor rotas and breaks

**Commercial and regulatory** advising on: Contracts for field hospitals; Contractual staff arrangements between the NHS and Local Authorities; Procurement issues; GP cluster hubs; Managing non-compliant patients; Judicial review of treatment decisions; Detention of prisoners with COVID-19 due to be released; Children's Continuing Care Contract; Provisions of the Coronavirus Act

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:

## OUR BUSINESS AS USUAL

Student Awards Services continues to implement the NHS Wales Bursary Schemes, which provides funding for healthcare students on NHS funded courses in Wales and Welsh domiciled medical and dental students within the UK.



## STUDENT AWARDS SERVICES

**WE HAVE** have maintained a 'business as usual' service

**Innovative** options to continue maintaining service levels have been made in order to support our service users during these challenging times and to continue to provide an **essential** Student Awards Service

**Bursary Applications and Disabled Student's Allowance (DSA)** applications undertaken as normal within the 20 working day time frame

**Student Award Services Helpdesk** the helpdesk has been operating an **urgent enquiries** line in order to provide the best support to service users

**Practice Placement Expenses** assessment of PPE applications undertaken as normal (Medical and Dental students only)

**Childcare Claims** students contacted directly as a result of the closure of some childcare facilities

Revised **procedure** for submitting PPE Claims and extension to the current six month submission deadline, in the event of a university having a backlog of claims, in place

Students currently in receipt of Childcare Allowance expenses contacted to establish if service users are still accessing childcare provisions and therefore require continued access to these payments



## MEDICAL EXAMINER SERVICE

Ongoing work with Hywel Dda University Health Board to assist in their planning for management of excess death

Work started with Hensol Venue Field Hospital to develop a service of death certification

**WE HAVE** implemented a 'Qualified Death Certifier' role within Cwm Taf Morgannwg Health Board to ease the burden on front line doctors

**Developed and coordinated** a central advice service for the changes to death certification and cremation regulations

Developed a central web page for a **Death Certification Advice Hub** which has collated guidance from England and Wales to provide an up to date source of information and guidance

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:

## OUR BUSINESS AS USUAL

We are continuing to provide audit assurance through the independent and objective assessment of governance, risk management and internal control.



## AUDIT AND ASSURANCE SERVICES



**WE ARE** supporting **effective governance** across NHS Wales

Working with health bodies to ensure annual opinions delivered to **support effective governance**

Providing **ongoing advice and support** as NHS bodies revise governance and control arrangements

**Chairing the Finance NWSSP Group** to ensure effective governance over major procurement contracts

Planning for 2020/21 to provide the **right level of assurance and consultancy** during the recovery phase

Providing **resources to support** other NHS bodies and NWSSP Directorates



## COUNTER FRAUD SERVICES



**WE ARE** supporting NHS Wales by providing **specialist guidance** in relation to the current Recruitment, Procurement and Supply Chain processes to help prevent fraud during COVID-19

**Established** key working partnership with NWSSP Head of Sourcing - Medical / Clinical to help identify fraudulent approaches of those taking advantage of the COVID-19 uncertainty and taking **positive** action in the ongoing fight against fraud

Maintaining a **robust** operational presence to swiftly investigate all ongoing cases of economic crime against NHS Wales and continue to provide **guidance** to the network of Local Counter Fraud Specialists at health bodies in Wales

Highlighting all new fraud risks to key stakeholders in NHS Wales to minimise potential losses to economic crime and provide specialist advice in relation to potential system and process weaknesses

Established a working protocol with Police Regional Crime Units and National Crime Agency to share reliable intelligence to help protect the NHS from Organised Crime Syndicates and actively disrupt their activities

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## FINANCE ACADEMY



### WE HAVE

applied our project management expertise into an **alternative focus** providing direct support to staff working on the front line

**Supported** Aneurin Bevan University Health Board set up and manage temporary accommodation for staff during COVID-19

Worked with **public health, finance and workforce** colleagues in the Health Board to develop a robust yet flexible process to meet individuals' needs whilst ensuring their safety, and that it provides strong financial governance

The Academy team covered the 8am to 8pm **Accommodation Team** shifts 7 days a week during the initial set up period

We are now **supporting** a smooth handover of the day-to-day process back to Health Board



## CENTRAL TEAM eBUSINESS SERVICES



### WE ARE

providing **24-7 support** for our Supply Chain, Procurement and Finance enterprise systems across NHS Wales, this includes setting up **urgent** COVID-19 suppliers

In **partnership** with health organisations and key suppliers, we have fast tracked and implemented a development to notify keys users of COVID-19 related orders that require urgent approval

As a **BACS Bureau Service** for NHS Wales, we have continued to ensure payments are processed for suppliers

Working with other NWSSP divisions to deliver simplified and **accurate** stock reporting

Worked in **collaboration** with ICT departments to address remote access to our enterprise systems

### OUR BUSINESS AS USUAL

Central Team eBusiness Services continues to ensure a centrally coordinated, strategic and corporate approach is taken to manage, support as well as enhance a number of core national enterprise systems for the Finance and Procurement communities across the NHS in Wales.

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:

## OUR BUSINESS AS USUAL

Procurement Services continues to deliver a high quality, customer focused professional service to the Health Boards and Trusts in NHS Wales – through Sourcing, Frontline, Supply Chain, eEnablement and Accounts Payable functions

Health Courier Service continues to support front line services across Wales, operating where required 24 hours a day, 365 days a year including providing vital Clinical Logistical Support services for Primary and Unscheduled Care in Hospitals, Clinics, Surgeries, GP Practices, Pharmacies, Schools (Flu Vaccines).



## PROCUREMENT SERVICES & HEALTH COURIER SERVICES

## Supporting

coordinated mutual aid transport and distribution responses for Northern Ireland and Scotland for NHS Wales

Working

**collaboratively** as part of a **Four Nations** approach on a wide range of issues associated with COVID-19



**WE ARE** providing **sourcing, procurement, distribution and transport services** across Wales to help NHS Wales meet COVID-19 surge capacity demands

Sourcing and distributing **50 million** items of PPE to Health and Social Care sites across Wales -not only to hospitals but also **Primary Care** sites, **optometrists, GP Covid Hub** and **dental clinics** providing **emergency** order same day delivery

Actively involved in procurement, storage, distribution and logistics support for **key equipment** to allow for rapid expansion of **Critical Care** capacity as well as equipment and consumables for Field Hospitals

Working in **partnership** with **CERET** to identify and bring to market new manufacturing capacity within Wales for PPE and equipment

Providing **24/7 cover** as a transport contact co-ordinator centre for Health Boards across Wales through a **National Transport Hub**

Distributing palliative care CD packs across Wales as part of a **24/7 Palliative Care Response Service** Distributed within **120 minutes anywhere in Wales** to support the sickest patients when needed via a single point of contact using approved Apps in full compliance e.g. Hospify

Working with **Public Health Wales** and the **Military** on the Mass COVID-19 testing programme, for national roll out

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## WALES INFECTED BLOOD SUPPORT SERVICE

### OUR BUSINESS AS USUAL

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



**WE ARE** operating a "Business As Usual" service for WIBSS except that we cannot currently offer home visits

We are **regularly** updating our website with information from Government about COVID-19 that is relevant to our **beneficiaries** including links to information from Public Health England and Public Health Wales

We have issued a **newsletter** providing advice and guidance on all the benefits/grants etc. that are currently available from Government

We are **accepting** referrals and offering assessments and interventions in a timely fashion

We have moved from offering face to face interventions to **telephone** and **video** calling with regards to our psychology and counselling **service**

Those who had been accessing these services have been very **understanding** about the need to change and a high proportion have wanted to **continue** the support

Staff have relocated (with their agreement) to **facilitate** the above changes



# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:

## WORKFORCE AND ORGANISATIONAL DEVELOPMENT

### DIGITAL WORKFORCE HAVE:

Developed guidance to standardise COVID-19 related absence in both ESR and rostering systems to support central reporting

Developed a dashboard to effectively report from ESR

Supporting Velindre University NHS Trust in the procurement of Allocate Health Roster System

Progressing the pilot of the NHS Wales Collaborative Bank – go live date 20th April 2020

Supporting the accelerated roll-out of Office365 and Microsoft Teams, liaising with the PMO for controlled release of communications

Supporting the procurement of additional COHORT licences on behalf of NHS Wales in line with the current All Wales contract



### WE ARE

an interconnected set of solutions to meet digital and employment needs to positively influence and develop staff and organisational success

### Operational Workforce

have

**200+** staff on deployment register

**26** deployed

**11** ready to start deployment

### Other key statistics

**60+** key worker letters issued

**375** risk assessments processed

**850** calls responded to, including bank (average is

**300** a month)

**4** additional retire and returners

### Organisational Development

Developed **well-being support** services

Developing a **Peer Support Network**

### Bank

**12** new bank roles advertised for COVID-19 support

**177** applications

**66** interviewed

**29** offers processed to date



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# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## WORKFORCE AND ORGANISATIONAL DEVELOPMENT

### DIGITAL LEARNING TEAM HAVE:

Create training section for Dental workers being redeployed to access training on Learning@wales.

Scheduled webinars with Local Authorities across Wales to highlight available resources to support COVID-19

Working with Employment Services Covid Hub for temporary workers to access training prior to commencing work

Increase of activity on Learning@Wales by 334%  
(68,374-297.385)



## WE ARE

an interconnected set of solutions to meet digital and employment needs to positively influence and develop staff and organisational success

### Digital Learning

**Team** have streamlined access to key courses in ESR for identified staff groups: COVID-19 Additional Training, Redeployment training for AHP staff, - Redeployment training for registered nurses being redeployed

Local Induction sites built with training for **mass volunteers** for Health Boards: Aneurin Bevan, Cardiff & Vale, Hywel Dda, Betsi Cadwaladr, Velindre, and Swansea Bay on Learning@Wales for **c6,000** users via streamlined process

Supported **HEIW** with update of patient care assistant training

Update and launch of **HCSW** Code of Conduct Training

**Developed** a Medical Gases Module

Increase in calls to helpdesk by **50%**

### Piloted **key elearning**

programmes to support COVID-19 with Nursing /Residential Homes in Swansea Bay

Subsequent rollout of these programmes to rest of Wales

**c1450** users

**Supported** Welsh Government in opening access to Violence Against Women module due to rise in incidents

**c1800** users accessed in 10 days

Support users from public/private/voluntary to access the above module

Create training section for **Dental workers** being redeployed to access training on Learning@wales

**Update** of the Nutritional Skills module to support COVID-19

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## EMPLOYMENT SERVICES



**WE ARE** continuing to deliver a full range of **Hire to Retire Services to NHS Wales** using innovation and new processes to provide a '**business as usual approach**' to our customers

### OUR BUSINESS AS USUAL

Employment Services continues to deliver a high quality, customer focused professional service to the Health Boards and Trusts in NHS Wales – through the full range of Hire to Retire Services to NHS Wales including Payroll, Pensions, Student Awards, Recruitment, Staff Expenses and Lease Car Administration.

Our **Recruitment** and **Payroll** teams have **redesigned** the workflows within the department to ensure **business continuity** has been maintained despite the significant impacts of COVID-19 on staff

Home working for Employment Services teams has been facilitated by a **fast-tracked** implementation of laptops, Office 365 and VPN functionality

Our **Pension teams** are reacting to the sad loss of Health Board staff by liaising with the employing Health Boards to calculate and fast track any death in service awards

We have **supported** the COVID-19 requirements through the development and management of a COVID-19 **Recruitment Hub** which has been launched to support with recruitment and deployment of re-registrants and students

The Recruitment Hub is currently supporting the process of on-boarding **1,948 Nursing Students** and **1,240 Re-registrants**

**Payroll teams** are currently working through the enrolment of additional ad-hoc staff to meet COVID-19 requirements including the students and re-registrants being recruited through the **COVID-19 Hub**

# HOW NWSSP IS SUPPORTING NHS WALES DURING COVID-19

Aligned with continuing to deliver our main 'business as usual' services to our customers we have:



## EMPLOYMENT SERVICES



**WE ARE** continuing to deliver a full range of **Hire to Retire Services** to NHS Wales using innovation and new processes to provide a 'business as usual approach' to our customers

**Recruitment Services** to support the NHS Wales COVID-19 response has enhanced during this period through:

**Virtual Pre-Employment check meetings** implemented and being carried out across all NHS Wales organisations

Standard processes redesigned to meet new **Disclosure** and **Barring** service parameters and virtual face to face ID checks

**Engaging** with Health Boards and offering a flexible approach to the recruitment process in terms of supporting their needs

Recruitment activity has included **1,360** booked Pre-employment checks in April which include over almost **500** COVID-19 related appointments

**Engagement** with the Trac Recruitment management developers to ensure revised functionality supports COVID-19 recruitment within NHS Wales

**Payroll Services** has had to maintain business continuity during April despite the impact of COVID-19 on Payroll staff and additional pressures such as implementation of the **AfC pay award**, revised **Tax Codes** and inputting requests for **Annual Leave** purchase

## Measures taken to maintain service have included:

Introduction of **shift working** to assist us to distance staff

Payroll staff working overtime, weekends and bank holidays to meet additional **demand**

Regular weekly virtual meetings with **Health Boards** to work through how the payroll service will deal with the additional requirements they are putting in place to react to COVID-19

**Processing** batches of additional temporary staffing, additional overtime for Health Boards and internal redeployment of Health Board staff into clinical areas

Some staff working from home to enable social distancing for staff working within the office, staff **alternating** one week home and one week office



Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**Agenda Item:**

**21/05/2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Temporary Medicines Unit for COVID-19 – Governance Paper**

**ARWEINYDD:  
LEAD:** Neil Frow, Managing Director

**AWDUR:  
AUTHOR:** Peter Elliott, Project Manager

**SWYDDOG ADRODD:  
REPORTING  
OFFICER:** Neil Frow, Managing Director

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

This paper requests Committee approval to establish a Temporary Medicines Unit to respond to the increased demand for injectable medicines due to the impact of COVID-19.

**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:**

-

**Ymgynghoriad/Consultation :**

Welsh Government, Chief Pharmacists' Group, Health Board and Trust Medical Directors.

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

DERBYN/ APPROVE	✓	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE
<b>Argymhelliad/ Recommendation</b>		The Committee is asked to approve the attached paper in support of the establishment of a Temporary Medicines Unit.		

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct Impact
<b>Cyfreithiol: Legal:</b>	The legal implications from the establishment of this service are included in this paper.
<b>Iechyd Poblogaeth: Population Health:</b>	The service is being introduced to improve the health of the population in response to the impact of COVID-19.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	The service is being introduced to improve the health of the population in response to the impact of COVID-19.
<b>Ariannol: Financial:</b>	Initial financial implications from the establishment of this service are included in this paper.
<b>Risg a Aswiriant: Risk and Assurance:</b>	The risk and assurance implications arising from the establishment of this service are covered in this paper but will need to be further developed as the service evolves.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	No direct Impact
<b>Gweithlu: Workforce:</b>	The workforce implications from the establishment of this service are included in this paper.
<b>Deddf Rhyddid Gwybodaeth/ FOIA</b>	Open

# **Temporary Medicines Unit for COVID19 Governance Paper**

## **SITUATION**

The COVID-19 pandemic represents unprecedented challenges to health and social care provision and requires significant and sometimes challenging decisions to be taken at pace.

NWSSP recognises the crucial role of supporting all NHS and Social Care services in Wales, bringing our project management expertise and where relevant, bringing existing project and programme arrangements into play to support Welsh Government identified priorities. NWSSP has needed to respond at pace and put in place innovative arrangements to provide the required response on a timely basis. To that end, the Welsh Government has agreed to provide funding to support the response to the COVID-19 pandemic.

As a result of the current COVID-19 pressure, there has been a big increase in demand for injectable medicines. While the existing pharmacy services are doing their best to meet this immediate need, much of the additional demand has been met by nurses drawing up syringes from ampules on the wards. This is widely accepted as being neither an efficient use of resource, not the safest or lowest risk way to prepare medicine.

The Medical Directors of the Health Boards and Trusts, together with the Chief Pharmacists, have drawn up a list of the Top 12 Injectable Medicines for the COVID-19 outbreak. Welsh Government has requested an immediate increase in pharmaceutical capacity for syringe filling of the Top 12, in order to reduce the amount of drawing up being carried out by nurses.

Betsi Cadwaladr University Health board has been piloting the concept of an automated syringe filling solution to delivery to hospital in north Wales. It is considered that distance and storage constraints mean that the capacity of this unit is not be able to service the whole of Wales during the expected peak levels of a COVID19 outbreak.

The Chief Pharmacists Group (CPG) have proposed that additional capacity should therefore be provided on an All Wales basis, including a Temporary Medicines Unit in South Wales (a syringe filling machine is already in use in North Wales), and strategic control of key materials on an All Wales basis. These activities are seen as comprising a Pharmacy Technical Service (i.e. supply activity), rather than Clinical Pharmacy.

## **REQUEST FOR SUPPORT AND PROJECT TEAM**

Welsh Government approached NWSSP on 6 April 2020 to provide project management expertise and to design and implement an operational Temporary Medicines Unit in South Wales and control of key materials required on an All Wales basis.

A Project Team was quickly mobilised by NWSSP to scope this All Wales service:

- The Senior Responsible Owner is Professor Malcolm Lewis, NWSSP Medical Director.
- The Project Manager is Peter Elliott, who has previous experience of working with the Chief Pharmacists community across Wales, and relevant Welsh Government officials.
- A nominated Accountable Pharmacist – Paul Spark
- Professional lead for the service – Chief Pharmacist for Wales – Andrew Evans
- All Wales Specialist Quality Assurance Pharmacist – Laura-Jane Keating

## **ENDORSEMENT OF SHORT LIST OF OPTIONS**

Options papers regarding the proposed service model were presented by the Project Team to the Chief Pharmacists Group (CPG) on 9 April 2020, 13 April 2020 and further to additional work completed again on 16 April 2020.

The most significant challenge to the project is the uncertainty over the level of demand for the service over the short and medium term. Demand from patients at the initial peak of the outbreak is complicated further by the uncertainty over the likelihood and timing of further peaks later in the year. There are numerous other variables:

- Availability of equipment;
- Availability of staff;
- Availability of bulk materials; and
- Availability of suitable or convertible premises.

A demand and capacity model has been constructed that will feed information from hospital sites for forward planning purposes.

The short list of options were endorsed by the CPG at that meeting. The CPG remains the key professional stakeholder of the service and will remain fully engaged and consulted as the project evolves.

The premises options have considered the following success factors:

- Ability to be established quickly with minimum disruption to existing units.
- Space and facilities for receiving, handling and storing both bulk stock and consignments for dispatch.
- Access to established daily logistic networks to Hospital and Surge Hospitals e.g. Principality across South Wales.
- Rapid access to IT systems.
- Accessibility to staff.
- Away from sources of COVID19 infection risk i.e. concentrations of patients with confirmed infections.
- Level of quality assurance achievable.

The short list of options included:

- Morrision Hospital Aseptic Unit
- Nevill Hall Aseptic Unit
- Cardiff University Redwood Building
- National Distribution Centre (IP5)

The preferred option is to use the space at the National Distribution Centre (IP5) with a 'Pop-up' Cleanroom.

The main advantage of this option, over the others, is the immediate availability of a clean and accessible space, compliant with social distancing regulations and having minimal disruption to existing hospital site working practices and environments. The site is also secure, already under NHS control, and able to be rapidly adapted to include secure controlled drugs storage, which is a particular shortfall at existing sites.

The build period is assessed as being 4 weeks from award of contract, followed by 2 weeks of validation. The service could therefore become operational by early July 2020.

The primary focus of this investment is meeting the expected second peak in demand for COVID medicines. The investment in the site at IP5 has been scoped such that the "pop up" facility does not obstruct the identified candidate site for the main TRAMS medicines hub. The opportunity will also exist to re-use the pop-up clean room as a training suite in the future, in the event of the main TRAMS investment taking place at that location.

## **REGULATORY FRAMEWORK**

The Medicines Regulator (MHRA) has issued a letter of guidance regarding temporary medicines preparation arrangements during COVID-19, in particular for supply of medicine across organisational boundaries. Key aspects of this guidance are:

- Fully Licensed Units can be used in line with their usual remit.
- Units operating under the "Section 10" exemption can be used for this purpose providing:
  - The unit is rated "Low Risk" by the Regional Quality Assurance (QA) for Wales
  - Large batches can be prepared so long as the methodology is appropriate and a patient list is maintained for each session
  - The prepared syringes can be assigned 7 days shelf life
- Locations off hospital site but controlled by the NHS are preferred.
- The site must be secure.
- Where a site not already registered as a Pharmacy it be registered as such with the General Pharmaceutical Council (GPhC).

Following government direction to focus on rapid capability to meet the expected second peak of COVID19, the Project Team has prioritised the "Section 10" path, as the best opportunity to get additional capacity in place as soon as possible.

The Project Team are working closely with the Regional QA, and she is consulting the MHRA to review the proposed design, and to ensure that the proposed arrangements meet both the letter and the spirit of their guidance.

The physical and organisational design for the unit is also future-proofed, to enable fully licensed operation to be pursued, if this were to be requested in the future.

## **GOVERNANCE**

The proposed services will be provided by NWSSP, by way of professional and technical services, in accordance with Regulation 2 of the The Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012.

All staff working in the new unit will be formally engaged to job roles within NWSSP, to ensure accountability for the work undertaken. These engagements will be a mixture of:

- Honorary Secondments of staff already employed by Health Board or Trust Pharmacy units

- Bank Staff engagements
- Temporary contracts

As a "Section 10 " Unit the management structure will be led by a full time "Accountable Pharmacist", leading with a team of "Authorised Pharmacists" who will supervise each individual working session in the unit.

A suitably qualified and experienced individual has been identified for the Accountable Pharmacist role. The Accountable Pharmacist will line report to the NWSSP Medical Director, as SRO for the service and the Accountable Officer for the service will be the Managing Director of Shared Services.

## **LEGAL LIABILITY, VICARIOUS LIABILITY AND INDEMNITY FOR CLAIMS**

The liability position has been discussed with the NWSSP Director of Legal & Risk and Welsh Risk Pool. His advice is as follows:

1. Staff employed by NWSSP will be captured by the common law concept of vicarious liability (which makes their employer liable for acts, omissions or breaches of duty that lead to personal injury or loss);
2. Staff otherwise engaged (such as staff seconded from other NHS bodies, staff engaged in the context of honorary contracts, sub-contractors, agency or locum staff) may be captured by the common law concept of vicarious liability and if not will be captured by the policy of NHS indemnity;

The Welsh Risk Pool (WRP) Head of Safety and Learning has also considered the urgent introduction of a medicines preparation facility by NWSSP on behalf of the Welsh Government. The application of NHS Indemnity to this facility and its services will be provided through the standard Welsh Risk Pooling arrangements. It does not require special permission from the Welsh Risk Pool Committee or WRP Accountable Officer.

The WRP has published an advisory note in respect of NHS Indemnity arrangements during the Coronavirus Pandemic. The temporary medicines facility is partly covered in the section "temporary sites and alternative premises". The indemnity of staff who are allocated to work in the temporary medicines service is also outlined in this guide, whether they are direct employees of the Trust, agency / locum staff or others redeployed from other NHS bodies (either through mutual aid arrangements or secondment arrangements).

As an NWSSP service, any claims or potential claims should be notified in the first instance to the WRP Operations Team (who act as the 'Claims

Manager' for NWSSP) and the NWSSP Health & Safety Manager. These should be highlighted as related to COVID19 special arrangements.

The existing NWSSP Datix incident reporting system should be utilised to record incidents and near misses by this service. The leadership of the temporary medicines service is requested to use the NWSSP Datix system to log non-conformances and service quality concerns. These will be monitored corporately and allocated to the appropriate 'accountable pharmacist' or a deputy for review and investigation. This will be reviewed over the next few months and data will be prepared by the NWSSP Health & Safety Manager to support the governance of the service.

## **WORKFORCE**

A suite of All Wales job roles for the activities planned within the Temporary Medicines Unit are being identified together with NWSSP Workforce team and HEIW. These will give the posts against which the temporary workers will be formally engaged. Engagement letters will be issued to staff confirming the employment, governance, and indemnity arrangements.

We plan to explore the engagement of existing appropriately skilled NHS staff who are unable to work in their existing units because of social distancing challenges. They may be able to be redeployed to this temporary working environment.

Where planned roles are not able to be filled from these routes, then they will be advertised externally on short fixed term contracts (aligned with funding award), with a view to recruiting from outside the existing NHS Wales workforce, particularly from the Bristol and Bath areas, having in mind the accessibility of South-East Wales, across the Prince of Wales bridge.

The workforce roles have been designed for a Section 10 Unit, but with sufficient coverage and depth of expertise to permit conversion to a Licensed Unit (MS Special & WDA) at a future date, if that were to be requested.

## FINANCING

### Capital Costs

The following table shows current capital cost estimates for the new facility based at IP5 in Newport and includes an element of additional equipment required at St Mary's Pharmaceutical Unit in Cardiff:

<b>Capital Costs 2020/21</b>	<b>£000</b>	<b>£000</b>
<b>1. Cardiff &amp; Vale - St Mary's Pharmaceutical Unit</b> Additional Equipment		<b>30</b>
<b>2. New Unit at IP5</b> Medimix Machines		<b>108</b>
Smart filler	124	
Other Equipment	15	
		<b>138</b>
<b>3. Conversion Cost Estimate at IP5*</b>		<b>271</b>
<b>Contingency</b>		<b>20</b>
<b>Total</b>		<b>567</b>

\*Estimated costs at this stage pending finalisation of room design, but does reflect firm quotes for all major items

Capital costs include quoted conversion costs of setting up a room at IP5 together with Medimix machines for bulk syringe filling and other ancillary equipment.

Opportunities for long term use of these assets, post the immediate COVID19 outbreak, will be considered in order to maximise value for the service in Wales.

Approval of the third tranche of funding is to be confirmed by Welsh Government and a verbal update will be provided at the meeting.

### Revenue Costs

Revenue costs divide into three elements:

- Staff Costs
- Non-staff overhead costs
- Transactional costs

The transactional costs include the cost of the medicines themselves, and the associated consumable items such as the syringes. The cost of these items will flow through NWSSP books, but will be recovered from the Health Boards on an item by item basis. The rationale for this is that these costs are already being incurred within health boards but with the preparation undertaken by local clinical staff rather than the proposed new temporary medicines unit. These costs have therefore been excluded from the financial analysis.

## Staff Costs

The following table shows staff costs on a full year basis and also for a 10 month period covering June 20– March 21 representing the period assumed before 'business as usual' resumes.

Staff Resource Estimates	A4C Band	WTE	Cost Per WTE	Basic Salary	Weekend	Total Cost	10 Month
				Cost	Premium		
				£	£	£	£
Accountable Pharmacist	8c	1.00	87,291	87,291		87,291	72,743
Admin Support	4	0.40	27,655	11,062		11,062	9,218
Authorised Pharmacist	8c	1.00	87,291	87,291		87,291	72,743
Scheduler/Procurement Lead	6	2.00	40,528	81,056	7,295	88,351	73,626
Production Manager	6	2.00	40,528	81,056	7,295	88,351	73,626
QA Lead	8c	1.00	87,291	87,291		87,291	72,743
Stores Operator	2	3.00	21,464	64,392	5,795	70,187	58,489
Production Supervisor	5	2.00	33,779	67,558	6,080	73,638	61,365
Production Operator	3	4.00	23,617	94,468	8,502	102,970	85,808
Product Approver	7	1.00	48,526	48,526	8,735	57,261	47,717
Domestic Assistant	2	2.00	21,464	42,928	3,864	46,792	38,993
Workforce training lead	7	1.00	48,526	48,526		48,526	40,438
<b>Total</b>		<b>20.40</b>		<b>801,445</b>	<b>47,566</b>	<b>849,011</b>	<b>707,509</b>

As noted above, this establishment contains sufficient resource to run as a Sec 10 Unit (as per the job titles given) or and an MS/WDA Licensed Unit, if required.

It is assumed that staff costs will not vary with production volume.

Approval of the revenue funding requirements to March 2021 is to be confirmed by Welsh Government and a verbal update will be provided at the meeting.

## Non Pay Costs

The following table show an estimate of non-pay costs (excluding the direct medicine costs which will be charged directly to health boards):

<b>Non Pay Revenue Costs</b>	<b>Full</b>	<b>2020/21</b>
	<b>Year</b>	<b>10 Mths</b>
	<b>£000</b>	<b>£000</b>
Transport Costs for Distribution	80000	66667
Disposables	23000	19167
External Testing	50000	41667
Equipment Maintenance	11755	9796
Uniforms and Protective Clothing	34644	28870
Cleaning and General Supplies	9500	7917
Office Costs	11903	9919
Regulatory Costs	18354	15295
Energy Costs	25000	20833
<b>Total</b>	<b>264156</b>	<b>220130</b>

## Transactional Costs

Transactional costs include the direct cost of the medicines and associated consumable items such as the syringes. The cost of these items will be charged directly to Health Boards on usage, initially being incurred by NWSSP and then recovered through a recharging arrangement. The rationale for this is that these costs are already being incurred within health boards but with drug preparation undertaken by local clinical staff rather than through the proposed new temporary medicines unit. These costs have therefore been excluded from the financial analysis.

## Overall Costs and Funding

The following table shows a summary of indicative total costs for which WG funding support has been agreed:

<b>Summary of Costs</b>	<b>Full Yr</b>	<b>2020/21</b>
	<b>Cost</b>	<b>10 Mths</b>
	<b>£000</b>	<b>£000</b>
<b>Capital Costs</b>	<b>567</b>	<b>567</b>
Revenue Costs		
Staff		708
Non pay		220
<b>Total Revenue Costs</b>	<b>0</b>	<b>928</b>

## **Benefits**

The overriding purpose to the proposed service is to ensure continuity of supply of high quality medicines, for the purpose of patient safety and minimising nurse workload.

The provision of ready to use syringes is also known to release a benefit in terms of Nurse Time on the wards which receive them. This benefit is usually taken qualitatively and, in the context of the COVID 19 outbreak, it is not considered to be cash releasing.

As such, a quantified benefits calculation is not included in this section, but could be brought forward as part of any future proposal to develop a self sustaining model of service provision, once the COVID outbreak has reduced or stabilised to a "business as usual" level.

## **EXIT STRATEGY**

The revenue funding awarded for the service is calculated to cover the period up to 31 March 2021.

After that time expires, and depending on the COVID situation, there will then be three possible options to consider:

- Closure of the service and storage of the equipment for future re-use
- Award of a further period of central funding to continue COVID related medicines preparation on the same basis
- Re-purposing of the unit as part of a wider All Wales CIVA service, based on a benefits driven funding model, jointly resourced by the participating organisations.

No assumption is taken in this paper on which of those exit routes may be followed, which will depend entirely on the circumstances in early 2021.

## **RECOMMENDATION**

The Partnership Committee is asked to **approve** the establishment of this service, and note the progress made to date.



**The report is not Exempt**

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

**Review of NHS Wales Shared Services Partnership Committee  
Standing Orders (SSPC SOs)**

<b>ARWEINYDD: LEAD:</b>	Andy Butler Director of Finance & Corporate Services
<b>AWDUR: AUTHOR:</b>	Roxann Davies Corporate Services Manager
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Peter Stephenson Head of Finance & Business Development
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	Andy Butler Director of Finance & Corporate Services 01443 848552 / <a href="mailto:Andy.Butler@wales.nhs.uk">Andy.Butler@wales.nhs.uk</a>

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

To provide the Committee with proposed amended version of the SSPC Standing Orders, following an annual review to ensure they remain relevant and fit for purpose following recent developments, which are summarised in the body of this report, for **APPROVAL**.

**Llywodraethu / Governance:**

<b>Amcanion / Objectives:</b>	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement.
<b>Tystiolaet / Supporting evidence:</b>	<a href="#">NHS Governance e-Manual</a> ; NHS Trust Model Standing Orders Reservation & Delegation of Powers (March 2014); NHS Trust Model Standing Orders, Reservation & Delegation of Powers, Glossary of Terms; Schedule 5.1 LHB Local Partnership Forum Advisory Group – Terms of Reference and Operating Arrangements; Velindre University NHS Trust Standing Financial Instructions (SFIs) and Standards of Behaviour Framework.

**Ymgynghoriad / Consultation:**

Engagement with NWSSP Managing Director, Director of Finance & Corporate Services, Deputy Director of Finance and Corporate Services, Head of Safety and Learning, Head of Finance and Business Improvement, Head of Financial Management and Velindre’s Director of Finance to update the SSPC SOs. The update will also be taken to Velindre Trust Board.

**Adduned y Pwyllgor / Committee Resolution (insert ✓):**

<b>DERBYN / APPROVE</b>	✓	<b>ARNODI / ENDORSE</b>		<b>TRAFOD / DISCUSS</b>		<b>NODI / NOTE</b>	
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<b>Argymhelliad / Recommendation:</b>	The Committee are asked to <b>APPROVE</b> the amendments to the SSPC SOs.
<b>Crynodeb Dadansoddiad Effaith / Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth / Equality and diversity:</b>	No adverse impacts or implications identified.
<b>Cyfreithiol / Legal:</b>	SSPC SOs are based on the Model Standing Orders issued by Welsh Government to NHS Trusts using powers of direction as provided in Section 19 (1) of the National Health Service (Wales) Act 2006, which states that NHS Trusts in Wales must agree Standing Orders (SOs) for the regulation of their proceedings and business.
<b>Iechyd Poblogaeth / Population Health:</b>	No adverse impacts or implications identified.
<b>Ansawdd, Diogelwch a Profiad y Claf / Quality, Safety &amp; Patient Experience:</b>	Ensuring the SSPC and its Sub-Committee(s) are empowered to make informed decisions is dependent upon the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.
<b>Ariannol / Financial:</b>	No adverse impacts or implications identified.
<b>Risg a Aswiriant / Risk and Assurance:</b>	The adoption of SOs and SFIs is a key element of the corporate governance arrangements of the SSPC. The adoption of the model in place ensures compliance with Welsh Government directives and guidance and ensures consistency across NHS Wales.
<b>Safonau Iechyd a Gofal / Health and Care Standards:</b>	The SOs ensure effective procedures are in place and demonstrate compliance with the overarching principles of governance, leadership and accountability of the quality themes outlined in the <a href="#">Health and Care Standards</a> .
<b>Gweithlu / Workforce:</b>	No adverse impacts or implications identified.
<b>Deddf Rhyddid Gwybodaeth / Freedom of Information:</b>	Open - the information is disclosable under the Freedom of Information Act 2000.

## REVIEW OF SSPC STANDING ORDERS

### 1. INTRODUCTION

To ensure effective, robust and up to date governance arrangements are in place for the SSPC, the SOs are reviewed on an annual basis and were last updated and approved by the SSPC in March 2019. Amendments have been made to the document since its last publication date and a summary of the amendments proposed are set out at **Appendix 1**. The fully updated document is included at **Appendix 2**, for **APPROVAL**. In accordance with our local environmental sustainability commitments, once approved, A5 bounded hard copies will be provided upon request only.

### 2. GOVERNANCE AND ASSURANCE

Annual revision of the document is a key element of the corporate governance arrangements of the SSPC and provides assurance that the SOs are compliant with Welsh Government directives and Model Standing Orders, up to date with emerging legislation and regulatory guidance and ensures consistency in managing the business of Committee. The updated SOs will be presented to the Velindre University NHS Trust Board, once approved by the SSPC.

Section 10.0.1 of the SSPC SOs state:

*“These Shared Services SOs shall be reviewed annually by the SSPC, which shall report any proposed amendments to the Velindre Board for consideration. The requirement for review extends to all documents having the effect as if incorporated in Shared Services SOs, including the Equality Impact Assessment.”*

Section 9.0.3 of Welsh Government’s Model Standing Orders for NHS bodies states:

*“Assurances in respect of the Shared Services shall primarily be achieved by the reports of the Managing Director of Shared Services to the Shared Services Partnership Committee, and reported back by the Chief Executive (or their nominated representative). Where appropriate, and by exception, the Board may seek assurances direct from the Managing Director of Shared Services. The Director of Shared Services and the Shared Services Partnership Committee shall be under an obligation to comply with any internal or external audit functions being undertaken by or on behalf of the HB.”*

### 3. RECOMMENDATION

- The Committee are asked to **APPROVE** the amended SSPC SOs.

#### Appendix 1 – Summary of Amendments to SSPC SOs (May 2020)

Page(s)	Amendment
Various	General housekeeping for consistency, to include formatting, page number amendments, as appropriate. Further, to include references to updated status of Velindre University NHS Trust, references to Health Education Improvement Wales (HEIW) as a Special Health Authority, references to Cwm Taf Morgannwg University Health Board and updating of job titles, to reflect current arrangements within NWSSP, throughout.
62-64	Minor amendments to the Operational Responsibility for Directors and Officers, to bring this in line with current working arrangements, for the categories of General, Chair’s Action on Urgent Matters to state Board Secretary Governance Support and Working In Partnership to state Deputy Director of Finance and Corporate Services; Amendment to high level delegation for approval of clinical negligence and personal injury claims to the NWSSP Managing Director and/or Director of Finance and Corporate Services.
70-74	To include amendments to Schemes of Budgetary Delegation, such as removal of reference to secure printing and franking machine contracts from Primary Care

	<p>Services and the removal of delegation limits set out historically for Workforce Education Development Services' (WEDS) Education and Training Contracts which have transferred to HEIW.</p> <p>Further, we propose the introduction of a delegated limit for All Wales Contracts whereby NWSSP is required to incur expenditure on behalf of NHS Wales. Similar arrangements exist NHS Wales Informatics Service (NWIS) for All Wales Contracts, who are also hosted organisation under Velindre University NHS Trust (Page 70).</p> <p>Capital expenditure limit increase proposed for NWSSP Managing Director and/or Chair to £1m, NWSSP Managing Director to £500k and Director of Finance and Corporate Services of £100k. (Page 70).</p> <p>Increased limit for intra-NHS invoices and payments (included but not limited to pharmacy rebates, NWSSP distribution, etc), to £750k for the NWSSP Managing Director and Director of Finance and Corporate Services (Page 71).</p> <p>To include amendments to job titles for Deputy Director and Assistant Director of Finance and Corporate Services, Director of Legal and Risk Services and Welsh Risk Pool, Head of Safety and Learning, to reflect current arrangements; removal of explicit column to reference to Powys Teaching Health Board explicitly, as these and Former Health Authority Claims are now dealt with by Legal and Risk Services (page 72).</p> <p>Amendments to Procurement Services delegated limits, to state IP5, Newport in place of Cwmbran Stores, following relocation in October 2019 (Page 73).</p> <p>Sets out the agreed NWSSP Scheme of Delegation for COVID-19 and pandemic expenditure, which was approved at the Velindre University NHS Trust Board meeting of 18 March 2020 and 30 March 2020. It was initially agreed to increase the delegated authorisation limits for the Chair and Managing Director for COVID 19 expenditure to £2M. This was subsequently increased to £5M from 30 March 2020. However, contracts and orders for COVID expenditure in excess of £5M will still require approval of the Velindre Trust Board, which for expedience may need to be through the existing mechanism of Chair's action. It was agreed that these increased limits for COVID expenditure would be reviewed on 30 June 2020.</p> <p>The introduction of a Scheme of Delegation for the Existing Liabilities Scheme Limits and arrangements with Medical and Dental Defence Union of Scotland, as set out in the letter dated 12 May 2020, sent from Mr Steve Elliott, Deputy Director of Finance at Welsh Government, to Mr Neil Frow, Managing Director of NWSSP, which confirms their acceptance of the proposed Scheme of Delegation from 1 July 2020, when oversight of the Existing Liability Scheme transfers to NWSSP, noting that any value of damages decisions greater than £1m will require written Welsh Government approval (Page 74).</p>
76-99	<p>To include updated Terms of Reference for Welsh Risk Pool Committee (Pages 76-82) NWSSP Audit Committee (Pages 83-93) and Evidence Based Procurement Board (EBPB) (Pages 94-99), to ensure they reflect current working arrangements in place for the Committees and Advisory Board.</p>



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:**

21 May 2020

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Proposed Payment Process for Existing Liability Scheme**

**ARWEINYDD:  
LEAD:** Alison Ramsey, Deputy Director of Finance

**AWDUR:  
AUTHOR:** Alison Ramsey, Deputy Director of Finance

**SWYDDOG ADRODD:  
REPORTING  
OFFICER:** Alison Ramsey, Deputy Director of Finance

**MANYLION  
CYSWLLT:  
CONTACT DETAILS:** Alison.ramsey@wales.nhs.uk

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

For the Committee to agree the proposed change to the Scheme of Delegation and recommend approval to the Velindre NHS Trust Board meeting in June 2020.

**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 :**

Welsh Government

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

DERBYN/ APPROVE	✓	ARNODI/ ENDORSE		TRAFOD/ DISCUSS		NODI/ NOTE	
<b>Argymhelliad/ Recommendation</b>							

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact.
<b>Cyfreithiol: Legal:</b>	All relevant considerations included in paper.
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct impact.
<b>Ariannol: Financial:</b>	All relevant considerations included in paper.
<b>Risg a Aswiriant: Risk and Assurance:</b>	All relevant considerations included in paper.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> Governance, Leadership and Accountability
<b>Gweithlu: Workforce:</b>	No direct impact.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open

## **Proposed payment process for Existing Liability Scheme**

### **Background**

The Welsh Government has delegated to NWSSP the function of oversight of the Existing Liabilities Scheme (ELS) and certain claims handling responsibilities to be undertaken by the Medical Protection Society (MPS) and Medical and Dental Defence Union of Scotland (MDDUS). Neil Frow will act as Accountable Officer for this delegated function.

A copy of the delegation letter is enclosed as Appendix A.

The Legal and Risk Services (L&R) Division of NHS Wales Shared Services Partnership (NWSSP) will deliver this service on a day-to-day operational basis under the leadership of Heather Grimbaldston as General Medical Services Indemnity Team Leader. Mark Harris, Director L&R, will provide oversight.

As an additional level of assurance, L&R will follow NWSSP performance reporting arrangements. This includes regular update reports from L&R to our Senior Management Team, written and oral scrutiny on a quarterly basis on the Division's performance against agreed objectives and Key Performance Indicators.

NWSSP also reports quarterly by exception on performance against agreed objectives and KPIs to the Delivery and Performance Division Health & Social Services (HSS) Group.

This oversight function does not involve making payments to either of the Medical Defence Organisations (MDOs) nor direct payments to claimants or to those providing services to defend claims such as Counsel or expert opinion. The Welsh Government HSS Finance team solely handles payments to MDOs. The MDOs make the direct payments to claimants and to those involved in defending the claim.

### **Change in function**

From 1 April 2021 the role of NWSSP will change and it will become responsible for the management of ELS claims, and this will be confirmed in a future delegation letter.

MDDUS has indicated a preference to transfer responsibility for the management of claims from 1 July 2020.

Welsh Government HSS Finance has asked NWSSP to consider if it can also take on responsibility for the direct payment process as part of the change

in function. There are two potential scenarios that may then be in operation alongside each other:

- **Scenario 1**

External solicitors previously engaged by the MDOs will continue to handle some of the claims once L&R has assumed responsibility for the management of the claims.

In this scenario, L&R will provide instructions. Authorisation and payment of the external solicitors' costs and disbursements will be approved in line with the Scheme of Delegation.

- **Scenario 2**

L&R solicitors handle some of the claims with no external solicitor involvement. In this scenario members of the GMPI team would then be instructing experts, counsel, cost draftsmen and incurring court fees.

In this scenario the Director or Deputy Director of L&R will approve claims decisions. Payment request will be approved in line with the Scheme of Delegation.

Annex 1 to this report summarises the process that will operate.

## **Proposal**

For NWSSP to take on responsibility for processing direct payments there are three key considerations:

### **1) Scheme of delegation**

The current NWSSP Scheme of delegation will need to be updated to reflect the change in responsibility.

The following proposal reflects similar arrangements put in place for the administration of the Welsh Infected Blood Scheme (WIBSS), on behalf of the Welsh Government.

A letter of delegation from the Welsh Government HSS Finance team will be required to support this way forward.

Separately then the following Scheme of Delegation is proposed relating to payment approvals within NWWSP:

## Existing Liability Limits - proposal

<b>Scheme Designation</b>	<b>Damages Limit</b>
Welsh Government	£1M and over
Managing Director and NWSSP Chairman	Up to £1M
Managing Director	Up to £500k
Director of Finance & Corporate Services	Up to £100k
Director of L&R	Up to £100k
Deputy Director of Finance & Corporate Services	Up to £50k
Deputy Director of L&R	Up to £50k
Head of Function - GMPI Team Leader	Up to £10k

### 2) Reporting

The Welsh Risk Pool Committee has no role in the administration or oversight of the Existing Liability Scheme.

It is proposed that NWSSP would provide to the Welsh Government every quarter end a report. This report would include:

- Number of live cases.
- Total estimated value of live cases split by damages/claimant costs/defence costs.
- Indicative settlement date.
- Probability of the claim being successful.
- Summary total of payments made in the last quarter and year to date.

Whilst learning from events is not a requirement prior to a claims decision or payment under the Existing Liability Scheme Regulations, it would nonetheless be considered good practice.

A learning from events form will be completed, logged on the database and incorporated into the wider sharing of learning from GMPI through case studies, training and newsletters.

### 3) Payments and reimbursement

If adopted it is proposed that claims and payments would be made by NWSSP and approved in line with the above scheme of delegation.

Any value of damages decisions >£1M will require written (email acceptable) Welsh Government approval.

All other value of claims decisions <£1M will be approved in line with the Scheme of Delegation.

With no payment history to rely upon it is difficult to predict with any certainty the volume or value of ELS payments to be processed by NWSSP. It is proposed that initially NWSSP will seek reimbursement for claims payments on a quarterly basis via invoice; similar to the WIBSS process.

It is acknowledged that in the event there is a significant value of payment to be made in any one month, an ad hoc cash draw down may be required from the Welsh Government HSS Finance approval. The L&R Finance Manager will liaise directly with Welsh Government HSS Finance team when this scenario arises.

This initial proposal will be kept under review, and amended if required with the agreement of Welsh Government HSS Finance, to a more frequent reimbursement arrangement.

### **Conclusion**

The Welsh Government HSS Finance team has agreed the above proposal, and a delegation letter will follow confirming the financial limits.

These proposed new arrangements will take effect from 1 July 2020 and be reviewed no later than 1 December 2020.

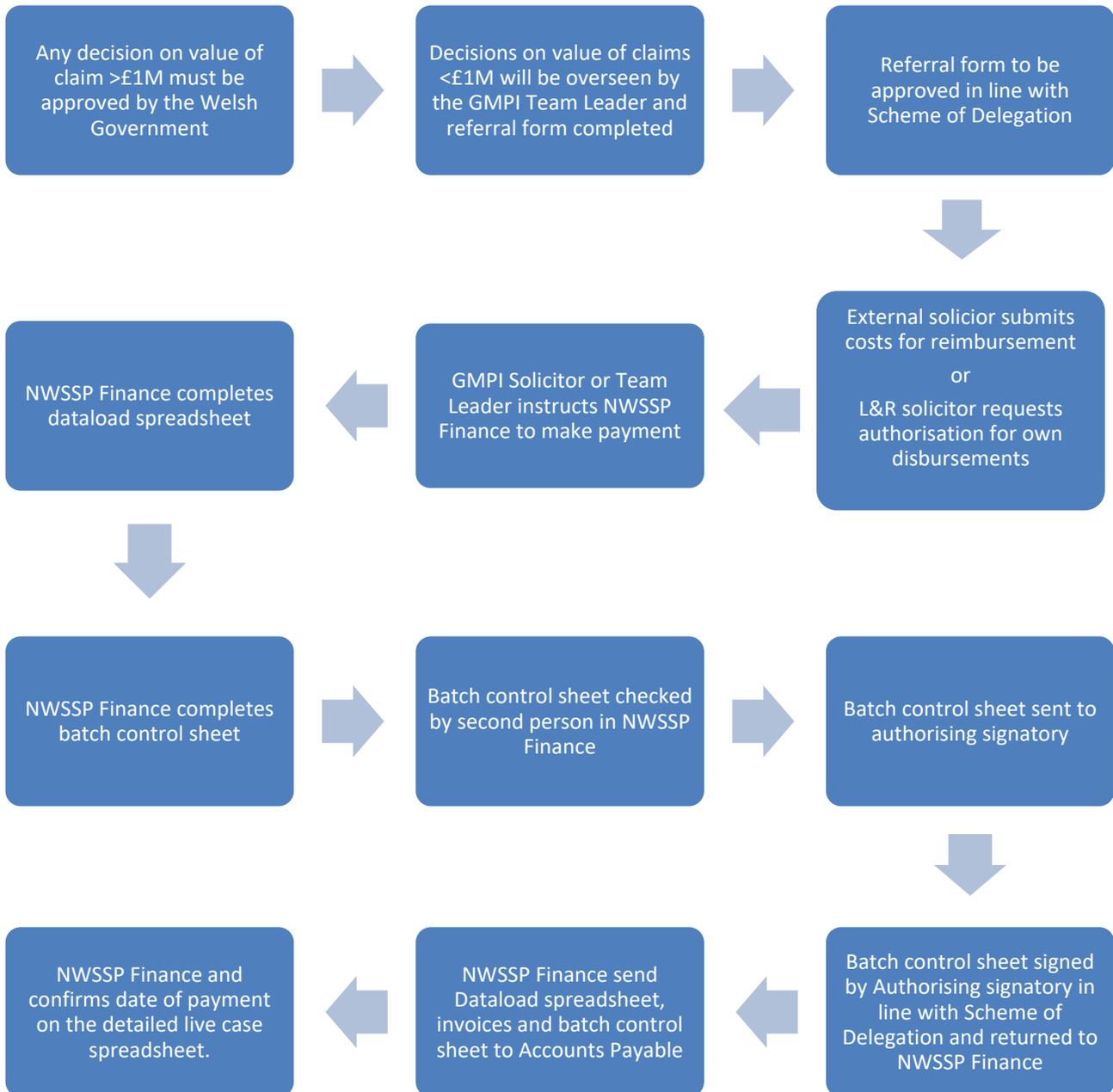
### **Recommendation**

The Committee is asked to:

- Note the content of the report.
- Agree the proposed change to the Scheme of Delegation and recommend approval to the Velindre NHS Trust Board meeting in June 2020.

## Annex 1 Existing Liability Scheme Payments – internal process

### Overview



- 1) Any decision on value of claims >£1M approval must be sought in writing by the GMPI Team Leader from [Steve.elliott@wales.nhs.uk](mailto:Steve.elliott@wales.nhs.uk) at Welsh Government; cc [john.evans@wales.nhs.uk](mailto:john.evans@wales.nhs.uk).
- 2) Any decision on value of claims <£1M must be overseen by the GMPI Team Leader and a referral form completed for approval by the Director of L&R or Deputy.
- 3) GMPI solicitor instructs NWSSP finance to make payments for either an interim payment or final payment for damages or costs.

GMPI Team Leader will be cc'd into the request by the solicitor. This request may come from an external solicitor previously appointed by MDOs or from one of the L&R solicitors.

Director of L&R will be cc'd into requests made by the Team Leader for their own cases.

Team Leader will instruct NWSSP finance to make payments relating to L&R solicitors.

- 4) NWSSP finance will complete a dataload spreadsheet in a pro-forma format (to enable upload by Velindre NHS Trust).

The dataload detailed spreadsheet will include:

- a. Name of the case
- b. Case reference
- c. Bank account details
- d. Invoice date
- e. Invoice number
- f. Amount incl. VAT
- g. Cost Centre
- h. Subjective Code
- i. Invoice received date
- j. VAT type (exempt/reclaimable)
- k. Claimant Name
- l. Email address of recipient for remittance

The VAT detail is significant because VAT is reclaimable on expert fees except where they have been paid as part of the claimant costs.

- 5) NWSSP finance will complete a batch control sheet total for all claims to be paid since the last batch.
- 6) The Batch control sheet will be signed by NWSSP Finance and checked by a second person before being sent to the appropriate Authorising Signatory in line with the scheme of delegation.

Electronic signatures are permissible if sent from the authorising email account.

- 7) NWSSP Finance then sends the Batch control sheet and the dataload spreadsheet for payment to Accounts Payable.

All supporting invoices for costs, including experts and barrister fees, should accompany the dataload spreadsheet.

Damages payment requests are supported by the email from the solicitor instructing the payment to be made following negotiation of the damages settlement.

Claimant costs to be paid are supported by email from the solicitor instructing payment following the negotiation of the costs settlement.

- 8) When payment has been confirmed, NWSSP finance will update the Finance detailed spreadsheet to confirm.

The Finance spreadsheet would contain the detail of all open cases with brought forward balances at the beginning of the year.

- The detail includes probability of loss to determine whether the case is a provision or a contingent liability, case ref and provision balances.
- Payments during the year are added so the closing balances are adjusted for in year utilisation
- The summary sheet shows the closing position which will reconcile to the yearend statements and can be used as a supporting document for the yearend audit.

- 9) Learning from events form completed, logged on the data base and incorporated into the wider sharing of learning from GMPI through case studies, training and newsletters.

## **ARGYMHELLIAD/RECOMMENDATION**

The Committee is asked to:

- Note the content of the report.
- Agree the proposed change to the Scheme of Delegation and recommend approval to the Velindre NHS Trust Board meeting in June 2020.



Neil Frow  
Managing Director  
NHS Wales Shared Services Partnership  
4/5 Charnwood Court  
Heol Billingsley  
Parc Nantgarw  
Cardiff  
CF15 7Q7

February 2020

Dear Neil

**DELEGATION OF OVERSIGHT OF THE EXISTING LIABILITIES SCHEME  
ARRANGEMENTS WITH MEDICAL AND DENTAL DEFENCE UNION OF SCOTLAND**

I am writing to you, as Managing Director of the NHS Wales Shared Services Partnership (SSP), in my role as Director, Primary Care and Health Science, and SRO for the Indemnity Project to formally delegate to Shared Services Partnership Legal and Risk Services (SSP LARS), the function of oversight of the Existing Liabilities Scheme (ELS) and certain claims handling responsibilities to be undertaken by the Medical and Dental Defence Union of Scotland.

We have previously discussed this approach with SSP LARS building on your appointment as operator of the Future Liabilities Scheme (General Medical Practice Indemnity).

I would draw your attention to the specific responsibilities that are delegated in the Interim Arrangements Deed and the Framework Agreement. For ease of reference, the oversight arrangements are set out in the **Annex** this letter.

In summary the oversight arrangements requires SSP LARS to comply with the obligations of Administrator as set out in the Interim Arrangements Deed (Schedule 5, Interim Business Handling, clause 9; Reporting clause 6; Forecasting and Reporting clause 7 ;Monthly Governance Committee clause 18) and the Framework Agreement (Migration clause 12; Schedule 6 Migration). Additionally you will work with HSS to put in place arrangements to ensure valid claim payments can be paid and to monitor the implementation and performance of the arrangements.

I would be grateful if you can confirm acceptance of this delegation letter in writing as soon as possible, please include specifically how you will manage the scheme.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Frances Duffy'. The signature is written in a cursive style with a large initial 'F'.

**Frances Duffy**

Cyfarwyddwr, Gofal Sylfaenol a Gwyddor Iechyd  
Director, Primary Care and Health Science



Neil Frow  
Managing Director  
NHS Wales Shared Services Partnership  
4/5 Charnwood Court  
Heol Billingsley  
Parc Nantgarw  
Cardiff  
CF15 7Q7

Our Ref: JE12520  
Your Ref:  
12 May 2020

Dear Neil,

## **SCHEME OF DELEGATION –FINANCIAL ARRANGEMENTS**

### **DELEGATION OF OVERSIGHT OF THE EXISTING LIABILITIES SCHEME ARRANGEMENTS WITH MEDICAL AND DENTAL DEFENCE UNION OF SCOTLAND -**

In February 2020, Frances Duffy, Director Primary Care and Health Science, wrote to you, in relation to the Delegation of oversight of the Existing Liabilities Scheme and arrangements with Medical and Dental Defence Union of Scotland. The letter stated:

“In summary the oversight arrangements requires SSP LARS to comply with the obligations of Administrator as set out in the Interim Arrangements Deed (Schedule 5, Interim Business Handling, clause 9; Reporting clause 6; Forecasting and Reporting clause 7 ;Monthly Governance Committee clause 18) and the Framework Agreement (Migration clause 12; Schedule 6 Migration).

Additionally you will work with HSS to put in place arrangements to ensure valid claim payments can be paid and to monitor the implementation and performance of the arrangements.”

This letter now confirms that Welsh Government is content with the proposals which are set out in Alison Ramsey’s letter of 28 April and the proposed Scheme of Delegation highlighted in the table below is considered appropriate and will be applicable for approval of payments from 1 July 2020 when oversight of the Existing Liabilities Scheme transfers to NWSSP.



<b>Scheme Designation</b>	<b>Damages Limit</b>
Welsh Government	£1M and over
Managing Director and NWSSP Chairman	Up to £1M
Managing Director	Up to £500k
Director of Finance & Corporate Services	Up to £100k
Director of L&R	Up to £100k
Deputy Director of Finance & Corporate Services	Up to £50k
Deputy Director of L&R	Up to £50k
Head of Function - GMPI Team Leader	Up to £10k

Claims and payments would be made by NWSSP and approved in line with the above scheme of delegation.

Any value of damages decisions greater than £1 million will require written Welsh Government approval.

All other value of claims decisions below £1million will be approved in line with the Scheme of Delegation.

Initially, NWSSP may seek reimbursement for claims payments on a quarterly basis, invoicing Welsh Government. In the event there is a significant value of payment to be made in any one month, an ad hoc cash draw down can be arranged from the Welsh Government with HSS Finance approval. The L&R Finance Manager should liaise directly with Welsh Government HSS Finance team if this scenario arises.

This initial proposal will be kept under review, and amended if required following consultation between Welsh Government HSS Finance and NWSSP.

I would be grateful if you can confirm acceptance of this scheme of delegation letter in writing as soon as possible.

Yours sincerely



**Steve Elliot**

Diprwy Cyfarwyddwr Cyllid | Deputy Director of Finance

Cc Frances Duffy, Director Primary Care and Health Science, Welsh Government



***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Use of Declarations of Interest when awarding Single Quotation/Tender Action**

<b>ARWEINYDD: LEAD:</b>	<b>Jonathan Irvine, Director of Procurement Services, NWSSP</b>
<b>AWDUR: AUTHOR:</b>	<b>Sharon Webber, Project Manager, Procurement Services</b>
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	<b>Peter Stephenson, Head of Finance &amp; Business Development</b>
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	<b>Jonathan.irvine@wales.nhs.uk</b>

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

To seek agreement to revised protocols for the completion of Declarations of Interest in the case of direct award of contract to supplier.

**Llywodraethu/Governance**

<b>Amcanion: Objectives:</b>	Excellence – to develop an organisation that delivers a process excellence through a focus on continuous service improvement
<b>Tystiolaeth: Supporting evidence:</b>	Single Quotation/Tender Request Form

**Ymgynghoriad/Consultation :**

Protocol agreed by representatives from individual Health Board/Trust Procurement Teams and NWSSP Director of Procurement Services.

<b>Adduned y Pwyllgor/Committee Resolution (insert ✓):</b>							
<b>DERBYN/ APPROVE</b>	✓	<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	
<b>Argymhelliad/ Recommendation</b>		The Committee is asked to approve the protocol stated below in respect of Direct Awards to Suppliers.					

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No impact as protocol will be relevant to all NWSSP Procurement Service staff who are involved in the decision to award.
<b>Cyfreithiol: Legal:</b>	Non-compliance with the protocol could result in potential conflicts of interest remaining undeclared when making a direct award to a supplier. The protocol supports the Trust Standards of Behaviour Policy intent that staff should perform impartially and without favour or disfavour.
<b>Iechyd Poblogaeth: Population Health:</b>	Not relevant.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	There is a risk of undue influence over procurement decisions, limiting fair competition and the ability to deliver all potential benefits.
<b>Ariannol: Financial:</b>	Undue favour or disfavour in the award of a contract may adversely affect benefits realised.
<b>Risg a Aswiriant: Risk and Assurance:</b>	This protocol supports the governance requirements set out in the Standards of Behaviour Policy with regard to Procurement.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf">http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf</a> Governance, Leadership and Accountability
<b>Gweithlu: Workforce:</b>	Communication of Committee's decision to all Procurement staff to reinforce practice.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open

## **TITLE: Use of Declarations of Interest when awarding Single Quotation/Tender Action**

### **1. CEFNDIR/BACKGROUND**

The impact of COVID-19 has resulted in substantial orders with often new suppliers having to be placed at very short notice, particularly when Personal Protective Equipment (PPE) is concerned. Established Protocols are therefore in need of updating to ensure that Declarations of Interest are appropriately completed and disclosed when awarding contracts against a Single Quotation or Tender, both in normal conditions and also during the exceptional circumstances as a result of the COVID-19 pandemic.

### **2. CRYNODEB/SUMMARY**

A review of procurement processes was undertaken to establish their compliance with Standards of Behaviour Policy as applied to direct award of contracts under both normal operating and emergency conditions due to COVID-19.

### **3. LLYWODRAETHU A RISG/ GOVERNANCE & RISK**

#### **Normal Operating Conditions**

Each procurement carried out on behalf of Health Boards and Trusts has a Procurement Lead assigned. The Procurement Lead is responsible for ensuring the completion of a Single Quotation/Tender Request form (Appendix A) if the Health Board/Trust lead indicates that a contract is placed with a nominated supplier.

The Single Quotation/Tender Request form includes a Declaration of Interest section signed by the Budget Approver. The Head of Procurement endorses the procurement advice given by the Procurement Lead based on the justification information provided by the requestor and budgetary approver.

The Head of Service, Chief Executive or Director sign completed forms. All requests to waive Standing Financial Instructions are reported to the next Audit Committee for retrospective approval.

#### **Emergency Conditions – Covid-19 Procurement**

Where contracts have been placed with suppliers under direct award due to extreme urgency, in line with Regulation 32(2)(c) of Public Regulations 2015 and Cabinet Office Procurement Policy Note – Responding to Covid-19, a Declaration of Interest is completed retrospectively for purchase orders raised.

Individual and All-Wales Covid-19 requirements are collated and confirmed by the nominated Procurement Lead. A File Note is prepared for all Covid-19 purchase orders raised within a defined period. It is supported by a spreadsheet, which includes details of all purchase orders raised, financial approvals, Welsh Government approval (where applicable), publication of award notices and Declaration of Interest completion.

Declarations of Interest are raised by supplier for the defined period and are completed by the Procurement Lead who is responsible for sourcing the supplier based on Health Board/Trust requirement and market analysis.

The NWSSP Director of Procurement Services and relevant Heads of Procurement sign the File Notes. The Covid-19 Finance Governance Group review all Covid-19 orders raised.

#### **4. ARGYMHELLIAD/RECOMMENDATION**

The Committee is asked to **APPROVE** the above protocol as it applies to the direct award of contracts under normal operations and emergency conditions of Covid-19 outbreak.

## SINGLE QUOTATION/TENDER REQUEST FORM

**REFERENCE NUMBER: To be completed by Procurement Department**

**(Applicable to expenditure in excess of £5,000)**

### Request to Waive Standing Financial Instructions:

Single quote/tender action shall only be undertaken following the approval of this application in **advance** of procurement activity commencing and only in **exceptional circumstances**.

Approval to waive the requirement to seek competitive tenders (purchases between £25,000 & over) & Quotations (purchases between £5,000 and £24,999). In relation to waiver requests over the OJEU threshold, a VEAT notice will also need to be published via Sell2Wales.

It is important that the form is completed **IN FULL** in order to satisfy the Health Board's Standing Orders which require competitive quotations/tenders to be obtained (to prove value of money) unless there are compelling reasons for single sourcing.

Consideration must be given to the Welsh Audit Office Guidance available from the Procurement Team.

**Please Note: all requests to waive Standing Financial Instructions will be formally reported to the next Audit Committee for retrospective approval.**

**\*Please complete all mandatory sections. Failure to complete will result in the form being returned to originator**

**\*\*To be completed by the Requesting Officer - [Core & ISO Controlled]\*\***

### Section 1

Request to Waive <i>Please tick as appropriate</i>	Single Quotation	Single Tender
<b>*Supplier:</b>		
<p><b>The granting of this application for a single firm or contractor of a special character is required or a proprietary item or service may be assessed as appropriate:</b></p> <ul style="list-style-type: none"> <li>the service/good/works is follow-up work where a provider has already undertaken initial work in the same area (and where the initial work was awarded from open competition);</li> <li>there is a compatibility issue which needs to be met e.g. specific equipment required, or compliance with a warranty cover clause;</li> <li>there is genuinely only one provider;</li> <li>there is a need to retain a particular contractor for real business continuity issues (not just preferences).</li> </ul> <p><i>NB: Evidence of all contact with potential alternative suppliers should be retained. Where no other supplier has been approached justification must also be included to ensure the application process is not delayed</i></p>		
<b>*Please provide detail of Goods/Services/Works required:</b>		

<b>If Services, is this for Consultancy/Individual?</b>	<b>Yes/ No</b>	<b>If 'yes', has an IR35 assessment been completed</b>	<b>Yes/ No or not applicable</b>
<b>Does this requirement have an implication under GDPR?</b>	<b>Yes/ No</b>	<b>If 'yes', has the IG Department been consulted</b>	<b>Yes/ No or not applicable</b>
<b>Proposed agreement period including start and end dates and any extension provision required.</b> <i>NB: Approval cannot be granted retrospectively. Should this be the case, please seek advice from the Procurement department.</i>			
<b>*Unit Cost/Annual Cost:</b>			
<b>*Total Cost</b> <i>(inc delivery &amp; VAT):</i>			
<b>*Whole Life Costs:</b> <i>(Please state all additional goods/services/works that may be required during the life of the goods/service/works being requested here. E.g. Maintenance, Consumables etc.)</i>			
<b>*New or Replacement Equipment/Service:</b> <i>(Please state)</i>			
<b>*Life Expectancy of equipment</b>			
<b>*Is this a Recurring Procurement?</b>	<b>Yes / No</b>		
<b>*Source of Funding:</b> <i>(Revenue/Capital/Charity etc.)</i>		<b>*Please provide Financial Code:</b>	
<b>Breakdown of estimated capital and on-going revenue charges per annum.</b> <i>NB: Please ensure your Finance Team are consulted before</i>			
<b>Have any revenue consequences (particularly staffing or maintenance implications), been agreed?</b>	<b>Yes / No</b> <b>If yes give details</b>		
<b>Any other financial consideration to be declared e.g. risks to ongoing funding, savings: cash releasing, cost avoidance, cost pressure, VFM impact.</b>			
<b>*Background: Reason for single supplier &amp; details of any alternatives considered &amp; reasons for their rejection (supplier(s) details required)</b>			

<b>*Explicit Reasons as to How Value for Money will be achieved when services are provided by a Single Supplier.</b> <i>Sufficient detail should be provided in this section or the request will be returned.</i>			
<b>*Have any Trials / Evaluations been undertaken within the Health Board?</b> NB: Appropriate advice should be sought from Procurement in advance of trials being undertaken	Yes/ No	If Yes, please state the evaluation reference number:	
<b>If Yes, please give full details of evaluation. Including whether or not any relevant Groups have been made aware of this evaluation (please state).</b>			
<b>*Consequence &amp; Impact if not approved:</b>			
<b>*Is this an Essential or Non-Essential requirement?</b>			
<b>If Yes, please give details (How many years etc)</b>			
<b>*Name:</b>			
<b>*Title:</b>			
<b>*Ward/Department:</b>			
<b>*Contact No:</b>			
<b>*Budget Holder:</b>			
<b>*Requisition Created?</b>	Yes/ No	If Yes, please state requisition number:	
<b>I have delegated responsibility for the non-pay expenditure budget specified above. I confirm that sufficient funding is available within the budget code specified, and authorise the expenditure to be coded accordingly.</b>			
<b>*Signature of requestor (please also print name &amp; position):</b>		<b>*Signature of budgetary approver (please also print name &amp; position):</b>	
<b>Date of Request:</b>		<b>Date of Approval :</b>	
<b>Statement of Support by Approver:</b>			

**\*\*Budget Approver to Complete\*\***

**Section 2**

**Declaration of Interest**

The Health Board is obliged to ensure that all procurement processes are carried out in accordance with the public procurement rules and NHS Wales's guidance. Where an employee is engaged in a procurement exercise a formal declaration is required to confirm that there is no potential interest which may give rise to a conflict.

**Please confirm the following statements are correct:**

		✓ x
1.	Neither I, my family, friends, acquaintances or work colleagues involved in this process, will receive any benefit or gain (financial or otherwise, directly or indirectly) if the contract is awarded to any of the bidders involved in the process as they become known.	
2a.	I have no material interest in whether the contract is awarded or not.	
2b.	I am not in possession of any Additional Information in respect of the procurement process. (Save for the information in the 'Additional Information box below)	
3.	I currently do not benefit in any way, financially or otherwise, including (but not limited to) the receipt of a grant or outside funding, that could influence my decision in respect of the procurement or any of the bidders involved in this process .	
4.	I have not received hospitality (other than of a nominal value or that declared in the register of gifts and hospitality maintained by Corporate Management) or any material gifts, as outlined in the Trusts Standards of Behaviour Framework Policy <a href="http://howis.wales.nhs.uk/sitesplus/972/page/51681">http://howis.wales.nhs.uk/sitesplus/972/page/51681</a> from any of the bidders involved in the process.	
5.	I have read, understood and will abide by the NHS Guidance entitled "Standards of Business Conduct for NHS Staff" (DGM (93)84) and the Trust Standards of Behaviour Framework Policy. <a href="http://howis.wales.nhs.uk/sitesplus/972/page/51681">http://howis.wales.nhs.uk/sitesplus/972/page/51681</a>	
6.	By signing this declaration I understand that it is my responsibility that should my circumstance change or a new relationship be established in relation to any bidding organisation, I will consult with the Lead Procurement contact and am aware that I may be required to complete a new Declaration of Interest or be required to withdraw my participation.	
7.	I will keep the identities of the bidders, the content of the bids and procurement documents confidential.	

I hereby certify that, to the best of my knowledge and belief, the statements set out above are correct. I understand that any failure on my part to declare an interest in a contract or otherwise to breach the rules and instructions mentioned above is a serious matter and could result in further legal or professional action being taken against me, including (but not limited to):

- Exclusion from the current procurement exercise and future procurement activities
- For Trust employees, it could result in disciplinary proceedings being initiated.
- For non-employees of the Trust we reserve the right to report the matter to their relevant employing organisation and professional body as potential professional misconduct
- Should the matter involve issues that are of a criminal nature e.g. fraud, bribery or corruption then the Trust will notify the appropriate authority to take any necessary action which may include prosecution.

**Signature:**

<b>Signature:</b>
<b>Print Name:</b>
<b>Position:</b>
<b>Date:</b>

**Authorisation - [Section Non Core to be Amended in Line with Local Scheme of Delegation]**

**Section 3**

<b>Designation</b>	<b>Signature</b>	<b>Date</b>
<b>Directorate Manager/Head of Service</b>		
<b>Comments:</b>		
<b>Executive Director/Director</b>		
<b>Comments:</b>		

Please note Single Tender/Quotation Action requests cannot be processed unless supported by the above signatures, electronic signatures will NOT be accepted, unless accompanied by an e-mail trail to prove that the authorisation has been completed correctly.

**Please now forward to Procurement Department**

**\*\* For Procurement Department Completion Only\*\***

**Section 4**

<b>Procurement Advice</b> <i>(Delete or cross through as appropriate)</i>	<ul style="list-style-type: none"> <li>• Yes, the SQA or STA is an appropriate course</li> <li>• No, an alternative option can be pursued</li> <li>• No Option</li> </ul>		
<b>Procurement Advice or Rejection Comments:</b> <i>(including any conditions/future actions):</i>			
<b>Endorsed</b>	<b>Yes/No</b>		
<b>Head of Procurement Signature:</b>		<b>Date:</b>	

**\*\* Chief Executive or Director of Finance or Director of Strategy or Chief Operating Officer Approval\*\***

**Section 5**

<b>Request Supported?</b>	<b>Yes/No</b>
---------------------------	---------------

<b>Supporting or Rejection Comments:</b> <i>(including any conditions/future actions):</i>			
<b>Signed:</b>		<b>Date:</b>	
<b>Please Print Name &amp;Position:</b>			

**Notes:**

- Upon completion of this section, please forward to: [INSERT EMAIL ADDRESS/ACTION POINT DETAILS]
- In the event that the Head of Procurement/Sourcing and Chief Executive do not authorise the request to waive the Standing Financial Instructions the budget holder will be advised immediately of the decision.



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**AGENDA ITEM:XX**

**21 05 2020**

**Teitl yr Adroddiad/Title of Report**

Update on funding for the Once for Wales Concerns Management System

**ARWEINYDD:  
LEAD:**

Mark Harris, Director Legal and Risk Services

**AWDUR:  
AUTHOR:**

Alison Phillips, Deputy Director Finance & Corporate Services

**SWYDDOG ADRODD:  
REPORTING OFFICER:**

Andy Butler, Director Finance & Corporate Services

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

To provide an update on the proposed arrangements to recharge costs relating to the Once for Wales Concerns Management System (currently known as Datix).

**Background**

The Once for Wales Concerns Management System (OFWCMS) Programme Team have recently completed a tender process and awarded the key lots to RL Datix Ltd in respect of the Cloud IQ system.

The Programme Executive sponsor is Claire Bevan, former Executive Director for Quality and Nursing Welsh Ambulance Service NHS Trust, Project Sponsor is Jonathan Webb, Welsh Risk Pool and Project Coordinator is Maria Stolzenburg.

The new OFWCMS replaces the existing Datix systems in place within each organisation. An all-Wales Single Tender Action (STA) process was previously agreed through the Velindre Trust Board and Welsh Government, to establish alignment of the legacy (before 2009) NHS organisation contracts into a single contract with NWSSP on behalf of all organisations. This aligned contract expires on 30th November 2019. In practice, this means that the current provider invoices NWSSP, for the total NHS Wales contract costs, and NWSSP then invoices the NHS organisations for their respective shares, which is based on their legacy contract share.

The Shared Services Partnership Committee (SSPC) approved this contract in June, and asked that the Director of Finance group consider whether the current methodology for apportioning costs remains appropriate or whether an alternative methodology should be devised. This was then referred to the Deputy Director of Finance group for consideration.

The Deputy Director of Finance group met in September and agreed to retain the existing recharge methodology for apportioning costs for the remainder of 2019/20, but to look again at the detailed impact of the other options in early 2020 for consideration for future years.

The OFWCMS Programme Board met for the first time in November 2019. The Board received an update from Jonathan Webb based on the September Deputy Director of Finance paper and is seeking clarity regarding financial implications for 2020-21.

The Deputy Director of Finance group met again in February 2020 to consider in more detail the impact of other options presented in September 2019.

## **Tender process**

As a brief reminder, the tender was divided into four lots:

- Lot 1 – The Core system functionality
- Lot 2 - Advocacy System (Case Management for new Wales Public Voice Body)
- Lot 3 - Risk Management System
- Lot 4 – Service User Feedback

Following completion of the tender process, a decision was made to award lots 1 and 3 and to delay lot 2 until the new body is established in shadow form.

A decision to review the specification and scope of lot 4 was made, and it is anticipated that the procurement process for this lot 4 will be completed by April 2020.

The tender process applied the Most Economically Advantageous Tender (MEAT) principle and the successful solution provides the full functionality for all organisations.

It is important to recognise that the successful solution RLDatix Cloud IQ is a very different piece of software to the existing Datix systems – with a different platform and system environment and enhanced functionality and intelligent monitoring capabilities. It is helpful however that the user experience between the systems has similarities, making the transition for staff across NHS Wales easier.

## **OFWCMS Funding Plan**

Funding for the new system is drawn from a number of sources – Welsh Risk Pool, Welsh Government and cross-charging to health bodies.

The development and implementation process i.e. the design and configuration of the system to meet the needs of NHS Wales organisations; will be funded through the Welsh Risk Pool revenue budget.

Welsh Government have provided funding to support the project phase through scoping and tender processes. This funding was planned to expire

in December 2019. Welsh Government have now confirmed it will extend the funding until March 2022. This will support the roll out and central governance functions during this period, and will reduce the cross-charge to health bodies.

The contract price and costs of the central governance team is not covered by the Welsh Government funding and will be cross-charged to health bodies in a similar way that the cross charging for the existing system is undertaken.

### **Cost and benefit profile**

With the combined costs of the new system and the costs of the central team, the annual cost across all organisations is £689,527. This is partly offset for the first three years by the funding from Welsh Government (£64,000.00), resulting in a cost to be cross charged to NHS Wales organisations of £625,527. The total increase in costs to NHS organisations following the tender exercise is £105,012.

When considered in an equal way (comparing the cost of existing functionality with new functionality), the new Once for Wales system provides a modest saving to NHS Wales. The actual overall costs to NHS Wales is slightly increased due to new functionality not previously in place and all organisations having the maximum functionality is realised.

The existing Datix systems work very differently to each other within each organisation, and this does not easily allow for presentation of data in a like for like way that would enable meaningful comparison. The new approach will enable adaptations and changes to the 'one' system to be considered and implemented consistently, whilst still allowing for local innovation.

This new approach will mean that local system leads receive consistent NHS Wales-focussed training without incurring hefty charges. As an example, sending a Datix Administrator to the Certified Professional Course costs a course fee and associated travel and accommodation and abstraction costs (8 days) – totalling around £8,000 per person. NHS Wales organisations have rarely taken this up (only 3 of the current Datix Administrators in Wales have this qualification). The new approach provides Wales-based training and support.

Building further on this, the new approach will enable the Welsh Risk Pool Learning and Support team to provide national learning materials, which can still be adapted for local scenarios and circumstances.

The cost of the development, configuration and setup costs are paid as a one off charge of £100,000.00. This will be paid in instalments by the Welsh Risk Pool.

The annual costs are summarised in the table below:

Forecast spend 2019-20 based on existing system with uplifts applied by supplier	£520,515
New system cost with costs of central governance team	£689,527
Funding from Welsh Government until March 2022	-£64,000
Cross Charge to NHS organisations	£625,527
<b>RESULTANT INCREASE IN COSTS</b>	<b>£105,012</b>

These costs are based on year 1. A cap on annual increases in in place of 1.95%, preventing the supplier from uplifting the like-for-like costs by more than this value.

### Arrangements for HEIW

The creation of Health Education and Improvement Wales (HEIW) has highlighted the need for this body to have an incident reporting system, but the majority of other functions are not required. The most cost-effective method of providing a system to HEIW is to connect them to an existing organisation. This is the arrangement with the existing system and Swansea Bay University Health Board provide this functionality to HEIW. Costs associated with achieving this will be agreed directly between the two executive leadership teams

### Recharging Principles

A summary of current and future costs is set out below:

	<b>CURRENT COST</b>	<b>FUTURE COST</b> <b>Based on current pricing structure</b>
	<b>£</b>	<b>£</b>
Powys	43,070	51,759
Public Health Wales	20,616	24,775
Velindre	30,320	36,437
Welsh Ambulance Services	21,098	25,355
Hywel Dda	97,985	117,753
Cwm Taf Morgannwg	49,493	59,478
Cardiff & Vale	49,054	58,952
Aneurin Bevan	49,194	59,118
Swansea Bay	61,161	73,499
Betsi Cadwaladr	98,524	118,401
<b>TOTAL</b>	<b>520,515</b>	<b>625,527</b>

The current pricing structure as set out above is drawn from the legacy organisation structure in NHS Wales before 2009, with the legacy system prices simply being aggregated and picked up by the current NHS organisations. This historic arrangement (Option 1) is reflected in current budgets and funding allocations.

Two alternative options for recharging have been considered, summarised in **Appendix A.:**

**1. Recharge based on Welsh Risk Pool Risk Sharing agreement (Option 2)**

The WRP risk sharing agreement takes account of a range of weighted measures:

- HSCS & Prescribing Revenue allocation;
- Claims history;
- New claims transfer from services to Legal & Risk;
- Claims potentially affecting next year's spend; and
- Management of concerns and learning from events.

There is however, a bias towards the level of claims by NHS organisations, and the Concerns Management System has a far wider use and purpose within the service.

It would result in a redistribution of costs across NHS organisations with no corresponding allocation adjustment.

**2. Recharge based on Whole Time Equivalent head count (Option 3)**

This would more fairly reflect the number of system users by NHS organisations, but would not be a fair reflection of the system utilisation levels.

It would result in a redistribution of costs across NHS organisations with no corresponding allocation adjustment.

**Update on Lot 4 – Service User Feedback**

The OFWCMS tender included a lot (4) in respect of the procurement of a Once for Wales system to support the planning, capture and analysis of Service User feedback.

During the original tender process, completed in 2019, a decision was reached not to award any supplier with this lot and to review the specification and return to the market.

The review of the tender is now complete and it is anticipated that the procurement process will be completed by April 2020. This will enable organisations to call-off the contract via a national framework. No additional

Velindre NHS Trust Board approval is required for this, as was included in the original tender approval process.

Until the completion of the tender process, it is not possible to provide clarity on the actual costs, but an estimated financial envelope can be predicted through market engagement processes. A cost per organisation in the region of £30k to £50k is anticipated to be required.

The current expectation is that organisations will have an individual instance of the system to ring fence the data related to its activity. It is possible that some organisations may pool their systems to reduce the individual costs, and a further update will be provided to the SSPC once this next phase of work is completed.

### **Proposed way forward**

The National Programme Board for the Once for Wales Concerns Management System met in November 2019. Their preference was to recommend a switch to a cost based on the size of an organisation i.e. head count, which was considered to be the most transparent and would address historic pricing issues inherited when the current NHS Wales structure was formed. The Board is seeking an update to confirm future funding implications.

An analysis of the above three options was provided to the Deputy Director of Finance group in February for further consideration. Whilst no consensus view was achieved, there was a suggestion that the potential impact of any change in methodology to a head count basis, as favoured by the Programme Board, could be 'smoothed' over two years, to reduce the impact on those facing increased charges. This position is set out in **Appendix B**.

### **Recommendation**

Members are asked to:

- note the update on progress with the Service User feedback tender lot (4);
- take account of the recommendation of the OFWCMS Programme Board to adopt Option 3 based on headcount and the suggestion of the Deputy Director of Finance group to smooth the impact of change over two years; and
- support the proposal set out in Appendix B, as the revised recharging methodology for 2020-21 and future years.

## APPENDIX A - Three options for recharging

	CURRENT COST	Legacy Share Basis			Risk Sharing Agreement Basis			Head Count Basis			
		Option 1			Option 2			Option 3			
	£	%	£	Inc/(Dec)	%	£	Inc/(Dec)	Head Count	%	£	Inc/(Dec)
Aneurin Bevan	49,194	9.45%	59,118	9,924	17.04%	106,590	57,396	13,124	14.76%	92,345	43,151
Betsi Cadwaladr	98,524	18.93%	118,401	19,877	18.44%	115,347	16,823	17,177	19.32%	120,864	22,340
Cardiff & Vale	49,054	9.42%	58,952	9,898	15.32%	95,831	46,777	14,553	16.37%	102,400	53,346
Cwm Taf Morgannwg	49,493	9.51%	59,478	9,985	11.97%	74,876	25,383	11,534	12.97%	81,158	31,665
Hywel Dda	97,985	18.82%	117,753	19,768	10.72%	67,056	-30,929	9,234	10.39%	64,974	-33,011
Powys	43,070	8.27%	51,759	8,689	5.86%	36,656	-6,414	1,981	2.23%	13,939	-29,131
Public Health Wales	20,616	3.96%	24,775	4,159	1.20%	7,506	-13,110	1,667	1.88%	11,730	-8,886
Swansea Bay	61,161	11.75%	73,499	12,338	16.09%	100,647	39,486	12,588	14.16%	88,574	27,413
Velindre	30,320	5.83%	36,437	6,117	1.13%	7,068	-23,252	3,870	4.35%	27,231	-3,089
Welsh Ambulance Services	21,098	4.05%	25,355	4,257	2.23%	13,949	-7,149	3,171	3.57%	22,312	1,214
<b>TOTAL</b>	<b>520,515</b>	<b>100%</b>	<b>625,527</b>	<b>105,012</b>	<b>100%</b>	<b>625,527</b>	<b>105,012</b>	<b>88,899</b>	<b>100%</b>	<b>625,527</b>	<b>105,012</b>

**APPENDIX B – Smooth the transition to Option 3 (head count) over two years**

	<b>CURRENT COST</b>	<b>Smooth impact over 2 years</b>		<b>Full Cost</b>	<b>Full Cost</b>
		<b>Year 1</b>	<b>Year 2</b>	<b>2020-21</b>	<b>2021-22</b>
	<b>£</b>	<b>Average Legacy Share v Headcount options</b>	<b>Full Effect</b>	<b>£</b>	<b>£</b>
Aneurin Bevan	49,194	26,538	43,151	75,732	92,345
Betsi Cadwaladr	98,524	21,108	22,340	119,632	120,864
Cardiff & Vale	49,054	31,622	53,346	80,676	102,400
Cwm Taf Morgannwg	49,493	20,826	31,665	70,319	81,158
Hywel Dda	97,985	-6,622	-33,011	91,363	64,974
Powys	43,070	-10,221	-29,131	32,849	13,939
Public Health Wales	20,616	-2,364	- 8,886	18,252	11,730
Swansea Bay	61,161	19,875	27,413	81,036	88,574
Velindre	30,320	1,514	-3,089	31,834	27,231
Welsh Ambulance Services	21,098	2,736	1,214	23,834	22,312
<b>TOTAL</b>	<b>520,515</b>	<b>105,012</b>	<b>105,012</b>	<b>625,527</b>	<b>625,527</b>



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**AGENDA ITEM:**  
**21/05/2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

All Wales Laundry Programme

<b>ARWEINYDD: LEAD:</b>	Neil Davies, Director of Specialist Estates Services
<b>AWDUR: AUTHOR:</b>	Ian Rose, Head of NWSSP PMO
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Neil Frow, Managing Director NWSSP
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	Ian Rose, Head of NWSSP PMO

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

The purpose of this report is to update the SSPC on the All Wales Laundry Services Programme.

**Llywodraethu/Governance**

<b>Amcanion: Objectives:</b>	To develop a service model that is fit for purpose, complies with modern standards, provides a sustainable and resilient laundry service and represents an operational model delivering best value for money for NHS Wales.
<b>Tystiolaeth: Supporting evidence:</b>	None

**Ymgynghoriad/Consultation:**

This work has not commenced

Adduned y Pwyllgor/Committee Resolution (insert ✓):							
DERBYN/ APPROVE		ARNODI/ ENDORSE	✓	TRAFOD/ DISCUSS		NODI/ NOTE	✓
<b>Argymhelliad/ Recommendation</b>		<p>Outline the recommendation of the report</p> <ul style="list-style-type: none"> <li>The Committee is asked to <b>Endorse and Note</b> the report</li> </ul>					

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	All equality and diversity impacts have been considered in the business case.
<b>Cyfreithiol: Legal:</b>	All legal impacts have been considered in the business case.
<b>Iechyd Poblogaeth: Population Health:</b>	No direct impact
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	No direct impact.
<b>Ariannol: Financial:</b>	All financial impacts have been considered in the business case.
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	<p>Access to the Standards can be obtained from the following link;</p> <p><a href="http://gov.wales/docs/dhss/publications/150402/standardsen.pdf">http://gov.wales/docs/dhss/publications/150402/standardsen.pdf</a></p>
<b>Gweithlu: Workforce:</b>	No direct impact
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open

# All Wales Laundry Programme

## 1. CEFNDIR/BACKGROUND

NWSSP is an integral part of NHS Wales and is led by a Managing Director and Senior Management Team who are accountable to the Shared Services Partnership Committee that is composed of representatives from each of the NHS organisations that use our services. We also have a number of sub-committees and advisory groups, which include members drawn from our partners, stakeholders and service users.

SES – Specialist Estate Services support strategic change in the Healthcare Estate through advice and support to the Welsh Government and NHS Wales. We offer business case scrutiny, construction procurement framework development, design advice, property management service and the maintenance of estates related guidance and information.

The Shared Services Partnership Committee (SSPC) oversees NWSSP and approved the NHS Wales Laundry Production Units Service Review project.

Stage 1 of the project was to review the existing laundry production units in NHS Wales against best practice guidance; specifically BS EN 14065 June 2016 - Textiles. Laundry processed textiles. Bio-contamination control system. That review identified the benefits, costs, timescales and risks in achieving BS EN 14065 June 2016 and identified the options available including assessment of independent versus collaborative management arrangements.

This stage concluded with the production of a draft Outline Business Case (OBC) which has been reviewed by Welsh Government and subsequent additional tasks are now required to proceed towards the next stage in the process.

The current stage of the process is building on the existing outline business case and completing a set of specific additional tasks to complete the review and produce a Programme Business Case (PBC) addressing the issues highlighted in the Welsh Government's letter dated 17<sup>th</sup> May 2019 and in accordance with the Welsh Government business case guidance.

The Consultants are currently engaged with and working across the Health Boards and Trusts as customers and suppliers to achieve the outcomes described within the Programme Brief and seeking to conclude the production of the Programme Business Case in May 2020.

## 2. Current Progress

There are 5 Laundry Production Units (LPUs) across NHS Wales:

- Ysbyty Glan Clwyd (Betsi Cadwaladr University Health Board)
- Glangwilli General Hospital Laundry (Hywel Dda University Health Board)
- Llansamlet Laundry Service (Swansea Bay University Health Board)
- Church Village (Cwm Taf Morgannwg University Health Board)
- Llanfrechfa Grange 'Green Vale' (Anuerin Bevan University Health Board)

In January's update to the Committee, a brief was provided on the activity that had been undertaken in the preceding months. This included the re-baseline and review of data captured as part of the Programme Business Case process to date, also ensuring additional data analysis for areas including transportation, carbon and energy consumption were completed and all points raised within the Welsh Government letter dated 19<sup>th</sup> May 2019 were addressed.

This stage of the business case concluded with two workshops in January and early February as agreed by participating Health board and Staff side representatives, with the aim of confirming the three locations to form the basis of the preferred option in the PBC and confirm the reduction from the five existing Laundry Production (LPUS) units to three LPUs.

The workshops were facilitated by Capita and using data provided as part of the business case process, a successful conclusion was reached. This was in agreement with the stakeholders present from the relevant Health Boards and Staff side representatives.

The Workforce Directors of the affected Health Boards also agreed a set of draft principles for managing the Workforce elements of the project, remembering that at this stage the employees are the responsibility of HBs and not NWSSP.

Furthermore, a series of roadshows were held in each of the laundry sites in the HBs over the autumn to maintain communications with HB staff. The workforce work stream subgroup also commenced with representation from NWSSP and Health Board Workforce teams, led by Gareth Hardacre (NWSSP Workforce & OD Director).

In the same meeting, the SSPC agreed to trigger the formal staff consultation process on behalf of the affected HBs with the proposals to close both Glangwili and Cwm Taf Laundry production units and to re-site those in Betsi Cadwaldr and Llansamlet and the associated TUPE transfers.

The consultation was officially launched on 17<sup>th</sup> February 2020, with a view to this concluding on 15<sup>th</sup> May 2020 in line with the required 90 day consultation period. Plans had been made for further roadshows with staff and Trades Unions to take place to aid the consultation process.

However as a result of the COVID-19 pandemic, it has not been possible for the consultation process to progress in a truly meaningful way.

Whilst staff have still been able to contribute to the consultation through these difficulties, one to one meetings with individuals have not been feasible due to the need to support the work against the pandemic and also to enable social distancing. It was also recognised that staff may not be in the frame of mind to consider this change at such a challenging time.

Following a proposal by the All Wales Laundry Workforce subgroup (which includes staff side representation), the Programme Board agreed to an extension of the consultation time line to 30<sup>th</sup> June 2020. This extension, depending on the virus trajectory, should enable staff to get through the initial surge and emotional implications of the pandemic; meet with their managers

to talk through the proposals; to provide their thoughts; and to ask any questions they may have.

The timeline will continue to be reviewed in line with the ongoing arrangements for managing during the COVID-19 pandemic.

If a further extension needs to be considered the Committee will be advised of such. However, it is vitally important that we ensure that our proposals proceed in partnership with meaningful consultation and consideration.

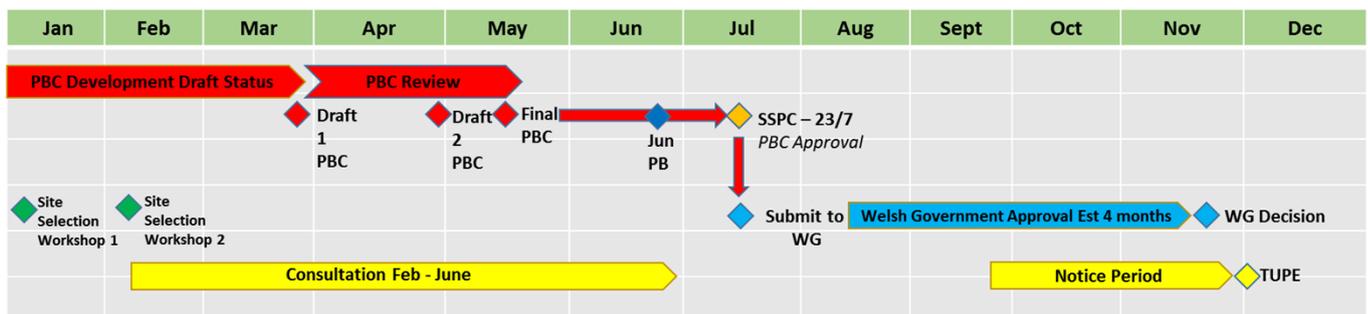
By extending the consultation period to 30th June 2020, the proposed date of the TUPE transfer would extend to 1st December 2020 (subject to SSPC and WG approvals).

This will also affect the planned submission timescales for the programme business case, which depends on the successful conclusion of the consultation process.

The current impact assessment demonstrates the following proposed changes to the planned timescales:

- Workforce Consultation Period extended from May 5<sup>th</sup> to June 30<sup>th</sup>
- SSPC PBC Review moved from May to July committee to align with end of Consultation Period.
- PBC submission to Welsh Government moved from May 21<sup>st</sup> to July 28<sup>th</sup> to align with end of consultation and SSPC approval.
- PBC availability for internal review remains unchanged on May 7<sup>th</sup>.
- TUPE of the Existing Laundry Services to NWSSP is moved from Oct 1<sup>st</sup> to Dec 1<sup>st</sup> to align with indicative Welsh Government "PBC approval to proceed to OBC"
- All subsequent stages of the business case process will move to remain aligned with PBC approval.

Revised PBC and Consultation Indicative Timeline – Jan 20 – Dec 20



- ◆ Workshops
- ◆ Shared Services Partnership Committee
- ◆ Programme Board
- ◆ Welsh Government
- ◆ Workforce
- ◆ Business Case

It is critical to note the above timescales must remain aligned to Welsh Government COVID19 lockdown planning and timescales, and must be assessed accordingly at each change.

### **3. ARGYMHELLIAD/RECOMMENDATION**

The Committee are asked to:

**ENDORSE** the extension to the timescales as outlined above.

**NOTE** the progress made to date within the business case process.



***The report is/is not Exempt***

**Teitl yr Adroddiad/Title of Report**

Update Report on the progress in expanding the Single Lead Employer Model to include:-

1. Pre-Registration Pharmacist and Foundation Dentist Trainees from August 2020;
2. Foundation, Core and Specialty Medical Trainees commencing from August 2020.

**ARWEINYDD:**

**Director of Workforce and OD**

**LEAD:**

**AWDUR:**

**Deputy Director of Workforce and OD**

**AUTHOR:**

**SWYDDOG ADRODD:**

**Director of Workforce and OD**

**REPORTING OFFICER:**

**Pwrpas yr Adroddiad:**

**Purpose of the Report:**

The purpose of this paper to update NHS Wales Shared Services Partnership (NWSSP) Committee members in the progress in expanding the Single Lead Employer Model (SLE) to include:-

1. Interim Foundation Doctor Year 1 Trainees from May 18<sup>th</sup> 2020 to support the COVID 19 Pandemic
2. Pre-registration Pharmacist and Foundation Year 1 Doctors with effect from August 2020;
3. Foundation Dentist, Speciality and Core Medical Trainees currently not subject to an existing SLE arrangement commencing from September 2020;

This paper updates Committee Members on the current Programme Management arrangements in place and progress in relation to taking forward the above proposals.

**Llywodraethu/Governance**

**Amcanion:  
Objectives:**

- **Value for Money** –Will deliver real term savings and service quality benefits to our customers through the reduction of administration costs associated with the reduction of payroll transactions, monitoring of professional registrations, DBS, Mandatory & Statutory training compliance.

	<ul style="list-style-type: none"> <li>• <b>Excellence</b> – The SLE model will deliver process excellence through a focus on continuous service improvement, automation and the use of technology.</li> <li>• <b>Excellence</b>- Trainees will be pre-screened when they rotate to a different Health Board thus avoiding unnecessary duplication of pre-employment checks;</li> <li>• <b>Staff</b> – Trainees will only require one round of employment checks prior to the start of their Training. This will have significant benefits to the trainee, as they will no longer be required to change employer when they rotate to as part of their training to different Health Boards.</li> <li>• <b>Staff</b> -Trainees will be managed by one employer and have one point of contact for queries relating to their pay, terms and conditions of employment, travel expenses etc.</li> </ul>
<b>Tystiolaeth: Supporting evidence:</b>	Programme Initiation Document and Structure:- Appendix A

<b>Ymgynghoriad/Consultation :</b>
Consultation will be required with a number of Stakeholders including Health Boards, Deanery, Trainee representatives , BMA, BDA, UNITE , Unison.

<b>Adduned y Pwyllgor/Committee Resolution (insert ✓):</b>							
<b>DERBYN/ APPROVE</b>		<b>ARNODI/ ENDORSE</b>	✓	<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	✓
<b>Argymhelliad/ Recommendation</b>	<p>The Committee is asked to</p> <ol style="list-style-type: none"> <li>1. NOTE the contents of this update report.</li> <li>2. AGREE to the proposal that pending the development and finalisation of an agreed contractual and governance framework for all medical trainees employed in the NWSSP Single Lead Employer model, the existing arrangements, principles, Service Level Agreements and governance framework agreed for Speciality GP Trainees employed by NWSSP can apply.</li> </ol>						

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>
--

<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct Impact
<b>Cyfreithiol: Legal:</b>	Not applicable
<b>Iechyd Poblogaeth: Population Health:</b>	No direct Impact
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	The SLE model will deliver process excellence through a focus on continuous service improvement, automation and the use of technology.
<b>Ariannol: Financial:</b>	The SLE model will deliver real term savings and service quality benefits to our customers through the reduction of administration costs associated with the reduction of payroll transactions, monitoring of professional registrations, DBS, Mandatory & Statutory training compliance.
<b>Risg a Aswiriant: Risk and Assurance:</b>	A Risk Register detailing the risks and actions to be taken to mitigate any risks will be developed as part of the Programme Board arrangements.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	No direct Impact
<b>Gweithlu: Workforce:</b>	Improved recruitment and retention of trainees  Improved morale of trainees
<b>Deddf Rhyddid Gwybodaeth/ FOIA</b>	Not applicable currently

## 1. Background

At last November's NHS Wales Shared Services Partnership (NWSSP) Committee meeting, members approved the proposal to expand the Single Lead Employer (SLE) Model to include-

- Foundation Dentists Trainees:
- Pre-Registration Pharmacists:

Members also approved a formal request from HEIW dated 23<sup>rd</sup> October 2019 that NWSSP work with HEIW to deliver a SLE model for Foundation, Core and Speciality Medical Trainees currently not subject to existing SLE arrangements within Wales. Subsequently, it was agreed that this would encompass a pilot for approximately 650 trainees (Foundation year 1 and priority specialities such as

Anaesthetics, Radiology and Paediatrics) to take effect from August 2020 with the aim of all remaining trainees not covered by a SLE agreement being employed by NWSSP by August 2021.

## **2. Progress Update**

### **2.1 Project Management Arrangements**

As proposed at last November's meeting, Project Management arrangements have been established involving representatives from NWSSP, all Health Boards who host trainees, Health Education and Improvement Wales (HEIW), the British Medical Association (BMA) as well as trainee representatives. A copy of the Programme Board's Structure, Project Initiation Document (PID) are attached (Appendix A) for information purposes.

### **2.2 Foundation Dentists and Pre-registration Pharmacists**

The governance and contractual components underpinning the arrangements to establish NWSSP as the SLE for Pre-registration Pharmacists and Foundation Dentists with effect from August and September 2020 respectively have been drafted via two separate project team arrangements. Representatives from NWSSP's SLE Department, Legal and Risk services and the respective Faculty departments from HEIW are overseeing the delivery of the Training Placements. The contractual arrangements detail the arrangements, which will govern the new employment relationship between the SLE (NWSSP) and Host Organisations (Health Boards, Community Pharmacies, Retail Pharmacy Sector, and Dental Training Practices). Copies of the final draft agreements for both staff groups will be submitted to Programme Board in June 2020 for final review before being submitted to July's NWSSP Committee for final approval.

Further work needs to be completed to agree the funding and financial flow arrangements; to include costs associated with trainee salaries and other associated employment costs e.g. travel, training etc. These will be finalised in June 2020.

### **2.3 SLE for Foundation, Core and Speciality Medical Trainees**

As significant progress has been made in developing the contractual arrangements to underpin the employment relationship between the SLE (NWSSP) and Host Organisations (Health Boards, Community Pharmacies, Retail Pharmacy Sector, and Dental Training Practices) in relation to Foundation Dentists and Pre- registration Pharmacists, it has been agreed that the work of the main Programme Board will now focus on the development and implementation of a SLE model for Foundation, Core and Specialty Medical Trainees.

The work is currently focusing on:

- 2.3.1 Developing the governance and contractual arrangements between HEIW, Host Organisations underpinning the arrangements to establish NWSSP as the SLE for Foundation, Core and Speciality Medical Trainees based on the current model in place for Specialty GP trainees;
- 2.3.2 Reviewing and updating the current governance and contractual arrangements between HEIW, Host Organisations and NWSSP for Specialty GP trainees in line with the contractual arrangements put in place for Foundation, Core and Speciality Medical Trainees;
- 2.3.3 Developing and agreeing all operational staff management and work flow arrangements between NWSSP as Lead Employer and all Host Organisations (Health Boards, Trusts and Training Practices);
- 2.3.4 Develop and agree funding and financial flow arrangements, to include costs associated with trainee salaries and other associated employment costs e.g. travel, training etc;
- 2.3.5 Establishing and conducting a wide reaching communication and engagement strategy to ensure that all stakeholders are fully involved and committed to the successful implementation of the project.

To enable this work to be completed three project teams have been established involving representatives from HEIW, Health Boards and SLE.

- Operational Management

Membership of this project team include Health Board Medical Workforce Managers, Deputy WOD (NWSSP), Senior Medical Workforce Manager (NWSSP) and Associate Director HEIW. The purpose of this group is to consider all operational staff management and work flow arrangements between NWSSP as Lead Employer and all Host Organisations (Health Boards, Trusts and Training Practices) such as on boarding, pay administration and expenses processes, management of leave, management of employee relations, management of performer's lists development and agreement of core SLAs/Contract specifications that describe the roles, responsibilities and accountabilities of all stakeholders, migration of data etc. .

- Financial

A Financial Project Team has been established with representatives from Health Board, HEIW and NWSSP Finance Departments to agree the funding and financial flow arrangements.

- Communication and Engagement

A communication sub group will be established to focus on stablishing appropriate communication and engagement process with all key stakeholders, establishing a dedicated website, FAQs etc.

## Impact of COVID19

The COVID 19 Pandemic has had a significant impact on training and recruitment plans and as such the initial work programme requested by the HEIW has been amended as detailed below :-

<b>Professional Group</b>	<b>Timescale for On boarding to SLE Model</b>	<b>Nos of Staff Involved</b>	<b>Comments</b>
Foundation Dentists	September 2020	72	HEIW is currently looking at how Foundation Dentistry training can be facilitated in light of COVID 19 restrictions on Dentists.  The timescales for moving to SLE model and contractual arrangements will need to be reviewed in light of the impact of COVID 19
Pre-registration Pharmacists	August 2020	156	Arrangements for SLE model on target
Interim Foundation Doctors	May 2020-June 2020	76	Awaiting further details of year 5 Cardiff University Medical students wanting to take up the interim F1 option)
Foundation Doctors	July 2020- August 2022	351 (includes 62 iF1)	Arrangements for implementation of SLE model on target
Paediatrics	September 2020	129	Details of individual staff yet to be confirmed by HEIW
Anaesthetics	October/November 2020	132	Details of individual staff yet to be confirmedly HEIW. May be subject to further change in light of delays in rotation/appointment due to COVID 19
Radiology	November 2020	69	Details of staff yet to be confirmed by HEIW

Other Medical Specialties	February 21 – August 21	tbc	Timescales to reviewed depending on impact of COVI 19 Pandemic
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A consequence of the COVID 19 Pandemic is that HEIW and Health Boards have requested that NWSSP appoint a significant number of Foundation Year 1 (F1) doctors to support the management of the Pandemic in advance of taking up their substantive Foundation Year 1 posts. To minimise disruption to those Foundation Doctors remaining in Wales for their substantive Foundation post, NWSSP has agreed on-board all interim F1s applying the principles and governance framework already established in the Service level Agreement for Speciality GP trainees. Once the revised contractual and governance framework for Foundation, Core and Specialty Trainees has been finalised this will be applied to all Doctors employed in the NWSSP Single Lead Employment model.

### **Recommendation**

It recommended that:-

NWSSP Committee Members NOTE the contents of this report;

NWSSP Committee Members AGREE to the proposal that pending the development and finalisation of an agreed contractual and governance framework for all medical trainees employed in the NWSSP Single Lead Employer model, the existing arrangements, principles, Service Level Agreements and governance framework agreed for Speciality GP Trainees employed by NWSSP can apply.

## Appendix A

### Implementation of Single Lead Employer (Foundation and Medical trainees)

#### Project Initiation Document (PID)

##### Change Control Table

Version	Amendment	Description	Release Date	Updated by
1	Draft	Draft PID	February 2020	Rhys Owen
2	Draft	Update	March 2020	Rhys Owen
3	Draft	Update	April 2020	Rhys Owen
4	Draft	Update	April 2020	Ian Collings
5	Draft	Update	April 2020	Helen Baker
6	Draft	Update	April 2020	Malcolm Lewis
7	Draft	Update	April 2020	Gareth Hardacre
8	Draft	Shared with Project Board	April 2020	Rhys Owen
9	Draft	Updates from Project Board	May 2020	Rhys Owen

##### Approvals

This document requires the following approvals. A signed copy should be placed in the project files.

Name	Signature	Title	Date of Issue	Version

## Distribution

This document has been distributed to:

Name	Title	Date of Issue	Version
Gareth Hardacre	Director of Workforce & OD	28/02/2020	1
Sarah Evans	Deputy Director of Workforce and OD	28/02/2020	1
Gareth Hardacre and Sarah Evans	As above	25/03/2020	2
Gareth Hardacre	NWSSP	07/04/2020	3
Sarah Evans	NWSSP		
Lindsay Payne	NWSSP		
Louisa Jones	NWSSP		
Ian Collings	HEIW		
Helen Baker	HEIW		
Malcolm Lewis	NWSSP	14/04/2020	5
Project Board	Stakeholders	27/04/2020	8
NWSSP Committee	Via Sarah Evans	May 2020	9

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Draft

## 1. Introduction

### 1.1 Document Purpose

This Project Initiation Document (PID) is a reference document that defines the scope and approach to a project, which will review the approach to the Single Lead Employer Service for Foundation and Medical trainees.

The primary purpose of the PID is to ensure that the project has a sound basis before asking the Project Board to make any major commitment to the project and to act as a base document against which the Project Board and Project Manager can assess progress, change management issues and on-going viability questions.

A project management structure has been established to enable the project to achieve the aims and objectives as outlined in what follows. The project management team represents the interests and various roles and responsibilities required within the PRINCE2 project management methodology.

The PID addresses a number of topics including:

- Scoping benefits and risks of new services
- Objectives and scope
- Project delivery strategy
- Organisation, communication and quality plans
- Risk and issue management
- Project processes
- Project filing and configuration management strategies
- Regular Project review and evaluation

Certain elements of this document are dynamic and are likely to be updated during the course of the project. These include:

- Project plan
- Risk log
- Organisational structure
- Project team
- Benefits realisation

## 2. Project Definition

### 2.1 Project Objectives

- Develop and agree appropriate contractual arrangements (similar to GP trainees) to govern the new employment relationship between the SLE (NWSSP), Training Provider (HEIW) and host employers
- Develop and agree a suite of SLA's between all key stakeholders
- Scope out the implications of maintaining a dedicated SLE for all foundation and medical trainees including any implications for staff currently supporting the provision of this service at Host Education and Training Providers (HBs) level
- Develop and agree all operational staff management and work flow arrangements between NWSSP (SLE), HEIW and Host Education and Training Providers (HBs)
- Develop and agree funding and financial flow arrangements, to include costs associated with trainee salaries and other associated employment costs e.g. travel, training etc.
- Establish and conduct a wide reaching communication and engagement strategy to ensure that all stakeholders are fully involved and committed to the successful implementation of the project

### 2.2 Scope

- Establish NWSSP as the SLE for all foundation and medical trainees within NHS Wales. Establish a phasing plan to facilitate all trainees by the SLE model by August 2021
- Arrangements established to manage all trainee rotations whilst employed by NWSSP under the SLE model in partnership with HEIW and the Host Education and Training providers (HBs)

### 2.3 Outline Project Deliverables

- Project Management arrangements (Scoping, PID, risk register, comms plan etc...)
- Project staff resource
- Meeting schedules (Project Board and Operational Project Team)
- Reporting/progress arrangements for Project Board
- Contractual arrangements
- Suite of SLA's
- Process/work flows for arrangements between SLE, HEIW and host employers
- Occupational health checks, employment checks and DBS checks
- Financial and funding flows
- Review and evaluation (benefits realisation)
- Project work streams – Finance, Legal (SLAs), Comms and operational process flows

## 2.4 Assumptions

- Budget provided and agreed by HEIW for NWSSP central costs will be further reviewed as the project develops
- Health Board medical workforce resource would support the major peaks in activity (including on-boarding) – where required
- HEIW will remain responsible for aspects of training provision, including the allocation of trainee placements in a timely manner
- Health Boards will continue to provide day to day workforce support and advice with a clear terms of reference around NWSSP legal requirements as the employer
- Occupational Health services in Health Boards will continue to provide Occupational Health support to trainees as is currently provided

## 2.5 Constraints

- Volume of trainees and speed with which assimilated onto the SLE model is challenging
- Existing workforce systems and interfaces e.g. ESR, Intrepid, Cohort etc. do not provide a seamless and integrated service
- Some OH practices do not support a timely release of information to enable employees to be cleared
- OH resource including Consultant availability is limited and therefore a constraint.

## 2.6 Interfaces

### Organisations/Process Management

- UK Recruitment Processes
- Medical Schools
- HEIW
- NWSSP
- Health Boards
- Primary Care and independent sector

### Systems

- Oriel
- Intrepid
- TRAC
- ESR
- Cohort
- E-expenses

### NWSSP

- Workforce, Systems
- Occupational Health/DBS
- On-boarding of recruits to the SLE Model

- Payroll
- Finance/Accounts
- Legal and Risk (Risk Pool and Indemnity)

### 3. Project Approach

- Prince2

### 4. Outline of Initial Business Case

#### 4.1 Reasons/Justification (business needs) for the project

NHS Wales Shared Services Partnership's (NWSSP) undertaking the Single Lead Employer role for Foundation and Medical Trainees enabling significant improvements in employment arrangements for Trainees.

To improve the trainee experience throughout their trainee lifecycle by minimising disruption and providing a constant employment vehicle through the SLE model.

#### 4.2 Options

Health Education and Improvement Wales undertook a detailed scoping exercise of single lead employer models in late 2019. The case for moving to a single lead employer was felt to be compelling by all stakeholders. NWSSP was identified as the option which would most effectively realise all the benefits of single lead employer arrangements for trainees in Wales.

#### 4.3 Dis-Benefits expected

- Complete transparency over employee relations and managing attendance issues that could be masked or hidden by constant changing of employers in the current model
- If there were to be an employment challenge then there would be multiple respondents involved in the process

#### Prime benefit

- Enhancement of the trainee experience and improved wellbeing, removing multiple employments and the unintended consequences including impact on tax codes, benefit entitlements, mortgages, expenses and access to employee assistance programme as a one stop shop.

#### 4.4 Benefits expected

Key Benefits					
Benefit	Benefit Description	Owner	Expected Outcomes	Measurement	Realisation By
Employment checks	Trainees will only require one round of employment checks prior to the start of their training	NWSSP recruitment and medical workforce	Efficiencies across Wales Employment checks can also be used for the trainee application to the Medical performers list Will avoid duplication	Efficiencies through avoiding duplication of checks  Evaluation by HEIW	Implementation of SLE service for Foundation and Medical Trainees and adoption of DBS Update service
Single point of contact	For queries relating to terms and conditions of service including matters such as maternity and sickness absence.  Trainee's awareness of policies and procedures that apply to their employment.	NWSSP medical workforce	Will make the experience of training in Wales a more positive one  A consistent approach to the use of policies and procedures across Wales for all trainees	Feedback from trainees  Reduction in feedback from Trainees that local arrangements are being applied which results in inconsistent management of a trainees employment  Evaluation by HEIW	6+ months after implementation of each phase
Managing sickness and absence monitoring	The SLE role will assist in identifying any trainees in difficulty at an early stage	NWSSP (SLE), Host Education and Training Provider (HBs) and HEIW	SLE will provide appropriate support at an early stage in conjunction with HEIW	Feedback from trainees  Evaluation By HEIW	Implementation of each phase
Access to Occupational Health Services	The SLE arrangement will ensure that access to OH services are consistent across Wales	NWSSP	Consistent access to OH services Appropriate and efficient transfer of information to host organisations	Feedback from trainees  Evaluation by HEIW	6+ months after implementation of each phase



Managing employment issues	Expert HR knowledge will be available to deal with complex employment issues	NWSSP SLE team with support from Host Training and Training Providers (HBs) in the application of some policies and procedures	Employee Relations issues or requests that arise such as sickness, maternity, fitness to practice or professionalism will have dedicated HR support	Measurement of ER cases or day to day HR requests that arise through the implementation of new service  Evaluation by HEIW	Implementation of each phase
Consistent and comparable payroll data	Where all trainees will be included on one payroll will enable analysis and review of salary and travel information	NWSSP Finance and Payroll	Will facilitate efficiencies in the form of cost savings, standardised policies and the promotion of best practice	Evaluation by HEIW	Implementation of each phase
Resource costs savings	Won't be the need for the resource time to re-start trainees on payroll and employment systems	NWSSP and host Health Boards	Will facilitate efficiencies in the form of cost savings and in staff time that can be re-invested in value added activity e.g. filling rota gaps, workforce planning	Reduction in DBS costs Reduction in transactional costs in HBs and in NWSSP payroll and recruitment processing	Every 6 and 12 months and at each changeover point in-between.
Health Board Medical Workforce	Release some of the pressures currently on the HB medical workforce teams during COVID-19	NWSSP and HEIW	Ensuring SLE model is still implemented where manageable and achievable during initial timescales	Adapting to COVID-19 and ensuring trainees can be on-boarded to SLE model where possible	Ongoing

#### 4.5 Estimated timescales (subject to change)

- **April-May**
  - Interim Foundation Doctors (F1s)
- **August 2020**
  - F1s
- **September 2020**
  - Paediatrics – new starters along with existing trainees
- **October 2020**
  - Anaesthetics – all trainees transferring
- **November 2020**
  - Radiology – all trainees transferring
- **February 2021**
  - Additional specialties (detailed TBD) – all trainees transferring
- **August 2021**
  - Establish NWSSP as the SLE for all core and speciality trainees employed

#### 4.6 Implications of no action

Ongoing issues around employment arrangements for medical trainees. Potential loss of trainees to alternative providers in the home nations and overseas.

#### 4.7 Cost of Project (£000)

*Cost for project plus expected on-going maintenance costs after the project*

Capital Costs	
Revenue Costs	
Project Costs	

## 4.8 NWSSP Estimated Project Resources (In Days per week)

Name	Role	Effort
Rhys Owen	Project Manager (NWSSP)	2
Sarah Evans	Deputy Director of Workforce and OD	2
Louisa Jones	Senior Medical Workforce Advisor	2
Kelly Skene	Head of Recruitment	1
Christine Richards	Payroll Services Manager	1
Rhian Thomas	Payroll Services	1
Nicholas Meyler	Senior Workforce Information Analyst	2
Linsay Payne	Head of Financial Management	
HB representative x2	Health Board	0.5 days each

## 5. Project Organisation

### 5.1 Roles and responsibilities

#### Project Board

Name	Role	Responsibility
Malcolm Lewis: Medical Director - NWSSP	Project Executive/SRO	Responsible and accountable for project success and is the key decision maker ensuring the project delivers the forecasted benefits
Rhys Owen: Project Manager - NWSSP	Project Manager	Responsible for managing project on a daily basis including documentation such as project plans, risks & issues register
Sharon Vickery: Assistant Director of Workforce – Swansea Bay Ian Collings: Associate Post Grad Dean/Lead for Trainee Development & Wellbeing (interim) – HEIW Rachel Lee: HEIW Julie Cassley: Assistant Director of Workforce – C&V Sarah Simmonds: Assistant Director of Workforce – Aneurin Bevan UHB Helen Baker: Director for Secondary Care - HEIW Angie Oliver: HEIW Deputy Director of Workforce	Senior User(s)	Responsible for understanding & representing the needs of the users who will benefit from & maintain the improvement made by the project

<p>HEIW: Assistant Director of Finance</p> <p>Hywel Jones: Assistant Medical Director – Aneurin Bevan UHB</p> <p>Hazel Robinson: Director of Workforce – Swansea Bay (Lead for GP SLE)</p> <p>Emma Woolley: Director of Education - Betsi Cadwaladr UHB</p> <p>Steve Morgan: Assistant Director of Workforce – Hywel Dda UHB</p> <p>Donna Hill: Assistant Director of Workforce - Cwm Taf Morganwng UHB</p> <p>Josie Cheetham: BMA</p> <p>Jasmine Harris: BMA</p>		
<p>Gareth Hardacre: Director of Workforce &amp; OD - NWSSP</p> <p>Sarah Evans: Deputy Director of Workforce &amp; OD - NWSSP</p> <p>Paul Thomas: Employment Services Director - NWSSP</p> <p>Mark Harris: Director Legal &amp; Risk, NWSSP</p> <p>Welsh Government representative</p>	Senior Supplier	Responsible for ensuring products delivered for the project are technically realistic & meet quality standards
<p>Simon Cookson: Director of Audit and Assurance - NWSSP</p>	Project Assurance	<p>Responsible for monitoring every aspect of the project's performance and products, independently from the Project Manager and report directly to the Project Board</p> <p>Or</p> <p>The Project Board may delegate the tasks belonging to this role to individuals outside the Project Board.</p>
<p>Lindsay Payne: Head of Financial Management - NWSSP</p>	Finance Lead	Responsible for understanding the financial direction of the Project

### Project Team

Name	Organisation/Division	Responsibility
Rhys Owen	NWSSP – PMO	Project Manager
Sarah Evans	NWSSP – Workforce	Team Manager
Louisa Jones	NWSSP - Workforce	Medical Workforce
Nicholas Meyler	NWSSP - Workforce	Workforce Systems

Kelly Skene	NWSSP - Recruitment	Recruitment
Christine Richards	NWSSP – Employment Services	Payroll
Linsay Payne	NWSSP – Finance	Finance
Senior Workforce Manager	Health Board	Host Education and Training Provider (HBs)
TBC	Workforce Managers Medical group	Medical Workforce
Louis Randall		Sponsorship
Daniela Mahapatra	NWSSP – Legal & Risk	Employment
Erin Kidd	NWSSP – Legal & Risk	Commercial
TBC	Occupational Health Department	

## 6. Controls

### 6.1 Risks

Risks are to be notified to the Project Manager and the Project Manager will maintain and monitor the risk and issue logs.

Risks will reviewed by the project board and:

- On a regular basis as part of the Project Team meeting and escalated to project board members as required.
- At regular intervals by the project team and project manager no more than fortnightly.

Risk reporting will include the highlighting of red risks by the Project Manager to the Project Sponsor and Project Board.

Risk reporting will be encouraged and the Project Manager will be pro – active in identifying risks and recording these, which may come from a variety of sources. For example, the Project team, Project Board, stakeholders, or others with an interest in the project, such as Welsh Government.

All risks will be identified, assessed and controlled in a consistent manner. This includes:

- **Risk ID** – Each risk will be given a unique ID number.
- **Risk summary** – An explanation of the risk.
- **Date risk identified & initial risk rating** – The date when the risk was first highlighted and the initial risk score (an estimate of the level risk to the project objectives using the likelihood & consequence matrix).
- **Rating when last assessed** – Provides a comparison of the current risk score against the initial one if it changes during the project.
- **Action agreed at last risk assessment** – Actions which will mitigate the impact of the risk identified.

- **Progress** – Update on the agreed actions.
- **Owner for risk** – person responsible for the risk.

## 6.2 Issues

Issues will be notified to the Project Manager and logged and maintained within the Issue log which will be reviewed at Project Team Meetings and at each project board.

An owner will be allocated to each issue and progress tracked until the issue is resolved. An escalation procedure will be coordinated by the Project Manager, who may resolve some issues or escalate to the Project Board.

## 6.3 Change Management Procedures

Any changes to scope must be assessed using the change control document within the “lifecycle document folder” and recorded in the change log.

## 6.4 Configuration Management Plan

The documents will be produced using Microsoft Office; version controlled and stored on the NWSSP PMO shared drive. Copies can be made available to all members on request.

All project documentation will remain the responsibility of the Project Manager. As the project progresses, controlled versions of documents may be published on a shared network drive solution for all documentation to maintain version control.

## 7. Quality

### 7.1 Quality Standards, Procedures & Management

The Project Manager will ensure quality standards will be communicated to all who are involved in the project.

### 7.2 Quality Assurance

It is paramount that effective quality assurance is in place to provide business continuity whilst adopting new policies, procedures and systems set out in the project’s quality plan.

## 8. Communication Plan

### 8.1 Objectives

What	Purpose	Format	Target Stakeholders
------	---------	--------	---------------------

Highlight Reports	Structured formal report covering progress, main risks, completed tasks, help needed.	NWSSP PMO Word template	Project Board Project Operational team
Project Minutes/notes	Record and distribute actions / discussions from the Project Board	NWSSP PMO Word template	Project stakeholders
Review support & progress meetings	Review progress and risks/issues register	Fortnightly meetings/Skype	Project operational team
Ad hoc feedback / requests for ad hoc direction	Allow feedback between Project team & Project Manager	Skype conference call or	Project Team

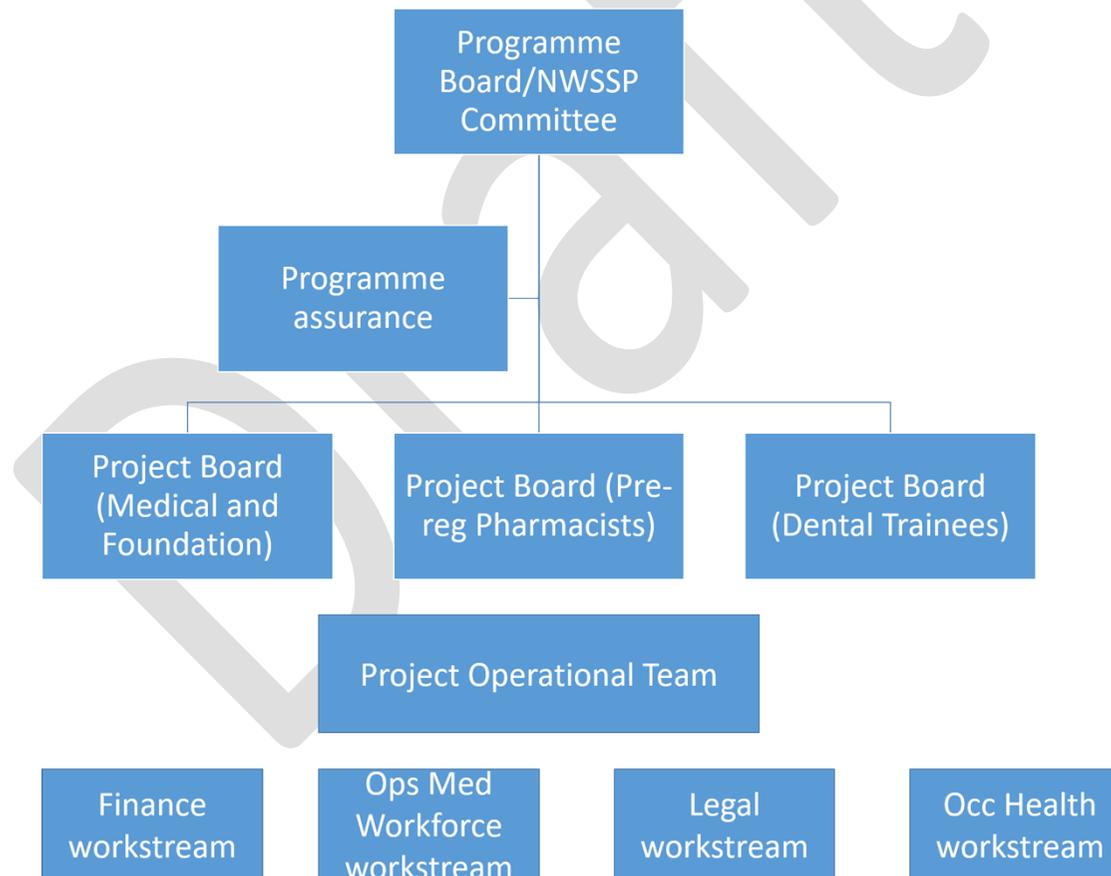
## 9. Progress Controls

There is a need to establish mechanisms to monitor and compare actual achievements against those planned; provide a forecast for the project's objectives, and the project's continued viability, and control any unacceptable variations. The project will be monitored against the agreed project plan and relevant documentation highlighting the projects progress.

## 10. Project Plan

A project plan detailing tasks, owners and completion status will be reviewed on a regular basis by the project operational team.

## 11. Programme Structure





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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM - tbc**

**21 May 2020**

*The report is Exempt*

**Teitl yr Adroddiad/Title of Report**

**UPDATE - NWSSP Transformation Programme**

<b>ARWEINYDD: LEAD:</b>	<b>Neil Frow, Managing Director</b>
<b>AWDUR: AUTHOR:</b>	<b>Dave Hopkins, Director of Primary Care Services</b>
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	<b>Neil Frow, Managing Director</b>
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	<b>Neil Frow - 01443 848550 Dave Hopkins - 02920 904080</b>

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

To update the SSPC on progress with the schemes to replace NHAIS.

**Llywodraethu/Governance**

<b>Amcanion: Objectives:</b>	In regard to NWSSP Value for Money, Customers, Staff, Excellence and Service Development (Modernisation) key corporate objectives
<b>Tystiolaeth: Supporting evidence:</b>	N/A

**Ymgynghoriad/Consultation :**

A number of various stakeholders have had meetings in relation to the transformation programme – these include, NWSSP, NWIS, Welsh Government, GPC Wales, PHW, NHS Digital, NHS England and PCSE (provided by CAPITA).

NWSSP have been in close dialogue with our NHS partners in England and in particular through a variety of workshops with NHS Digital with regard to the present and future demographic systems being delivered by NHS Digital.

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

<b>DERBYN/ APPROVE</b>		<b>ARNODI/ ENDORSE</b>		<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	✓
<b>Argymhelliad/</b>	The Committee is asked to:						

<b>Recommendation</b>	<ol style="list-style-type: none"> <li>1. <b>Note</b> the current situation with regard to the replacement of the GMS system and the commissioning of the Northern Ireland product FPPS;</li> <li>2. <b>Note</b> the current situation with regard to the replacement of the GOS system and the in-house development of an interim GOS claims and payments system;</li> <li>3. <b>Note</b> the work undertaken to date in collaboration with NHS Digital for the decommissioning of the NHAIS system and the move to their successor patient demographic products.</li> </ol>
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<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact
<b>Cyfreithiol: Legal:</b>	No direct impact, the procurement of the successor GMS product has now been purchased as a joint development venture after approval to proceed by DoH (Northern Ireland) and in accordance with the provisions of the 'Hamburg Agreement', for contracting between two public sector bodies. This has been subject to legal advice inside NWSSP and subsequent advice and endorsement through legal counsel.
<b>Iechyd Poblogaeth: Population Health:</b>	Systems replacement to be delivered for Patient Registration by NHS Digital must be able to meet cross border patient transfers in relation to demographic data and screening services.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	<p>New processes for patient transfers will need to be agreed as NHS Wales will be directly reliant on the NHS Digital demographic system.</p> <p>Screening related services are being handled by PHW in conjunction with PHE, NWIS and NHS Digital.</p>
<b>Ariannol: Financial:</b>	<p>Financial implications relating to the core demographic systems which will be supplied by NHS Digital are confirmed circa 25% of current charge. The overall NHAIS charges which are presently covered in our SLA for NWIS and NHS Digital will be utilised to part fund the new arrangements.</p> <p>The charges for the replacement GMS payments offering has been confirmed. A bid for Capital and Revenue</p>

	<p>injection has been approved by Welsh Government and now allows the BSO in Northern Ireland to fully resource the implementation.</p> <p>The development of the interim GOS systems will be undertaken by diverting internal resources with support from the NWSSP Project Management Team. External resources are now deployed to support programme.</p> <p>An increase in the establishment for the Modernisation and Technical team has been agreed and these resources (approx. 3 WTE) will be deployed in the implementation of all NHAIS replacement solutions, and the ongoing support.</p>
<b>Risg a Aswiriant: Risk and Assurance:</b>	<p>The withdrawing of systems in England has resulted in an increase cost to NHS Wales; however, funding streams have now been allocated to both GMS and GOS systems replacements and are on target to meet NHS Digital decommissioning.</p> <p>The current position with the COVID19 pandemic is an inherent risk to delivery of the new systems, however PCS remain confident of mitigating these risks should the current systems be affected in terms of their availability.</p> <p>This programme of change is highlighted and RAG rated as a lower risk as part of the current NWSSP Corporate Risk Register.</p>
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	No direct impact.
<b>Gweithlu: Workforce:</b>	<p>Potential impact for NWSSP staff through modernisation of patient registration and payment/claims functions with the introduction of new systems.</p> <p>Increase in technical staff agreed and funded internally.</p>
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Closed - the information should be subject to exemption.

## 1 SERVICE IMPACT

The rollout of the Medical Record Envelopes (MREs) Service in England is now at a steady state with records moving directly between GP practices. The number of outstanding records transferring between England and Wales has improved considerably with a new norm of around 8 to 10K records outstanding, compared to a high of 15k records in 2018. The current COVID pandemic has seen a considerable reduction in patient transfer both across Wales and between Wales and England.

In terms of timescales there has been a significant delay in the implementation of the new GMS payment system in NHSE, planned for original completion in September 2017. Due to COVID-19 related issues, this has been further delayed with a revised forecast now of October 2020. Discussions are ongoing with NHS Digital providing future support on an ad-hoc basis, at least until the end of the 2020 calendar year on the GMS payments service. NWIS provide first line support to both NWSSP and PHW and will do so as long as required.

For GOS services in NHSE the commencement of rollout of the CAPITA solution started from October 2019 and was planned for completion by end of May 2020. However issues in relation to COVID19 has led to requests that PCSE (run by CAPITA) delay their implementation completion until September 2020. NWSSP are developing an interim GOS/EHEW claims and payments service in-house. This was initially planned for May implementation; however, some resources were re-directed in the short term for COVID19 requirements and the completion is now forecast for July/August 2020. The interim aspect relates to the likely introduction of a new Optometric contract for Wales in the next 18 months, which is likely to focus on the preventative agenda and increased service provision in primary care.

In terms of replacement GMS, NWSSP have been in regular discussion with NHS Northern Ireland and is now in the implementation stage having secured the required funding through Welsh Government. Initially planned to complete by July 2020 this now has contingency and all parties are now working to the revised deadline set by NHSE (October 2020).

## 2 ACTIVITY TO DATE

A Transformation Programme Board has been formally created and will be responsible for reporting back to the Director of NWSSP and his executive team on a monthly basis.

### 2.1 NHAIS patient registration replacement (PCRM)

- After initial appraisal for having a separate service based on WDS the decision is to proceed with NHS Digital for future patient demographic services via their new SPINE system;
- NWIS hold the SLA with NHS Digital for access to Spine Services. The services currently require access via smartcard technology (service provided by NWSSP) however NWIS are in dialogue to firm up feasibility and costs for NHS Wales users at GP practices to have to use Smartcards to access spine

system. In any service rollout NWSSP will look to provide the necessary management for smart card services in a much expanded environment;

- Monthly meetings are in place between NWSSP, NWIS and NHS Digital;
- Welsh Government and GPC Wales are updated on position on a regular basis.

## **2.2 NHAIS payments systems replacement (GMS)**

- The case for funding of the Northern Ireland Family Practitioner Payments System (FPPS) was approved by NWSPPC and ratified by Velindre UNHST in late November 2019, subsequently this was ratified and funded by Welsh Government;
- FPPS system and the SLA will include a joint development team arrangement between Northern Ireland BSO and NWSSP going forward;
- NHS Digital have advised that the current GSUM Bureau will be available in July to run data for the following quarter. Subsequently, it has been agreed that the FPPS NHS Wales incidence will be enabled for the 1st July to allow a parallel run to take place during July – September. The PCS Service will therefore need to be live from 1st October 2020;
- Following escalation of the issue concerning the basis for agreement membership for the FPPS Joint Service Board has been agreed with the inaugural meeting scheduled to take place on the 26th May;
- Various teams within BSO have been engaged to provide information and commence setting up the NHS Wales version. Demonstrations have been held to provide PCS with an overview of the system and also GSUM calculations;
- A technical level meeting took place on 6<sup>th</sup> May to establish the environment setup and connectivity plan;
- NWSSP, Accounts Payable have set up and successfully tested payment via Oracle with a live run on the 1st May for Appliance Contractors. Work continues to ensure a seamless integration between PCS Contract Management team and Accounts Payable.

## **2.3 Open Exeter payments systems replacement (GOS)**

- NHS Digital have advised that the Open Exeter Ophthalmic Payments will be available until the end of September 2020. PCS will have the new GOS payments solution available for a parallel run to take place between July and September;
- Work on the project has been paused since the beginning of the COVID19 lockdown due to: -
  - The contract developer being stranded in Germany and the VPN remote working solution not performing to the required standard;
  - Redirection of resource from the project team to support the COVID19 effort in Ophthalmics;
  - A replacement remote solution (Bomgar) has been proposed. The results of a brief, initial test are encouraging. A full test with the German contractor will take place on 11<sup>th</sup> May to enable a decision on how to resource the project going forward.

- There is approximately three weeks work from the point of restarting to get the data capture elements of the solution to a position where user acceptance testing can commence.
- Work on QA, payment file creation, BACS transfer and reporting functionality will continue in parallel with that work as it does not involve the contract developer resource.

### **3 PLANNED ACTIONS TO TAKE PLACE**

- Continued engagement with NHS Digital to gather information on the implications, plans and final costing model proposed for NHS Wales to take their SPINE system and supporting PCRM and SDRS solutions;
- To complete the development of the GOS interim solution for NHS Wales claims and payments by August 2020;
- To implement the new FPPS solution to replace the NHSD GMS system by July 2020 (with go-live from 1 October 2020);
- Finalise the arrangements for decommissioning the NHAIS system and introduction of the new PCRM service by July 2021.



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:XX**

**21<sup>st</sup> May 2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Finance, Workforce and Performance Update Report**

**ARWEINYDD:  
LEAD:**

**Andy Butler, Director of Finance & Corporate Services & Gareth Hardacre, Director of WODS**

**AWDUR:  
AUTHOR:**

**Finance and Workforce Team**

**SWYDDOG ADRODD:  
REPORTING  
OFFICER:**

**Andy Butler, Director of Finance & Corporate Services**

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

The purpose of this report is to provide the SSPC with an update on finance, workforce and performance matters within NWSSP as at 31<sup>st</sup> March 2020.

**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:**

-

**Ymgynghoriad/Consultation :**

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

DERBYN/ APPROVE	ARNODI/ ENDORSE	TRAFOD/ DISCUSS	NODI/ NOTE	✓
<b>Argymhelliad/ Recommendation</b>	<p>The Committee is asked to:</p> <ol style="list-style-type: none"> <li>1. Note the financial position to 31<sup>st</sup> March 2020</li> <li>2. Note the significant level of professional influence benefits generated by NWSSP to 31<sup>st</sup> March 2020.</li> <li>3. Note the performance against the High level key performance indicators to 31<sup>st</sup> March 2020.</li> <li>4. Note the workforce data for the period.</li> <li>5. Note the content of this update and seek further information if required.</li> </ol>			

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

## Executive Summary - Period 1<sup>st</sup> April to 31<sup>st</sup> March 2020

### Financial Position

As at the 31<sup>st</sup> March 2020 NWSSP have reported a planned surplus of £11k. As previously confirmed, an additional £1.250m was distributed to NHS Wales and Welsh Government to bring the total NWSSP 2019/20 distribution up to £2.000m. This was achieved after internally funding the Laundry and TRAMS projects and the re-negotiated Microsoft Enterprise Agreement in addition to making non-recurrent reinvestments within NWSSP. The Welsh Risk Pool risk pool outturn was in line with the target agreed with Welsh Government. The 2019/20 Capital Expenditure Limit of £3.068m was utilised in full.

The financial position of NWSSP is consolidated within the Velindre NHS Trust Financial statements. The NWSS Finance team prepared the accounts in accordance with the original deadline set by Welsh Government in spite of the difficulties caused through COVID 19

### Key Performance Measures

40 of our 45 key performance indicators are currently reporting green or amber. The following 5 internal measures however, are showing as red and should be noted.

High Level - KPIs Mar 2020 (unless stated otherwise)	Target		Position at 31 Dec	Position at 31 Jan	Position at 29 Feb	Position at 31 Mar
NWSSP PSPP NHS % (In Month)	95%	Monthly	91%	83%	100%	69.84%
NWSSP PSPP NHS % (Cumulative)	95%	Monthly	85%	85%	85%	86.78%
Agency % to date	<0.8%	Cumul	1.02%	1.03%	1.08%	1.19%
Agency % Adjusted to exclude GP Trainees	<0.8%	Cumul	1.51%	1.60%	1.61%	1.77%
Time to Shortlist by Managers	3 Days	Monthly	8 days	9.6 days	10.3 days	7.8 days

Public Sector Pay Policy (PSPP) – NHS Invoices - The NHS PSPP performance for March 2020 was 69.84%, with the cumulative PSPP for the year being 86.78% against a target of 95%.

Variable Pay – Bank costs remain more or less static in spend, however there has been a significant increase in agency costs rising from £45k in December to £81k in January, £113k in February and £174k in March. The February and March increases are in line with additional activity taking place in a number of areas to support the COVID19 pandemic.

Time to Shortlist by Managers – this remains significantly above the 3 day target with only 10 out of 21 records achieving the target.

Summary – It is pleasing to report that all financial targets were achieved and performance against the KPIs was strong. . Performance against PSPP for NHS invoices remains a challenge, and this should be a target for achievement in 2020/21.

## Finance, Workforce and Performance Update Report

### INTRODUCTION

This report provides an update to 31<sup>st</sup> March 2020 regarding:

- Year End Final Financial Position,
- High Level Performance indicators and
- Workforce Information

### NWSSP Financial position – Full Financial Year

NWSSP reported £11k surplus position at the close of Month 12. This was in line with that planned. The income and expenditure position for the 2020/21 Financial year can be summarised as follows:

	Annual Budget £0	YTD Budget £0	YTD Expend £0	YTD under/ overspend £0
Audit & Assurance Services	2,762	2,762	2,759	-2
Procurement Services	13,877	13,877	13,667	-210
Health Courier Services	809	809	283	-526
SMTL	710	710	713	4
Stores	0	0	45	45
Employment Services	10,284	10,284	10,093	-191
Primary Care Services	11,488	11,488	10,709	-780
Legal & Risk Services	2,600	2,600	2,593	-7
WIBSS	0	0	0	0
Welsh Risk Pool Services	557	557	555	-1
Specialist Estates Services	2,998	2,998	2,723	-274
E-Business Central Team Services	906	906	-88	-993
Accounts Payable	3,051	3,051	3,097	46
E-Enablement	561	561	450	-111
Counter Fraud Services	447	447	437	-10
Corporate Services	1,548	1,548	1,589	41
Corporate IT Support/RPA	1,708	1,708	1,645	-63
PMO/TRAMS	619	619	630	11
Accommodation	2,421	2,421	2,150	-271
Finance	932	932	828	-105
Finance Academy	428	428	312	-116
Welsh Language	268	268	232	-37
GP Training Scheme	0	0	0	0
Workforce & OD/WFIS/ESR/TEL	1,612	1,612	1,581	-31
Salary Sacrifice	-30	-30	-33	-3
ESR Enhanced	-60	-60	-60	0
Corporate income/reserves	-2,849	-2,849	-526	2,323
Distribution	750	750	2,000	1,250
	<b>58,397</b>	<b>58,397</b>	<b>58,386</b>	<b>-11</b>

## NWSSP 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, which relate to Legal Services, Procurement Services and Specialist Estates Services can now be allocated across health organisations for all areas other than construction procurement. This is not possible for construction procurement due to the mechanism utilised to capture the data. Detail for health boards and trusts is reported in the individual performance reports issued to health organisations quarterly.

The indicative financial benefits across NHS Wales arising in the period April – March 2020 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services *	13.828
Procurement Services	34.228
Legal & Risk Services	77.932
<b>Total</b>	<b>125.989</b>

*\*The Specialist Estates Services Benefit does not include the Quarter 4 BfW savings.*

## PERFORMANCE

### Performance Reporting – to Health Boards and Trusts

NWSSP performance reports continue to be produced and distributed on a quarterly basis. The Quarter 4 reports are in the process of being produced. These reports reflect the ongoing developments in NWSSP performance reporting and incorporate feedback received to date.

Additionally, high level KPI data relating to the performance of each service for all Wales is detailed in the table below. This provides data for March 2020 (unless otherwise stated) along with comparison to the previous two periods.

## KEY FINANCIAL TARGETS

The table below provides a summary of key financial indicators for consideration.

Financial Position and Key Targets	Target		Position at 31-Jan	Position at 29-Feb	Position at 31-Mar
Financial Position – Forecast Outturn	Break even	Monthly	Breakeven	Breakeven	£11k Underspend
Capital financial position	Within CEL	Monthly	On Target	On Target	Achieved CEL met
Planned Distribution	£0.75m	Annual	£2.00m	£2.00m	£2.00m
NWSSP PSPP NON-NHS % (In Month)	95%	Monthly	97%	98%	97.78%
NWSSP PSPP NON-NHS % (Cumulative)	95%	Monthly	98%	98%	98.11%
NWSSP PSPP NHS % (In Month)	95%	Monthly	83%	100%	69.84%
NWSSP PSPP NHS % (Cumulative)	95%	Monthly	85%	85%	86.78%

It should be noted that although the Public Sector Payment Policy does not officially apply to the payment of NHS invoices, Welsh Government have been pushing to ensure that payments to other NHS bodies are made within 30 days against the 95% target. As such, a target has been included above to show performance against this.

The finance team are now pushing to ensure that payments of invoices to other NHS bodies are made within 30 days of the invoice date.

## KEY PERFORMANCE MEASURES

The table below provides a summary of key performance indicators for consideration.

High Level - KPIs March 2020 (unless stated otherwise)	Target		Position at 31 Jan	Position at 29 Feb	Position at 31 Mar
<b>Internal Indicators</b>					
<b>Corporate</b>					
NHS Debts in excess of 11 weeks – Value	<£100k	Monthly	£19k	£95k	£45k
NHS Debts in excess of 17 weeks – Value	0	Monthly	£103k	£4k	£0k
Variable Pay – Overtime	<£43k	Monthly	£33k	£32k	£43k
Agency % to date	<0.8%	Cumulative	1.03%	1.08%	1.19%
Agency % Adjusted to exclude GP Trainees	<0.8%	Cumulative	1.60%	1.61%	1.77%
<b><i>NWSSP Org KPIs Recruitment</i></b>					
Time to Approve Vacancies	10 days	Monthly	9.3 days	7.3 days	9.7 days

Time to Shortlist by Managers	3 Days	Monthly	9.6 days	10.3 days	7.8 days
Time to notify Recruitment of Interview Outcome	3 Days	Monthly	5.8 days	3.5 days	3.9 days
<b><u>Website &amp; Social Media Reach</u></b>					
Internet hits per month	>100k	Monthly	106k	110k	114k
Intranet hits per month	>75k	Monthly	144k	136k	75k
Twitter Followers		Cumulative	3,097	3,154	3,274
Twitter New Followers	35	Monthly	52	70	82
Tweet Impressions	20k	Monthly	15k	27k	42k
Tweets	20	Monthly	22	28	49
<b>Professional Influence</b>					
Professional Influence Savings	£110m annual target	Cumulative	£117m	£125m	£126m
<b>Procurement Services</b>					
Procurement savings *Current Year	£24.28m	Cumulative	£30.38m	£30.93m	£34.23m
All Wales PSPP – Non-NHS YTD	95%	Quarterly	Reported Quarterly	Reported Quarterly	96.1%
All Wales PSPP –NHS YTD	95%	Quarterly	Reported Quarterly	Reported Quarterly	85.1%
Accounts Payable % Calls Handled (South)	95%	Monthly	99.8%	99.8%	99.7%
<b>Employment Services</b>					
Payroll accuracy rate (Added Value)	99.6%	Monthly	99.81%	99.77%	99.75%
<b><u>All Wales Org KPIs Recruitment</u></b>					
Time to Approve Vacancies	10 days	Monthly	10.4 days	9.5 days	10.1 days
Time to Shortlist by Managers	3 Days	Monthly	7.3 days	6.6 days	7.3 days
Time to notify Recruitment of Interview Outcome	3 Days	Monthly	4.4 days	3 days	2.9 days
<b><u>All Wales Org - NWSSP KPIs recruitment element</u></b>					
Time to Place Adverts	2 days	Monthly	1.4 days	1.5 days	1.4 days
Time to Send Applications to Manager	2 days	Monthly	1.0 day	1.0 day	1.0 day
Time to send Conditional Offer Letter	4 days	Monthly	3.7 days	3.6 days	3.5 days
Recruitment % Calls Handled		Monthly	98.7%	99.1%	92%
<b>Primary Care Services</b>					
Payments made accurately and to timescale	100%	Monthly	100%	100%	99.93%
Prescription - keying Accuracy rates (Payment Month)	99%	Monthly	99.60%	99.85%	99.89%
<b>Internal audit (April)</b>					
Audits reported % of planned audits	96%	Cumulative	55%	64%	95%
% of audit outputs in progress		Cumulative	29%	28%	5%
Report turnaround management response to draft report [15 days]	80%	Cumulative	72%	67%	69%
Report turnaround draft response to final reporting [10 days]	80%	Cumulative	99%	99%	99%

<b>Legal and risk</b>					
Timeliness of advice acknowledgement - within 24 hours	90%	Monthly	100%	97.5%	100%
Timeliness of advice response – within 3 days or agreed timescale	90%	Monthly	97.5%	97.5%	100%
<b>Welsh Risk Pool</b>					
Acknowledgement of receipt of claim	100%	Monthly	100%	No Committee	100%
Valid claims received within deadline processed in time for next WRP committee	100%	Monthly	100%	No Committee	100%
Claims agreed paid within 10 days	100%	Monthly	100%	No Committee	100%

## Capital Update

The NWSSP Capital Expenditure Limit (CEL) to 31<sup>st</sup> Marc 2020 totalled £3.068m and this allocation and spend at the end of the year is broken down as follows:

Capital Type	Description	£ m		
		Value Allocated	Value Spent	Difference
Additional Funding	IP5 Repair works (Phase 1 & 2)	0.832	0.832	0.000
Additional Funding	SMTL Equipment	0.018	0.018	0.000
Additional Funding	Digital Funding	0.644	0.644	(0.000)
Additional Funding	Workforce Reporting Tool	0.109	0.109	0.000
Additional Funding	NHAIS Development	0.253	0.253	(0.000)
Additional Funding	HCS Replacement Vehicles Scheme	0.226	0.226	0.000
Additional Funding	Medical Examiner Service	0.052	0.052	0.000
Additional Funding	COVID-19	0.334	0.334	0.000
	<b>Additional Funding Total</b>	<b>2.468</b>	<b>2.468</b>	<b>0.000</b>
Discretionary	IT Software	0.023	0.039	(0.016)
Discretionary	IT Hardware	0.396	0.395	0.001
Discretionary	Property	0.097	0.071	0.026
Discretionary	Equipment	0.084	0.095	(0.011)
	<b>Discretionary Total</b>	<b>0.600</b>	<b>0.600</b>	<b>(0.000)</b>
	<b>NWSSP Capital Total</b>	<b>3.068</b>	<b>3.068</b>	<b>0.000</b>

It should be noted that all funds allocated were spent in full which given the current circumstances should be seen as a positive achievement.

## Welsh Risk Pool

### DEL Resource utilised 2019/20

The Welsh Government agreed initial allocation for the year was **£101m** (£75m core, £26m PIDR) for clinical negligence and personal injury claims and a **£1.259m** allocation for Redress.

Total funding for 2019/20 was subsequently provided as follows:-

**1920 Funding Streams**

75,000,000	WG Core
26,000,000	WG PIDR 1
1,880,000	WG PIDR 2
2,700,000	WG Redress
3,974,000	NHS Wales - Risk Share
10,700,000	WG funding M12

**120,254,000.00**

An additional **£1.880M** PIDR funding was provided by Welsh Government following a more detailed analysis to identify the actual 2019/20 impact for cases forecast to settle in year.

Redress expenditure was forecast to be **£2.7M** in 2019/20 with funding provided with reference to the WG three year agreement to underwrite Redress overspends until 2021/22.

The **£3.974m** Risk Share contribution was agreed with the Welsh Government at the Directors of Finance meeting on the 21 February 2020 as the final Risk Share contribution to this year’s spend.

Following the finalised agreement for Risk Share charges with NHS Wales in February, WG agreed to fund a further **£10.7m** for two cases settled late in March 2020.

The DEL expenditure can be analysed as follows:-

<b>Expenditure type</b>	<b>Position as at M12 2018/19 £m</b>	<b>Position as at M12 2019/20 £m</b>
Claims reimbursed & WRP Managed Expenditure	102.994	68.036
Periodical Payments made to date	12.054	13.972
Redress Reimbursements	1.671	1.431
EIDO – Patient consent	0.062	0.062
Clinical Negligence Salary Subsidy	0.000	0.072
WRPS Transfers, Consent, Prompt, CTG	0.000	0.104
Movement on Claims Creditor	(4.369)	36.520
<b>Year to date expenditure</b>	<b>112.412</b>	<b>120.197</b>

The increase in the movement on the claims creditor compared to last year can be explained by an unusually high number of high value cases settling in February and March. Health Boards and Trusts have not yet had the opportunity to seek reimbursement for these cases from the WRPS.

Similarly, the decrease in claims reimbursements compared to last year relates to the same timing issues as the claims creditor. These cases have either not yet been submitted by Health Boards and Trusts to the WRPS team for consideration or not yet been approved for reimbursement via WRPS committee.

The WRPS has utilised **£120.197m** of the total **£120.254m** funding available, a **£57K** under-utilisation.

Within the **£120.197m** 2019/20 charge, Redress expenditure is **£2.055m** (**£1.431m** reimbursements and a **£0.624m** increase movement on the Redress creditor) compared to agreed funding available of **£2.7m**.

The **£645K** residual Redress funds (£2.7M less £2.055m) have been almost fully utilised by additional clinical negligence and personal injury charges of **£588K**. The **£57K** difference can be seen in the total utilisation figures above.

Redress expenditure compared to the core £1.259m WG allocation is overspent by **£797K**. Welsh Government will fund this separately with reference to the three year agreement from 2018/19 to 2020/21.

## **ANNUALLY MANAGED EXPENDITURE 2019/20**

### **Total Provisions 2019/20**

The summary below shows total provisions have risen to £1,133.965m, an increase of £52.524m.

PROBABLE & CERTAIN CASES	2018/19	2019/20	Movement
	£M's	£M's	£M's
CLINICAL NEGLIGENCE	646.833	676.400	29.567
PERSONAL INJURY	2.539	5.145	2.606
REDRESS	1.941	3.376	1.435
Defence Legal Fees and others	7.612	7.981	0.369
<b>SUB TOTAL</b>	<b>658.925</b>	<b>692.902</b>	<b>33.977</b>
Periodical Payment Order	422.516	441.063	18.547
<b>TOTAL PROVISION</b>	<b>1,081.441</b>	<b>1,133.965</b>	<b>52.524</b>

The closing WG WRPS provision last year, as detailed in the NHS Summarised accounts was **£1,081.441m**. This is comprised of;

- £658.925m relating to cases identified as probable or certain and,
- £422.516m relating to Structured Settlements/PPOs

Total provisions have risen to **£1,133.965m** in 2019/20, an increase of **£52.524m** compared to a **£18.227m** increase in provisions in 2018/19.

- £692.902m relating to cases identified as probable or certain and,
- £441.063m relating to Structured Settlements/PPOs

The effect of the Personal Injury Discount Rate change in March 2017 reached a plateau in 2018/19 after two financial years of significant increases in provisions.

The subsequent change in August 2019 from -0.75% to -0.25% has had minimal effect compared to the previous change in 2017, when rates moved from a 2.5% positive rate to a negative -0.75%.

The provision for probable and certain cases has increased by **£33.977m** from **£658.925m** to **£692.902m**.

# WORKFORCE INFORMATION

## Summary



Key					
<span style="color: green;">■</span>	Meeting or exceeding target	<span style="color: orange;">■</span>	On course for target	<span style="color: red;">■</span>	Off target
<span style="color: green;">▲</span>	Positive change	<span style="color: red;">▲</span>	Negative change	<span style="color: black;">▲</span>	Change not measured

## NWSSP Staff in Post

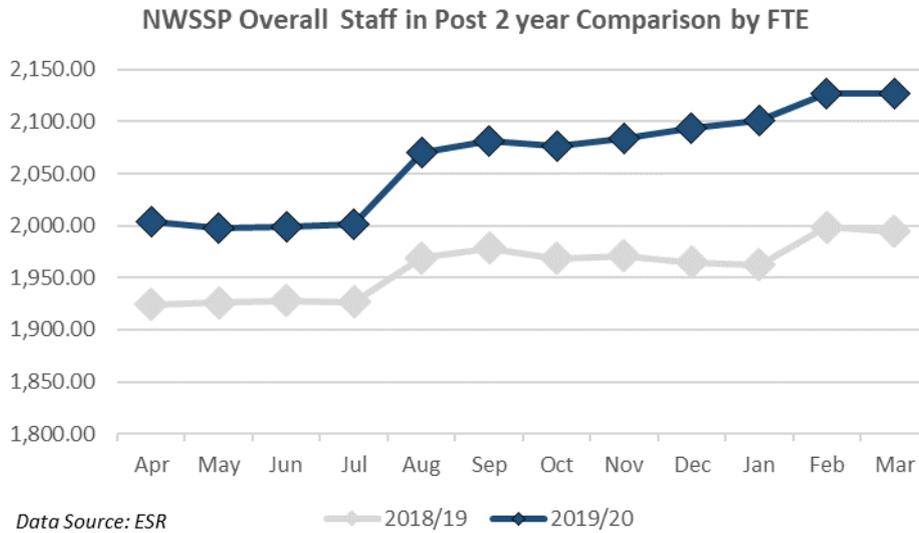
The table below outlines the directly employed contracted full time equivalent (FTE) and headcount figures for NWSSP as at 31<sup>st</sup> March 2020:

Section	Headcount		FTE		Headcount Change	
	Feb 20	Mar 20	Feb 20	Mar 20	Headcount Change +/-	Headcount Change +/- %
Audit & Assurance Section	53	53	50.22667	50.22667	0.00	0.00%
Corporate Section	198	198	188.30666	187.90666	0.00	0.00%
Counter Fraud Section	7	7	7	7	0.00	0.00%
Digital Workforce Solutions Section	17	17	16	16	0.00	0.00%
E-Business Central Team Section	11	10	9.73333	8.93333	-1.00 ▼	-10.00%
Employment Section	359	361	326.2586	327.68527	2.00 ▲	0.55%
Finance Section	25	26	23.05334	24.05334	1.00 ▲	3.85%
GP Trainees Section	506	503	453.6	451.05	-3.00 ▼	-0.60%
Legal & Risk Section	112	114	102.89333	104.89333	2.00 ▲	1.75%
Primary Care Section	312	309	286.66528	284.55028	-3.00 ▼	-0.97%
Procurement Section	604	605	568.90959	570.98959	1.00 ▲	0.17%
Specialist Estates Section	47	47	45.96	45.96	0.00	0.00%
Surgical Materials Testing (SMTL) Section	22	21	21.12	19.72	-1.00 ▼	-4.76%
Welsh Employers Unit Section	4	4	3.8	3.8	0.00	0.00%
Workforce & OD Section	25	25	23.9	23.9	0.00	0.00%
<b>NWSSP Overall</b>	<b>2302</b>	<b>2300</b>	<b>2127.4268</b>	<b>2126.66847</b>	<b>-2.00 ▼</b>	<b>-0.09%</b>

The change of headcount and FTE is attributable to starters, leavers and change of assignments from bank to substantive employees.

## NWSSP Overall Headcount Trajectory

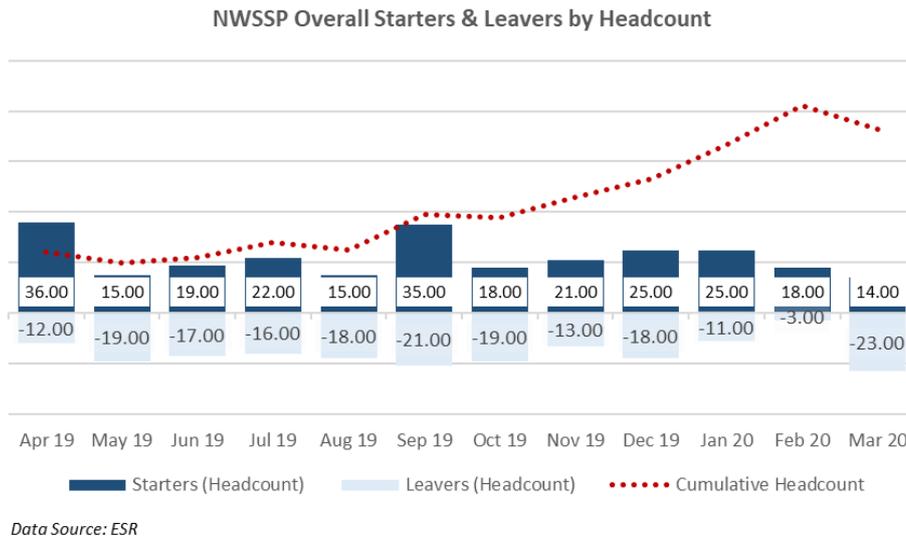
The graph below shows the rolling 12-month headcount trajectory compared to the same period for the previous year.



The significant increase in headcount in the months of August and February is attributable to the appointment of GP Trainees to NWSSP under the single lead employer scheme.

## Staff Turnover

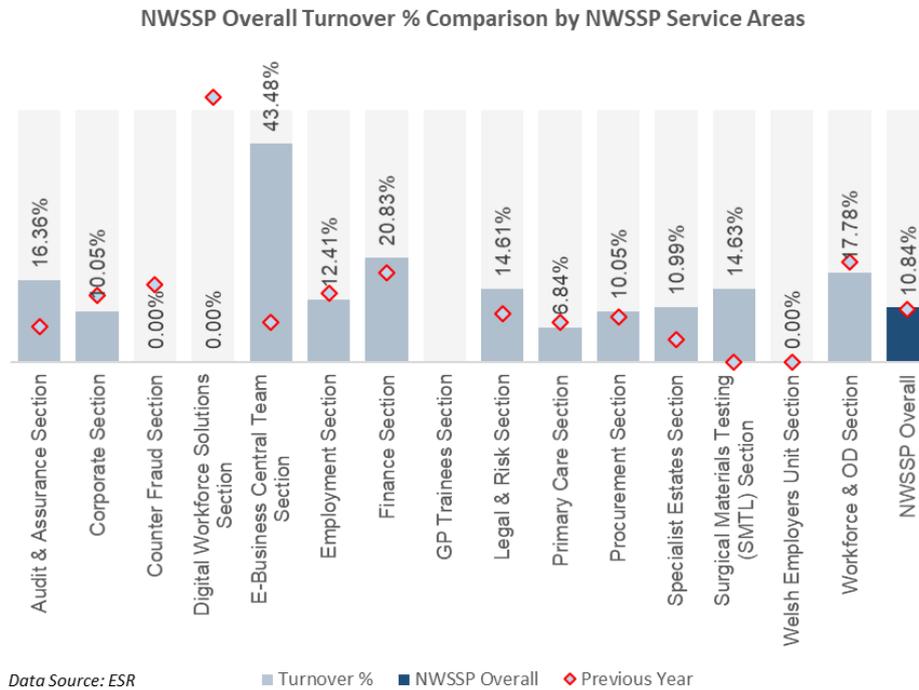
The graph below shows the starters and leavers in NWSSP from April 2019 to the end of March 2020. GP Trainees and Bank workers are excluded from this information:



The turnover rate for NWSSP from 1st April 2019 to 31<sup>st</sup> March 2020 is **10.84%** compared to **10.48%** for the same period last year.

These figures do not reflect internal movement and turnover within NWSSP, or GP Trainee and Bank turnover.

Further detail of turnover by service area is shown in the chart below:



Please note that those functions with a low headcount may demonstrate disproportionately high turnover percentages. Whilst it is acknowledged that the impact of staff turnover within smaller teams can have a significant impact, the turnover percentage needs to be understood within the context of the overall headcount.

A summarised analysis of the reasons why staff have left is provided below for the period 1st April 2019 to 31<sup>st</sup> March 2020.

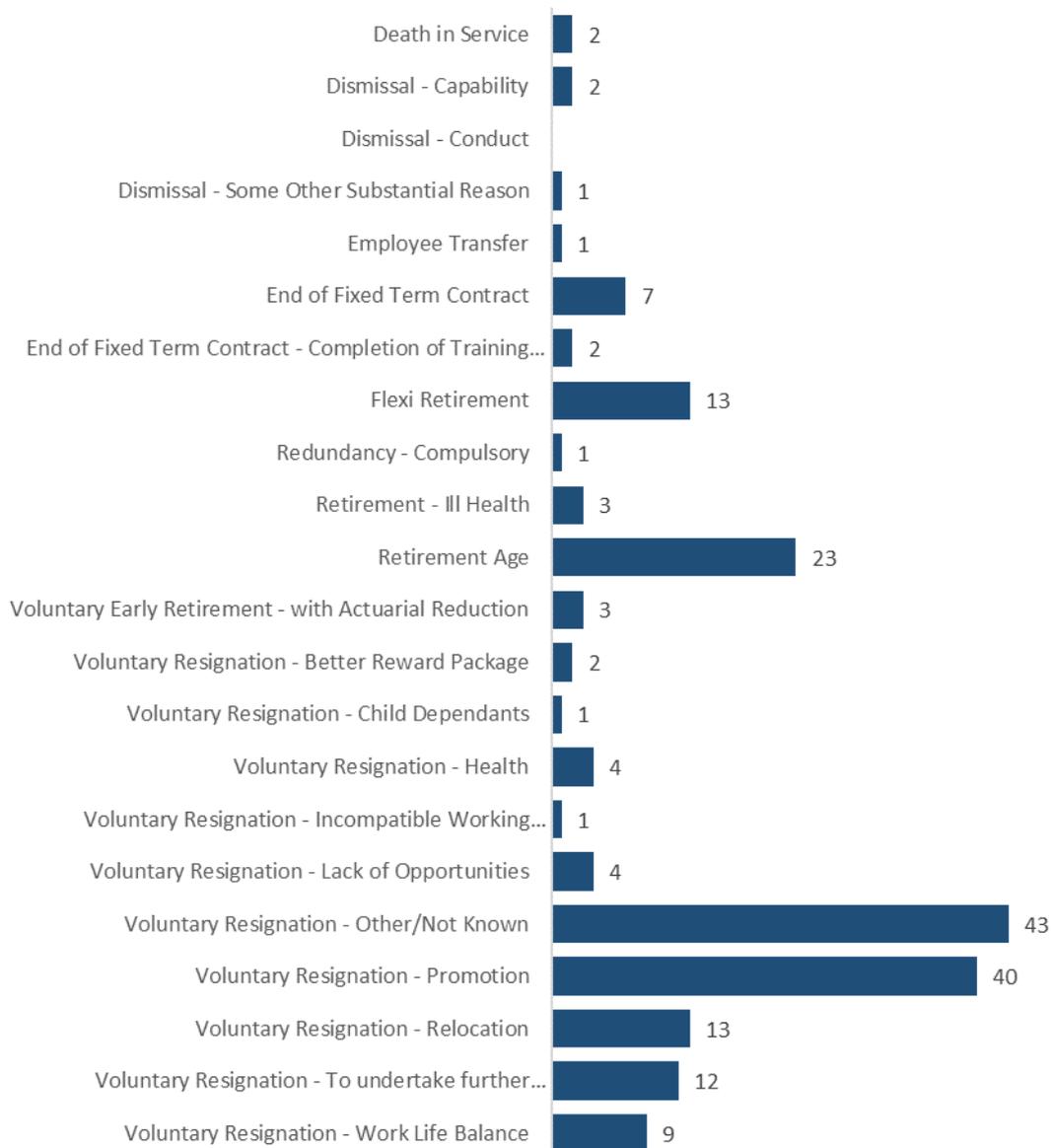
Non Voluntary Resignations		Voluntary Resignations		Retirement
Death in Service	2	Voluntary Resignation - Better Reward Package	2	Voluntary Early Retirement - with Actuarial Reduction
Dismissal - Capability	2	Voluntary Resignation - Health	4	Flexi Retirement
Dismissal - Conduct		Voluntary Resignation - Incompatible Working Relationships	1	Retirement - Ill Health
Employee Transfer	1	Voluntary Resignation - Lack of Opportunities	4	Retirement Age
End of Fixed Term Contract	7	Voluntary Resignation - Other/Not Known	43	
End of Fixed Term Contract - Completion of Training Scheme	2	Voluntary Resignation - Promotion	40	
End of Fixed Term Contract - Other	1	Voluntary Resignation - Relocation	13	
Dismissal - Some Other Substantial Reason	1	Voluntary Resignation - To undertake further education or training	12	
Redundancy - Compulsory	1	Voluntary Resignation - Work Life Balance	9	
Dismissal - Statutory Reason	1	Mutually Agreed Resignation - Local Scheme with Repayment	0	
		Voluntary Resignation - Adult Dependants	0	
		Redundancy - Voluntary	1	
		Voluntary Resignation - Child Dependants	1	
<b>Total</b>	<b>18</b>		<b>130</b>	
<b>Grand Total</b>	<b>190</b>			

Of **190** staff that left the organisation during this period, **130** staff terminated because of a voluntary resignation, equivalent to **68.42%** of all terminations.

**23** staff terminated in March 2020.

A summarised analysis of leaving reasons for those staff terminating over a 12 month period is detailed in the chart overleaf.

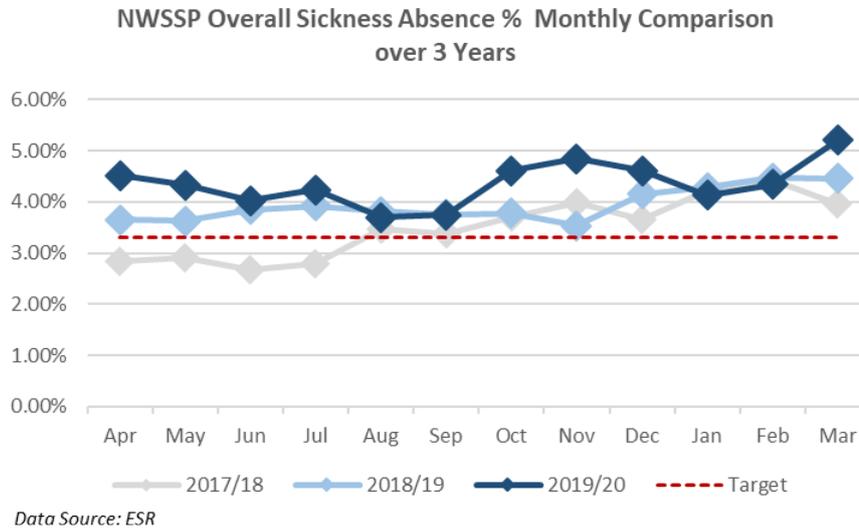
### NWSSP Overall Leavers by Headcount and Leaving Reason over 12 Months



Data Source: ESR

## Sickness Absence

The chart below shows the average sickness absence rate for NWSSP for 12 months from 1st April 2019 to 31st March 2020 compared to the 2 previous years.



NWSSP's target is 3.30% in line with the Welsh Government target of reducing sickness absence by 1%.

The in-month sickness absence rate for March 2020 was **5.20%**, which is a **0.87%** increase from the February position:

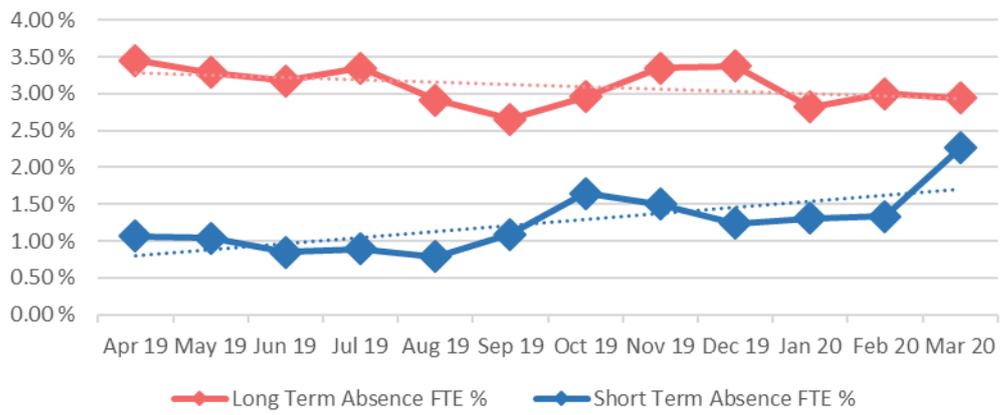
## Cumulative Absence

Absence % (FTE)	Abs (FTE)	Avail (FTE)
4.36%	32,907.84	754,424.56

Month	Absence % (FTE)	Abs (FTE)	Avail (FTE)
Apr 19	4.51%	2,706.22	59,959.16
May 19	4.33%	2,685.64	62,058.00
Jun 19	4.02%	2,411.71	59,950.13
Jul 19	4.24%	2,628.47	61,981.15
Aug 19	3.70%	2,362.55	63,797.59
Sep 19	3.74%	2,329.64	62,250.07
Oct 19	4.61%	2,972.37	64,523.99
Nov 19	4.85%	3,026.06	62,390.76
Dec 19	4.62%	2,998.57	64,938.26
Jan 20	4.13%	2,683.82	65,030.38
Feb 20	4.34%	2,671.43	61,594.16
Mar 20	5.20%	3,431.35	65,950.91

The below graph shows the 12-month trend in Long Term versus Short Term Sickness absence for the period 1st April 2019 to 31st March 2020:

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



Data Source: ESR



***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**NWSSP Annual Governance Statement**

<b>ARWEINYDD: LEAD:</b>	Andy Butler Director of Finance & Corporate Services
<b>AWDUR: AUTHOR:</b>	Peter Stephenson Head of Finance & Business Development
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Andy Butler Director of Finance & Corporate Services
<b>MANYLION CYSWLLT: CONTACT DETAILS:</b>	Andy Butler Director of Finance & Corporate Services 01443 848552 / <a href="mailto:Andy.Butler@wales.nhs.uk">Andy.Butler@wales.nhs.uk</a>

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

To provide the Partnership Committee with the finalised version of the NHS Wales Shared Services Partnership's (NWSSP) Annual Governance Statement.

**Llywodraethu/Governance**

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

**Ymgynghoriad/Consultation:**

The purpose of this report is to receive the Annual Governance Statement (AGS) for the NHS Wales Shared Services Partnership (NWSSP). The Statement has also been submitted to the Senior Management Team and the Audit Committee in April 2020. The Statement will be formally approved at the June meeting of the Audit Committee.

<b>Adduned y Pwyllgor/Committee Resolution (insert ✓):</b>							
<b>DERBYN/ APPROVE</b>		<b>ARNODI/ ENDORSE</b>	✓	<b>TRAFOD/ DISCUSS</b>		<b>NODI/ NOTE</b>	
<b>Argymhelliad/ Recommendation</b>		The Committee is asked to <b>ENDORSE</b> the report ahead of formal approval by the Audit Committee.					

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

# NWSSP ANNUAL GOVERNANCE STATEMENT

## May 2020

### 1. BACKGROUND

The Shared Services Partnership Committee (“the Committee”) was established in accordance with the Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012 No. 1261(W.156) and the functions of managing and providing shared services (professional, technical and administrative services) to the health service in Wales is included within the Velindre National Health Service Trust (Establishment) (Amendment) Order 2012.

The Annual Governance Statement is a mandatory requirement. It provides assurance that NWSSP has a generally sound system of internal control that supports the achievement of its policies, aims and objectives, and provides details of any significant internal control issues.

The Statement must be signed off by the Managing Director as the accountable officer, and approved by the Velindre NHS Trust Audit Committee for NWSSP. As a hosted organisation, NWSSP’s annual governance statement forms part of the Velindre NHS Trust’s annual report and accounts. The external auditor will report on inconsistencies between information in the Statement and their knowledge of the governance arrangements for NWSSP.

The Head of Internal Audit provides an annual opinion to the accounting officer and the Velindre NHS Trust Audit Committee for NWSSP on the adequacy and effectiveness of the risk management, control and governance processes to support the Statement.

The Annual Governance Statement for 2019-2020 is presented at **Appendix 1**.

### 2. TIMELINE FOR APPROVAL

The timeline for approving the statement is as follows:

<b>Date</b>	<b>Action</b>
27 February 2020	<u>Senior Management Team (SMT)</u> The SMT reviewed the draft statement
28 April 2020	<u>Audit Committee</u> The Velindre NHS Trust Audit Committee for Shared Services considered the draft and agreed that it is consistent with the

	Committee's view on the NWSSP's assurance framework
30 June 2020	<u>Audit Committee</u> Velindre NHS Trust Audit Committee for NWSSP review of the Statement along with the final Head of Internal Audit Opinion and final version agreed.
30 June 2020	Arrange Welsh language translation
31 July 2020	Publicise on NWSSP website

#### 4. GOVERNANCE & RISK

The Managing Director of Shared Services, as head of the Senior Management Team reports to the Chair and is responsible for the overall performance of NWSSP. The Managing Director is the designated Accountable Officer for NWSSP and is accountable through the leadership of the Senior Management Team.

The Managing Director is accountable to the Shared Services Partnership Committee (SSPC) in relation to those functions delegated to him by the SSPC. The Managing Director is also accountable to the Chief Executive of Velindre NHS Trust in respect of the hosting arrangements supporting the operation of NWSSP.

#### RECOMMENDATION

The Committee is asked to:

- **ENDORSE** the report



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

# Annual Governance Statement 2019/2020

<b>Version</b>	<b>Approved</b>
<b>1</b>	<b>SMT 27 February 2020 draft for information</b>
<b>2</b>	<i><b>SSPC 24 March 2020 draft for endorsement</b></i>
<b>3</b>	<i><b>SMT 26 March 2020 draft for endorsement</b></i>
<b>4</b>	<i><b>Velindre Integrated Governance Group 6 April 2020</b></i>
<b>5</b>	<b>Audit Committee 28 April 2020 for review</b>
<b>6</b>	<b>SMT 30 April 2020 final for formal adoption</b>
<b>7</b>	<b>SSPC 21 May final for endorsement</b>
<b>8</b>	<b>Audit Committee 30 June for final approval</b>

*Meeting dates above in italics were scheduled but did not take place due to impact of COVID-19.*

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# ANNUAL GOVERNANCE STATEMENT 2019/2020

## 1. SCOPE OF RESPONSIBILITY

At the time of preparing this Annual Governance Statement, NWSSP and the NHS in Wales is facing unprecedented and increasing pressure in planning and providing services to meet the needs of those who are affected by COVID-19, whilst also planning to resume other activity where this has been impacted.

The required response has meant the whole organisation has had to work very differently both internally and with our staff, partners and stakeholders and it has been necessary to revise the way the governance and operational framework is discharged. In recognition of this, Dr Andrew Goodall, Director General Health and Social Services/NHS Wales Chief Executive wrote to all NHS Chief Executives in Wales, with regard to "COVID -19- Decision Making and Financial Guidance". The letter recognised that organisations would be likely to make potentially difficult decisions at pace and without a firm evidence base or the support of key individuals which under normal operating circumstances would be available. Nevertheless, the organisation is still required to demonstrate that decision-making has been efficient and will stand the test of scrutiny with respect to compliance with Managing Welsh Public Money and demonstrating Value for Money after the COVID-19 crisis has abated and the organisation returns to more normal operating conditions.

To demonstrate this, NWSSP is recording how the effects of COVID-19 have impacted on any changes to normal decision making processes. Where relevant these, and other actions taken have been explained within this Annual Governance Statement.

As Accounting Officer, the Managing Director has responsibility for maintaining a sound system of internal control that supports the achievement of the NHS Wales Shared Services Partnership's (NWSSP), and the host's (Velindre University NHS Trust) policies, aims and objectives. The Managing Director also safeguards the public funds and departmental assets for which he is personally responsible, in accordance with the responsibilities assigned to him. The Managing Director is responsible for ensuring that NWSSP is administered prudently and economically and that resources are applied efficiently and effectively.

Governance comprises the arrangements put in place to ensure that the intended outcomes for stakeholders are defined and achieved. Effective governance is paramount to the successful and safe operation of NWSSP's services. This is achieved through a combination of "hard" systems and processes including standing orders, policies, protocols and processes; and "soft" characteristics of effective leadership and high standards of behaviour (Nolan principles).

The Managing Director of Shared Services is accountable to the Shared Services Partnership Committee (Partnership Committee) in relation to those functions delegated to it. The Managing Director is also accountable to the Chief Executive of Velindre University NHS Trust (the Trust) in respect of the hosting arrangements supporting the operation of Shared Services.

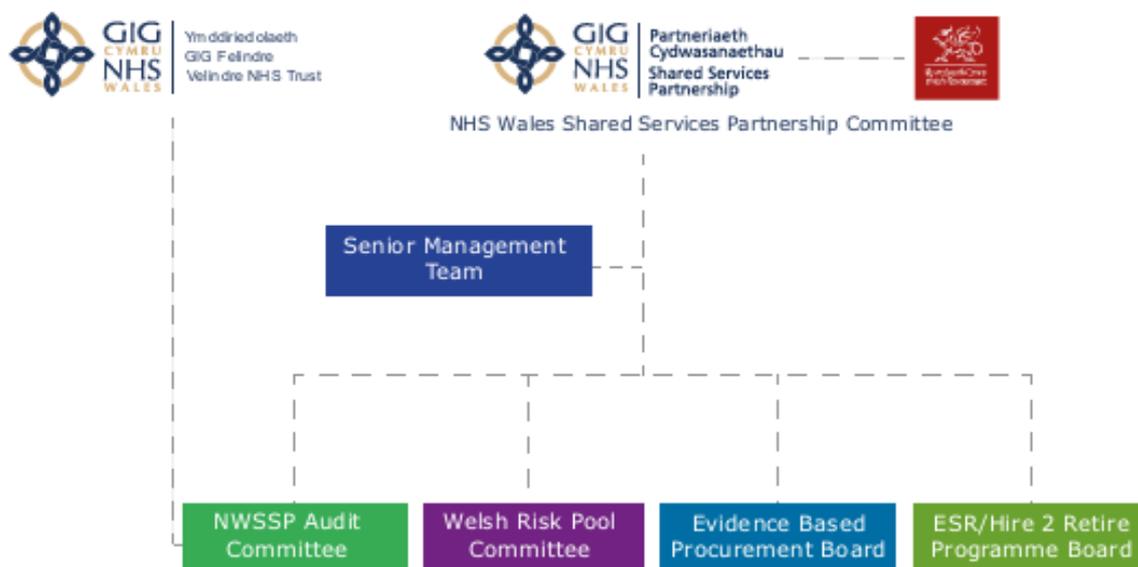
The Chief Executive of the Trust is responsible for the overall performance of the executive functions of the Trust and is the designated Accountable Officer for the Trust. As the host organisation, the Chief Executive (and the Trust Board) has a legitimate interest in the activities of the Shared Services Partnership and has certain statutory responsibilities as the legal entity hosting Shared Services.

The Managing Director of Shared Services (as the Accountable Officer for Shared Services) and the Chief Executive of the Trust (as the Accountable Officer for the Trust) shall be responsible for meeting all the responsibilities of their roles, as set out in their respective Accountable Officer Memoranda. Both Accountable Officers co-operate with each other to ensure that full accountability for the activities of the Shared Services and the Trust is afforded to the Welsh Government Ministers/Cabinet Secretary whilst minimising duplication.

The Governance Structure for NWSSP is presented in Figure 1 below:

Figure 1 –NWSSP’s Governance Structure

Our structure is underpinned though the overarching Velindre NHS Trust legal and assurance framework.



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

## **2. GOVERNANCE FRAMEWORK**

NWSSP has two main Committees that have key roles in relation to the Governance and Assurance Framework. Both Committees are chaired by Independent Members and undertake scrutiny, development discussions, and assess current risks and monitor performance in relation to the diverse number of services provided by NWSSP to NHS Wales.

### **2.1 Shared Services Partnership Committee**

The Shared Services Partnership Committee (Partnership Committee) was established in accordance with the Velindre National Health Service Trust Shared Services Committee (Wales) Regulations 2012 and the functions of managing and providing shared services (professional, technical and administrative services) to the health service in Wales is included within the Velindre National Health Service Trust (Establishment) (Amendment) Order 2012.

The composition of the Partnership Committee includes an Independent Chair, the Managing Director of Shared Services, and either the Chief Executive of each partner organisation in NHS Wales or a nominated executive representative who acts on behalf of the respective Health Board or Trust.

At a local level, Health Boards and NHS Trusts in Wales must agree Standing Orders for the regulation of proceedings and business. They are designed to translate the statutory requirements set out within the Local Health Boards (Constitution, Membership and Procedures) (Wales) Regulations 2009, into day to day operating practice, and, together with the adoption of a scheme of matters reserved to the Board; a scheme of delegations to officers and others; and Standing Financial Instructions, they provide the regulatory framework for the business conduct of NWSSP and define its way of working. These documents, accompanied by relevant Trust policies and NWSSP's corporate protocols, approved by the SMT, provide NWSSP's Governance Framework.

Health Boards, NHS Trusts and Health Education and Improvement Wales (HEIW) have collaborated over the operational arrangements for the provision of shared services and have an agreed Memorandum of Co-operation to ensure that the arrangements operate effectively through collective decision making in accordance with the policy and strategy set out above, determined by the Partnership Committee.

Whilst the Partnership Committee acts on behalf of all NHS organisations in undertaking its functions, the responsibility for the exercise of Shared Services functions is a shared responsibility of all NHS bodies in Wales.

NWSSP's governance arrangements are summarised below.

Figure 2: Summary of Governance Arrangements



The Partnership Committee has in place a robust Governance and Accountability Framework for NWSSP including:

- Standing Orders;
- Hosting Agreement;
- Interface Agreement between the Chief Executive Velindre University NHS Trust and Managing Director of NWSSP; and
- Accountability Agreement between the Partnership Committee and the Managing Director of NWSSP.

These documents, together with the Memorandum of Co-operation form the basis upon which the Partnership Committee's Governance and Accountability Framework is developed. Together with the Trust Values and Standards of Behaviour framework, this is designed to ensure the achievement of the standards of good governance set for the NHS in Wales.

The Membership of the Committee during the year ended 31 March 2020 is outlined in Figure 3 below. Membership was originally designed to be the Chief Executives of each Health Board and Trust but nominated deputies are allowed to attend and vote, provided they are an Executive Director of their own organisation.

Ensuring that meetings are quorate is an increasing challenge, but all were attended by the Chair, and the attendance of the Committee is outlined in Figure 4.

Figure 3: Table of Members of the NHS Wales Shared Services Partnership Committee during 2019/2020

<b>Name</b>	<b>Position</b>	<b>Organisation</b>	<b>From – To</b>
Margaret Foster (Chair)	<i>Independent Member</i>	<i>NHS Wales Shared Services Partnership</i>	<i>Full Year</i>
Huw Thomas (Vice Chair )	<i>Director of Finance</i>	<i>Hywel Dda UHB</i>	<i>Full Year</i>
Neil Frow	<i>Managing Director of NWSSP</i>	<i>NHS Wales Shared Services Partnership</i>	<i>Full Year</i>
Hazel Robinson	<i>Director of Workforce &amp; OD</i>	<i>Swansea Bay UHB</i>	<i>Full Year</i>
Geraint Evans	<i>Director of Workforce and OD</i>	<i>Aneurin Bevan UHB</i>	<i>Full Year</i>
Sue Hill	<i>Director of Finance</i>	<i>Betsi Cadwaladr UHB</i>	<i>Full Year</i>
Bob Chadwick	<i>Director of Finance</i>	<i>Cardiff and Vale UHB</i>	<i>Full Year</i>
Anne Phillimore	<i>Interim Director of Workforce &amp; OD</i>	<i>Cwm Taf Morgannwg UHB</i>	<i>Full Year</i>
Eifion Williams	<i>Director of Finance</i>	<i>HEIW</i>	<i>Full Year (also covered Powys for start of year)</i>
Pete Hoggood	<i>Director of Finance</i>	<i>Powys THB</i>	<i>Part Year</i>
Huw George	<i>Director of Operations and Finance</i>	<i>Public Health Wales NHS Trust</i>	<i>Full Year</i>
Steve Ham	<i>Chief Executive</i>	<i>Velindre University NHS Trust</i>	<i>Full Year</i>
Chris Turley	<i>Director of Finance</i>	<i>Welsh Ambulance Services NHS Trust</i>	<i>Full Year</i>

The composition of the Committee also requires the attendance of the following: Deputy Director of Finance, Welsh Government, Director of Finance & Corporate Services, NWSSP, Director of Workforce & Organisational Development, and Board Secretary NWSSP as governance support. Unison are also invited to the meetings.

Figure 4 – Attendance at the Meetings of the NHS Wales Shared Services Partnership Committee during 2019/2020

<b>Organisation</b>	<b>23/05/2019</b>	<b>18/07/2019</b>	<b>18/09/2019</b>	<b>02/12/2019</b>	<b>16/01/2020</b>
Aneurin Bevan UHB	✓	✓	x	✓	x
Betsi Cadwaladr UHB	✓**	x	x	X	✓**

Cardiff and Vale UHB	X	✓*	✓	✓	✓
Cwm Taf UHB	X	X	X	X	X
HEIW	✓	X	X	X	✓**
Hywel Dda LHB	X	✓	✓	✓	✓
Powys Teaching Health Board	✓	✓	✓**	✓	✓**
Public Health Wales Trust	✓**	✓**	X	✓**	X
Swansea Bay UHB	✓	X	X	X	✓
Velindre NHS Trust	✓	✓	✓**	X	✓
Welsh Ambulance Service Trust	X	X	X	X	X
Welsh Government	✓	X	X	X	✓

✓ Denotes the nominated member was present

✓\*Denotes the nominated member was not present and that an alternative Executive Director attended on their behalf

✓\*\* Denotes that the nominated member was not present and that while a deputy did attend, they were not an Executive Member of their Board.

X Denotes Health Body not represented

*NB: A further meeting of the Partnership Committee had been scheduled for March 2020, but was cancelled due to the COVID-19 crisis.*

The purpose of the Partnership Committee is set out below:

- To set the policy and strategy for Shared Services;
- To monitor the delivery of Shared Services through the Managing Director of Shared Services;
- To seek to improve the approach to delivering shared services which are effective, efficient and provide value for money for NHS Wales and Welsh Government;
- To ensure the efficient and effective leadership, direction, and control of Shared Services; and
- To ensure a strong focus on delivering savings that can be re-invested in direct patient care.

The Partnership Committee monitors performance monthly against key performance indicators. For any indicators assessed as being below target, reasons for current performance are identified and included in the report along with any remedial actions to improve performance. These are

presented to the Partnership Committee by the relevant Director. Deep Dive sessions are a standing item on the agenda to learn more about the risks and issues of directorates within NWSSP.

The Partnership Committee ensures that NWSSP consistently followed the principles of good governance applicable to NHS organisations, including the oversight and development of systems and processes for financial control, organisational control, governance and risk management. The Partnership Committee assesses strategic and corporate risks through the Corporate Risk Register.

## **2.2 Partnership Committee Performance**

During 2019/2020, the Partnership Committee approved an annual forward plan of business, including:

- Regular assessment and review of:
  - Finance, Workforce and Performance information;
  - Corporate Risk Register;
  - Welsh Risk Pool;
  - Programme Management office updates.
- Annual review and/or approval of:
  - Integrated Medium Term Plan;
  - Annual Governance Statement;
  - Wales Audit Office Management Letter;
  - Annual Review;
  - Standing Orders and Standing Financial Instructions;
  - Health & Care Standards; and
  - Service Level Agreements.
- Deep Dives into:
  - E-Expenses;
  - Health Courier Services;
  - GP Indemnity Scheme; and
  - Medical Examiner Service.

## **2.3 Velindre Audit Committee for NWSSP**

The primary role of the Velindre University NHS Trust Audit Committee for Shared Services (Audit Committee) has been to review and report upon the adequacy and effective operation of NWSSP's overall governance and internal control system. This includes risk management, operational and compliance controls, together with the related assurances that underpin the delivery of NWSSP's objectives. This role is set out clearly in the Audit Committee's terms of reference, which were revised in July 2019 to ensure these key functions were embedded within the standing orders and governance arrangements.

The Audit Committee reviews the effective local operation of internal and external audit, as well as the Counter Fraud Service. In addition, it ensures that a professional relationship is maintained between the external and internal auditors so that assurance resource is effectively used.

The Audit Committee supports the Partnership Committee 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 Committee attendees during 2019/2020 comprised of three Independent Members of Velindre University NHS Trust supported by representatives of both Internal and External Audit and Senior Officers of NWSSP and Velindre University NHS Trust. Ray Singh and Phil Roberts both stood down after the October 2019 Committee and were replaced with Gareth Jones and Janet Pickles as Independent Members.

Figure 5 - Composition of the Velindre University NHS Trust Audit Committee for NWSSP during 2019/20

In Attendance	April 2019	July 2019	October 2019	January 2020	Total
<b>Committee Members</b>					
Martin Veale, Chair & Independent Member	✓	✓	✓	✓	4/4
Ray Singh, Independent Member	✓	✓	✓		3/3
Phil Roberts, Independent Member	✓	✓	X		2/3
Gareth Jones, Independent Member				✓	1/1
Janet Pickles, Independent Member				X	0/1
<b>Wales Audit Office</b>					
Audit Team Representative	✓	✓	X	✓	3/4
<b>NWSSP Audit Service</b>					
Director of Audit & Assurance	✓	✓	✓	✓	4/4
Head of Internal Audit	✓	✓	✓	✓	4/4
Audit Manager	✓	✓	X	X	2/4
<b>Counter Fraud Services</b>					
Local Counter Fraud Specialist	✓	✓	✓	X	3/4
<b>NWSSP</b>					
Margaret Foster, Chair NWSSP	✓	✓	✓	✓	4/4
Neil Frow, Managing Director	✓	✓	✓	✓	4/4
Andy Butler, Director of Finance & Corporate Services	✓	✓	✓	✓	4/4
Peter Stephenson, Head of Finance & Business Development	✓	✓	✓	✓	4/4
Roxann Davies, Compliance Officer	✓	✓	X	✓	3/4
NWSSP Secretariat	✓	✓	✓	✓	4/4
<b>Velindre University NHS Trust</b>					

In Attendance	April 2019	July 2019	October 2019	January 2020	Total
Mark Osland, Director of Finance	X	✓	X	✓	2/4
Lauren Fear Director of Corporate Governance				✓	1/1

The Audit Committee met formally on four occasions during the year with the majority of members attending regularly and all meetings were quorate. An Audit Committee Highlight Report is reported to the Partnership Committee, after each Audit Committee meeting.

## 2.4 Reviewing Effectiveness of Audit Committee

The Audit Committee completes an annual committee effectiveness survey evaluating the performance and effectiveness of:

- the Audit Committee members and Chair;
- the quality of the reports presented to Committee; and
- the effectiveness of the Committee secretariat.

The survey questionnaire comprises self-assessment questions intended to assist the Committee in assessing their effectiveness with a view to identifying potential areas for development going forward. A survey undertaken during May 2019, had a 91% response rate (10 responses received) and identified the following:

- Over 90% of all responses were positive;
- All respondents felt that the Committee had been provided with sufficient authority and resource to perform its role effectively;
- All respondents considered that the Committee meets sufficiently frequently to deal with planned matters and that sufficient time is made available for questions and discussion;
- All respondents agreed that the atmosphere at Committee meetings is conducive to open and productive debate;
- All respondents agreed that the behaviour of members and attendees was courteous and professional; and
- All respondents agreed that the reports received by the Committee were timely and included the right format and content to enable the Committee to discharge its internal control and risk management responsibilities.

The results of the survey were included in a wider review of the effectiveness of the Audit Committee. This review was undertaken internally, but drew on the following sources of information:

1. Review of the revised UK Code of Corporate Governance 2018 (researching similar associated literature, guides and precedents in this field e.g. NHS Governance e-Manual);

2. Benchmarking exercise of results from both the NWSSP Audit Committee and Velindre's Audit Committee Effectiveness Survey (ACES) in 2018;
3. Attending Velindre's Audit Committee to compare and contrast; identify where NWSSP Audit Committee can add value from actions implemented within Velindre;
4. Assessment of corporate communications around the NWSSP Audit Committee and Members to identify ways to encourage visibility in the organisation through better promotion of Independent Members;
5. Considering observations raised at Meeting Reviews conducted by the NWSSP Audit Committee Chair, following each meeting; and
6. Liaising with the NHS Wales Deputy Board Secretaries Network in relation to Committee Effectiveness.

The output from this exercise was an action plan that comprised 36 recommendations across a range of headings. Progress with achievement of the action plan is reported to each Audit Committee meeting. As at 31 March 2020, 27 recommendations had been implemented with nine on-going, that have not yet been implemented and these actions will be integrated to inform the Audit Committee effectiveness action plan for 2020-21.

## 2.5 Sub Groups and Advisory Groups

The Partnership Committee is supported by three advisory groups:

- **Welsh Risk Pool Committee**
  - Reimburse losses over £25,000 incurred by Welsh NHS bodies arising out of negligence;
  - Provide oversight of the GP Indemnity Scheme;
  - Funded through the NHS Wales Healthcare budget;
  - Oversees the work and expenditure of the Welsh Risk Pool; and
  - Helps promote best clinical practice and lessons learnt from clinical incidents.
- **Evidence-Based Procurement Board**
  - Advisory group to promote wider liaison across NHS Wales;
  - Includes representatives of various disciplines across NHS Wales and relevant research bodies;
  - Helps inform and develop a value and evidence based procurement process for medical consumables and devices for NHS Wales.
- **Local Partnership Forum (LPF)**
  - Formal mechanism for consultation and engagement between NWSSP and the relevant Trade Unions. The LPF facilitates an open forum in which parties can engage with each other to inform debate and seek to agree local priorities on workforce and health service issues.

## 2.6 Senior Management Team (SMT)

The Managing Director leads the SMT and reports to the Chair of the Partnership Committee on the overall performance of NWSSP. The Managing Director is the designated Accountable Officer for Shared Services and is accountable, through the leadership of the Senior Management Team, for:

- The performance and delivery of NWSSP through the preparation of the annually updated Integrated Medium Term Plan (IMTP) based on the policies and strategy set by the Committee and the preparation of Service Improvement plans;
- Leading the SMT to deliver the IMTP and Service Improvement Plans;
- Establishing an appropriate Scheme of Delegation for the SMT; and
- Ensuring that adequate internal controls and procedures are in place to ensure that delegated functions are exercised properly and prudently.

The SMT are responsible for determining NWSSP policy, setting the strategic direction and aims to ensure that there is effective internal control, and ensuring high standards of governance and behaviour. In addition, the SMT is responsible for ensuring that NWSSP is responsive to the needs of Health Boards and Trusts.

The SMT comprises:

Figure 7 – Composition of the SMT at NWSSP during 2019/2020

Name	Designation
Neil Frow	Managing Director
Andy Butler	Director of Finance and Corporate Services
Gareth Hardacre	Director of Workforce and Organisational Development
Jonathan Irvine*	Director of Procurement Services
Paul Thomas	Director of Employment Services
Simon Cookson	Director of Audit and Assurance
Anne-Louise Ferguson MBE	Director of Legal and Risk
Dave Hopkins	Director of Primary Care Services
Neil Davies	Director of Specialist Estates
Professor Malcolm Lewis OBE**	Medical Director

- *Jonathan Irvine commenced in post in September 2019, after the retirement of Mark Roscrow, MBE.*
- *Professor Malcolm Lewis was formally appointed as NWSSP's first Medical Director in November 2019.*

Since the start of March 2020, the SMT has been supported by a Planning and Response Group to meet the challenges arising from the COVID-19 outbreak. In addition to the core members of the SMT, the Planning and Response Group includes representation from Trade Unions, Communications and the Surgical Materials Testing Laboratory. All

decisions taken by the Group are recorded on an Issues and Decisions Log, and the Group meets at least weekly via Skype.

### **3. THE PURPOSE OF THE SYSTEM OF INTERNAL CONTROL**

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to the achievement of the policies, aims and objectives of NWSSP. Therefore, it can only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks, evaluate the likelihood of those risks being realised and the impact they would have, and to manage them efficiently, effectively and economically. The system of internal control has been in place in NWSSP for the year ending 31 March 2020 and up to the date of approval of the Trust Annual Report and Accounts.

#### **3.1 External Audit**

NWSSP's external auditors are the Wales Audit Office (WAO). The Audit Committee has worked constructively with the WAO and the areas examined included:

- Position Statements (to every meeting);
- NWSSP Nationally Hosted NHS IT Systems Assurance Report 2018-19;
- Management Letter 2018/19; and
- WAO Assurance Arrangements 2020.

The work of external audit is monitored by the Audit Committee through regular progress reports. Their work is considered timely and professional. The recommendations made are relevant and helpful in our overall assurance and governance arrangements and in minimising risk. There are clear and open relationships with officers and the reports produced are comprehensive and well presented.

In addition to internal NWSSP issues, the Audit Committee has been kept apprised by our external auditors of developments across NHS Wales and elsewhere in the public sector. These discussions have been helpful in extending the Audit Committee's awareness of the wider context of our work.

#### **3.2 Internal Audit**

The Audit Committee regularly reviewed and considered the work and findings of the internal audit team. The Director of Audit and Assurance and the relevant Heads of Internal Audit have attended meetings to discuss their work and present their findings. The Audit Committee are satisfied with the liaison and coordination between the external and internal auditors.

Quarterly returns providing assurance on any audit areas assessed as having “no assurance” or “limited assurance” were issued to Welsh Government in accordance with the instruction received from Dr Andrew Goodall, Chief Executive NHS Wales/Director General in July 2016. During 2019/20 no internal audit reports were rated as limited or no assurance.

For both internal and external audit, the Audit Committee have ensured that management actions agreed in response to reported weaknesses were implemented in a timely manner. Any planned revisions to agreed timescales for implementation of action plans requires Audit Committee approval. A separate report on the position with implementation of audit recommendations is monitored at each Audit Committee and is also taken for action at each monthly meeting of the SMT.

Reports were timely and enabled the Audit Committee to understand operational and financial risks. In addition, the internal auditors have provided valuable benchmarking information relating to best practice across NHS Wales.

### **3.3 Counter Fraud Specialists**

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 Audit Committee to monitor progress against the agreed Counter Fraud Plan, including the following reports:

- Progress Update at each meeting
- Annual Report 2018-19
- Counter Fraud Work Plan 2019-20
- Counter Fraud Self Review Tool Submission 2018-19

During 2019/20, four new investigations into possible fraudulent or corrupt activity were instigated together with the four cases that were brought forward from 2018/19. Of the four new cases, all of them involved alleged false claims that had been submitted to the NHS Student Awards Service.

As part of its work, the Counter Fraud Department has a regular annual programme of raising fraud awareness for which a number of days are then allocated and included as part of a an agreed Counter Fraud Work-Plan which is signed off by the Director of Finance and Corporate Services annually.

As part of that planned area of work, regular fraud awareness sessions are arranged and then held with various staff groups at which details on how and to who fraud can be reported are outlined.

In addition to this and in an attempt to promote an Anti-Fraud Culture within NWSSP, a quarterly newsletter is produced which is then available

to all staff on the intranet and all successful prosecutions are also publicised in order to obtain the maximum deterrent effect.

### **3.4 Integrated Governance**

The Audit Committee is responsible for the maintenance and effective system of integrated governance. It has maintained oversight of the whole process by seeking specific reports on assurance, which include:

- The Quality Assurance and Improvement Plan arising from the 2018-19 Internal Audit self-assessment;
- Tracking of Audit Recommendations;
- Corporate Risk Register;
- Directorate Assurance Maps; and
- Governance Matters report on single tender actions, declarations of interest, gifts and hospitality received and declined.

During 2019/20, the Audit Committee reported any areas of concern to the Partnership Committee and played a proactive role in communicating suggested amendments to governance procedures and the corporate risk register.

### **3.5 Quality**

During 2019/20, the Partnership Committee has given attention to assuring the quality of services by including a section on "Quality, Safety and Patient Experience" as one of the core considerations on the committee report template when drafting reports for Partnership Committee meetings.

In addition, quality of service provision is a core feature of the discussions undertaken between NWSSP and the Health Boards and Trusts during quarterly review meetings with the relevant Directors.

Procurement Services maintains certification to a number of international and national standards including ISO 9001 Quality Management, ISO 27001 Information Security, OHSAS 18001 Occupational Health & Safety and Customer Service Excellence. The Regional Stores are also accredited to the STS Code of Practice & Technical Standard for the Public Sector. During 2019/20 the ISO 9001 scope of certification was extended to include the Accounts Payable function in North Wales. The Customer Service Excellence certification was also extended to include Health Courier Services in June 2019. Work is now underway to transition from OHSAS 18001 to ISO 45001 for the 2020/21 period, which will include an extension of scope to include IP5 in Newport. In 2020/21, further extensions to certification will be implemented across the Supply Chain, Logistics & Transport team including certification to ISO 9001.

Procurement Services continues to hold the ISO27001 Information Security Management Standard (ISMS) certification and this was recertified by a new Assessment Body in 2019/20. NWSSP has developed an organisation wide cyber-security action plan that is being deployed across Services.

NWSSP took part in a cyber-security audit as part of the work to achieve the Cyber Essentials Plus standard from the international NIST framework and the action plan has been updated to reflect the recommendations. The standard aims to improve resilience and responsiveness to threats to information, preserving confidentiality, integrity and availability of information by applying a risk management process. It deals with the need for prevention and all aspects of protocol including technical, physical and legal control.

### **3.6 Looking Ahead**

As a result of its work during the year the Audit Committee is satisfied that NWSSP has appropriate and robust internal controls in place and that the systems of governance incorporated in the Standing Orders are fully embedded within the Organisation.

Looking forward to 2020-21 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 and also by its major providers;
- 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;
- Ensure the Partnership Committee 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 Partnership Committee.

## **4. CAPACITY TO HANDLE RISK**

As previously highlighted the need to plan and respond to the COVID-19 pandemic presents a number of challenges to the organisation. A number of new and emerging risks were identified. Whilst NWSSP did have a major incident and business continuity plan in place, as required by the Civil Contingencies Act 2004, the scale and impact of the pandemic has been unprecedented. Significant action has been taken at a national and local level to prepare and respond to the likely impact on the organisation. There does remain a level of uncertainty about the overall impact this will have on the immediate and longer term delivery of services by NWSSP, although there is confidence that all appropriate action has been taken, and all services have been sustained thus far. The identified risks, which are recorded in a separate COVID-19 Risk Register, are as follows:

- Threats to the supply of medical equipment and consumables, and in particular Personal Protective Equipment;
- Insufficient numbers of staff are able to work to provide the business critical services to our customers;
- Staff (including GP Trainees) are put at risk of contracting COVID-19 whilst at work;
- Staff well-being is adversely affected through concerns arising from COVID-19;
- The operational cost of addressing the pandemic cannot be contained within available funding resulting in a potential breach of the planned outturn for 2020-21; and
- Threats to the Strategic Outline Case for the Imperial Park building due to it currently having to store substantial levels of equipment for field hospitals that may now not be required, at least in the short-term.

NWSSP continues to work closely with a wide range of partners, including the Welsh Government as it continues with its response, and planning into the recovery phase. It will be necessary to ensure this is underpinned by robust risk management arrangements and the ability to identify, assess and mitigate risks which may impact on the ability of NWSSP to achieve its strategic objectives.

In addition to the risks arising as a result of the COVID-19 pandemic there are other risks facing the organisation. Some of these risks will have been exacerbated as a result of the COVID-19 response. The organisations risk profile relating to non-COVID-19 risks includes two red-rated risks as follows:

- Plans for the replacement of the NHAIS system to allow payments to be made to GPs; and
- The need to develop an in-house system for the payment of Opticians.

Both risks have seen some delay in mitigation due to the pandemic, but should be fully addressed in the first half of 2020/21.

The Shared Services Partnership Committee has overall responsibility and authority for NWSSP's Risk Management programme through the receipt and evaluation of reports indicating the status and progress of risk management activities.

The lead director for risk is the Director of Finance and Corporate Services who is responsible for establishing the policy framework and systems and processes needed for the management of risks within the organisation.

The Trust has an approved strategy for risk management and NWSSP has a risk management protocol in line with its host's strategy providing a clear systematic approach to the management of risk within NWSSP. The Risk Protocol was re-approved by the SMT in January 2020, and will be presented to the Audit Committee in April 2020 for further review.

NWSSP seeks to integrate risk management processes so that it is not seen as a separate function but rather an integral part of the day-to-day management activities of the organisation including financial, health and safety and environmental functions.

The Corporate Risk Register is reviewed monthly by the SMT who ensure that key risks are aligned to delivery and are considered and scrutinised by the SMT as a whole. The register is divided into two sections as follows:

- Risks for Action – this includes all risks where further action is required to achieve the target score. The focus of attention for these risks should be on ensuring timely completion of required actions; and
- Risks for Monitoring – this is for risks that have achieved their target score but which need to remain on the Corporate Risk Register due to their potential impact on the organisation as a whole. For these risks the focus is on monitoring both any changes in the nature of the risk (e.g. due to external environmental changes) and on ensuring that existing controls and actions remain effective (e.g. through assurance mapping).

It is the responsibility of each Director and Head of Service to ensure that risk is addressed within each of the locations relevant to their Directorates. It is also important that an effective feedback mechanism operates across NWSSP so that frontline risks are escalated to the attention of Directors.

Each Director is required to provide a regular update on the status of their directorate specific risk registers during quarterly review meetings with the Managing Director. All risks categorised as being red within individual directorate registers trigger an automatic referral for review by the SMT, and if deemed appropriate the risk is added to the NWSSP Corporate Risk Register.

Assurance maps are updated at least annually for each of the directorates to provide a view on how the key operational, or business-as-usual risks are being mitigated. The Audit Committee review all assurance maps annually.

A Risk Appetite statement has also been documented and approved by the Audit Committee. This covers nine specific aspects of NWSSP activity with a separate appetite score for each. The operationalisation of the risk appetite is through the target scores in the corporate and directorate risk registers. The Risk Appetite was reviewed again by the SMT in January 2020 to ensure that it remains appropriate, and was also presented to the Audit Committee in April 2020.

The annual internal audit of risk management was last undertaken at the end of 2018/19 and concluded that the level of assurance given as to the

effectiveness of the system of internal control in place to manage the risk associated with Risk Management was Substantial Assurance.

NWSSP's approach to risk management therefore ensures that:

- Leadership is given to the risk management process;
- Staff are trained on how to identify and manage risk;
- Risks are identified, assessed, and prioritised ensuring that appropriate mitigating actions are outlined on the risk register;
- The effectiveness of key controls is regularly assured; and
- There is full compliance with the Orange Book on Management of Risk.

## **5. THE RISK AND CONTROL FRAMEWORK**

NWSSP's commitment to the principle that risk is managed effectively means a continued focus to ensure that:

- There is compliance with legislative requirements where non-compliance would pose a serious risk;
- All sources and consequences of risk are identified and risks are assessed and either eliminated or minimised; information concerning risk is shared with staff across NWSSP and with Partner organisations through the Partnership Committee and the Audit Committee;
- Damage and injuries are minimised, and people health and wellbeing is optimised; and
- Lessons are learnt from compliments, incidents, and claims in order to share best practice and reduce the likelihood of reoccurrence.

### **5.1 Corporate Risk Framework**

The detailed procedures for the management of corporate risk have been outlined above. Generally to mitigate against potential risks concerning governance, NWSSP is proactive in reviewing its governance procedures and ensuring that risk management is embedded throughout its activities, including:

- NWSSP is governed by Standing Orders and Standing Financial Instructions which are reviewed on an annual basis;
- The Partnership Committee and Audit Committee both have forward work plans for committee business which provide an assurance framework for compliance with legislative and regulatory requirements;
- The effectiveness of governance structures is regularly reviewed including through Committee self-effectiveness surveys;
- The front cover pro-forma for reports for Committees includes a summary impact analysis section to be completed prior to submission. This provides a summary of potential implications relating to equality and diversity, legal implications, quality, safety

- and patient experience, risks and assurance, Wellbeing of Future Generations, Health and Care Standards and workforce;
- The Service Level Agreements in place with the Health Boards and NHS Trusts set out the operational arrangements for NWSSP's services to them and are reviewed on an annual basis;
  - NWSSP are proactive in completing the Welsh Government's Health and Care Standards framework and ensure that Theme 2 Safe Care provides a clear picture of NWSSP's approach to health, safety and risk management; and
  - The responsibilities of Directors are reviewed at annual Performance and Development Reviews (PADRs).

## **5.2 Policies and Procedures**

NWSSP follows the policies and procedures of the Trust as the host organisation. In addition, a number of workforce policies have been developed and promulgated on a consistent all-Wales basis through the Welsh Partnership Forum and these apply to all staff within NWSSP.

All staff are aware of and have access to the internal Intranet where the policies and procedures are available. In a number of instances supplementary guidance has been provided. The Trust ensures that NWSSP have access to all of the Trust's policies and procedures and that any amendments to the policies are made known as they are agreed. NWSSP participate in the development and revision of workforce policies and procedures with the host organisation and has established procedures for staff consultation.

The Partnership Committee will where appropriate develop its own protocols or amend policies if applicable to the business functions of NWSSP. The Managing Director and other designated officers of NWSSP are included on the Trust Scheme of Delegation.

## **5.3 Information Governance**

NWSSP has established arrangements for Information Governance to ensure that information is managed in line with the relevant ethical law and legislation, applicable regulations and takes guidance, when required from the Information Commissioner's Office (ICO). This includes established laws including Data Protection Legislation, Common Law Duty of Confidentiality, the Human Rights Act, the Caldicott Report and specific Records Management Principles. The implementation of the General Data Protection Regulations in May 2018 increased the responsibilities to ensure that the data that NWSSP collects, and its subsequent processing, is for compatible purposes, and it remains secure and confidential whilst in its custody.

The Director of Finance and Corporate Services is the designated Senior Information Risk Owner (SIRO) in relation to Information Governance for NWSSP and, due to NWSSP's hosted status, the Caldicott Guardian for decisions of a clinical nature is Mr Rhydian Hurle, Medical Director, who is employed by the NHS Wales Informatics Service (NWIS).

NWSSP has an Information Governance Manager who has the objective of facilitating the effective use of controls and mechanisms to ensure that staff comply with Information Governance fundamental principles and procedures. This work includes awareness by delivery of an online core skills training framework eLearning module on Information Governance, classroom based training for identified high risk staff groups, developing and reviewing policies and protocols to safeguard information, and advising on and investigating Information Governance breaches reported on the Datix incident reporting system.

The Information Governance Manager is responsible for the continuing delivery of an enhanced culture of confidentiality. This includes the presence of a relevant section on the intranet and a dedicated contact point (via ActionPoint) for any requests for advice, training or work.

NWSSP has an Information Governance Steering Group (IGSG) that comprises representatives from each directorate who undertake the role of Information Asset Administrators for NWSSP. The IGSG discusses quarterly issues such as GDPR and Data Protection Legislation, the Freedom of Information Act, Information Asset Ownership, Information Governance Breaches, Records Management, Training compliance, new guidance documentation and training materials, areas of concern and latest new information and law.

NWSSP has a suite of protocols and guidance documents used in training and awareness for all staff on the importance of confidentiality and to ensure that all areas are accounted for. These include email and password good practice guides, summarised protocols and general guidance for staff. There is also a documented Privacy Impact Assessment (or "Privacy by Design") process in place to ensure consideration of Information Governance principles during the early stages of new projects, processes or work streams proposing to use identifiable information in some form.

NWSSP has developed an Integrated Impact Assessment process to include broader legislative and regulatory assurance requirements, and the pro-forma includes the need to consider the impact of the protected characteristics (including race, gender and religion) on the various types of Information Governance protocols.

The Information Governance Manager attends various meetings including the Trust IG and IM&T Committee and the NHS Wales Information Governance Management Advisory Group (IGMAG) hosted by NHS Wales Informatics, attended by all NHS Wales Health Boards.

An annual report is produced on Information Governance within NWSSP. This was submitted to the SMT in September 2019, and will now be produced annually going forward. Information governance performance is also included in an overall Governance Report that was taken to the SMT in January 2020 for the first time, and will continue to be submitted quarterly in the future.

## 5.4 Counter Fraud

Counter Fraud support is incorporated within the hosting agreement with the Trust. Under this agreement, local Counter Fraud Services are provided to NWSSP by Cardiff and Vale UHB.

In addition, NWSSP lead the NHS Wales Counter Fraud Steering Group (CFSG), facilitated by Welsh Government, which works in collaboration with the NHS Counter Fraud Authority in NHS England to develop and strengthen counter fraud services across NHS Wales. The Director of Finance and Corporate Services chairs the group.

In 2018/19 the Group documented and approved a NHS Fighting Fraud Strategy for Wales. During 2019/20, the strategy has been signed off by Welsh Government and has been taken to all boards of Health Boards and Trusts in NHS Wales. An action plan to deliver the strategy has also been documented and is reviewed at the quarterly meetings of the CFSG. Work has also been undertaken to improve and enhance the quarterly reporting of both the Local Counter Fraud Specialists, and the Counter Fraud Services Wales Team. Reports are submitted to the meetings of the CFSG, and are then shared with both Welsh Government and the Directors of Finance Group for NHS Wales.

## 5.5 Internal Audit

The NWSSP hosting agreement provides that the Partnership Committee will establish an effective internal audit as a key source of its internal assurance arrangements, in accordance with the Public Internal Auditing Standards.

Accordingly for NWSSP, an internal audit strategy has been approved by the Audit Committee which provides coverage across NWSSP functions and processes sufficient to assure the Managing Director of Shared Services and in turn the Partnership Committee and the Trust as host organisation, on the framework of internal control operating within NWSSP.

The delivery of the audit plan for NWSSP culminates in the provision of a Head of Internal Audit opinion on the governance, risk and control processes operating within NWSSP. The opinion forms a key source of assurance for the Managing Director when reporting to the Partnership Committee and partner organisations.

In March 2018, the internal audit team was subject to a formal external quality assessment undertaken by the Chartered Institute of Internal Auditors. The opinion from this review was that:

*The Institute of Internal Audit's (IIA's) International Professional Practice Framework (IPPF) includes the Definition of Internal Auditing, Code of Ethics, Core Principles and International Standards. The Public Sector Internal Audit Standards are wholly aligned with these standards. There are 64 fundamental principles to achieve with 118 points of recommended*

*practice. It is our view that NWSSP Audit and Assurance Services conforms to all of these principles, and it is therefore appropriate for NWSSP Audit and Assurance Services to say in reports and other literature that it "conforms to the IIA's professional standards and to PSIAS".*

## 5.6 Integrated Medium Term Plan (IMTP)

NWSSP has continued with the medium term approach to planning and has undertaken a significant amount of work which continues to ensure it maintains progress to develop its three year IMTP. The IMTP is approved by the Partnership Committee and performance against the plan is monitored throughout the year. The key priorities in the plan during 2019/20 were largely achieved as were also the financial targets.

The IMTP is formally reviewed and amended annually and approved by the Partnership Committee in January each year prior to submission to Welsh Government. The planning process for the 2020-2023 IMTP commenced with a stakeholder away day in September 2019 and the completed IMTP was submitted to Welsh Government at the end of January 2020.

Welsh Government formally responded in March 2020 to confirm that the plan was satisfactory, and consistent with the requirements of the NHS Planning Framework 2019-22. However, in light of the current COVID-19 challenges, Welsh Government have paused the IMTP process to enable all resources to be redirected to sustaining and supporting key services. Pausing the process has meant that NWSSP were able to focus attention on the response to COVID-19. Welsh Government have stated that they will discuss any further implications for this year's plan and the next planning cycle at an appropriate time later in the year.

## 5.7 Health and Care Standards for NHS Wales

The Standards for Health Service in Wales provide a framework for consistent standards of practice and delivery across the NHS in 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 Health and Care Standards Framework comprises seven main themes and sub criteria against which NHS bodies need to demonstrate compliance.

The process for undertaking the annual self-assessments is:

- The Corporate Services Manager undertakes an initial evaluation;
- A draft self-assessment is then presented to the SMT for discussion and further consultation is undertaken at Directorate level;



- Feedback from each Directorate is reviewed and incorporated into the self-assessment pro-forma and is then re-presented to SMT for final approval
- Once approved, it is presented to the Partnership Committee, Audit Committee and the Trust Quality and Safety Committee.

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

A summary of the self-assessment ratings is outlined below:

Figure 9 – Self- Assessments Rating Against the Health and Care Standards 2019/2020

<b>Theme</b>	<b>Executive Lead</b>	<b>2019/2020 Self-Assessment Rating</b>	<b>2018/2019 Self-Assessment Rating</b>
<b>Governance, Leadership and Accountability</b>	Senior Management Team	4	4
<b>Staying Healthy</b>	Director of Workforce and Organisational Development	4	4
<b>Safe Care</b>	Director of Finance and Corporate Services  Director of Specialist Estates	4	4
<b>Effective Care</b>	Senior Management Team	4	4
<b>Dignified Care</b>	Not applicable	Not applicable	Not applicable
<b>Timely Care</b>	Not applicable	Not applicable	Not applicable
<b>Individual Care</b>	Senior Management Team	4	4
<b>Staff and Resources</b>	Director of Workforce and Organisational Development	4	4

*The overall rating against the mandatory Governance, Leadership and accountability module and the seven themes within the Health and Care Standards reflects NWSSP's overall compliance against the standards and has been rated as a 4 as outlined below:*

Figure 10 – NWSSP’s Overall Self-Assessment Score Health and Care Standards 2019/2020

<b>Assessment Level</b>	<b>1</b> We do not yet have a clear, agreed understanding of where we are (or how we are doing) and what / where we need to improve	<b>2</b> We are aware of the improvements that need to be made and have prioritised them, but are not yet able to demonstrate meaningful action	<b>3</b> We are developing plans and processes and can demonstrate progress with some of our key areas for improvement	<b>4</b> We have well developed plans and processes can demonstrate sustainable improvement throughout the organisation / business	<b>5</b> We can demonstrate sustained good practice and innovation that is shared throughout the organisations / business, and which others can learn from
<b>Rating</b>				✓	

## 6. MANDATORY DISCLOSURES

In addition to the need to report against delivery of the Standards for Health Services in Wales, NWSSP is also required to report that arrangements are in place to manage and respond to the following governance issues:

### 6.1 Equality, Diversity and Human Rights

NWSSP is committed to eliminating discrimination, valuing diversity and promoting inclusion and equality of opportunity in everything it does. NWSSP’s priority is to develop a culture that values each person for the contribution they can make to the services provided for NHS Wales. As a non-statutory hosted organisation within the Trust, NWSSP is required to adhere to the Trust Equality and Diversity Policy, Strategic Equality Plan and Objectives, which set out the Trust’s commitment and legislative requirements to promote inclusion.

NWSSP’s Corporate Services Manager chairs the NHS Wales Equality Leadership Group (ELG), who work in partnership with colleagues across NHS Wales and the wider public sector, to collaborate on events, facilitate workshops, deliver and undertake training sessions, issue communications and articles relating to equality, diversity and inclusion, together with the promotion of dignity and respect for all. During 2019-20, the ELG began scoping Once4Wales opportunities and committed to developing a work programme to support this agenda. NWSSP is proactive in supporting NHS Wales organisations with completion of their submission for all-Wales services, such as Procurement and Recruitment

The process for undertaking Equality Integrated Impact Assessments (EQIIA) has matured, and considers the needs of the protected characteristics identified under the Equality Act 2010, the Public Sector Equality Duty in Wales and the Human Rights Act 1998, whilst recognising the potential impacts from key enablers such as Well-being of Future Generations (Wales) Act 2015, incorporating Environmental Sustainability, Modern Slavery Act 2015 incorporating Ethical Employment in Supply Chains Code of Practice 2017, Welsh Language, Information Governance and Health and Safety. During 2019-20, reference was included to the Socio-Economic Duty, coming into force on 1 April 2020, to ensure NWSSP capture and mitigate any potential impacts arising from strategic decisions made, in a fair, effective and efficient manner.

Personal data in relation to equality and diversity is captured on the Electronic Staff Record (ESR) system and staff are responsible for updating their own personal records using the Electronic Staff Record Self-Service. This includes ethnicity; nationality, country of birth, religious belief, sexual orientation and Welsh language competencies. The NHS Jobs all-Wales recruitment service, run by NWSSP adheres to all of the practices and principles in accordance with the Equality Act and quality checks the adverts and supporting information to ensure no discriminatory elements are present.

NWSSP has a statutory and mandatory induction programme for its workforce, including the NHS Wales "Treat Me Fairly" e-learning module, which forms part of a national training package and the statistical data captured for NWSSP completion contributes to the overall figure for NHS Wales. A Core Skills for Managers Training Programme is provided and the Managing Conflict module includes an awareness session on Dignity at Work.

## **6.2 Welsh Language**

NWSSP is committed to ensuring that the Welsh and English languages are treated equally in the services provided to the public and NHS partner organisations in Wales. This is in accordance with the current Trust Welsh Language Scheme, Welsh Language Act 1993, the Welsh Language Measure (Wales) 2011 and the Welsh Language Standards [No7.] Regulations 2018.

The work of NWSSP in relation to Welsh language delivery and performance is reported to the Welsh Government, National Assembly and the Welsh Language Commissioner within the Annual Performance Report. This work is largely undertaken by the Welsh Language Officer and a team of Translators.

These posts enable compliance with the current obligations under the Welsh Language Scheme and in meeting the requirements of the Welsh Language Standards. This has increased the demand for translation services in the following areas:

- Service Delivery Standards;
- Policy Making Standards;
- Operational Standards;
- Record Keeping Standards; and
- Supplementary Standards.

NWSSP has made significant progress in developing and growing its Welsh language services by successfully offering all staff the opportunity to learn Welsh at work. The NWSSP website is bilingual and there has been investment in the development of a candidate interface on the TRAC recruitment system. NWSSP also offer language services to other organisations and have delivered translation and other language services to Public Health Wales, HEIW, and NWIS during 2019/20.

An annual report on performance with Welsh Language services is also produced and was submitted to the SMT in September 2019.

### **6.3 Handling Complaints and Concerns**

NWSSP is committed to the delivery of high quality services to its customers. The NWSSP Issues and Complaints Management Protocol is reviewed annually. The Protocol aligns with the Velindre University NHS Trust Handling Concerns Policy, the Concerns, Complaints and Redress Arrangements (Wales) Regulations 2011 and Putting Things Right Guidance.

During 2019-20, 30 complaints were received, of which:

- 12 complaints responded to within 30 working days (40%);
- 14 complaints responded to outside of 30 working days (47%);
- One complaint withdrawn (3%); and
- Three complaints which were ongoing at the time of writing (10%).

As detailed above, only 40% of the complaints received were responded to within the 30 working day target, which is a decrease in performance compared to 88% compliance during 2018-19, based on 25 complaints received.

Where responses were issued outside of the target, cases were particularly complex in nature and delays arose related to staff absence, specifically within Employment Services. However, in all instances holding letters were issued and/or telephone calls were made to the complainants explaining that NWSSP were still in the process of investigating the matters raised and that they would be provided with a substantive response as soon as the investigation had been concluded.

Of the complaints recorded, eight were found to be upheld, in their entirety, or in part. Three complaints were escalated to the Public Services Ombudsman Wales (PSOW) for independent investigation during 2019-20. However, in each case investigated, the PSOW found in the favour of NWSSP.

## 6.4 Freedom of Information Requests

The Freedom of Information Act (FOIA) 2000 gives the UK public the right of access to a variety of information held by public bodies and provides commitment to greater openness and transparency in the public sector, especially for those who are accountable for decisions made on behalf of patients and service users.

### **Figure 12 – Freedom of Information Requests 2019-2020**

There were **66** requests received within NWSSP during 2019/20, some of these were redirected to other bodies for response but those received were mostly handled within the prescribed 20 day time limit for requests. **3** requests were answered slightly over the deadline for compliance but this was due to the complexity of the information requested within those requests and the far ranging input required by other parties to agree the information to be supplied.

<b>FOI Breakdown</b>
<b>49</b> answered within the 20 day target
<b>14</b> transferred out to another NHS body
<b>3</b> responded to outside of the deadline

## 6.5 Data Security and Governance

In 2019/20, there were **42** information governance breaches reported within NWSSP; these included issues with mis-sending of email and records management. The majority of these were down to human error and despite education effectively provided to ensure awareness of confidentiality and effective breach reporting, unfortunately errors can happen.

Staff are encouraged to report all manner of confidentiality breaches regardless of whether they originate within the organisation or not as a concern. In 2019/20, **126** breaches were reported, of those **84** were incidents occurring outside NWSSP's control.

All breaches are recorded in the Datix risk management software which was upgraded and relaunched as RLDatix in January 2020, and investigated in accordance with the Information Governance and Confidentiality Breach Reporting protocols, which comply with the General Data Protection Regulation (GDPR). The protocols encourage staff to report those breaches that originate outside the organisation for recording purposes.

From this, the Information Governance Manager writes quarterly reports including relevant recommendations and any areas for improvement to minimise the possibility of further breaches. Members of the Information Governance Steering Group are required to report on any incidents in their areas to include lessons learned and any changes that have been made since an incident was reported.

There were no Information Governance breaches reported in 2019/20 that were assessed as being of a category serious enough to report to the Information Commissioner's Office (ICO) for further investigation.

## 6.6 ISO14001 – Environmental Management and Carbon Reduction

NWSSP is committed to managing its environmental impact, reducing its carbon footprint and integrating the sustainable development principle into day-to-day business. NWSSP successfully implemented ISO14001 as its Environmental Management System (EMS), in accordance with Welsh Government requirements and have successfully maintained certification since August 2014, through the operation of the Plan, Do, Check, Act model of continuous improvement.

Annual surveillance audits are undertaken to assess continued compliance with the Standard. The last external assessment was undertaken in August 2019. The ISO14001:2015 Standard, places greater emphasis on protection of the environment, continuous improvement through a risk process based approach and commitment to top-down leadership, whilst managing the needs and expectations of interested parties and demonstrating sound environmental performance, through controlling the impact of activities, products or services on the environment. NWSSP is committed to environmental improvement and operates a comprehensive EMS in order to facilitate and achieve the Environmental Policy.

### Carbon Footprint

We committed to reducing our carbon footprint by implementing various environmental initiatives and efficiencies at our sites within the scope of our ISO14001:2015 certification. As part of our commitment to reduce our contribution to climate change, a target of 3% reduction in our carbon emissions (year on year, from a baseline of carbon footprint established in 2016-17), was agreed and this was reflected within our Environmental Sustainability Objectives.

During 2019-20, we achieved our target and obtained a 4.39% reduction overall in CO2 emissions and where we did not meet our gas consumption targets, this was due to baseline reporting for additional sites, which is detailed in the narrative in our Sustainable Development Statement and Annual Review, which explore performance, achievements and highlights in further detail.

Area	2016/17	2017/18	2018/19	2019/20	Target	Target Achieved
Electricity CO2e	11% reduction	18% reduction	11.5% reduction	6% reduction	3% reduction	✓
Gas CO2e	13% increase	7% reduction	38% reduction	31.% increase	3% reduction	X
Water M3	51% increase	9% reduction	6% increase	50% reduction	3% reduction	✓
Waste CO2e	62% recycled/recovered	95% recycled/recovered	89% recycled/recovered	94.68% recycled/recovered	70% recycled/recovered	✓
Business Mileage Expenditure	6% reduction	15% reduction	11% increase	14% reduction	15% reduction by 2021	✓
Business Mileage	7% reduction	11% reduction	10% increase	19% reduction	15% reduction by 2021	✓
<b>Overall Carbon Footprint</b>	<b>5.37% Increase</b>	<b>3.78% Reduction</b>	<b>11.32% Reduction</b>	<b>4.39% Reduction</b>		

## **6.7 Business Continuity Planning/Emergency Preparedness**

The impact of COVID-19 has resulted in business continuity and emergency preparedness procedures being implemented. The scale of the crisis is unprecedented in living memory and consequently the documented procedures have had to be updated and tailored to reflect the actuality of the situation. These measures were implemented towards the end of the 2019-20 financial year and are likely to be in place for a significant proportion of 2020-21. To date, NWSSP has been able to continue to provide services to all its customers and while staff are working very differently, there has been very few things that have had to stop, and indeed some productivity levels are actually higher than they were before the crisis. The new ways of working are largely predicated on the use of technology to allow large numbers of staff to work remotely and more flexibly.

Notwithstanding COVID-19, NWSSP is proactive in reviewing the capability of the organisation to continue to deliver products or services at acceptable predefined levels following a disruptive incident. NWSSP recognise its contribution in supporting NHS Wales to be able to plan for and respond to a wide range of incidents and emergencies that could affect health or patient care, in accordance with requirement for NHS bodies to be classed as a Category 1 responders deemed as being at the core of the response to most emergencies under the Civil Contingencies Act (2004).

As a hosted organisation under the Trust, NWSSP is required to take note of their Business Continuity Management Policy and ensure that NWSSP has effective strategies in place for:

- People – the loss of personnel due to sickness or pandemic;
- Premises – denial of access to normal places of work;
- Information Management and Technology and communications/ICT equipment issues; and
- Suppliers internal and external to the organisation.

Specific and significant work was undertaken during 2019/20 in terms of the business continuity risks arising from the potential of a no-deal Brexit. NWSSP purchased additional warehouse facilities at Imperial Park, Newport, on the instruction of Welsh Government and increased stock levels to provide 12 weeks of stock, rather than the usual four. NWSSP took part in various testing scenarios and were a member of the Trust Brexit Planning Group, as well as being represented in regular meetings with Welsh Government and the Department of Health.

NWSSP is committed to ensuring that it meets all legal and regulatory requirements and has processes in place to identify, assess, and implement applicable legislation and regulation requirements related to the continuity of operations and the interests of key stakeholders. During 2019/20 the NWSSP Business Continuity Plan and supporting Business Impact

Assessments have been updated as necessary and Action Cards have been documented for the majority of specific scenarios within Directorates. A number of specific and mainly IT-related incidents have tested business continuity measures for real during the year, and particularly the current COVID-19 crisis. In addition though, incidents included the loss of the Blaenavon Data Centre in June 2019, for which a lessons learned paper was taken to the July Partnership Committee. The Business Continuity procedures were also the subject of an internal audit at the end of 2018/19 which resulted in a reasonable assurance opinion.

NWSSP continues to work towards implementing the Cyber Security Framework in order to address the specific needs of the service. This is an ongoing plan covering the areas of Identify, Protect, Detect, Respond and Recover. NWSSP have already started a number of work streams including Information Workflows and Governance, Awareness and Training, Procurement of Professional Incident Response Capability, Protective Technology through the SIEM Procurement Project and Business Continuity Planning workshops across the whole of the whole of Shared Services. NWSSP have also recently implemented a robust new virtualised infrastructure based on the tenets of the framework in order to provide a safe and secure environment for NWSSP business systems. Internal Audit have also recently undertaken a review of Cyber Security, and provided a rating of reasonable assurance.

## **6.8 UK Corporate Governance Code**

NWSSP operates within the scope of the Trust governance arrangements. The Trust undertook an assessment against the main principles of the UK Corporate Governance Code as they relate to an NHS public sector organisation in Wales. This assessment was informed by the Trust's assessment against the "Governance, Leadership and Accountability" theme of the Health and Care Standards undertaken by the Board. The Trust is clear that it is complying with the main principles of the Code, is following the spirit of the Code to good effect and is conducting its business openly and in line with the Code. The Board recognises that not all reporting elements of the Code are outlined in this Governance Statement but are reported more fully in the Trust's wider Annual Report. NWSSP have also completed the self-assessment on the "Governance, Leadership and Accountability" theme of the Health and Care Standards with a positive maturity rating of 4.

## **6.9 NHS Pension Scheme**

As an employer hosted by the Trust and as the Payroll function for NHS Wales, there are robust control measures in place to ensure that all employer obligations contained within the Scheme regulations for staff entitled to membership of the NHS Pension Scheme are complied with. This includes ensuring that deductions from salary, employer's contributions and payments into the Scheme are in accordance with the Scheme rules, and that member Pension Scheme records are accurately updated in accordance with the timescales detailed in the Regulations. During

2019/20, NWSSP responded to and implemented the requirements of the Ministerial Direction of December 2019 in respect of the tax implications for the pension schemes for clinicians.

## **7. MANAGING DIRECTOR'S OVERALL REVIEW OF EFFECTIVENESS**

As Accounting Officer, I have responsibility for reviewing the effectiveness of the system of internal control. My review of the system of internal control is informed by the work of the internal auditors, and the Directors and Heads of Service within NWSSP who have responsibility for the development and maintenance of the internal control framework, and comments made by external auditors in their audit letter and other reports.

As Accountable Officer I have overall responsibility for risk management and report to the NHS Wales Shared Services Partnership Committee regarding the effectiveness of risk management across NWSSP. My advice to the Partnership Committee is informed by reports on internal controls received from all its committees and in particular the Audit Committee.

Each of the Committees have considered a range of reports relating to their areas of business during the last year, which have included a comprehensive range of internal audit and external audit reports and reports on professional standards from other regulatory bodies. The Committees have also considered and advised on areas for local and national strategic developments and a potential expansion of the services provided by NWSSP. Each Committee develops an annual report of its business and the areas that it has covered during the last year and these are reported in public to the Trust and Health Boards.

### **Internal Audit Opinion**

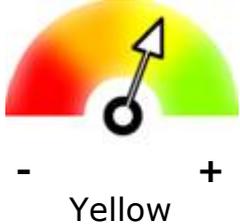
Internal audit provide me and the Partnership Committee through the Audit Committee with a flow of assurance on the system of internal control. I have commissioned a programme of audit work which has been delivered in accordance with Public Sector Internal Audit Standards by the Audit and Assurance function within NWSSP.

The scope of this work is agreed with the Audit Committee and is focussed on significant risk areas and local improvement priorities. The overall opinion of the Head of Internal Audit on governance, risk management and control is a function of this risk based audit programme and contributes to the picture of assurance available to the Board in reviewing effectiveness and supporting our drive for continuous improvement.

The programme has been impacted by the need to respond to the COVID-19 pandemic with some audits deferred, cancelled or curtailed as the organisation responded to the pandemic. The Head of Internal Audit is satisfied that there has been sufficient internal audit coverage during the reporting period in order to provide the Head of Internal Audit Annual

Opinion. In forming the Opinion the Head of Internal Audit has considered the impact of the audits that have not been fully completed.

The Head of Internal Audit opinion for 2019/2020 was that the Partnership Committee can take **Reasonable Assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, were suitably designed and applied effectively:

RATING	INDICATOR	DEFINITION
<b>Reasonable assurance</b>	 -                      + Yellow	The Committee can take <b>reasonable assurance</b> that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with <b>low to moderate impact on residual risk</b> exposure until resolved.

In reaching this overarching opinion the Head of Internal Audit has identified that the assurance domains relevant to NWSSP have all been assessed as providing reasonable assurance. During the year, no internal audit reports were issued with a rating of limited or no assurance.

### Internal Audit Review of Risk Management

Internal Audit undertook a review of Risk Management in 2018/19 to assess the effectiveness of the systems in place to manage and assure risks. This audit provides assurance to the Audit Committee that risks material to the achievement of system objectives are managed appropriately.

Internal Audit concluded that the level of assurance given as to the effectiveness of the system of internal control in place to manage the risk management framework was **Substantial Assurance**. This report was taken into account when completing the theme on the Governance, Leadership and Accountability Health and Care Standards self-assessment for 2019/20.

### Financial Control

NWSSP was established by Welsh Government to provide a range of support services to the NHS in Wales. As Managing Director and Accountable Officer, I retain overall accountability in relation to the financial management of NWSSP and report to the Chair of the Partnership Committee.

### NWSSP Financial Control Overview

There are four key elements to the Financial Control environment for NWSSP as follows:

- **Governance Procedures** – As a hosted organisation NWSSP operates under the Governance Framework of the Trust. These procedures include the Standing Orders for the regulation of proceedings and business. The statutory requirements have been translated into day-to-day operating practice, and, together with the Scheme of Reservation and Delegation of Powers and Standing Financial Instructions (SFIs), provide the regulatory framework for the business conduct of the Trust. These arrangements are supported by detailed financial operating procedures covering the whole of the Trust and also local procedures specific to NWSSP. During the current COVID-19 crisis the governance arrangements have been enhanced through the establishment of a Finance Governance Committee. This meets as and when required to consider and approve large scale and urgent requisitions. Membership of the Committee includes senior finance staff from NWSSP, the Velindre Director of Finance and an independent member of the Board, representatives from Counter Fraud, Accounts Payable and Legal and Risk Services. The Committee is chaired by the Director of Audit and Assurance Services, and Procurement colleagues (virtually) attend the Committee to give background and context to specific requisitions.
- **Budgets and Plan Objectives** – Clarity is provided to operational functions through approved objectives and annual budgets. Performance is measured against these during the year.
- **Service Level Agreements (SLAs)** – NWSSP has SLAs in place with all customer organisations and with certain key suppliers. This ensures clarity of expectations in terms of service delivery, mutual obligations and an understanding of the key performance indicators. Annual review of the SLAs ensures that they remain current and take account of service developments.
- **Reporting** – NWSSP has a broad range of financial and performance reports in place to ensure that the effectiveness of service provision and associated controls can be monitored and remedial action taken as and when required.

Through this structure NWSSP has maintained effective financial control which has been reviewed and accepted as appropriate by both the Internal and External Auditors.

## CONCLUSION

This Governance Statement indicates that NWSSP has continued to make progress and mature as an organisation during 2019/20 and that it is further developing and embedding good governance and appropriate controls throughout the organisation. No significant control weaknesses have been identified during the year. NWSSP has received positive feedback from Internal Audit on the assurance framework and this, in conjunction with other sources of assurance, leads me to conclude that it has a robust system of control.

As indicated throughout this statement, the need to plan and respond to the COVID-19 has had a significant impact on the organisation, wider NHS and society as a whole. It has required a dynamic response which has presented a number of opportunities in addition to the risks. The need to respond and recover from the pandemic will be with the organisation and wider society throughout 2020/21 and beyond. I will ensure our Governance Framework considers and responds to this need.

**Looking forward – for the period 2020/21:**

I confirm that I am aware of my on-going responsibilities and accountability to you, to ensure compliance in all areas as outlined in the above statements continues to be discharged for the financial year 2020/21.

Signed by:

Managing Director – NHS Wales Shared Services Partnership

Date: May 2020



***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**NWSSP Corporate Risk Update – May 2020**

<b>ARWEINYDD: LEAD:</b>	Peter Stephenson Head of Finance & Business Development
<b>AWDUR: AUTHOR:</b>	Peter Stephenson Head of Finance & Business Development
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	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**

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

**Ymgynghoriad/Consultation:**

The Senior Management Team (SMT) reviews the Corporate Risk Register on a monthly basis. In response to the COVID-19 outbreak, a separate Risk Register has been documented to cover specific risks relating to this.

Individual Directorates hold their own Risk Registers, which are reviewed at local directorate and quarterly review meetings.

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

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

# NWSSP CORPORATE RISK REGISTER UPDATE May 2020

## 1. INTRODUCTION

The Corporate Register is presented at **Appendix 1** for information. The COVID-19 Register is presented at **Appendix 2** for information.

## RISKS FOR ACTION

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

<b>Current Risk Rating</b>	<b>May 2020</b>
Red Risk	2
Amber Risk	6
Yellow Risk	3
Green Risk	0
<b>Total</b>	<b>11</b>

### 2.1 Red-rated Risks

#### ***Risk A1 - Demise of the Exeter Software System***

A Project Board has been established to oversee this risk, and this reports to a Programme Board covering the three main developments connected to NHAIS, namely GMS, GOS and PCRM. Work is on-going with the planned go-live date of 1 July 2020 still the target.

#### ***Risk A3 - NHS Digital are withdrawing the Ophthalmic Payment service from the end of March 2020.***

The in-house development of a replacement product, supported by an external consultant, has been adversely impacted by COVID-19. However, NHS Digital have extended their support until the end of September 2020, and the project has recommenced at pace since the end of April.

### 2.2 New Risks

#### ***Risk A10 - 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.***

NWSSP-SES Fire Safety Advisors undertook fire risk assessments for these buildings, which identified potential issues with the integrity of fire compartment walls. Consequently, NWSSP's local site managers commissioned an external contractor to undertake a Fire Stopping Survey Report for each site. The resultant survey reports produced by AEON (GB) Ltd identified a number of issues affecting the integrity of the fire compartment walls. In separate correspondence quotations have been provided by AEON to address the issues identified. Inclusive of VAT, the cost of addressing the issue at all three buildings would be approximately £100k.

All three buildings have:

- Automatic alarm and detection systems;
- Evacuation strategies based on simultaneous evacuation; and
- Multiple fire exit routes.

As a result of these attributes the threat to life risk due to the integrity of fire wall compartmentation is considered by the Fire Safety Officer to be very low as any fire will be quickly detected by the automatic alarm and detection system and staff will be able to promptly evacuate the building via one of the multiple fire exit routes.

Consequently, on the basis of the very low risk to life, NWSSP-SES Fire Safety Advisors consider it reasonable for NWSSP not to undertake these works. Nevertheless, addressing the compartmentation issues would help to protect the building and its contents in the event of a fire which might have significant operational benefits.

None of these buildings are directly owned by NWSSP and we have therefore written to the respective landlords with copies of the Fire Stopping Survey Report. Currently not all responses have been received, but those that have indicate that landlords are unwilling to undertake this work. Outstanding responses are being chased and a paper on this issue will be reviewed by the SMT at its May meeting.

## 2. RISKS FOR MONITORING

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

<b>Current Risk Rating</b>	<b>May 2020</b>
Red Risk	0
Amber Risk	0
Yellow Risk	1
Green Risk	1
<b>Total</b>	<b>2</b>

### 3. COVID-19 RISKS

A separate Risk Register has been documented for COVID-19 related risks and is included on the agenda for information. This register is reviewed and updated at the weekly meetings of the COVID-19 Planning and Response Group. The Register contains seven current risks, which are currently categorised as follows:

<b>Current Risk Rating</b>	<b>May 2020</b>
Red Risk	2
Amber Risk	5
Yellow Risk	0
Green Risk	0
<b>Total</b>	<b>7</b>

The two red risks relate to the following:

- ***There is a risk that the operational cost of addressing the pandemic cannot be contained within available funding*** – the costs of responding to COVID-19 are being accurately recorded and Welsh Government have indicated that these will be refunded, but this cannot be guaranteed.
- ***GP Trainees, who are employed by NWSSP, are exposed to a higher level of risk of catching COVID-19 but are outside the direct control and influence of NWSSP*** – this is a recently added risk which we have not yet had the chance to work through in terms of existing controls and required mitigations. Once this work is complete the risk profile may be able to be reduced.

### 4. ASSESSMENT/GOVERNANCE & RISK ISSUES

There is a significant risk to the NWSSP if robust governance arrangements are not in place for risk management and each Director has responsibility for notifying the SMT of any risks that could have a financial impact if arrangements are not in place to manage risk. If there are insufficient communication flows to manage risk then there could be a resulting adverse effect on NWSSP and its customers.

### 5. RECOMMENDATION

The Committee are asked to:

- **NOTE** to the Corporate Risk Register as at January 2020.

### 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				
<b>Risks for Action</b>												
A1	The Northern Ireland model procured to replace the NHAIS system fails to deliver the anticipated benefits within required timescales impacting the ability to pay GPs (Original risk added April 2017) <b>Escalated Directorate Risk</b>	4	5	20	Legal Counsel advice received. PMO Support Project and Programme Boards in place Heads of Agreement signed	4	4	16	Programme and Project Boards to review progress in lead-up to 1 July go-live date for GP payments.	The final business case has been approved by both the SSPC and the Velindre Trust Board at their most recent meetings and funding received from Welsh Government for Northern Ireland model. Go-live is scheduled for 1 July. <b>Risk Lead: Director of Primary Care Services</b>	↓	30-jun-20
A2	Failure to obtain clinical engagement in assessing non-stock requirements stemming from a no-deal Brexit (added Apr 2019) <b>Strategic Objective - Customers</b>	5	5	25	Storage facility in place (IP5) that has been adequately stocked to cope with a no-deal Brexit. Regular system testing being undertaken to test resilience. This risk aligns only to the replacement of the GMS payments element of NHAIS.	2	4	8	Taken decision to procure all critical non-stock items as a contingency.	Risk downgraded following election and subsequent withdrawal from EC. However, political situation needs to be monitored to ensure that risk does not re-occur if 31 December 2020 deadline for agreement not achieved. <b>Risk Lead: Director of Procurement Services</b>	↓	31-des-20
A3	NHS Digital are withdrawing the Ophthalmics Payment service from the end of March 2020. (Added June 2019) <b>Escalated Directorate Risk</b>	5	5	25	Contingency arrangements in place in the event of NHS Digital switching off services before new solution in place. Programme Board established.	3	5	15	Developing in-house solution making use of K2 software. This was used to develop the Student Awards Service. The decision to move to a bespoke development and not to engage with CAPITA relates mainly to the fact that WG sources suggest a move away from the traditional approach in delivering eye services into the community and the delivery of an updated contract in Wales.	Support from NHS Digital has been extended until end September 2020. COVID-19 has caused some delays with development, but project recommencing on 27/4. <b>Risk Lead: Director of Primary Care Services</b>	↓	30-sep-20
A4	NWSSP are unable to recruit and retain sufficient numbers and quality of staff for certain professional services (Procurement Services) resulting in a potential failure to meet desired performance targets and/or deliver service improvements. (Added April 2017) <b>Strategic Objective - Staff</b>	5	4	20	Staff Surveys & Exit Interviews Monitoring of turnover and sickness absence Workforce & OD Framework Work with Great With Talent to develop On-Boarder, Absence & Exit questionnaires (3, 6 and 12 months) Development of Clerical Bank Strengthened relationship with local universities Work-based degree opportunities in some professional services Use of Social Media Use of Recruitment Consultants Targeted Advertising - Trade Journals	4	3	12	Exit interviews to assess rationale for staff leaving employment - 31 Mar 2018 (HR) - on hold due to procurement tender exercise	Recruitment and retention remains a concern, particularly within professional posts primarily with the procurement services function.  Recruitment has improved in other professional functions.  Work is taking place with all services to have in pace agile recruitment and retention strategies to attempt to address these concerns, utilising available data and information. <b>Risk Lead: Director of Workforce and OD</b>	→	30-sep-20
A5	NWSSP's lack of capacity to develop our services to deliver further efficiency savings and introduce innovative solutions for NHS Wales and the broader public sector. (Added April 2017) <b>Strategic Objective - Service Development</b>	4	4	16	IMTP Horizon scanning days with SMT and SSPC to develop services Established new Programme Management Office (PMO) IT Strategy Regular reporting to SMT and SSPC	2	3	6	1. Implementation of project management software (AB) 2. Invest in Robotic Process Automation (AB)	1. Procurement pilot project completed - currently being rolled out in NWSSP 2. RPA pilot in progress - update to July SMT and further update to Dec 2019 SMT <b>Risk Lead: Director of Finance &amp; Corporate Services</b>	→	30-sep-20

<b>A6</b>	Lack of effective succession planning at a senior level will adversely impact the future and strategic direction of NWSSP due to the age profile of the SMT. (added April 2017 )	4	3	12	Workforce & OD Framework On-going development of existing staff to ensure a ready supply of staff to meet the maturing organisation's needs. Leadership Development Programmes	3	3	9	1. Develop a plan which includes likely key dates for each of the affected services and which prioritises succession planning based on proximity of risk (HR) 31 Dec 18 2. NHS Wales Leadership Programme - identify key staff with potential for future development and encourage them to undertake the leadership programme - (HR) 31 Dec 18 3. National Succession Strategy for NHS Wales - participate in the work of the national group and identify high performing staff who may be eligible for consideration to support succession planning requirements - (HR) 31 Dec 18	Recent appointments of senior staff have helped to address this risk. New Director of Legal & Risk Services appointed and Director of PCS to be appointed once COVID-19 crisis is past.	→	30-sep-20
	<b>Strategic Objective - Staff</b>									<b>Risk Lead: Director of Workforce and OD</b>		
<b>A7</b>	Suppliers, Staff or the general public committing fraud against NWSSP. (added April 2019)	5	3	15	Counter Fraud Service Internal Audit WAO PPV National Fraud Initiative Counter Fraud Steering Group Policies & Procedures Fraud Awareness Training Fighting Fraud Strategy & Action Plan	4	3	12	1. Increase level of counter fraud resource (AB 30/6/19) 2. Implement actions from Fighting Fraud Strategy (PS 30/9/19) 3. Formally present Counter Fraud Work Plan to SMT (AB 31/05/19)	Risk increased due to COVID-19 and significant increase in expenditure.K23	↑	30-sep-20
	<b>Strategic Objective - Value For Money</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
<b>A8</b>	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 Stratia Consulting Review IGSG Information Governance training Mandatory cyber security e-learn introduced Dec 19 Internal Audit review - Reasonable Assurance (April 2020)	2	5	10	Consider introduction of mandatory cyber security e-learn (AB 30/06/19) Follow up progress with Cyber Security Plan (AB 30/09/19) Complete actions from internal audit review of BCP (PS 30/09/19) Promote use of Self-Serve ESR (GH 30/09/19) Move all desktop devices to Windows 10 by the Windows 7 end of support (PS 30/06/20) Undertake further IA review of Cyber Security (PS 31/03/20)	Nick Lewis presented update to October 2019 Audit Committee and due to present to SMT. E-learn to be introduced December 2019 Windows 10 migration to be completed by June 20	→	30-sep-20
	<b>Strategic Objective - Service Development</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
<b>A9</b>	Risk to services provided at Mamhilad following notice that Landlord may look to sell site for housing from 2023. (added Nov 2019)	5	4	20	Additional space available in IP5.	3	3	9	Meeting scheduled for 18 November to discuss risk.	Meeting held as planned on 18 Nov. As not likely to happen until 2023, agreed to revisit at end of 2020 and consider space options in IP5.	→	31-des-20
	<b>Strategic Objective - Staff</b>									<b>Risk Lead: Director of Finance &amp; Corporate Services</b>		
<b>A10</b>	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. (added Feb 2020)	2	5	10	Fire Safety Officer Risk Assessment - assessed risk to life as low - Update Paper to Feb SMT.	2	5	10	Written to Landlords to remind them of their responsibilities to address this issue - thus far not wanting to take any further action. Paper to go to May 2020 SMT (ND)	Risk discussed at January SMT. Although risk to life has been assessed as low, NWSSP has a duty of care to its staff. Brecon House also stores patient records and any loss or damage caused by a fire would be difficult to manage.	*	30-jun-20
	<b>Strategic Objective - Staff</b>									<b>Risk Lead: Director of Workforce and OD</b>		
<b>A11</b>	Failure to comply with Welsh Language requirements and capacity to meet the increased demand for Welsh translation services resulting from the implementation of the Welsh Language Standards leading to reputational damage for NWSSP. (added April 2017)	3	4	12	Welsh Language Officer appointed Staff required to populate Welsh language skillset in ESR Welsh Language Translator appointed WL awareness is included within the face to face corporate induction training day Accredited WL training in place at several NWSSP sites WL monitoring report submitted to SMT External comms - WIAP project ensuring all web information is bilingual, graphic design, public events, etc	2	3	6	1. Undertake a Cost/benefits analysis to justify further investment in Welsh Language capacity - complete 2. Bilingual interface of TRAC recruitment software to be fully bilingual - complete 3. Investigate the potential for introducing a WL hub to provide support with translation for NHS Wales - complete 4. Undertake Internal Audit review of progress against Welsh Language Standards - complete. Reasonable Assurance.	Regular updates to SMT and additional resource recruited Jan 2019. Further recruitment exercise in May 2019 Reasonable Assurance from Internal Audit review. Undertaken joint recruitment with PHW and NWIS - 3 new translators appointed in June 2019 COVID-19 has resulted in many notices not being translated - allowed for under Welsh Language Standards Appealed a number of standards with Welsh Language Commissioner (Nov 19)	→	31-mar-20
	<b>Strategic Objective - Staff</b>									<b>Risk Lead: Director of Finance and Corporate Services</b>		
<b>Risks for Monitoring</b>												
<b>M1</b>	Disruption to services and threats to staff due to unauthorised access to NWSSP sites. (Added May 2018)	5	4	20	Manned Security at Matrix CCTV Locked Gates installed at Matrix. Security Review Undertaken (reported Dec 18) Increased Security Patrols at Matrix.	1	4	4	Continue to monitor.	Security Review undertaken and reported to SMT in Dec 2018. No major findings and all agreed actions implemented or superceded.	→	
	<b>Strategic Objective - Staff</b>									<b>Risk Lead; Director Specialist Estates Services/Director of Finance and Corporate Services</b>		

<b>M2</b>	Operational performance is adversely affected through the use of some out-of-date software systems, lack of consistent IT support across NHS Wales resulting in interoperability issues and the limited capacity of NWIS to meet the demand for IT development to develop our services. (added April 2017)	4	5	20	Created a Business Systems and Informatics Department Service Level Agreement (SLA) in place with NWIS Significant additional capital funding obtained from Welsh Government in prior year for IT investment	1	3	3	Continue to monitor.	Huge amount of work undertaken in recent weeks to provide staff with new laptops, VPN tokens and transition to Office 365.	↓	
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Key to Impact and Likelihood Scores						
		Impact				
		Insignificant	Minor	Moderate	Major	Catastrophic
		1	2	3	4	5
Likelihood						
5	Almost Certain	5	10	15	20	25
4	Likely	4	8	12	16	20
3	Possible	3	6	9	12	15
2	Unlikely	2	4	6	8	10
1	Rare	1	2	3	4	5
	<b>Critical</b>	Urgent action by senior management to reduce risk				
	<b>Significant</b>	Management action within 6 months				
	<b>Moderate</b>	Monitoring of risks with reduction within 12 months				
	<b>Low</b>	No action required.				

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

	New Risk
	Escalated Risk
	Downgraded Risk
	No Trend Change

### COVID-19 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				
<b>Risks for Action</b>												
A1	The total quantum for funding for addressing Covid-19 across Wales remains fluid and uncertain. There is a risk that the organisation's operational cost of addressing the pandemic cannot be contained within available funding resulting in a potential breach of the planned outturn for 2020-21.	5	5	25	Financial modelling and forecasting is co-ordinated on a regular basis; Financial reporting to Welsh Government on local costs incurred as a result of Covid-19 to inform central and local scrutiny, feedback and decision-making; Oversight arrangements in place at SMT level, and through the command structure. Financial Governance Committee considers VFM in all expenditure	4	5	20	Ensure that the costs directly associated with COVID-19 are identified and accurately captured. Provide regular updates to Welsh Government.	Costs of COVID-19 direct expenditure being accurately and regularly recorded.	â	30-Jun-20
A2	By requiring our staff to continue working we expose them to a greater risk of being infected with COVID-19 which may cause them significant health problems.	5	5	25	All staff encouraged to work from home where possible. Social Distancing measures in place in each office. Any staff displaying any symptoms told not to come into office or go home immediately. Testing for front-line staff Weekly Site Leads' meetings to assess position in each office. Provision of hand sanitisers and soap. Enhanced Cleaning services Notices in all buildings reminding of good hygiene practices. Regular SMT walk-arounds of all sites. COVID-19 Planning and Response Group More flexible building opening times	2	5	10	Continue to monitor effectiveness of current measures through Site Leads and the weekly Site Leads meeting. Recovery Group and Site Leads' Group to produce a Return to Work Plan. Undertake Risk Assessments for BAME and Pregnant staff.	Current measures seem to be effective. Large numbers of staff are working from home and social distancing measures are in place for those staff who need to continue to come into work. Daily reporting of absences shows that the numbers of staff reporting COVID-19 like symptoms continues to fall. The regular meetings of the Site Leads (now weekly but previously more frequently) provide on the ground information in real time and the Site Leads Meeting includes direct representation from the COVID-19 Planning and Response Group so that matters can be escalated appropriately. Risk assessment exercise is awaiting guidance and documentation from Welsh Government that is expected imminently.	ä	30-Jun-20
A3	NWSSP are unable to procure sufficient orders of PPE, medical consumables and equipment resulting in clical staff being able to treat patients safely and effectively.	5	5	25	Finance Governance Committee authorising expenditure on daily basis 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 undertaking consultancy work on behalf of WG to assist in this area.	2	5	10	Review findings of Deloitte report.	Procurement Staff have been working 24/7 to source supplies in very challenging markets. The establishment of the Finance Governance Committee, which includes representatives of the Velindre Board, has vastly sped up the approval of orders across NWSSP, Velindre and Welsh Government. Access to, and contribution in, Mutual Aid with the other home nations has helped to gain orders in difficult markets.	ä	30-Jun-20
A4	NWSSP are unable to continue to provide business-critical services due to having insufficient numbers of staff available and able to undertake the work.	5	5	25	Identification of all business-critical services Redeployment of staff to business-critical services Increased provision of laptops and VPN Roll-out of Office 365 Use of Bomgar service for PCS Daily monitoring and reporting of absence figures. Weekly IT Update meetings. IT Update also given to weekly COVID-19 Planning & Response Group	2	5	10	Escalate delays in implementing Citrix to senior staff in NWIS.	The daily report on staff absence shows that absence rates are falling. The investment in hardware and software has allowed large numbers of staff to work remotely with minimal problems thus far.	â	30-Jun-20
A5	Staff wellbeing is adversely affected through concerns arising from COVID-19 either directly in terms of their health and that of their families, or financially from loss of income of a family member.	5	5	25	Regular communications to all staff Reminders of how to access Employee Assistance schemes Mental Health First Aiders Formal Peer Group with phone surgery times (includes Trade Union Leads)	2	5	10	All Directors to record video messages for their staff. Undertake Staff Surveys	As previously stated, absence rates are falling linked to COVID-19 symptoms. Communications are being issued on a regular basis and all Directors and Managers are tasked with regularly checking the health and well-being of their staff.	ä	30-Jun-20

<b>A6</b>	Current reduction in the need for Field Hospitals is leaving IP5 full of surplus equipment which impacts current and future plans for its strategic use.	4	4	16	IP5 Board	3	4	12	Seek clarification from Welsh Government on future plans for Field Hospitals. Undertake wider consideration of the IP5 SOC alongside the future requirement for equipment needed to deal with emergency situations. Paper to SSPC Board 21/05/2020	The IP5 Board considered this matter at its meeting on 13/5/2020. Some equipment has now been removed from the site and Stephen Harry is leading the COO Group to consider the kitting out of field hospitals.	â	30-Jun-20
<b>A7</b>	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.	2	5	10	ML, SE, GH & L&R representative to meet to discuss how best to get assurance over the Risk Assessments undertaken by the Education Supervisor.		ä	30-Jun-20
										<b>Risk Lead: Director of Procurement Services</b>		
										<b>Risk Lead: Director of Workforce and OD</b>		

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

<input type="checkbox"/>	New Risk
<input type="checkbox"/>	Escalated Risk
<input type="checkbox"/>	Downgraded Risk
<input type="checkbox"/>	No Trend Change

Key to Impact and Likelihood Scores						
		Impact				
		Insignificant	Minor	Moderate	Major	Catastrophic
		1	2	3	4	5
Likelihood						
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	<b>Low</b>	No action required.				

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

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



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:**  
**21 May 2020**

***The report is not Exempt***

**Teitl yr Adroddiad/Title of Report**

**Annual Report Issues and Complaints 2019-20**

**ARWEINYDD:**

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**LEAD:**

Head of Finance & Business Development

**AWDUR:**

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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 as to complaints received by the NWSSP during the financial year, 1 April 2019 to 31 March 2020.

**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 Complaints Management Protocol and associated literature is in the process of being reviewed and updated. This will be subject to an Equality Integrated Impact Assessment and consultation of the NWSSP SMT.

**Adduned y Pwyllgor/Committee Resolution (insert ✓):**

**DERBYN/  
APPROVE**

**ARNODI/  
ENDORSE**

**TRAFOD/  
DISCUSS**

**NODI/  
NOTE**

✓

**Argymhelliad/  
Recommendation**

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

<b>Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:</b>	
<b>Cydraddoldeb ac amrywiaeth: Equality and diversity:</b>	No direct impact.
<b>Cyfreithiol: Legal:</b>	<p>Regulation 51 of the “National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 (“the Regulations”)” provides that each responsible body in NHS Wales must prepare an annual report on complaints. The report must contain, as a minimum:</p> <ul style="list-style-type: none"> <li>• Number of concerns received (including, in the case of Welsh NHS bodies, concerns reported under Part 7 of the Regulations related to cross border services);</li> <li>• The number of concerns deemed well founded; and</li> <li>• The number of concerns referred to the Public Services Ombudsman for Wales.</li> </ul> <p>This report provides assurance to the Committee that NWSSP is dealing with and learning from concerns in accordance with the Regulations.</p>
<b>Iechyd Poblogaeth: Population Health:</b>	No impact.
<b>Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety &amp; Patient Experience:</b>	The provisions of the Protocol ensure that NWSSP’s services are delivered in a satisfactory manner and support Health Bodies in delivering an excellent service; which will contribute to improving quality, safety and patient experience.
<b>Ariannol: Financial:</b>	Not applicable.
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides assurance to the Committee that NWSSP has robust governance processes in place.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	The provision of high quality, safe and reliable care is dependent on good governance, leadership and accountability, which feature as overarching principles of the quality themes outlined in the Health and Care Standards.
<b>Gweithlu: Workforce:</b>	No impact.
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open. The information is disclosable under the Freedom of Information Act 2000.

## **1. BACKGROUND**

NWSSP has arrangements that it follows to manage complaints in order to meet the requirements of the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011) and "Putting Things Right" arrangements in accordance with the Velindre University NHS Trust Handling Complaints Policy.

On 2 July 2014, Welsh Government published the "Review of Concerns (Complaints) Handling with NHS Wales – "Using the Gift of Complaints" report, which made more than 100 recommendations on strengthening the NHS complaints process. In light of this, and with reference to the handling of Complaints within NHS Wales (2015), the NWSSP Issues & Complaints Management Protocol was revised with the objective of standardising the complaints process for all services within NWSSP so that complaints can be handled consistently and recorded accurately.

The Issues and Complaints Management Protocol incorporates specific guidance on identifying if a complainant is to be categorised as vexatious and how such complaints are managed. It also raises awareness for members of the public on how NWSSP deals with all kinds of complaints, as published on the NWSSP website:

<http://www.nwssp.wales.nhs.uk/issues-and-complaints>.

## **2. GOVERNANCE AND ASSURANCE ARRANGEMENTS**

Regulation 51 of the "National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 ("the Regulations")" states that each responsible body in NHS Wales must prepare an Annual Report on complaints. The report must contain, as a minimum:

- Number of concerns received (including, in the case of Welsh NHS bodies, concerns reported under Part 7 of the Regulations related to cross border services);
- Number of concerns deemed well founded; and
- Number of concerns referred to the Public Services Ombudsman for Wales.

This report provides assurance to the SSPC that NWSSP is dealing with and learning lessons from concerns brought to the attention of the organisation, in accordance with the specified Regulations.

## **3. SUMMARY OF COMPLAINTS AND ISSUES RECEIVED**

During 2019-20, 30 complaints were received, of which:

- 12 complaints responded to within 30 working days (40%);

- 14 complaints responded to outside of 30 working days (47%);
- One complaint withdrawn (3%); and
- Three complaints were ongoing at the time of writing (10%).

Of the complaints recorded, eight were found to be upheld, in their entirety, or in part.

Three complaints were escalated to the Public Services Ombudsman Wales (PSOW) for independent investigation during 2019-20. However, in each case investigated, the PSOW found in favour of NWSSP.

### Complaints

During the reporting period for 2019-20, 30 formal complaints were received and recorded by Corporate Services. This compares with 27 complaints received in the same reporting period during the 2018-19 financial year.

As detailed above, 40% of the complaints received were responded to within the 30 working day target, which is a decrease in performance compared to 89% compliance during 2018-19.

The majority of complaints received relate to the Employment Services directorate and specifically in relation to Payroll Services. We note that this is a sensitive and emotive area for individuals and that the concerns received represent only a minor percentage of the transactions processed by the service across NHS Wales. Further, a contributory factor was staff absence, in relation to the Student Awards Service, in particular.

Corporate Services continue to work with the Employment Service Improvement Team in order to capture lessons learned to mitigate the need for escalation to a corporate level complaint and to standardise our responses, for consistency and customer service.

### Issues

Additionally, there were 13 matters that were categorised as issues, which were locally resolved, thus negating the requirement for a formal complaint to be made during 2019-20. 13 issues were also received in the same reporting period during the 2018-19 financial year.

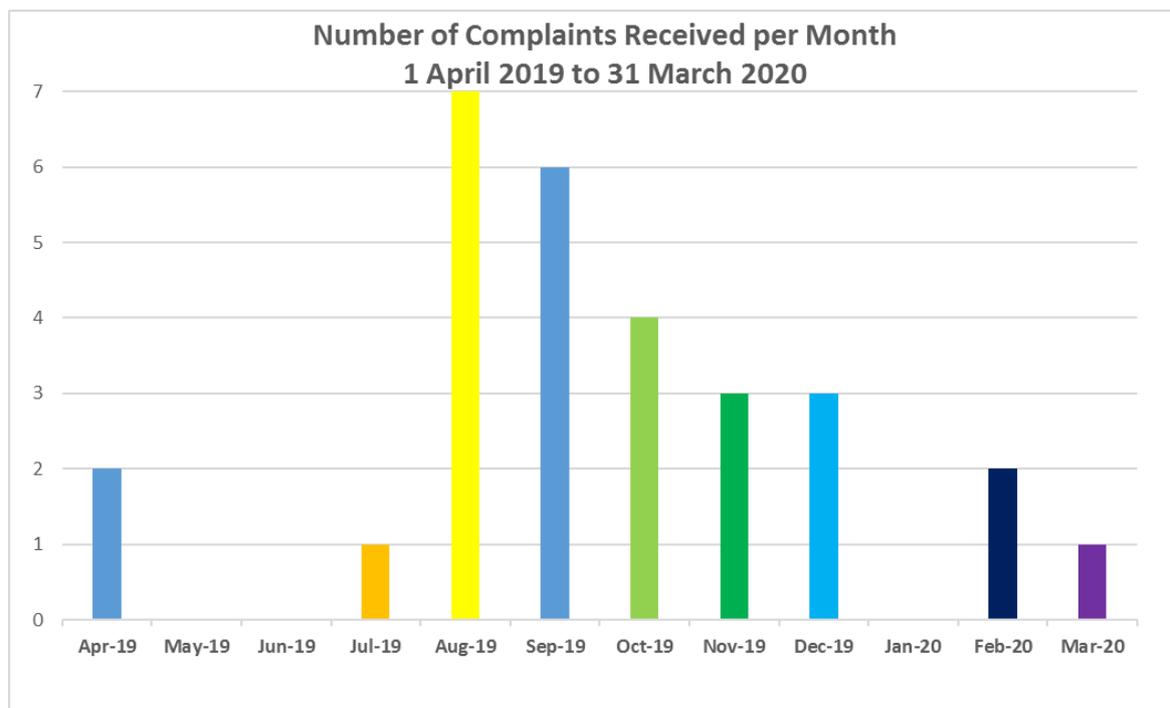
The pie chart in **Figure 1**, overleaf, categorises the complaints received per directorate:

Figure 1 – Total complaints received by directorate from 1 April 2019 to 31 March 2020



The graph in **Figure 2**, overleaf, categorises the complaints received per month:

Figure 2 – Total complaints received per month from 1 April 2019 to 31 March 2020



The graph in **Figure 3** below compares the trends in complaints and issues recorded from 2016-17, to date.

Figure 3 – Comparison of Annual Complaints and Issues Figures 2016-2020

Reporting Year	Complaints Received	Complaints % Difference	Trend	Issues	Issues % Difference	Trend	PSOW Referral	Response in 30 Working Days
2019-20	30	11%	↑	13	0%	→	3	40%
2018-19	27	93%	↑	13	44%	↑	0	89%
2017-18	14	100%	↑	9	80%	↑	1	71%
2016-17	7	Baseline	→	5	Baseline	→	0	71%

#### 4. TIMELINESS OF RESPONSE

The Protocol stipulates that all complaints will be acknowledged within two working days of receipt of the initial contact and that a full response to the points raised (where applicable), will be issued within 30 working days, excluding weekend and bank holidays.

During the period 1 April 2019 to 31 March 2020, all complaints received were acknowledged within the two working day target. However, only 40% of the complaints received were responded to within the 30 working day target, compared to 89% in 2018-19. This evidences a decrease in our timeliness of our investigations and responses, of which contributory factors are detailed within this report.

14 responses were issued outside of the target, being responded to between 31 and 78 working days respectively, due the nature of their complexity and/or third party involvement. However, it should be noted that in all instances, holding communications were issued to the complainants detailing that NWSSP were still in the process of investigating the matters raised and that they would be provided with a substantive response as soon as the investigation had been concluded.

#### 5. NATURE OF COMPLAINTS

A brief summary of the nature of the complaints received is set out below:

##### Employment Services:

- Seven complaints relating to Student Awards Services' bursary scheme and funding eligibility;
- Four complaints relating to Recruitment Services;
- 16 complaints relating to Payroll/Pension Services, included:
  - 4 x Eligibility for Widening Access Training Scheme (3 x ABUHB / 1 x SBUHB);
  - ABUHB Payroll Services TUPE Process and Tax Underpayment;

- ABUHB Payroll Services HMRC / Tax Code Issues;
- ABUHB Payroll Services P60 Issue;
- ABUHB Payroll Services Sickness Absence;
- ABUHB Payroll Services Overpayment;
- ABUHB and SBUHB Payroll Services Continued Overpayments;
- SBUHB Payroll Services Underpayment;
- BCUHB Payroll Services Maternity Pay;
- CAVUHB Payroll Services Underpayment;
- CAVUHB Payroll Services Maternity Pay;
- ABUHB Payroll and Pension Services for Deceased Employee, following Overpayment generated; and
- PTHB Pension Services regarding Retrospective Pay Protection.

#### Workforce and Organisational Development

- One complaint relating to GP Single Lead Employer Scheme on-boarding process

#### Primary Care Services

- One complaint relating to removal from multiple GP Surgeries (Vexatious Complainant); and

#### Legal and Risk Services

- One complaint relating to method of communication, subsequently withdrawn (Vexatious Complainant).

## **6. PUBLIC SERVICES OMBUDSMAN WALES**

Three complaints were escalated to the Public Services Ombudsman Wales (PSOW) for independent investigation during 2019-20. However, in each case investigated, the PSOW found in favour of NWSSP.

## **7. RAISING AWARENESS OF THE IMPORTANCE OF EFFECTIVE COMPLAINTS MANAGEMENT**

In order to continue raising awareness of the Protocol and associated process to ensure effective complaints management in the future:

- Corporate Services are currently in the process of conducting the 2020 review of the NWSSP Issues and Complaints Management Protocol, associated literature and templates. The subsequent findings of this review will be taken to a future formal SMT meeting;
- Corporate Services develop refresher training for staff on effective handling of concerns. In-depth and specific training sessions are to be provided upon request (e.g. directorate specific/working group based). Sessions targeted at staff responsible for managing complaints and investigations of issues reported to highlight expectations, processes and compliance deadlines; they also provide a platform for feedback to be received from an operational level;
- Nominated individuals within directorates to review previous concerns raised within their service area to capture outcomes/lessons learned and to share knowledge/achieve best practice as to effective

- complaints management, in particular working closely with Employment Services' Service Improvement Team; and
- Once reviewed, the Protocol will be re-circulated to staff, together with communications published in the Rhannu internal staff newsletter, to further raise awareness. It is recognised that even those without responsibility for dealing with complaints need to be aware of the correct course of action, should they receive a complaint from a patient, service user, employee or another party.

## **8. RECOMMENDATION**

The SSPC are asked to:

- **NOTE** the Issues & Complaints Annual Report



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

## NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 10 – JANUARY 2020

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for January 2020 and should be read in conjunction with the Monitoring Return tables submitted for Month 10.

Thank you for your letter of 22<sup>nd</sup> January 2020 responding to the Month 9 monitoring return submission. The action points raised have been addressed within this return and further information provided where requested

### Overview of Performance and Financial Position

NWSSP's financial position for Period 10 and the full year forecast is reported at break-even. This is after providing for the 2019/20 savings distribution of £0.750m per the submitted IMTP and an additional in year distribution of £1.250m as detailed below:

	%	PLANNED DISTRIBUTION £	ADDITIONAL DISTRIBUTION £	TOTAL DISTRIBUTION £	Agreed Recurrent Reinvestment £	Agreed Non-Recurrent Reinvestment £	TOTAL 2019/20 CASH DISTRIBUTION £
Aneurin Bevan	9.85	73,844	123,125	<b>196,969</b>			196,969
Swansea Bay	8.80	66,029	110,000	<b>176,029</b>			176,029
Betsi Cadwaladr	11.98	89,815	149,750	<b>239,565</b>	-89,815	-20,000	129,750
Cardiff and Vale	10.49	78,652	131,125	<b>209,777</b>			209,777
Cwm Taf	10.60	79,527	132,500	<b>212,027</b>			212,027
Hywel Dda	7.77	58,293	97,125	<b>155,418</b>	-58,293		97,125
Powys	1.95	14,598	24,375	<b>38,973</b>	-14,598		24,375
Velindre	1.17	8,781	14,625	<b>23,406</b>			23,406
WAST	1.28	9,580	16,000	<b>25,580</b>	-9,580		16,000
Public Health Wales	0.87	6,530	10,875	<b>17,405</b>	-6,530		10,875
Welsh Government	35.25	264,351	440,500	<b>704,851</b>	-264,351		440,500
<b>Total</b>	<b>100%</b>	<b>750,000</b>	<b>1,250,000</b>	<b>2,000,000</b>	<b>-443,167</b>	<b>-20,000</b>	<b>1,536,833</b>

1. **Actual Year to Date and Forecast Under/Overspend 2019/20 (Tables A, B & B2)**

Table A has been amended in Month 10 to report the updated value for income generation and a revised full year forecast of funds for reinvestment/redistribution as a result of the actual achievement of non-recurrent savings in Month 10 linking through from Table C.

The actual position for month 10 has been reported with the forecast position for months 11-12. This continues to identify a projected full year outturn at break-even in line with year 1 of our IMTP assumptions.

The key points to note within the actual and forecast position at Month 10 are:

- Depreciation charges of £2.342m have been forecast for 2019/20. This includes £0.019m of accelerated depreciation in respect of assets with an NBV when Cwmbran Stores was closed this financial year. This is marginally less than the depreciation forecast in November due to the indexation adjustment being actioned in the fixed asset register and a number of capital purchases being delayed until quarter 4. Income from WG of £0.791m has been anticipated in Table E in respect of the charges over and above the baseline depreciation funding of £1.551m (**Action Point 9.5**).
- £81.403m income and expenditure is included to Month 10 in relation to the WRP DEL and redress budgets. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts.

The WRP forecast outturn has been updated at the close of Month 10. This identifies the most likely outturn being forecast at £112.598m which is included in Table B (£115.298m including redress).

WG have confirmed PIDR funding of £27.880m for 2019/20. Previous calculations had assumed funding of £26.000m. Given the uncertainty surrounding the final settlement figure for a number of large cases during February, the element to be funded under the risk sharing agreement remains at £9.718m for Month 10 despite this additional funding and has been anticipated in Table E. This updated position will be reported to DoFs at the next meeting on 21<sup>st</sup> February 2020. We have again shared the updated forecast at the close of Month 10 with UHB/Trust colleagues with the aim that they will have sufficient time to include in their month 10 returns also.

The balance of the 2019/20 forecast expenditure has been profiled equally over months 11-12. The associated income has also been reprofiled in

Table B between Welsh Government and NHS bodies to reflect the income to be received under the risk sharing agreement.

The redress forecast outturn remains at £2.7m in Month 10. This is greater than the £1.259m funding allocated. The additional £1.441m will need to be funded by Welsh Government now that the risk sharing agreement is likely to be invoked and the full £2.7m has been anticipated in Table E.

- £2.189m of income and expenditure has been included in respect of ESR Enhance based on the most recent recharge profile received from the Department of Health. This may change before the end of the financial year when the final quarter charge is received.
- An estimate of the GP trainee expenditure and the associated charges to LHBs/Trusts/HEIW (£30.445m) has been made within the forecast although may fluctuate with the recruitment to new GP training posts, the payment of the GP incentive and the rotation in February.
- An estimate of Stores expenditure and charges to NHS Wales of £35.685m have been included within the forecast. This excludes any issues that may arise through the utilisation of the Brexit stock. We understand discussions are continuing between WG and Velindre regarding the cash impact on Velindre as a result of holding this additional stock.
- Non pay in December was greater than originally projected primarily due to the quarterly pharmacy rebates being more than forecast. This was offset by a corresponding increase in income in the month (**Action Point 9.1**)

## 2. Underlying Position (Table A1)

There is no brought forward deficit to report for NWSSP and following the identification of further recurrent savings the carry forward position is now break-even also. The non-recurrent savings, funding and income generation linked through from Table A have been in the main offset with non-recurrent pressures (primarily NWSSP reinvestment requirements/additional distribution) that will not be carried forward.

**3. Ring Fenced Funding (Table B)**

Baseline depreciation funding of £1.551m has been invoiced. The current forecast charges for 2019/20 for approved schemes total £2.342m, indicating additional funding of £0.791m will be required.

**4. Net Expenditure Profile Analysis (Table B1)**

This table has been populated with the actual and forecast information. As we are required to report a neutral position within the Velindre ledger each month, the non pay forecast will change from plan due to the break-even accrual made each month to report the position.

Table B1 has been updated in Month 10 to reflect the actual pay and non pay variances reported per the ledger and continues to report an overall break-even position between the two categories in the full year forecast.

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

Agency expenditure of £0.081m, 1.1% of in month total pay expenditure (1.0% year to date), was reported in Month 10 due to the requirement to cover vacancies and additional workload.

The reduction in admin and clerical agency usage in Month 9 was reported due to a genuine reduction in usage in December combined with a review of all older agency accruals being made (**Action Point 9.2**).

**6. Savings Plans (Tables C, C1, C2 & C3)**

These tables have been updated in Month 10 to reflect the actual savings achieved. Further non-recurrent savings were achieved in month due to continued turnover and slippage in appointing to vacancies.

A review of the non pay spend savings scheme has been undertaken in month. This has been historically used to balance to the overall non pay variance reported in the ledger. It is now recognised that non pay pressures should be included in Table A rather than netted off from Table C3 and this methodology will be revised next financial year (**Action Point 9.3**)

**7. Income Assumptions 2019/20 (Tables D & E)**

A small number of minor changes have been made to Table D in Month 10.

Table E has been populated with the budgeted income streams by NHS Organisation with a number of additional income streams included that have been anticipated within our forecast financial position. These totals will not reconcile to the NHS Income reported in Table B or the NHS Income & Expenditure reported in Table D. This is due to the ledger reporting of intra-trading within Velindre, classification of non-material NHS recharges against pay/non pay per the manual for accounts and solicitor income not recorded against NHS income subjectives.

The WRP risk sharing anticipated income remains at £9.718m in Table E and the PIDR funding has been increased to the confirmed level of £27.880m. The anticipated depreciation funding has also reduced to £0.791m per our final identified depreciation requirements.

Anticipated income of £0.250m for GP Indemnity claims remains in Table E due to the existence of one potential claim which may settle this financial year. Due to the timescales before the end of the financial year, there is only a small possibility this may be paid and we will be able to provide an update on this in the Month 11 return.

#### **8. Healthcare Agreements & Major Contracts**

Not applicable to NWSSP.

#### **9. Risk Management (Table F)**

The risks identified within our IMTP have been included within Table F and the values and risk levels have been reviewed again in month 10. As we progress through the financial year some of the risks have been reduced further again this month given we now have more certainty on the likelihood of these risks materialising as we approach the end of the financial year (**Action Point 9.6**)

#### **10. Statement of Financial Position and Aged Welsh NHS Debtors (Tables G & N)**

NWSSP has not been requested to complete Table G.

At the close of Month 10, there were 8 invoices exceeding 17 weeks. Five of these have now been paid, agreed to be paid or credited in early February.

Continued increased efforts are being made to clear as many NHS invoices as possible before the year end (**Action Point 9.4**)

**11. Cash Flow Forecast (Table H)**

This table is not required for NWSSP.

**12. Public Sector Payment Compliance (Table I)**

This table is not required for NWSSP, although it is pleasing to report that the unadjusted NWSSP PSPP achievement for Month 10 was 95.94% for Non NHS invoices and 82.50% for NHS invoices.

**13. Capital Schemes & Other Developments (Tables J, K & L)**

These tables have been updated in Month 10 to reflect in month spend and any revised spend profiles against the updated CEL issued on 7<sup>th</sup> February 2020.

Whilst there is a significant percentage of our spend forecast to be incurred in quarter 4, the majority of our capital funding was received later in the financial year and we do not anticipate any issues with meeting our CEL in 2019/20.

**14. EFL (Table M)**

This table is not required for completion by NWSSP.

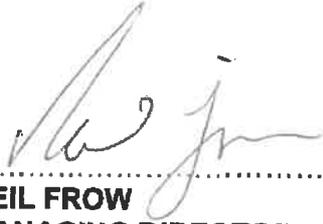
**15. Other Issues**

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 Management Team reports.

It is pleasing to be able to set a balanced budget for 2019/20 and to report a positive month 10 position with confidence in the achievement of our break-even IMTP and the increased 2019/20 savings distribution of £2.000m to NHS Wales.

The Shared Services Partnership Committee will receive the Month 10 Financial Monitoring Return, together with the Month 9 and 11 returns, at the next meeting on 24<sup>th</sup> March 2020.

**16. Authorisation of Return**



.....  
**NEIL FROW  
MANAGING DIRECTOR  
NWSSP**

**11<sup>th</sup> February 2020**



.....  
**ANDY BUTLER  
DIRECTOR OF FINANCE  
NWSSP**

# NHS Wales Shared Services Partnership

Period : Jan 20

**Table A - Movement of Opening Financial Plan to Forecast Outturn**

This Table is currently showing 0 errors

Line 11 should reflect the corresponding amounts included within the latest IMTP submission to WG  
 Lines 1 - 11 should not be adjusted after Month 1

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2 New Cost Pressures - as per 3 year plan (Negative Value)	-6,991	-4,544	-2,447	-2,447
3 <b>Opening Cost Pressures</b>	<b>-6,991</b>	<b>-4,544</b>	<b>-2,447</b>	<b>-2,447</b>
4 Identified Savings Plan (Positive Value)	1,031	223	808	808
5 Savings / Mitigating Actions Yet To Be Identified (Positive Value)				
6 Welsh Government Funding (Positive Value)	821	547	274	274
7 Net Income Generated (Positive Value)	0	0	0	0
8 Planned Accountancy Gains (Positive Value)	0	0	0	0
9 Release of Uncommitted Contingencies & Reserves (Positive Value)				
10 Income Generation per IMTP	5,139	3,962	1,177	1,177
11 <b>Opening Financial Plan</b>	<b>0</b>	<b>188</b>	<b>-188</b>	<b>-188</b>
12 Cost Pressures b/fwd from Previous Year - unidentified within 3 year plan (Negative Value)				
13 Opening Plan Savings - Forecast (Underachievement) / Overachievement	2,281	2,281	0	108
14 Additional In Year Identified Savings - Forecast (Positive Value)	224	146	78	80
15 Additional In Year Identified Accountancy Gains (Positive Value)	0	0	0	0
16 Additional Net Income Generated (Positive Value)	482	482	0	0
17 Non Identification of Savings / Mitigating Actions Yet To Be Identified in Opening Plan	0	0	0	0
18 Release of Previously Committed Contingencies & Reserves (Positive Value)	0			
19 Additional In Year Welsh Government Funding (Positive Value)	0			
20 Non recurrent NWSSP reinvestment	-1,274	-1,274		
21 Non pay pressures	-463	-463		
22 NWSSP Distribution	-1,250	-1,250		
23	0			
24	0			
25	0			
26	0			
27	0			
28	0			
29	0			
30	0			
31	0			
32	0			
33	0			
34	0			
35	0			
36	0			
37	0			
38 <b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>0</b>	<b>110</b>	<b>-110</b>	<b>0</b>

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
18													0
19													0
20	-174	-155	-248	-246	-411	-401	-105	-240	-199	905			-1 274
21	-10	-32	-10		-42		-70	-102	-72	-125			-463
22										-1,250			-1,250
23													0
24													0
25													0
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35													0
36													0
37													0

# NHS Wales Shared Services Partnership

Table B - Monthly Positions

This Table is currently showing 0 errors

Period : Jan 20

A. Monthly Summarised Statement of Comprehensive Net Income		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position	
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000	
1	Cajal Donorship / Government Grant Income	ActualF'cast	6,235	5,685	7,056	6,522	6,402	7,145	7,240	6,902	7,304	6,606	5,624	6,606	16,820	0
2	Welsh NHS Local Health Boards & Trusts Income	ActualF'cast	6,829	21,597	11,332	12,854	10,142	8,003	13,561	8,794	26,794	13,862	22,373	12,869	135,887	0
3	WHSOC Income	ActualF'cast	596	349	2,107	80	271	1,846	697	(263)	2,106	233	195	3,035	8,441	171,146
4	Welsh Government Income	ActualF'cast	12,749	26,651	20,545	19,456	16,816	18,024	21,868	16,483	36,813	20,811	28,192	32,800	213,215	274,208
5	Other Income	ActualF'cast	6,843	6,892	6,529	6,647	6,001	6,984	7,606	7,044	7,091	7,095	7,051	7,055	69,324	83,430
6	Income Total	ActualF'cast	300	10,309	5,883	7,358	4,605	3,802	7,842	3,270	37,424	8,291	16,917	16,947	81,403	115,299
7	Non Pay	ActualF'cast														
8	Losses, Sundry Payments and Irrecoverable Debts	ActualF'cast														
9	Operational (Income) / Costs	ActualF'cast														
10	Total Interest Receivable	ActualF'cast														
11	Total Interest Payable	ActualF'cast														
12	DEB - Depreciation, Accelerated Depreciation & Impairments	ActualF'cast	198	198	198	197	197	197	194	194	170	211	192	1,940	2,342	
13	AME - Donations & Contributions	ActualF'cast														
14	AME - Donations & Contributions	ActualF'cast														
15	Non Allocated Continuity	ActualF'cast														
16	Profit / Loss on asset disposal	ActualF'cast														
17	Cost Total	ActualF'cast	12,749	26,651	20,545	19,456	16,816	18,024	21,868	15,483	36,813	20,811	28,192	32,800	213,215	274,207
18	Net surplus / (deficit)	ActualF'cast	0	0	0	0	0	0	0	(10)	0	0	0	(3)	0	0

## B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000
19. Actual YTD surplus / (deficit)	0
20. Actual YTD surplus / (deficit) last month	0
21. Current month actual surplus / (deficit)	0
22. Average monthly surplus / (deficit) YTD	0 ▲
23. YTD / remaining months	0

Full-year surplus / (deficit) scenarios	£'000
24. Extrapolated Scenario	0
25. Year to Date Trend Scenario	0

C. DEL/AME Depreciation & Impairments

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
DEI														
26 Baseline Provider Depreciation	134	134	134	133	133	133	133	127	127	116	123	123	1,299	1,545
27 Strategic Depreciation	64	64	64	64	64	64	64	66	66	55	69	69	641	778
28 Accelerated Depreciation											19		0	19
29 Impairments													0	0
30 Other (Specify in Narrative)													0	0
31 Total	198	198	198	197	197	197	197	193	193	171	211	192	1,940	2,342
AME														
32 Dominated Asset Depreciation													0	0
33 Impairments													0	0
34 Other (Specify in Narrative)													0	0
35 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0

D. Contingency Gains

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
36 Contingency Gains	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Committed Reserves & Contingencies

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
37 List of all Committed Reserves & Contingencies (no above in Section A. Please specify Row number in description)														
38 Actual/£'000														
39 Actual/£'000														
40 Actual/£'000														
41 Actual/£'000														
42 Actual/£'000														
43 Actual/£'000														
44 Actual/£'000														
45 Actual/£'000														
46 Actual/£'000														
47 Actual/£'000														
48 Actual/£'000														
49 Actual/£'000														
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58 Actual/£'000														
59 Actual/£'000														
60 Actual/£'000														
61 Actual/£'000														
62 Actual/£'000														
63 Actual/£'000														
64 Actual/£'000														
65 Phrasing														
66 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0

# NHS Wales Shared Services Partnership

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation and Accountancy Gains)

Period : Jan 20

This Table is currently showing 0 errors

	Total YTD												Full-year forecast	YTD as % of FY %age of YTD Actual/Plan	Assessment		Full-Year Effect of Recurring Savings £'000									
	1	2	3	4	5	6	7	8	9	10	11	12			Green £'000	Amber £'000		non recurring £'000	recurring £'000							
	Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000														
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
10	6	6	6	6	6	6	6	6	6	6	6	6	59	71	0	0	0	0								
11	6	6	6	127	106	28	12	(51)	(21)	19	17	12	240	285	0	0	0	0								
12	0	0	0	121	101	23	7	(57)	(27)	14	7	7	181	194	0	0	0	0								
13	80	80	80	80	80	80	80	80	80	80	80	80	800	960	0	0	0	0								
14	225	230	200	257	419	286	233	368	278	315	200	200	2,871	3,271	0	0	0	0								
15	145	150	180	177	339	208	153	288	198	235	120	120	2,071	2,311	0	0	0	0								
16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
19	86	86	86	86	86	86	86	86	86	86	86	86	859	1,031	0	0	0	0								
20	231	238	266	384	525	314	245	317	257	334	212	212	3,111	3,538	0	0	0	0								
21	145	150	180	288	440	228	180	232	172	249	127	127	2,252	2,505	0	0	0	0								
22	Variance in month												168.77%	174.59%	209.51%	346.85%	511.54%	265.96%	185.65%	289.45%	196.61%	288.23%	147.24%	147.24%	202.11%	
23	As percentage of FY actual/forecast												6.53%	6.67%	7.52%	10.86%	14.86%	8.89%	6.64%	8.88%	7.28%	9.46%	6.01%	6.01%	6.01%	

NHS Wales Shared Services Partnership  
Table C1 - Savings Schemes Pay Analysis

Period : Jan 20

Month	1 2 3 4 5 6 7 8 9 10 11 12												Full-year forecast	YTD as %age of YTD variance as %age of YTD Budget/Plan	Assessment		Full in-year forecast	Full-Year Effect of Recurring Savings £'000
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			Green £'000	Amber £'000		
1 Changes in Staffing	80	80	80	80	80	80	80	80	80	80	80	80	800	980	0	0	845	
2 Establishment	80	80	80	80	80	80	80	80	80	80	80	80	800	980	0	223	737	
3 Variable Pay	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4 Locum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5 Agency / Locum paid at a premium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6 Changes in Bank Staff	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
7 Other (Please Specify)	145	150	180	177	339	206	153	288	198	235	120	120	2,071	2,311	0	2,311	0	
8 Total	225	230	260	257	419	286	233	368	278	315	200	200	2,871	3,271	0	2,534	737	
9 Variance	145	150	160	177	339	206	153	288	198	235	120	120	2,071	2,311	0	2,534	737	
10 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
20 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

Month	1 2 3 4 5 6 7 8 9 10 11 12												Full-year forecast	YTD as %age of YTD variance as %age of YTD Budget/Plan	Assessment		Full in-year forecast	Full-Year Effect of Recurring Savings £'000
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			Green £'000	Amber £'000		
1 Reduced usage of Agency/Locums paid at a premium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2 Non Medical 'off contract' to 'on contract'	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3 Medical - Impact of Agency pay rate caps	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4 Other (Please Specify)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
7 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

This Table is currently showing 0 errors

Table C3 - Savings Tracker

Summary of Forecast Savings (£000's)	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
Planned Care	0	0	0	0	0	0
Unscheduled Care	0	0	0	0	0	0
Primary and Community Care (Excl Prescribing)	0	0	0	0	0	0
Mental Health	0	0	0	0	0	0
Clinical Support	0	0	0	0	0	0
Non Clinical Support (Facilities/Estates/Corporate)	3,271	265	0	3,536	482	0
Commissioning	0	0	0	0	0	0
Across Service Areas	0	0	0	0	0	0
CHC	0	0	0	0	0	0
Prescribing	0	0	0	0	0	0
Medicines Management (Secondary Care)	0	0	0	0	0	0
<b>Total</b>	<b>3,271</b>	<b>265</b>	<b>0</b>	<b>3,536</b>	<b>482</b>	<b>0</b>

# NHS Wales Shared Services Partnership

Period : Jan 20

This Table is currently showing 0 errors

Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn

		FORECAST YEAR END			
		Worst Case	Likelihood	Best Case	Likelihood
		£'000		£'000	
<b>Current Reported Forecast Outturn</b>		0		0	
<b>Risks (negative values)</b>					
1	Non delivery of Saving Plans/CIPs				
2	WHSSC Performance				
3	Other Contract Performance				
4	WG Income assumed is not forthcoming	0	Medium		
5	Income generation schemes do not achieve income targets	(75)	Low		
6	Service demands/activity levels increase above anticipated levels	(30)	Low		
7	Inability to recruit to substantive posts and continuing to incur higher agency costs	(40)	Low		
8	Lack of capital funds incur increased vehicle hire/maintenance costs	(30)	Low		
9	No funding for pension discount rate increase is received	0	Low		
10	Vacancy factor decreases below that assumed in budget setting	0	Low		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
<b>Opportunities (positive values)</b>					
23	Increased vacancy factor	175	Medium	250	Medium
24					
25					
26					
27					
28					
29					
30	<b>Total Risks /Opportunities</b>	0		250	
31	<b>Total Amended Forecast</b>	0		250	

## **NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 11 – FEBRUARY 2020**

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for February 2020 and should be read in conjunction with the Monitoring Return tables submitted for Month 11.

Thank you for your email of 25<sup>th</sup> February 2020 responding to the Month 10 monitoring return submission. The action points raised have been addressed within this return and further information provided where requested

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

NWSSP's financial position for Period 11 and the full year forecast continues to be reported at break-even. This is after providing for the 2019/20 savings distribution of £0.750m per the submitted IMTP and the additional in year distribution of £1.250m.

#### **1. Actual Year to Date and Forecast Under/Overspend 2019/20 (Tables A, B & B2)**

Table A has been amended in Month 11 to report the updated value for income generation and a revised full year forecast of funds for reinvestment/redistribution as a result of the actual achievement of non-recurrent savings in Month 11 linking through from Table C.

The actual position for month 11 has been reported with the forecast position for month 12. This continues to identify a projected full year outturn at break-even in line with year 1 of our IMTP assumptions.

The key points to note within the actual and forecast position at Month 10 are:

- Depreciation charges of £2.338m have been forecast for 2019/20. This reconciles to the final confirmed depreciation figure and an invoice for £0.787m has been raised to WG in early March in respect of charges over and above the baseline depreciation funding of £1.551m (**Action Point 9.5**).

- £86.379m income and expenditure is included to Month 11 in relation to the WRP DEL and redress budgets. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts.

The WRP forecast outturn has been updated at the close of Month 11. This identifies the forecast outturn at £106.854m which is included in Table B (£109.554m including redress).

In addition to the £75m WRP baseline funding and the additional PIDR funding of £27.880m, £3.974m has been funded under the risk sharing agreement in 2019/20 and allocation adjustments have been actioned by WG in respect of this.

The redress forecast outturn remains at £2.7m in Month 11. This is greater than the £1.259m funding allocated. The additional £1.441m will need to be funded by Welsh Government now that the risk sharing agreement has been invoked and the full £2.7m has been anticipated in Table E.

- An estimate of the GP trainee expenditure and the associated charges to LHBs/Trusts/HEIW (£30.753m) has been made within the forecast which is an increase from previous months due to increased trainees on the February rotation.
- An estimate of Stores expenditure and charges to NHS Wales of £35.685m have been included within the forecast. This may increase in month 12 due to increased stores issues in March in respect of protective equipment and infection control items for the coronavirus outbreak.

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

There is no brought forward deficit to report for NWSSP and following the identification of further recurrent savings the carry forward position is now break-even also. The non-recurrent savings, funding and income generation linked through from Table A have been in the main offset with non-recurrent pressures (primarily NWSSP reinvestment requirements/additional distribution) that will not be carried forward.

**3. Ring Fenced Funding (Table B)**

Baseline depreciation funding of £1.551m has been invoiced. The final forecast charges for 2019/20 total £2.338m, indicating additional funding of £0.787m is required which has now been invoiced to WG in early March.

**4. Net Expenditure Profile Analysis (Table B1)**

This table has been populated with the actual and forecast information. As we are required to report a neutral position within the Velindre ledger each month, the non pay forecast will change from plan due to the break-even accrual made each month to report the position.

Table B1 has been updated in Month 11 to reflect the actual pay and non pay variances reported per the ledger and continues to report an overall break-even position between the two categories in the full year forecast.

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

Agency expenditure of £0.113m, 1.1% of in month total pay expenditure (1.1% year to date), was reported in Month 11. This has increased in February due to the usage of agency staff to undertake work in respect of our Microsoft Office 365 rollout and additional drivers in HCS to support the additional demand resulting from the coronavirus outbreak.

**6. Savings Plans (Tables C, C1, C2 & C3)**

These tables have been updated in Month 11 to reflect the actual savings achieved. Further non-recurrent savings were achieved in month due to continued turnover and slippage in appointing to vacancies.

**7. Income Assumptions 2019/20 (Tables D & E)**

Table D has been amended in Month 11 to remove the WRP risk sharing income now that the resource allocation adjustment has been made and we will receive this income from Welsh Government.

Table E has been populated with the budgeted income streams by NHS Organisation with a number of additional income streams included that have been anticipated within our forecast financial position. These totals will not reconcile to the NHS Income reported in Table B or the NHS Income &

Expenditure reported in Table D. This is due to the ledger reporting of intra-trading within Velindre, classification of non-material NHS recharges against pay/non pay per the manual for accounts and solicitor income not recorded against NHS income subjectives.

The WRP risk sharing income anticipated in Table E is now finalised and has been reduced to £3.974m and is now included under the WG anticipated income stream. The anticipated depreciation funding has also reduced to £0.787m per our final identified depreciation requirements.

Anticipated income of £0.250m for GP Indemnity claims has been removed from Table E in Month 11 now that it has been confirmed that no claims will settle this financial year.

The remainder of the anticipated income streams have either been invoiced for in early March or will be invoiced before the end of the financial year.

#### **8. Healthcare Agreements & Major Contracts**

Not applicable to NWSSP.

#### **9. Risk Management (Table F)**

The risks identified within our IMTP have been included within Table F and the values and risk levels have been reviewed again in month 11. As we approach the end of the financial year all risks have been reduced to zero with the exception of the risk that income targets may not be achieved, although it is recognised that the likelihood of this occurring is low.

#### **10. Statement of Financial Position and Aged Welsh NHS Debtors (Tables G & N)**

NWSSP has not been requested to complete Table G.

At the close of Month 11, there were 5 invoices exceeding 17 weeks. All of these have been paid in early March and we are actively chasing payment for any invoices that will reach 17 weeks before the end of the financial year in order that these are cleared before the agreement of balances exercise (**Action Point 10.1**).

**11. Cash Flow Forecast (Table H)**

This table is not required for NWSSP.

**12. Public Sector Payment Compliance (Table I)**

This table is not required for NWSSP, although it is pleasing to report that the NWSSP PSPP achievement for Month 11 was 98.07% for Non NHS invoices and 100% for NHS invoices.

**13. Capital Schemes & Other Developments (Tables J, K & L)**

These tables have been updated in Month 11 to reflect in month spend and any revised spend profiles against the updated CEL issued on 9<sup>th</sup> March 2020.

Whilst there is a significant percentage of our spend still to be incurred in Month 12, the majority of our capital funding was received later in the financial year and following a detailed review of all our capital schemes we do not anticipate any issues with meeting our CEL in 2019/20.

**14. EFL (Table M)**

This table is not required for completion by NWSSP.

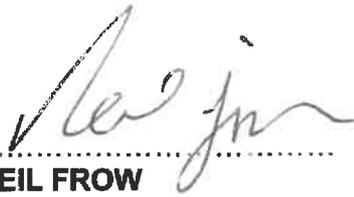
**15. Other Issues**

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 Management Team reports.

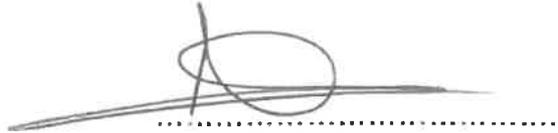
It is pleasing to continue to be able to report a positive month 11 position with confidence in the achievement of our break-even IMTP and the increased 2019/20 savings distribution of £2.000m to NHS Wales.

The Shared Services Partnership Committee will receive the Month 11 Financial Monitoring Return, together with the Month 9 and 10 returns, at the next meeting on 24<sup>th</sup> March 2020.

**16. Authorisation of Return**



.....  
**NEIL FROW  
MANAGING DIRECTOR  
NWSSP**



.....  
**ANDY BUTLER  
DIRECTOR OF FINANCE  
NWSSP**

**12<sup>th</sup> March 2020**

# NHS Wales Shared Services Partnership

Period : Feb 20

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 11 should reflect the corresponding amounts included within the latest IMTP submission to WG  
Lines 1 - 11 should not be adjusted after Month 1

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2 New Cost Pressures - as per 3 year plan (Negative Value)	-6,991	-4,544	-2,447	-2,447
3 <b>Opening Cost Pressures</b>	<b>-6,991</b>	<b>-4,544</b>	<b>-2,447</b>	<b>-2,447</b>
4 Identified Savings Plan (Positive Value)	1,031	223	808	808
5 Savings / Mitigating Actions Yet To Be Identified (Positive Value)				
6 Welsh Government Funding (Positive Value)	821	547	274	274
7 Net Income Generated (Positive Value)	0	0	0	0
8 Planned Accountancy Gains (Positive Value)	0	0	0	0
9 Release of Uncommitted Contingencies & Reserves (Positive Value)				
10 Income Generation per IMTP	5,139	3,962	1,177	1,177
11 <b>Opening Financial Plan</b>	<b>0</b>	<b>188</b>	<b>-188</b>	<b>-188</b>
12 Cost Pressures b/fwd from Previous Year - unidentified within 3 year plan (Negative Value)				
13 Opening Plan Savings - Forecast (Underachievement) / Overachievement	2,335	2,335	0	108
14 Additional In Year Identified Savings - Forecast (Positive Value)	224	146	78	80
15 Additional In Year Identified Accountancy Gains (Positive Value)	0	0	0	0
16 Additional Net Income Generated (Positive Value)	673	673	0	0
17 Non Identification of Savings / Mitigating Actions Yet To Be Identified in Opening Plan	0	0	0	0
18 Release of Previously Committed Contingencies & Reserves (Positive Value)	0			
19 Additional In Year Welsh Government Funding (Positive Value)	0			
20 Non recurrent NWSSP reinvestment	-1,278	-1,278		
21 Non pay pressures	-704	-704		
22 NWSSP Distribution	-1,250	-1,250		
23	0			
24	0			
25	0			
26	0			
27	0			
28	0			
29	0			
30	0			
31	0			
32	0			
33	0			
34	0			
35	0			
36	0			
37	0			
38 <b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>0</b>	<b>110</b>	<b>-110</b>	<b>0</b>

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
18													0
19													0
20	-174	-155	-248	-246	-411	-401	-105	-240	-199	905	-4		-1,278
21	-10	-32	-10		-42		-70	-102	-72	-125	-241		-704
22										-1,250			-1,250
23													0
24													0
25													0
26													0
27													0
28													0
29													0
30													0
31													0
32													0
33													0
34													0
35													0
36													0
37													0

# NHS Wales Shared Services Partnership

Table B - Monthly Positions

This Table is currently showing 0 errors

Period: Feb 20

A. Monthly Summarised Statement of Comprehensive Net Income		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year and position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
1	Capital Donations / Government Grant Income	Actual/F'cast	0,255	0,885	7,056	6,622	6,402	7,145	7,540	7,814	6,696	6,687	4,472	76,765	82,227
2	Welsh NHS Local Health Boards & Trusts Income	Actual/F'cast	5,938	21,897	11,332	12,854	10,142	9,033	13,581	8,784	13,882	10,377	28,618	146,204	174,882
3	WHSSC Income	Actual/F'cast	380	348	2,157	80	271	1,848	667	(263)	293	117	3,158	8,658	11,716
4	Welsh Government Income	Actual/F'cast	15,749	28,651	20,645	19,458	16,815	19,054	21,846	15,483	20,811	17,351	38,248	230,576	208,824
5	Other Income	Actual/F'cast	6,843	6,692	6,529	6,847	6,901	6,964	7,638	7,044	7,085	7,189	7,197	76,613	83,710
6	Income Total	Actual/F'cast	30,065	58,073	47,615	49,831	46,234	51,900	53,611	48,276	58,285	52,461	60,109	338,569	361,355
7	Pay	Actual/F'cast	5,309	5,372	7,835	5,254	5,092	7,031	6,341	4,875	6,114	5,265	4,987	7,887	65,535
8	Non Pay	Actual/F'cast	389	10,369	5,683	7,338	4,886	3,802	7,642	3,270	27,424	4,978	23,175	86,379	100,004
9	Losses, Suspended Payments and Irrecoverable Debts	Actual/F'cast													
10	Exceptional Income / Costs	Actual/F'cast													
11	Total Interest Receivable	Actual/F'cast													
12	Total Interest Payable	Actual/F'cast													
13	DEL - Depreciation, Accelerated Depreciation & Impairments	Actual/F'cast	188	188	188	187	187	187	184	184	170	209	189	2,140	2,338
14	AME - Depreciation & Impairments	Actual/F'cast													
15	Non Allocated Contingency	Actual/F'cast													
16	Profit / Loss on asset disposal	Actual/F'cast													
17	Cost Total	Actual/F'cast	12,749	28,631	20,545	19,456	18,815	18,024	21,838	14,483	20,811	17,361	38,248	230,576	208,824
18	Net surplus/ (deficit)	Actual/F'cast	0	0	0	0	0	0	0	(10)	0	0	0	0	0

## B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000
19. Actual YTD surplus/ (deficit)	0
20. Actual YTD surplus/ (deficit) last month	0
21. Current month actual surplus/ (deficit)	(0)
22. Average monthly surplus/ (deficit) YTD	0
23. YTD remaining months	0
24. Extrapolated Scenario	0
25. Year to Date Trend Scenario	0

Full-year surplus/ (deficit) scenario	£'000
24. Extrapolated Scenario	0
25. Year to Date Trend Scenario	0

C. DELAMIE Depreciation & Impairments

IDEL	1		2		3		4		5		6		7		8		9		10		11		12		Total YTD	Forecast year end position
	Apr	£'000	May	£'000	Jun	£'000	Jul	£'000	Aug	£'000	Sep	£'000	Oct	£'000	Nov	£'000	Dec	£'000	Jan	£'000	Feb	£'000	Mar	£'000		
26	Baseline Provider Depreciation	134	134	134	134	133	133	133	133	133	133	128	128	127	127	127	127	127	116	116	123	123	123	1422	1,546	
27	Strategic Depreciation	64	64	64	64	64	64	64	64	64	64	70	70	66	66	66	66	66	95	95	88	88	88	708	774	
28	Accelerated Depreciation																				19	19	19	0	0	
29	Impairments																							0	0	
30	Other Strategic (in Narrative)																							0	0	
31	Total AME	198	198	198	198	197	197	197	197	197	197	188	188	183	183	183	183	171	171	209	209	209	2,149	2,358		
32	Donated Asset Depreciation																							0	0	
33	Impairments																							0	0	
34	Other Strategic (in Narrative)																							0	0	
35	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

D. Accountancy Gains

Accountancy Gains	1		2		3		4		5		6		7		8		9		10		11		12		Total YTD	Forecast year end position
	Apr	£'000	May	£'000	Jun	£'000	Jul	£'000	Aug	£'000	Sep	£'000	Oct	£'000	Nov	£'000	Dec	£'000	Jan	£'000	Feb	£'000	Mar	£'000		
35	Accountancy Gains	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

E. Committed Reserves & Contingencies

List of all Committed Reserves & Contingencies (see above in Section A. Phases a-e) (Row number in description)	1		2		3		4		5		6		7		8		9		10		11		12		Total YTD	Forecast year end position
	Apr	£'000	May	£'000	Jun	£'000	Jul	£'000	Aug	£'000	Sep	£'000	Oct	£'000	Nov	£'000	Dec	£'000	Jan	£'000	Feb	£'000	Mar	£'000		
37	Actual Cost																								0	0
38	Actual Cost																								0	0
39	Actual Cost																								0	0
40	Actual Cost																								0	0
41	Actual Cost																								0	0
42	Actual Cost																								0	0
43	Actual Cost																								0	0
44	Actual Cost																								0	0
45	Actual Cost																								0	0
46	Actual Cost																								0	0
47	Actual Cost																								0	0
48	Actual Cost																								0	0
49	Actual Cost																								0	0
50	Actual Cost																								0	0
51	Actual Cost																								0	0
52	Actual Cost																								0	0
53	Actual Cost																								0	0
54	Actual Cost																								0	0
55	Actual Cost																								0	0
56	Actual Cost																								0	0
57	Actual Cost																								0	0
58	Actual Cost																								0	0
59	Actual Cost																								0	0
60	Actual Cost																								0	0
61	Actual Cost																								0	0
62	Actual Cost																								0	0
63	Actual Cost																								0	0
64	Actual Cost																								0	0
65	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

# NHS Wales Shared Services Partnership

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation and Accountancy Gains)

Period : Feb 20

This Table is currently showing 0 errors

1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY		Assessment		Full-Year Effect of Recurring Savings £'000							
														Apr	May	Jun	Jul		Aug	Sep	Oct	Nov	Dec	Jan	Feb
£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000							
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
10	6	6	6	6	6	6	6	6	6	6	6	65	71	0	0	0	0	0							
11	6	6	6	127	108	28	12	(51)	(21)	19	12	253	265	65.31%	265	0	0	151							
12	0	0	0	121	101	23	7	(57)	(27)	14	7	188	184	266.09%	184	0	149								
13	80	80	80	80	80	80	80	80	80	80	80	880	880	0	880	0	0								
14	225	230	260	257	419	286	233	368	278	315	254	3,125	3,325	83.98%	3,325	0	845								
15	145	150	160	177	339	206	163	268	188	235	174	2,245	2,365	255.11%	2,365	0	737								
16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								
19	88	86	86	88	88	86	86	86	86	86	86	845	1,031	0	1,031	0	0								
20	231	236	268	364	525	314	245	317	257	334	266	3,378	3,590	84.08%	3,590	0	886								
21	145	150	160	288	440	228	160	232	172	249	181	2,433	2,559	257.36%	2,559	0	0								
22	Variance in month												168.77%	174.59%	209.51%	346.85%	511.54%	265.96%	185.65%	269.45%	169.81%	289.23%	210.00%	147.24%	257.38%
23	As percentage of FY actual/forecast												6.43%	6.57%	7.41%	-10.89%	14.64%	8.76%	6.84%	8.64%	7.17%	9.32%	7.42%	5.92%	

NHS Wales Shared Services Partnership  
Table C1- Savings Schemes Pay Analysis

Period : Feb 20

Month	Full Year Forecast												Assessment		Full Year Forecast	Full Year Effect of Recurring Savings £'000	
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast			YTD as % of YTD Budget/Plan
1 Changes in Staffing	80	80	80	80	80	80	80	80	80	80	80	80	880	960	960	0	0
2 Establishment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3 Variable Pay	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4 Locum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 Agency / Locum paid at a premium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6 Changes in Bank Staff	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7 Other (Please Specify)	145	150	180	177	339	206	163	288	198	235	174	120	2,245	2,365	84.03%	2,365	0
8 Total	225	230	260	257	419	286	233	368	278	315	254	200	3,125	3,325	83.06%	3,325	0
9 Variance	145	150	180	177	339	206	163	288	198	235	174	120	2,245	2,365	255.11%	2,365	0

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

Month	Full Year Forecast												Assessment		Full Year Forecast	Full Year Effect of Recurring Savings £'000	
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast			YTD as % of YTD Budget/Plan
1 Reduced usage of Agency/Locums paid at a premium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2 Non Medical 'off contract' to 'on contract'	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3 Medical - Impact of Agency pay rate caps	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4 Other (Please Specify)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

This Table is currently showing 0 errors

Table C3 - Savings Tracker

Summary of Forecast Savings (£000's)	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
Planned Care	0	0	0	0	0	0
Unscheduled Care	0	0	0	0	0	0
Primary and Community Care (Excl Prescribing)	0	0	0	0	0	0
Mental Health	0	0	0	0	0	0
Clinical Support	0	0	0	0	0	0
Non Clinical Support (Facilities/Estates/Corporate)	3,325	265	0	3,590	673	0
Commissioning	0	0	0	0	0	0
Across Service Areas	0	0	0	0	0	0
CHC	0	0	0	0	0	0
Prescribing	0	0	0	0	0	0
Medicines Management (Secondary Care)	0	0	0	0	0	0
<b>Total</b>	<b>3,325</b>	<b>265</b>	<b>0</b>	<b>3,590</b>	<b>673</b>	<b>0</b>

# NHS Wales Shared Services Partnership

Period : Feb 20

This Table is currently showing 0 errors

Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn

		FORECAST YEAR END			
		Worst Case £'000	Likelihood	Best Case £'000	Likelihood
Current Reported Forecast Outturn		0		0	
<b>Risks (negative values)</b>					
1	Non delivery of Saving Plans/CIPs				
2	WHSSC Performance				
3	Other Contract Performance				
4	WG Income assumed is not forthcoming	0	Low		
5	Income generation schemes do not achieve income targets	(50)	Low		
6	Service demands/activity levels increase above anticipated levels	0	Low		
7	Inability to recruit to substantive posts and continuing to incur higher agency costs	0	Low		
8	Lack of capital funds incur increased vehicle hire/maintenance costs	0	Low		
9	No funding for pension discount rate increase is received	0	Low		
10	Vacancy factor decreases below that assumed in budget setting	0	Low		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
<b>Opportunities (positive values)</b>					
23	Increased vacancy factor	50	Medium	50	Medium
24					
25					
26					
27					
28					
29					
30	<b>Total Risks /Opportunities</b>	<b>0</b>		<b>50</b>	
31	<b>Total Amended Forecast</b>	<b>0</b>		<b>50</b>	

## **NHS WALES SHARED SERVICES PARTNERSHIP MONITORING RETURN COMMENTARY FOR PERIOD 12 – MARCH 2020**

This summary report provides a review of NHS Wales Shared Services Partnership's (NWSSP) performance for March 2020 and should be read in conjunction with the Monitoring Return tables submitted for Month 12.

Thank you for your email of 19<sup>th</sup> March 2020 responding to the Month 11 monitoring return submission noting that you did not have any material issues to raise.

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

NWSSP's final outturn financial position for 2019/20 is a £0.011m underspend. This has been achieved after providing for the 2019/20 savings distribution of £0.750m per the submitted IMTP and the additional in year distribution of £1.250m.

#### **1. Actual Year to Date and Forecast Under/Overspend 2019/20 (Tables A, B & B2)**

Table A has been amended in Month 12 to report the final value for income generation, the actual increased distribution made and the non-recurrent reinvestment of funds within NWSSP during 2019/20.

The key points to note within the final position at Month 12 are:

- Increased pay expenditure can be evidenced in Month 12, this is due to:
  - the recognition of the additional 6.3% pension charges. The NWSSP share of the Velindre total is £3.613m. These are offset by the corresponding additional WG income in Month 12
  - a large increase in the volume of bank, agency and overtime worked during March to support the COVID19 pandemic. These increases are reported against admin and clerical and estates and ancillary staff classifications.

- Other income increased as forecast in Month 12 due to the quarter 3 and 4 pharmacy rebate income which can be seen is offset by a corresponding increase in non pay costs as these are repatriated to UHBs/Trusts.
- Depreciation charges of £2.338m were incurred as forecast and confirmed in our final depreciation requirements submission.
- £120.159m income and expenditure is included in relation to the WRP DEL and redress budgets. This expenditure is reported separately on line 9 – Losses, Special Payments & Irrecoverable Debts.

The WRP outturn was £118.104m with the redress expenditure totalling £2.055m.

- The GP Specialty Trainee expenditure and the associated charges to LHBs/Trusts/HEIW totalled £30.937m which is an increase from previous years due to increased training numbers.
- Final All Wales Stores expenditure and charges to NHS Wales for items issued totalled £37.598m.
- Rebates of pharmacy income claimed by NWSSP and repatriated to UHBs/Trusts totalled £10.223m
- The new Medical Examiner Service pilot phase commenced prior to the COVID19 outbreak and income and expenditure of £0.110m is included in the position.

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

There is no brought forward deficit to report for NWSSP and following the identification of further recurrent savings the carry forward position is now break-even also. The non-recurrent savings, funding and income generation linked through from Table A have been in the main offset with non-recurrent pressures (primarily NWSSP reinvestment requirements/additional distribution) that will not be carried forward.

## **3. Ring Fenced Funding (Table B)**

Baseline depreciation funding of £1.551m has been invoiced in addition to the agreed additional funding of £0.787m for 2019/20.

#### **4. Net Expenditure Profile Analysis (Table B1)**

Table B1 has been updated in Month 12 to reflect the actual pay and non pay variances reported per the ledger. There is a net deficit of £0.294m between the pay and non pay tables which is offset by the overachievement of income of £0.305m which when combined reflects the £0.011m underspend position reported.

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

Agency expenditure of £0.173m, 2.3% of actual in month total pay expenditure (1.2% year to date), was reported in Month 12. The percentage figures differ from those reported in Table B2-B due to the increased pay costs reported as a result of the inclusion of the 6.3% pension costs. The increase of total pay costs reduces the in month and cumulative percentages to 1.6% and 1.1% respectively. The costs have increased significantly in March due to a number of agency staff being recruited to support the additional work resulting from the COVID19 pandemic.

#### **6. Savings Plans (Tables C, C1, C2 & C3)**

These tables have been updated in Month 12 to reflect the actual savings achieved. Further non-recurrent savings were achieved in month due to continued turnover and slippage in appointing to vacancies.

#### **7. Income Assumptions 2019/20 (Tables D & E)**

Table D has been amended in Month 12 to report the NWSSP NHS Income & Expenditure that will be agreed as part of the overall Velindre agreement exercise, although we will need to undertake a detailed exercise to extract the NWSSP elements of the final agreement to confirm this over the coming weeks.

Table E has been populated with the actual income we recorded by NHS Organisation, Welsh Government and other income. These totals will not reconcile to the NHS Income reported in Table B or the NHS Income & Expenditure reported in Table D. This is due to the ledger reporting of intra-trading within Velindre, classification of non-material NHS recharges against pay/non pay per the manual for accounts and solicitor income not recorded against NHS income subjectives.

**8. Healthcare Agreements & Major Contracts**

Not applicable to NWSSP.

**9. Risk Management (Table F)**

All risks have been reduced to zero following the final reported outturn position.

**10. Statement of Financial Position and Aged Welsh NHS Debtors (Tables G & N)**

NWSSP has not been requested to complete Table G.

At the close of Month 12, there were no invoices exceeding 17 weeks and 16 invoices exceeding 11 weeks. 7 of these have since been paid. We will continue debt collection efforts with all outstanding NHS invoices in line with the agreement of balances process.

**11. Cash Flow Forecast (Table H)**

This table is not required for NWSSP.

**12. Public Sector Payment Compliance (Table I)**

This table is not required for NWSSP, although it is pleasing to report that the NWSSP PSPP achievement for Month 12 was 97.77% with the cumulative 2019/20 position at 98.11%

**13. Capital Schemes & Other Developments (Tables J, K & L)**

These tables have been updated in Month 12 to reflect the final spend profiles against the updated CEL issued on 14<sup>th</sup> April 2020.

It is pleasing to report that we managed our capital schemes and met our CEL in line with our forecast.

**14. EFL (Table M)**

This table is not required for completion by NWSSP. It should be noted that the non-completion in Month 12 has produced two validation errors on the return.

**15. 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 Management Team reports.

It is very pleasing to be able to report the final 2019/20 outturn with a modest surplus of £0.011m after providing the increased savings distribution to NHS Wales of £2.000m during the year, whilst also reporting the full achievement of our Capital Expenditure Limit.

The Shared Services Partnership Committee will receive the Month 12 Financial Monitoring Return at the next meeting on 21<sup>st</sup> May 2020.

**16. Authorisation of Return**



**NEIL FROW  
MANAGING DIRECTOR  
NWSSP**



**ANDY BUTLER  
DIRECTOR OF FINANCE  
NWSSP**

**23<sup>rd</sup> April 2020**

# NHS Wales Shared Services Partnership

Period : Mar 20

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 11 should reflect the corresponding amounts included within the latest IMTP submission to WG  
 Lines 1 - 11 should not be adjusted after Month 1

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2 New Cost Pressures - as per 3 year plan (Negative Value)	-6,991	-4,544	-2,447	-2,447
3 <b>Opening Cost Pressures</b>	<b>-6,991</b>	<b>-4,544</b>	<b>-2,447</b>	<b>-2,447</b>
4 Identified Savings Plan (Positive Value)	1,031	223	808	808
5 Savings / Mitigating Actions Yet To Be Identified (Positive Value)				
6 Welsh Government Funding (Positive Value)	821	547	274	274
7 Net Income Generated (Positive Value)	0	0	0	0
8 Planned Accountancy Gains (Positive Value)	0	0	0	0
9 Release of Uncommitted Contingencies & Reserves (Positive Value)				
10 Income Generation per IMTP	5,139	3,962	1,177	1,177
11 <b>Opening Financial Plan</b>	<b>0</b>	<b>188</b>	<b>-188</b>	<b>-188</b>
12 Cost Pressures b/fwd from Previous Year - unidentified within 3 year plan (Negative Value)				
13 Opening Plan Savings - Forecast (Underachievement) / Overachievement	2,472	2,472	0	108
14 Additional In Year Identified Savings - Forecast (Positive Value)	224	146	78	80
15 Additional In Year Identified Accountancy Gains (Positive Value)	0	0	0	0
16 Additional Net Income Generated (Positive Value)	305	305	0	0
17 Non Identification of Savings / Mitigating Actions Yet To Be Identified in Opening Plan	0	0	0	0
18 Release of Previously Committed Contingencies & Reserves (Positive Value)	0			
19 Additional In Year Welsh Government Funding (Positive Value)	0			
20 Non recurrent NWSSP reinvestment	-1,036	-1,036		
21 Non pay pressures	-704	-704		
22 NWSSP Distribution	-1,250	-1,250		
23	0			
24	0			
25	0			
26	0			
27	0			
28	0			
29	0			
30	0			
31	0			
32	0			
33	0			
34	0			
35	0			
36	0			
37	0			
38 <b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>11</b>	<b>121</b>	<b>-110</b>	<b>0</b>

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
18													0
19													0
20	-174	-155	-248	-246	-411	-401	-105	-240	-199	905	-4	242	-1,036
21	-10	-32	-10		-42		-70	-102	-72	-125	-241		-704
22										-1,250			-1,250
23													0
24													0
25													0
26													0
27													0
28													0
29													0
30													0
31													0
32													0
33													0
34													0
35													0
36													0
37													0

# NHS Wales Shared Services Partnerships

Table B - Monthly Positions

This Table is currently showing 0 errors

Period : Mar 20

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	£'000	£'000
A. Monthly Summarised Statement of Comprehensive Net Income															
1	Capital Donations / Government Grant Income	Actual/F'cast	0,255	7,956	0,822	0,402	7,145	7,340	0,952	7,834	6,993	6,807	7,802	83,517	83,517
2	Wales NHS Local Health Boards & Trusts Income	Actual/F'cast													
3	WHS&SC Income	Actual/F'cast	5,899	21,597	11,332	12,854	10,142	9,039	13,681	28,784	13,892	10,377	42,495	189,759	189,759
4	Wales Government Income	Actual/F'cast	599	349	2,157	60	1,849	907	(293)	2,166	239	117	4,576	13,133	13,133
5	Other Income	Actual/F'cast	12,749	28,031	20,545	19,456	16,815	16,024	21,889	15,403	20,811	17,361	54,832	205,509	205,509
6	Income Total	Actual/F'cast	6,843	6,892	6,529	6,847	6,804	7,690	7,094	7,093	7,095	7,189	11,055	87,589	87,589
7	Pay	Actual/F'cast	5,309	5,372	7,839	5,254	5,052	7,031	6,341	4,976	6,295	4,897	9,892	75,397	75,397
8	Non Pay	Actual/F'cast	399	16,399	6,993	7,598	4,886	3,892	3,270	23,424	8,291	4,976	33,819	120,188	120,188
9	Losses, Special Payments and Irrecoverable Debts	Actual/F'cast													
10	Exceptional Income / Costs	Actual/F'cast													
11	Total Interest Receivable	Actual/F'cast													
12	Total Interest Payable	Actual/F'cast	189	189	199	197	197	197	184	164	170	209	189	2,338	2,338
13	DEL - Depreciation, Accelerated Depreciation & Impairments	Actual/F'cast													
14	AME - Unrealised & Impairments	Actual/F'cast													
15	Non Allocated Contingency	Actual/F'cast													
16	Profit / Loss on asset disposal	Actual/F'cast													
17	Cost Total	Actual/F'cast	12,749	28,831	20,545	19,456	18,024	21,889	15,403	19,813	20,811	17,361	64,321	285,607	285,607
18	Net surplus / (deficit)	Actual/F'cast	0	0	0	0	0	0	(10)	0	0	0	11	11	11

## B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000
19. Actual YTD surplus / (deficit)	11
20. Actual YTD surplus / (deficit) last month	0
21. Current month actual surplus / (deficit)	11
22. Average monthly surplus / (deficit) YTD	1
23. YTD / remaining months	Trend ▲
	RDV/01

Full-year surplus / (deficit) scenarios	£'000
24. Extrapolated Scenario	11
25. Year to Date Trend Scenario	11

C. DELMINE Depreciation & Impairments

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
DEEL														
26 Resilience Provider Decommission	184	134	134	133	133	133	128	127	127	118	123	123	1,545	1,545
27 Strategic Disposal	64	64	64	64	64	64	70	66	66	65	68	68	774	774
28 Accelerated Depreciation											19	19	19	19
29 Impairments													0	0
30 Other Specifics in Narrative													0	0
31 Total	188	168	168	167	167	167	168	168	168	171	209	189	2,338	2,338
AME														
32 Donated Asset Depreciation													0	0
33 Impairments													0	0
34 Other Specifics in Narrative													0	0
35 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0

D. Accruals & Gains

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
36 Accruals & Gains	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Committed Reserves & Contingencies

	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year end position
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
List of all Committed Reserves & Contingencies (no above in Section A. Please specify Row number in description.														
37 Actual/F'cast													0	0
38 Actual/F'cast													0	0
39 Actual/F'cast													0	0
40 Actual/F'cast													0	0
41 Actual/F'cast													0	0
42 Actual/F'cast													0	0
43 Actual/F'cast													0	0
44 Actual/F'cast													0	0
45 Actual/F'cast													0	0
46 Actual/F'cast													0	0
47 Actual/F'cast													0	0
48 Actual/F'cast													0	0
49 Actual/F'cast													0	0
50 Actual/F'cast													0	0
51 Actual/F'cast													0	0
52 Actual/F'cast													0	0
53 Actual/F'cast													0	0
54 Actual/F'cast													0	0
55 Actual/F'cast													0	0
56 Actual/F'cast													0	0
57 Actual/F'cast													0	0
58 Actual/F'cast													0	0
59 Actual/F'cast													0	0
60 Actual/F'cast													0	0
61 Actual/F'cast													0	0
62 Actual/F'cast													0	0
63 Actual/F'cast													0	0
64 Actual/F'cast													0	0
65 Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Phantom													0	0

# NHS Wales Shared Services Partnership

Period : Mar 20

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation and Accountancy Gains)

This Table is currently showing 0 errors

1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY %age of YTD Performance	Assessment		Full In-Year forecast	Full-Year Effect of Recurring Savings £'000
															Green £'000	Amber £'000		
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	8	6	6	6	6	6	6	6	6	6	6	74	71	71	71	0	0	0
11	8	6	6	127	106	28	12	(21)	19	12	12	265	265	100.00%	265	0	118	140
12	8	6	0	121	101	23	7	(57)	14	7	194	194	194	273.24%	194	0	0	0
13	80	80	80	80	80	80	80	80	80	80	80	800	800	100.00%	800	0	0	0
14	225	230	260	267	418	288	233	368	278	315	254	337	3,482	100.00%	3,482	0	2,725	737
15	145	150	180	177	339	208	153	288	198	174	257	2,502	2,502	260.63%	2,502	0	0	0
16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	86	86	86	86	86	86	86	86	86	86	86	86	86	100.00%	86	0	0	0
20	231	236	266	384	523	314	245	317	257	334	266	349	3,727	100.00%	3,727	0	2,841	886
21	145	150	180	298	440	229	160	232	172	248	181	264	2,696	201.49%	2,696	0	0	0
22	168.77%	174.59%	209.51%	346.65%	511.54%	265.96%	185.65%	269.45%	199.61%	288.23%	210.06%	306.89%	261.49%					
23	6.20%	6.33%	7.13%	10.30%	14.10%	8.44%	6.58%	8.52%	6.81%	8.97%	7.15%	9.36%						

NHS Wales Shared Services Partnership  
Table C1- Savings Schemes Pay Analysis

Period : Mar 20

	Month												Total YTD	Full-year forecast	YTD as % variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green £'000	Amber £'000	non recurring £'000	recurring £'000	
1 Changes in Staffing	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	0	0	0	0	845
2 Establishment	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	0	0	0	0	0
3 Variable Pay	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4 Locum	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 Agency / Locum paid at a premium	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6 Changes in Bank Staff	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7 Other (Please Specify)	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
8 Total	225	230	260	257	419	286	233	368	278	315	254	337	3,462	3,462	0	0	0	0	0	0
9 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
10 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
23 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
24 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
28 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
29 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
33 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
34 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
36 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
37 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
38 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
39 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
43 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
44 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
47 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
48 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
49 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
53 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
54 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
58 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
59 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
63 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
64 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
66 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
67 Total	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
68 Variance	145	150	180	177	339	206	153	288	198	235	174	257	2,502	2,502	0	0	0	0	0	0
69 Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
70 Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71 Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72 Total	145	150	18																	

This Table is currently showing 0 errors

Table C3 - Savings Tracker

Summary of Forecast Savings (£000's)	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
Planned Care	0	0	0	0	0	0
Unscheduled Care	0	0	0	0	0	0
Primary and Community Care (Excl Prescribing)	0	0	0	0	0	0
Mental Health	0	0	0	0	0	0
Clinical Support	0	0	0	0	0	0
Non Clinical Support (Facilities/Estates/Corporate)	3,482	285	0	3,727	305	0
Commissioning	0	0	0	0	0	0
Across Service Areas	0	0	0	0	0	0
CHC	0	0	0	0	0	0
Prescribing	0	0	0	0	0	0
Medicines Management (Secondary Care)	0	0	0	0	0	0
<b>Total</b>	<b>3,482</b>	<b>285</b>	<b>0</b>	<b>3,727</b>	<b>305</b>	<b>0</b>

# NHS Wales Shared Services Partnership

Period : Mar 20

This Table is currently showing 0 errors

Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn

		FORECAST YEAR END			
		Worst Case £'000	Likelihood	Best Case £'000	Likelihood
Current Reported Forecast Outturn		11		11	
<b>Risks (negative values)</b>					
1	Non delivery of Saving Plans/CIPs				
2	WHSSC Performance				
3	Other Contract Performance				
4	WG Income assumed is not forthcoming	0	Low		
5	Income generation schemes do not achieve income targets	0	Low		
6	Service demands/activity levels increase above anticipated levels	0	Low		
7	Inability to recruit to substantive posts and continuing to incur higher agency costs	0	Low		
8	Lack of capital funds incur increased vehicle hire/maintenance costs	0	Low		
9	No funding for pension discount rate increase is received	0	Low		
10	Vacancy factor decreases below that assumed in budget setting	0	Low		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
<b>Opportunities (positive values)</b>					
23	Increased vacancy factor	0	Medium	0	Medium
24					
25					
26					
27					
28					
29					
30	<b>Total Risks /Opportunities</b>	0		0	
31	<b>Total Amended Forecast</b>	11		11	



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

Partneriaeth  
Cydwasaethau  
Shared Services  
Partnership

**AGENDA ITEM:**  
**SSPC 21/05/2020**

**The report is not Exempt**

**Teitl yr Adroddiad/Title of Report**

**NWSSP Audit Committee Assurance Report – 28 April 2020**

**ARWEINYDD:**

Peter Stephenson

**LEAD:**

Head of Finance & Business Development, NWSSP

**AWDUR:**

Roxann Davies

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**Pwrpas yr Adroddiad:**

**Purpose of the Report:**

The purpose of this paper is to provide the SSPC with assurance and details of the key issues considered by the Velindre University NHS Trust Audit Committee, at its meeting on 28 April 2020.

**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:**

No direct impact

**Legal:**

**Iechyd Poblogaeth:  
Population Health:**

No direct impact

**Ansawdd, Diogelwch a Profiad  
y Claf:**

No direct impact

<b>Quality, Safety &amp; Patient Experience:</b>	
<b>Ariannol: Financial:</b>	No direct impact
<b>Risg a Aswiriant: Risk and Assurance:</b>	This report provides assurance to the Committee that NWSSP has robust risk management processes in place.
<b>Safonau Iechyd a Gofal: Health &amp; Care Standards:</b>	Access to the Standards can be obtained from the following link: <a href="http://gov.wales/docs/dhss/publications/150402standardsen.pdf">http://gov.wales/docs/dhss/publications/150402standardsen.pdf</a>
<b>Gweithlu: Workforce:</b>	No direct impact
<b>Deddf Rhyddid Gwybodaeth/ Freedom of Information</b>	Open and discloseable



## 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 28 April 2020, is outlined below:

<b>ALERT</b>	No matters to alert/escalate.
<b>ADVISE</b>	It was advised that the NWSSP Local Counter Fraud Specialist had been temporarily redeployed to the Dragon's Heart Field Hospital and therefore the Committee would receive the following Counter Fraud reports at the June 2020 meeting; NWSSP Counter Fraud Annual Report 2019-20, Self-Review Submission Tool Review and Work Plan 2020-21.

<p><b>ASSURE</b></p>	<p><b>Governance and Assurance Matters During COVID-19 Pandemic</b></p> <p>The Committee received a comprehensive verbal update from the NWSSP Managing Director and NWSSP Director of Finance and Corporate Services in relation to the handling of COVID-19 matters and the impact on the organisation. They provided insight and highlighted the importance of the challenging and complex work being undertaken by NWSSP staff across the board, ranging from Procurement going above and beyond to source, acquire and deliver PPE for frontline care, Informatics migrating 1500 staff to Microsoft Office365 and delivery of our business critical services to ensure NHS Wales staff are recruited and paid, as well as suppliers, contractors, GPs and opticians. NWSSP identified critical business services in the first instance, as being Accounts Payable, Procurement and PCS and recognised the importance of providing transactional, administrative and office based staff with the equipment needed to effectively work from home as a matter of urgency, in line with Government guidance. Buildings management and the safeguarding of staff has taken high precedence with implementing various controls at sites to comply with social distancing measures and reduce the risks arising.</p> <p>The Committee formally noted and recognised how helpful and flexible the Velindre Trust Board have been in adapting to the exceptional circumstances and turning around NWSSP requests rapidly, in order to assist in obtaining vital equipment.</p> <p>The Committee received an extraordinary report in relation to NWSSP financial expenditure and the changes to governance arrangements, as a result of COVID-19, including the changes made to the delegated limits for urgent COVID-19 expenditure and the establishment of a Finance and Governance Committee to monitor the overarching contracts and ensure due diligence for robust and complex arrangements, chaired by the Director of Audit and Assurance Services. Further, the NWSSP COVID-19 advance payment log for purchases and checklist was tabled at the Committee, which included a detailed breakdown of updates on goods received, to include planned delivery schedules, as informed by Procurement.</p> <p>The Committee received a number of items for information and assurance, as shared with the NHS Wales Board Secretaries to highlight the importance of maintaining effective governance arrangements in difficult times, namely:</p> <ul style="list-style-type: none"> <li>• Letter from Richard Bevan (ABUHB) to Dr Andrew Goodall regarding proposals from NHS Wales Board Secretaries and Director of Corporate Governance for COVID-19, dated 18032020;</li> <li>• Response to Letter from NHS Wales Board Secretaries and Director of Corporate Governance for COVID-19, dated 26032020; and</li> <li>• Letter from Dr Andrew Goodall to Chief Executives and Accountable regarding COVID19 Decision Making Financial Guidance, dated 30032020, with attached Financial Guidance.</li> </ul>
<p><b>ASSURE</b></p>	<p><b>External Audit</b></p> <p>Wales Audit Office (WAO) Position Statement was presented and set out an update on current and planned audit work, together with the Auditor General's planned programme of related studies and national events that may be of interest to the Committee, which would be held remotely in the current circumstances. The majority planned audit work for NWSSP was complete before COVID-19 and that the WAO Nationally Hosted NHS IT Systems and WAO Management Letter audits would be rescheduled to take place later in 2020. There were no significant issues of concern to report to the Committee.</p>

**ASSURE****Internal Audit**

The Committee received a comprehensive update from Internal Audit and in addition to the Position Statement, which highlighted progress of the 2019/20 Internal Audit Plan, together with an overview of other activity undertaken since the previous meeting. It was advised that good progress had been made and there would be an anticipated delay in finalising audits due to the current challenges faced in NWSSP, surrounding COVID-19. In addition, the Committee received the following reports for consideration:

- Primary Care Services Contractor Payments Internal Audit Report
  - Achieved substantial assurance and did not identify any issues that would be classified as a weakness in the system control or design.
- Stores (IP5) Internal Audit Report
  - Achieved substantial assurance and did not identify any issues that would be classified as a weakness in the system control or design.
- Business Case Scrutiny Internal Audit Report
  - Achieved reasonable assurance, with two medium priority recommendations for action.
- Cyber Security Internal Audit Report
  - Achieved reasonable assurance, with one high and four medium priority recommendations for action.
- Staff Expenses Internal Audit Report
  - Achieved reasonable assurance, with one high, two medium and one low priority recommendations for action.
- Purchase to Pay (P2P) Accounts Payable Internal Audit Report
  - Achieved reasonable assurance, with five medium priority recommendations for action.
- Contact Centres Internal Audit Advisory Review
  - It was noted that whilst the Advisory Review assignment is not allocated an assurance rating, advice and recommendations were provided to facilitate change and improvement, with the findings highlighting 3 recommendations for action.

The Committee received the Head of Internal Audit Opinion and Annual Report 2019-20, which awarded an overall opinion of reasonable assurance, together with summarised results of the internal audit work performed during the year. The report included a summary of audit performance in comparison to the plan and an assessment of compliance with the Public Sector Internal Audit Standards (PSIAS). 20 internal audit reviews were undertaken during the year, of which; 8 achieved substantial assurance, 10 achieved reasonable assurance and 2 were categorised as advisory reports, with assurance being not applicable. There had been no limited assurance reports generated during the financial year and advised that where no assurance opinion was awarded, this was by design, due to an advisory or investigative piece of work and the plan was informed on a risk basis.

The Committee received a helpful Internal Audit Planning Paper for 2020-21, setting out the steps taken by Audit and Assurance Services to support NHS Wales as it deals with COVID-19. For example, ensuring Internal Audit remain in a position to provide Opinions for 2019/20, taking into account the significant operational pressures that organisations are under and progressing where possible whilst working remotely and continuing to provide advice to organisations on maintaining appropriate governance and financial controls, whilst ensuring that front line services receive the staff and equipment they need. It was anticipated that limited internal audit work would be undertaken as NHS Wales deals with COVID-19 over

	<p>the coming months, with a full programme of audit and assurance recommending, possibly in the second quarter of 2020/21, at the earliest. It was agreed that the Committee would approve final sign-off at the June 2020 meeting.</p>
<b>ASSURE</b>	<p><b>Assurance, Risk and Governance</b></p> <p>The Draft Annual Governance Statement (AGS) for 2019-20 was presented for comment and it was noted that it paints a positive picture overall with nothing contentious to report. The document was currently in draft format and would be brought back in June for final approval. For assurance, the SMT had approved the AGS in its draft format.</p> <p>The Corporate Risk Register highlighted four existing red risks, six amber risks, three yellow risks and one green risks in the Risks for Action section of the Register. There remained one yellow risk in the Risks for Monitoring section and the Committee was reminded that the Register is reviewed at each SSPC, Audit Committee and Formal SMT meeting. The existing four red risks were summarised as follows:</p> <ul style="list-style-type: none"> <li>• The costs of responding to COVID-19 cannot be contained within available funding;</li> <li>• Threat to the supplies of medical consumables and equipment;</li> <li>• The Northern Ireland model procured to replace the NHAIS system fails to deliver the anticipated benefits within required timescales impacting the ability to pay GPs; and</li> <li>• NHS Digital withdrawing the Ophthalmics Payment service from the end of March 2020 (since pushed back to September 2020).</li> </ul> <p>The Risk Management Protocol and Risk Appetite Statement were presented for Committee approval, following a refresh being undertaken. The Protocol was last approved at the June 2018 meeting and the Statement last approved at the October 2018 meeting. There were no significant changes made to either document since that time and they had been recently re-approved by the SMT at the January 2020 meeting. The Committee was content to approve the Protocol and Statement.</p> <p>In relation to the tracking of Audit Recommendations, progress was reported as 196 total recommendations, of which, 194 were implemented, one was not yet due (medium priority) and one proposed revised deadline of 31/03/2021, which was agreed by the Committee.</p>
<b>INFORM</b>	<p>The following items were received for Committee information:</p> <ul style="list-style-type: none"> <li>• Audit Committee Forward Plan 2020-21</li> <li>• Audit Committee Effectiveness Action Plan</li> <li>• NWSSP Integrated Medium Term Plan Summary 2020-23</li> </ul>
<p><b>DATE OF NEXT MEETING:</b>          Tuesday, 30 June 2020 from 14:00-16:30          NWSSP Boardroom HQ, Charnwood Court, Nantgarw / By Skype (As appropriate)</p>	

## 2. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

- **NOTE** the Assurance Report