

**NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE AGENDA
27TH MARCH 2018 - 10:00 TO 13:00 - BOARDROOM, NWSSP HQ, CHARNWOOD COURT**

SSPC Agenda 27032018.doc

- 0 PART A
- 1 PRELIMINARY MATTERS
- 1.1 Welcome and Introduction - Chair
- 1.2 Apologies for Absence - Chair
- 1.3 Declarations of Interest - Chair
- 1.4 Unconfirmed Minutes of Meeting Held on 18/01/2018 - Chair
 - 1.4 Unconfirmed Minutes of Meeting Held on 18012018.docx
- 1.5 Action Log - Chair
 - 1.5 Action Log.doc
- 1.6 Matters Arising not considered on the Action Log - Chair
- 2 SERVICE REVIEW
- 2.1 Internal Audit Strategy (Presentation) - Director of Audit & Assurance
- 2.2 Welsh Language Standards [No7.] Regulations 2018 (Presentation) - Welsh Language Officer
 - 2.2 Welsh Language Standards No.7 Regulations 2018.docx
- 3 CHAIR AND MANAGING DIRECTOR'S REPORTS
- 3.1 Chairman's Report (Verbal) - Chair
- 3.2 Managing Director's Report (Verbal) - Managing Director
- 3.3 Prudent Procurement (Verbal) - Managing Director
- 3.4 Health Education and Improvement Wales (HEIW) Update (Verbal) - Managing Director
- 3.5 National Procurement Service (NPS) Update (Verbal) - Managing Director
- 3.6 Senior HR Arrangements (Verbal) - Managing Director
- 4 ITEMS FOR APPROVAL / ENDORSEMENT
- 4.1 Integrated Medium Term Plan (IMTP) 2018-2021 – Financial Discussion - Director of Finance & Corporate Services
 - PLEASE KINDLY NOTE THAT THE IMTP ATTACHMENT IS 247 PAGES - PLEASE DO NOT PRINT*
 - Shared Services - Collated Feedback -SSPC Update Mar18.docx
 - NWSSP IMTP SSPC Mar 18.pdf
- 4.2 Board Decision Required for Commitment Exceeding £100k for the Period 19/01/18 - 20/03/18 - Managing Director
 - 4.3 Board Decision Required for Commitment Exceeding £100k for the Period 19th January 2018 - 20th March 2018.docx
- 4.3 Draft Annual Governance Statement - Director of Finance & Corporate Services
 - SSPC Cover Sheet Annual Governance Statement.docx
 - Annual Governance Statement 2017-18 Draft.docx
- 4.4 Benefits Portal (Verbal) - Director of Finance & Corporate Services
- 5 PROJECT UPDATES
- 5.1 Purchase to Pay Update - Head of Accounts Payable & E-enablement - TO FOLLOW
- 5.2 Update on Laundry Review (Verbal) - Managing Director
- 5.3 Update on Catering Review (Verbal) - Managing Director
- 5.4 Transfer of Redress from Welsh Government to NWSSP - Director of Finance & Corporate Services
 - 5.4 Transfer of Redress from Welsh Government to NWSSP.docx
- 6 GOVERNANCE, PERFORMANCE AND ASSURANCE
- 6.1 Finance and Performance Report - Director of Finance & Corporate Services
 - 6.1 Finance and Performance Report.docx
- 6.2 Welsh Risk Pool Financial Position - Director of Finance & Corporate Services

6.3 Corporate Risk Register.docx

6.3 Appendix 1 Corporate Risk Register.pdf

7 ITEMS FOR INFORMATION / DISCUSSION

7.1 Audit Committee Highlight Report - Director of Finance & Corporate Services

7.1 Audit Committee Highlight Report.docx

8 OTHER MATTERS

8.1 Any Other Urgent Business

8.2 Date of Next Meeting: Thursday 17th May 2018, Boardroom, NWSSP Headquarters, Nantgarw









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Shared Services
Partnership





NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE
TUESDAY 27TH MARCH 2018
10:00 – 13:00
BOARDROOM, CHARNWOOD COURT, NANTGARW

AGENDA

PART A		
1. PRELIMINARY MATTERS		LEAD/ ATTACHMENTS
1.1	Welcome and Introductions	Chair
1.2	Apologies for absence	Chair
1.3	Declarations of Interest	Chair
1.4	"Unconfirmed" Minutes of meeting held on 18 th January 2018	Chair  1.4. Unconfirmed Minutes of Meeting H
1.5	Action Log	Chair  1.5 Action Log.doc
1.6	Matters Arising not considered on the action log	Chair
2. SERVICE UPDATES		
2.1	Internal Audit Strategy	Director of Audit & Assurance Presentation
2.2	Welsh Language Standards [No7.] Regulations 2018	Welsh Language Officer  2.2 Welsh Language Standards No.7 Regul Presentation

3. CHAIR AND MANAGING DIRECTOR'S REPORTS		
3.1	Chairman's Report	Chair Verbal
3.2	Managing Director's Report	Managing Director Verbal
3.3	Prudent Procurement	Managing Director Verbal
3.4	Health Education and Improvement Wales (HEIW) Update	Managing Director Verbal
3.5	National Procurement Service (NPS) Update	Managing Director Verbal
3.6	Senior HR Arrangements	Managing Director Verbal
4. ITEMS FOR APPROVAL/ENDORSEMENT		
4.1	<p>Integrated Medium Term Plan (IMTP) 2018-2021 – Financial Discussion</p> <p>PLEASE KINDLY NOTE THAT THE IMTP ATTACHMENT IS 247 PAGES - PLEASE DO NOT PRINT</p>	<p>Director of Finance & Corporate Services</p>  <p>4.1 Shared Services - Collated Feedback -SS</p>  <p>4.1 Appendix 1 NWSSP IMTP SSPC M.</p>
4.2	Board Decision Required for Commitment Exceeding £100k for the Period 19 th January 2018 - 20 th March 2018	<p>Managing Director</p>  <p>4.2 Board Decision Required for Commitr</p>
4.3	Draft Annual Governance Statement	Director of Finance & Corporate Services

		 4.3 SSPC Cover Sheet Annual Governance St  4.3 Appendix 1 Annual Governance St
4.4	Benefits Portal	Director of Finance & Corporate Services Verbal
5. PROJECT UPDATES		
5.1	Purchase to Pay Update - Head of Accounts Payable & E-Enablement	Director of Finance & Corporate Services To Follow
5.2	Update on Laundry Review	Managing Director Verbal
5.3	Update on Catering Review	Managing Director Verbal
5.4	Transfer of Redress from Welsh Government to NWSSP	Director of Finance & Corporate Services  5.4 Transfer of Redress from Welsh C
6. GOVERNANCE, PERFORMANCE AND ASSURANCE		
6.1	Finance and Performance Report	Director of Finance & Corporate Services  6.1 Finance and Performance Report.c
6.2	Welsh Risk Pool Financial Position	Director of Finance & Corporate Services

		 6.2 Welsh Risk Pool Financial Update.docx
6.3	Corporate Risk Register	Director of Finance & Corporate Services  6.3 Corporate Risk Register.docx  Appendix 1 - SSPC Corporate Risk Regist
7. ITEMS FOR INFORMATION/DISCUSSION		
7.1	Audit Committee Highlight Report	Director of Finance & Corporate Services  7.1 Audit Committee Highlight Report.docx
8.OTHER MATTERS		
8.1	Any Other Urgent Business	Chair
8.2	<u>Date of Next Meeting</u> Thursday, 17 th May 2018, Boardroom, NWSSP Headquarters, Nantgarw	Chair



MINUTES OF THE SHARED SERVICES PARTNERSHIP COMMITTEE (SSPC)

THURSDAY 18TH JANUARY 2018

10:00 – 13:00

NWSSP HQ, BOARDROOM

Present:

Attendance	Designation	Health Board / Trust
Margaret Foster (MF)	Chair	NWSSP
Neil Frow (NF)	Managing Director	NWSSP
Geraint Evans (GE)	Director of Workforce and Organisational Development	ABUHB
Jo Davies (JD)	Director of Workforce and Organisational Development	Cwm Taf UHB
Chris Lewis (CL)	Deputy Director of Finance	Cardiff & Vale UHB
Steve Ham (SH)	Chief Executive	Velindre NHS Trust
Nia Williams (NW) via VC	Executive Project Manager	Hywel Dda UHB
Huw Thomas	Director of Finance	BCUHB
Chris Turley (CL)	Assistant Director of Finance	WAST
Steve Elliott (SE)	Deputy Director of Finance	Welsh Government
Andy Butler (AB)	Director of Finance & Corporate Services	NWSSP
Jacqui Maunder (JM)	Head of Corporate Services	NWSSP
Darron Dupre (DD)	Trade Union Representative - Unison	NWSSP
Mark Roscrow (MR) (Items 5.2 & 7.5)	Director of Procurement Services	NWSSP
Marie-Claire Griffiths (Item 2.1.)	IMTP Lead	NWSSP
Karen Thomas (KT)	Secretariat	NWSSP

1. PRELIMINARY MATTERS		
WELCOME AND INTRODUCTIONS		
No.	Minute	Action
1.1	The Chair welcomed everyone to the January 2018 Shared Services Partnership Committee (SSPC) meeting.	
APOLOGIES FOR ABSENCE		
1.2	Apologies of absence were received from the following: Robert Williams, Director of Governance, Cwm Taf UHB Eifion Williams, Director of Finance, Powys THB Melanie Westlake, Board Secretary/Head of Corporate Governance, PHW Hazel Robinson, Director of Workforce & OD, NWSPP	
DECLARATIONS OF INTEREST		
1.3	There were no additional declarations of interest to those already declared.	
UNCONFIRMED MINUTES OF THE MEETING HELD ON 16 th NOVEMBER 2017		
1.4	The unconfirmed minutes of the meeting held on 16 th November 2017 were agreed as a true and accurate record of the meeting with the exception that Huw Thomas was in attendance at that meeting, and this had not been recorded on the attendee list within the minutes.	
ACTION LOG		
1.5	Members NOTED the updates provided and ENDORSED the Action Log.	
MATTERS ARISING		
1.6	No matters were raised.	
2	SERVICE REVIEW	
Draft INTEGRATED MEDIUM TERM PLAN (IMTP) 2018-2021		
2.1	The draft Integrated Medium Term Plan (IMTP) 2018-2021 was received . Andy Butler (AB) Director of Finance & Corporate Services provided an update on the feedback received from Welsh Government on progress in delivering the performance measures outlined within the IMTP 2017-2018. The feedback stated that NWSSP had a strong plan. NWSSP were keen to strengthen its arrangements for consulting and engaging with Health Board's/Trusts on its IMTP and	

	<p>had devised an engagement table to collect information on how NWSSP could further support NHS bodies in Wales.</p> <p>Marie Claire Griffiths (MCG), IMTP Lead gave an informative presentation on the NWSSP's IMTP Service Development Roadmap 2018-19 and went through the 5 key themes of working: Supporting Sustainable Primary Care; Sharing Best Practice; Workforce Modernisation; Supporting Service Re-design; and "Once for Wales" Systems.</p> <p>A discussion took place regarding the potential "Once for Wales" services that NWSSP could provide to NHS Wales. The Committee were supportive of the initiatives .</p> <p>One example given was the potential for a "Welsh Language Hub" to support Health Boards/Trusts in managing Welsh language literature translations and simultaneous translations. It was suggested that standardisation of services was essential to ensure that a consistent service was provided across NHS Wales.</p> <p>Neil Frow (NF), Managing Director advised that he had met with Mark Drakeford, Cabinet Secretary for Finance at the recent Procurex Event and had positive discussions on the progress and the impact that NWSSP had delivered to date and potential future opportunities whereby NWSSP could do more. NF advised that there were a number of non-departmental bodies that were keen to explore the opportunity of working with shared services.</p> <p>AB advised that work had begun on developing a business case for a "Welsh Language Hub" and this would be presented to the next Committee meeting for consideration. The Committee discussed Welsh Language expenditure and noted that significant expenditure had been invested in creating a bilingual interface for the TRAC recruitment system. NF advised that not many Health Boards/Trusts were making full use of the bilingual interface at present.</p> <p>MCG explained that the key priorities for NWSSP's IMTP over the next three years were:</p> <ol style="list-style-type: none"> 1. Value For Money – to develop a highly efficient and effective shared services organisation which delivers real term savings and service quality benefits to its customers 2. Customers – to develop an open and transparent customer focused culture that supports the delivery of high quality services 	
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	<ol style="list-style-type: none"> 3. Staff – to have an appropriately skilled, productive, engaged and healthy workforce resourced to meet service needs. 4. Excellence – To develop an organisation that delivers process excellence through a focus on continuous service improvement, automation and the use of technology. 5. Service Development – to develop and extend the range of high quality services provided to NHS Wales and the wider public sector. <p>DD suggested that the reference to “customers” could be amended to “partnerships” to reflect NWSSP’s commitment to partnership working.</p> <p>MCG advised that the use of the term “customer” was to reflect what NWSSP needed from its customers with the use of the four Cs: Collaboration; Commitment; Co-operation and Consolidation.</p> <p>AB informed the Committee that there were three aspects to the revenue budget, namely Core Services, Risk and Non-medical. APB advised the Committee on the key assumptions contained within the Financial Strategy and in particular the creation of a “Reinvestment Fund” to facilitate in a number of investment areas including RPA, Programme Management capacity and technology. He also highlighted that the creation of HEIW had very recently been deferred for 6 months and therefore the IMTP would need to be updated to reflect the recent decision.</p> <p>The Committee discussed the need to invest in staff resource and technology in the mid-term to release savings in the long-term.</p> <p>NF advised that NWSSP had invested in robotic process automation (RPA) and enhanced its IT capabilities with a view to being more cost efficient. The findings from a recent pilot exercise utilising RPA had proved to be extremely positive with demonstrable savings in terms of both time and resource. NF advised that NWSSP were also investing in a graduate programme for Procurement Services due to the challenges encountered in recruiting experienced procurement staff.</p> <p>AB advised that NWSSP had an ambitious improvement programme, which required capital funding. AB advised that NWSSP were seeking £4.5m from Welsh Government as NWSSP only had a discretionary fund of £380,000 which was lower than any other organisation in Wales.</p> <p>AB advised that there had been investment in NWSSP’s IT systems for several years and it was important that this</p>	
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	<p>was maintained. He highlighted that IT was an enabler for NWSSP to continue to develop service improvements, despite not being able to fund it within the existing discretionary capital allowance..</p> <p>HT requested that a more in-depth conversation on the future financial requirements for NWSSP be discussed at the next Committee meeting.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the plan for the initial submission to Welsh Government at the end of January 2018. In approving the plan members emphasised the importance of further work being undertaken over the next few months to review additional opportunities to support Health Boards & Trusts and deliver efficiencies through increased collaborative working across Wales. 	
3. CHAIR AND MANAGING DIRECTOR'S REPORT		
CHAIR'S REPORT		
3.1	<p>The verbal update from the Chair was received.</p> <p>The Chair informed the Committee that she had visited Cardiff and Vale UHB on the 6th December 2017 as part of her annual programme of visits to Health Boards and Trusts.</p> <p>The Chair advised that the Welsh Government's Final Report on the Parliamentary Review of Health and Social Care in Wales was published on the 16th January 2018 and that reference to the need for NWSSP to work more closely with the NHS Wales Informatics Services (NWIS) was not clear. It was noted that work was being undertaken to align the IMTP to the review.</p> <p>Steve Elliott (SE) stated that Welsh Government's strategy to response to the report would be completed by Spring 2018.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update 	
MANAGING DIRECTOR'S REPORT		
3.2	<p>The verbal update from the Managing Director, NWSSP was received.</p> <p>NF provided an update on:</p> <p>ESR developments to the Oracle system were progressing well and only minor issues had been identified for the</p>	

upgrade to version 12.2. Work on the Hire to Retire project was also progressing well and no issues had been reported for the central team in England. There was a need to work with the NHS Wales Informatics Services (NWIS) concerning ESR enhancements, which included the ability to use emails as a workflow to approve areas such as annual leave requests through ESR.

SMTL - NF advised that the Surgical Materials Testing Laboratory (SMTL) team had recently re-attained the UKAS accredited ISO 17025 international standard for testing laboratories

Catering Review – NF advised that NWSSP had been asked to lead a piece of work to put in place a suitable framework for an IT system which would be made available for health boards to use with regard to catering services, this had been discussed at a recent Public Accounts Committee (PAC) meeting attended by Dr Andrew Goodall, Director General/Chief Executive NHS Wales. Given that NWSSP were leading the catering review project Anthony Hayward, Assistant Director National Clinical Commissioning Unit (NCCU) had been asked to lead the project on behalf of NWSSP. Working groups were being set up with NWIS and a timetable was being put in place to track progress.

Staff Pensions – NWSSP were receiving increased calls to assist NHS staff with pension queries and NF emphasised that the NHS Business Services Authority were responsible for administering the NHS pension scheme in England and Wales. It was also important to note that NWSSP were unable to provide staff with advice on pensions as we were not a regulated body in this respect and so could not offer such advice. It was further noted that as a consequence of reducing the standard Lifetime Pensions Allowance and Annual Allowance changes more and more queries were being put forward to Employment Services. The Committee noted that staff may be surprised by the risk liability and the potential monetary hit they may encounter under the new rules. It was agreed that Paul Thomas Director of Employment Services will draft a communication to be issued to all NHS Wales staff outlining the potential impact of the Pensions allowance changes to staff and to inform them that NWSSP were unable to offer pensions advice.

Extension of Services – as part of NWSSP's commitment to supporting the NHS and broader public sector to manage potential business pressures NWSSP had been in discussion with South Wales Police on a potential collaboration with NWSSP's Health Courier Services (HCS) and a meeting was due to be held with the Welsh NHS Confederation and the

	<p>Welsh Government Sponsored Bodies to discuss potential opportunities for support.</p> <p>Other areas of interest were :</p> <p>NF advised that the Audit and Assurance strategy previously discussed by the Committee would be brought to the next meeting.</p> <p>NF advised that the Welsh Government has issued a consultation on "Proposed health board boundary change in Bridgend"¹ which would involve the Princess of Wales Hospital in Bridgend and that there may be a significant amount of support work for NWSSP to support primary care teams. NF advised that NWSSP would support Abertawe Bro Morgannwg University Health Board (ABMU) and Cwm Taf University Health Board (CTUHB) in managing any agreed changes as consequence of the consultation.</p> <p>NF advised that the Evidence Based Procurement Board (EBPB) (previously known as the All Wales Medical Consumables and Devices Strategy Group (AWMCDSG) were reviewing the pipeline of areas to review.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update 	
4. ITEMS FOR APPROVAL/ENDORSEMENT		
Feedback on Laundry Review		
4.1	<p>The verbal update on progress in obtaining support for the Laundry Services Review to progress to a full business case was received.</p> <p>NF stated that further to the Committee endorsing the preferred Option and recommendations within the Laundry Review report at the November 2017 meeting and fully supporting moving to the next stage, as Laundry Services did not fall under the current NWSSP portfolio of services the Committee had agreed for members to seek support from their own organisations before NWSSP could proceed to the development of a full business case. NF requested that each representative provide an update on progress.</p> <p>Geraint Evans (GE), Director of Workforce and Organisational Development (DWODS) for Aneurin Bevan University Health Board (ABUHB) advised that</p>	

¹ Welsh Government Consultation - Proposed health board boundary change in Bridgend
<https://consultations.gov.wales/consultations/proposed-health-board-boundary-change-bridgend>

	<p>the laundry report will be considered by the Board on the 13th February 2018.</p> <p>Huw Thomas (HT), Deputy Director of Finance, Betsi Cadwaladr University Health Board (BCUHB) stated that the outline business case which gave options for the replacement of the existing laundry services had been considered by the board and that their view was in support of the recommendation coming out.</p> <p>Chris Lewis (CL), Deputy Director of Finance, Cardiff & Vale University Health Board (C&VUHB) stated that the report due to go to the to Board at the end of January 2018 and that the impact of the proposed changes had less impact on C&VUHB in comparison with others.</p> <p>Chris Turley (CT), Deputy Director of Finance, Welsh Ambulance Services Trust (WAST) and Steve Ham (SH), Chief Executive, Velindre NHS Trust advised the report was also going to their Board meetings in January 2018.</p> <p>SH advised that the report would be would be discussed in camera due to the sensitivities raised.</p> <p>Nia Williams (NW), Executive Project Manager, Hywel Dda University Health Board (H DUHB) advised the report was going to Board in March 2018 as per the email Jo Wilson, Board Secretary/Director of Governance had sent to Jacqui Maunder, Head of Corporate Services, NWSSP. NW advised that there were potential issues for H DUHB, especially in relation to staff concerns and engagement.</p> <p>Jo Davies (JD), Director of WODS, Cwm Taf University Health Board (CTUHB) that the report would be going to the Board in March 2018.–</p> <p>Darron Dupre (DD), Unison representative advised that he had concerns about any impact on long-serving staff.</p> <p>The Committee discussed DD's concerns and the Chair stated that Committee had approved the development of an NHS Wales Laundry Production Units Service Review project at its meeting on 17th May 2016 as a result of the publication of the "Decontamination of linen for health and social care Guidance for linen processors implementing BS</p>	
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	<p>EN 14065". The Chair also stated that no decisions had been made the work to date had only looked at whether the current arrangements were fit for purpose and met the new standards and what options could be looked at going forward. As part of that process a number of laundry staff had been included as part of the working group preparing the outline business case and that additional consultation would be undertaken with staff if the Health Boards/Trusts agreed that NWSSP could progress to developing a final business case.</p> <p>The Chair advised that the next stage would also look at the finer details of how savings could be realised and that it was also important to understand that the project would have a long programme of work, would require capital funding and that the existing laundry facilities would continue to operational whilst any agreed new sites were developed.</p> <p>NF advised that a further update would be provided at the next meeting.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the verbal updates 	
5. PROJECT UPDATES		
Prudent Procurement		
5.1	<p>The report on Prudent Procurement was received.</p> <p>MR gave an update on progress made in respect of the Evidence Based Procurement Board (EBPB) (previously known as the All Wales Medical Consumables and Devices Strategy Group (AWMCDSG)) on Prudent Procurement and gave an overview of the links to the value based procurement programme led through ABUHB.</p> <p>MR said that Dr Andrew Goodall, Director General/Chief Executive NHS Wales had very clear expectations about the EBPB's recommendations and actions with the desire to bring more pace to the review process. The EBPB met on 15th November and provided final approval to the restructure proposal including change in name. A number of topics were explored during the meeting assessing initial findings to decide if additional work was required. The areas included: Ultrasound Treatment, Capsule Endoscopy, Offloading Devices, Hip Protectors, Glucose Test Strips, DACC Coated Dressings and PT26 - Flash Glucose Monitoring.</p>	

	<p>The EBPB group had had initial discussions with Health Technology Wales to ensure that the two groups did not duplicate activity and to recognise the common goal of ensuring value, maximising outcomes and minimising variance in established technologies/devices currently in use in NHS Wales</p> <p>MR advised that a team was being assembled with support from Welsh Government and that he was in discussion with the University of South Wales to arrange student placements to support the programme.</p> <p>The Committee discussed work undertaken on cataracts and NF advised he was in discussion with Alan Brace, Director of Finance, Health and Social Care, Welsh Government on funding and said that there was a potential for inward investment.</p> <p>MR stated that the group were working in collaboration with the Life Sciences Hub, Cardiff and that they were the front door for the work of the group.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report 	
Purchase to Pay Update – No P.O. Pay Policy		
5.2	<p>The report seeking approval for the new NHS Wales No PO No Pay (No Purchase Order/No Payment) Policy was received.</p> <p>MR advised that the policy was a key enabler to improving the efficiency of the purchase to pay (P2P) process in NHS Wales by ensuring suppliers sought a purchase order (PO) number in advance of supplying goods and services. The policy ensures that NHS Wales only pays for goods, services and works, which have been properly ordered and authorised in accordance with the NHS Wales Procurement rules and relevant Standing Financial Instructions (SFIs) before receiving an invoice. It also ensures invoices received by the NHS Wales Accounts Payable teams can be processed efficiently to minimise delay to suppliers and contractors. Invoices received by the NHS Wales Accounts Payable Team without a valid PO number would severely delay payment to suppliers.</p>	

	<p>MR advised that the policy had been well received in terms of the P2P programme; however there had been a slow start due to resource issues. A full time resource had now been employed to address the issue.</p> <p>HT stated that the exceptions list was lengthy and the longer the list the more complicated the issues could become and that clarification was required on some of the issues.</p> <p>The Committee discussed delay issues with C&VUHB and it was noted that the Health Board were in agreement with the principle but would not be able to implement it as soon as other health bodies.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the NHS Wales No PO No Pay (No Purchase Order/No Payment) Policy for adoption by each Health Board and Trust across Wales with a view to it being implemented from April 2018 onwards and NOTE the delay in full implementation at C&VUHB 	
Priority Supplier Programme		
5.3	<p>The report on progress with the Priority Supplier Programme (previously referred to as the Oxygen Finance Ltd option) initiative was received.</p> <p>Further to the Committee agreeing to pursue the Oxygen Finance initiative in June 2017, the Velindre NHS Trust Procurement Team had awarded a contract to Oxygen Finance Limited utilising a Northumbrian County Council Framework Agreement in August 2017. A Steering Group was established during the Implementation Phase of the project comprising of representatives from the Health Boards/Trusts across NHS Wales.</p> <p>MR advised that there had been significant activity over the past 4 months, resulting in the programme going live some 6 weeks earlier than initially forecast. The key tasks undertaken to date included:</p> <ul style="list-style-type: none"> • ABMU Suppliers – Following the agreement that ABMU would be the pilot/blueprint organisation, a detailed examination of ABMU's supplier was undertaken. Suppliers were tiered according to their expenditure in ABMU and across Wales. There are 133 identified Tier 1 suppliers representing an All Wales spend of £775 million per annum spend. • Supplier on-boarding – to date 2 suppliers have joined the Programme. The gross rebate income 	

	<p>earned up to the 5th January is £2,688.70 and there has been lost opportunities of £678.89. This represents a rebate earned percentage of almost 80%. All 6 organisations (ABMU, AB, BCU, C&V, CT and HD) who trade with the on-boarded suppliers have all earned some rebate monies. Supplier meetings with NHS core suppliers are taking place on a weekly basis over the coming months, three meetings were held prior to the end of December (which were positively received from the supplier's perspective) and four further meetings are taking place week commencing 12th January 2018.</p> <ul style="list-style-type: none"> • Blueprint design - During October and November, workshops were held in ABMU to examine the purchase to pay processes for four areas of significant spend, that are not included as part of the core implementation. The four areas were: Continuing Health Care, Pharmacy, Nursebank/Temporary staffing and Estates and Construction. <p>The outputs from this review are currently being validated in workshops in Cardiff and Vale UHB and Aneurin Bevan UHB, however early indications indicated that the four areas could be included as part of the core implementation.</p> <p>Progress from the programme would be showcased at a conference in March 2018 and marketing brochure and a supplier 'micro site' to raise awareness of the programme was near completion and a data cleanse email would be issued to Tier 2 and 3 suppliers during January/ February 2018</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report. 	
Health Education and Improvement Wales (HEIW) Update		
5.4	<p>The verbal report on progress in establishing the "Health Education Improvement Wales (HEIW)" single body for workforce planning, development and commissioning of education and training was received.</p> <p>NF advised that the new date for the HIEW to go live was 1st October 2018 which gave the implementation team time to assess and deliver the areas required to enable the organisation run effectively from the start.</p>	

	<p>NF advised that Alexandra Howells, interim Chief Executive, ABMU had been appointed as the new Chief Executive, and that a letter had been issued stating that there had been a change to the official start date of HEIW.</p> <p>HIEW will be working in shadow form from the 1st April 2018 and the Cabinet Secretary for Health had announced the new independent members of the Board as Tina Donnelly, Ruth Hall, John Hill-Tout, Heidi Phillips, Gill Lewis and Ceri Phillips.</p> <p>NF advised that NWSSP had provided a great deal of support to the programme and a significant amount of work was ongoing to ensure the new deadline was going to be hit. NF said that NWSSP were currently the employing organisation for Dr Chris Jones, the Interim Chair of HIEW and that NWSSP would be supporting them to employ approximately ten people during the shadow period. NF advised that further clarity was needed about other interim arrangements such as leases for the new building etc..</p> <p>NF advised that IT issues were being resolved and that staff affected by the move to a new body had been kept fully informed of progress and that a formal consultation would be issued in due course. NF had written to the trade unions involved to keep them updated on progress.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update. 	
Technology Enabled Learning (TEL) Business Case		
5.5	<p>The Committee report on the business case to request recurrent funding to secure the Technology Enabled Learning (TEL) Strategy for Public Sector Wales was received.</p> <p>NF advised that the TEL team was set up in 2006 on a non-recurring basis and that Julie Rogers (JR), Director of WODS, Welsh Government had been sent a report requesting recurrent funding to continue providing the service to NHS Wales and other public sector organisations.</p> <p>NF advised that TEL was currently funded by the Health Technology Fund and that discussions were ongoing with regard to securing additional funding to keep the service running going forward.</p>	

	<p>The Committee discussed the work of TEL and it was suggested that NWSSP look at providing IT training for all staff on how to sue the system.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report. 	
Salary Sacrifice Portal – Lease Cars		
5.6	<p>The verbal report on the Salary Sacrifice Scheme Portal was received.</p> <p>AB advised that NWSSP had utilised the services of NHS Fleet Solutions to provide a salary sacrifice service within NHS Wales. He advised that the scheme had been very successful and there were over 1,600 lease vehicles in place across NHS Wales which provided an annual cash benefit of approximately £600 per vehicle to each health board.</p> <p>AB advised that the vehicles were energy efficient and contributed to the common goal of reducing CO2 emissions and the NHS' impact on the environment.</p> <p>AB explained that discussions had been held with a private sector Salary Sacrifice car provider, which offered a similar offering to NHS Fleet solutions. The initial discussions identified wide variations between the prices of the cars, with some being cheaper than NHS Fleet prices whilst others being more expensive AB requested approval from the Committee to introduce an extra Salary Sacrifice Provider to provide additional choice to staff.</p> <p>AB explained that both NHS Fleet and the other Salary sacrifice provider could offer a staff portal that would bring together a whole range of staff benefits.</p> <p>The Committee suggested that broader consideration should be given to extending the scheme to other staff benefits, including 'beneficial loans', which were interest-free, or at a rate below HMRC's official interest rate with a view to supporting staff in the current economic climate. It was agreed that further work would be undertaken a more detailed discussion should take place at the May 2018 meeting.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • ENDORSE the proposal to introduce an additional lease car salary sacrifice provider 	

Maternity Network – Training Business Case		
5.7	<p>The report outlining the plans and request for investment by the Maternity Network Wales for the implementation of training for Consultant-led Maternity Units was received.</p> <p>AB explained that clinical negligence claims were increasing significantly and that the costs of claims relating to maternity and obstetric events were of a high value. Over 50% of claims which were settled through the means of a Periodical Payment Order (PPO) related to these incidents and this meant that the Welsh Risk Pool (WRP) was currently committed to an annual long-term commitment of over £6m per year in relation to that group of claims.</p> <p>PPO settlements, involving claims relating to maternity and obstetric care which resulted in reimbursement to health bodies continued to represent a large proportion of the WRP payments. Based on the risk profile and expenditure there was a vital need make improvements across Wales, in this area to reduce harm and future costs to NHS Wales.</p> <p>The Welsh Risk Pool had considered the introduction of a multi professional structured training programme, which was currently going through a Procurement process.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report • ENDORSE the request for funding to be approved. 	
National Health Applications and Infrastructure Services (NHAIS)		
5.8	<p>The Committee verbal update on progress to replace the National Health Applications and Infrastructure Services (NHAIS) system was received.</p> <p>NF advised that progress was ongoing with Capita regarding developing options for the replacement of the NHAIS system and to establish exact costs. Alternative replacement options had also been considered including utilising the system in place in Northern Ireland as the software language requirements were compatible with NWSSP's IT skillset.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report 	

Patient Medical Record (PMR) service update		
5.9	<p>The report from on the ongoing Patient Medical Record (PMR) store and scan on demand service, provided to Health Board General Practices by Primary Care Services (PCS) was received.</p> <p>AB advised that the PMR Storage and Scan on Demand Service was an off-site storage and management facility on behalf of general medical practices in Wales. The facility currently had limited capacity; however there was an option to expand the service to meet the future needs of NHS Wales. The PMR service was a key enabler to release space currently utilised in general practices for the storage of paper PMRs.</p> <p>A business case outlining justification for the expansion and requesting funding to take on a new lease to increase storage space at Mamhilad, Brecon House, to adopt a new fire suppression system, extra roller racking and the provision of 2 scanners to support the PMR expansion programme was being submitted to the Velindre NHS Trust Board for approval.</p> <p>The Committee discussed the business justification case for PMR for storing GP records.</p> <p>Boards were keen for the PMR service to continue and had expressed demand for additional storage. AB advised that the extension of the service would require significant capital outlay upfront from £380k up to £1.1million. AB emphasised that the Fire suppression system was essential and that there were no such systems in place at local surgeries to safeguard information and minimise risk.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • ENDORSE the report and the request to Velindre NHS Trust for expenditure to be approved subject to capital funding being provided by Welsh Government 	
6. GOVERNANCE, PERFORMANCE AND ASSURANCE		
Finance and Performance Report		
6.1	<p>The report summarising the latest financial position and key performance indicators (KPIs) was received.</p> <p>AB informed the Committee that NWSSP were on track to exceed its financial targets for 2017-2018 and that there</p>	

	<p>had been an additional distribution of £0.750m declared for 2017/18. This increased the distribution from the planned £1.050m as outlined in the Integrated Medium Term Plan (IMTP) to £1.800m. Some NHS bodies had agreed to reinvest their share of the planned distribution. It was noted that NWSSP would still be able to break even and brokerage of £1m had been provisionally agreed with WG. It was however highlighted that the NWSSP capital allocation was insufficient to take forward a number of key initiatives but discussions with Welsh Government were ongoing.</p> <p>The Committee members reviewed and discussed performance as part of the scrutiny process.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report 	
Welsh Risk Pool Financial Position		
6.2	<p>The verbal update summarising the latest Welsh Risk Pool financial position was received. It was noted that Welsh Government working with NWSSP had managed to secure an additional £30 million from HM Treasury to cover the impact of the change in the Personal Injury Discount Rate. The Committee acknowledged the significant efforts of the WG and NWSSP Finance Teams in obtaining the additional funding</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the report 	
Corporate Risk Register		
6.3	<p>The report on the Corporate Risk Register was received.</p> <p>The Committee received an update on key risks and reviewed the updated Corporate Risk Register. The risks contained within the risk register included matters discussed within the business of the meeting.</p> <p>AB advised that there were currently three red risks identified on the register relating to:</p> <ul style="list-style-type: none"> • the ongoing issues following the changes made by NHS England in relation to primary care records transfers and the proposed changes to the Exeter payment and patient registration system; • The Technology Enabled Learning (TEL) portal requires additional support from NWIS to ensure 	

	<p>that user capacity is aligned with forecasted usage and is fully supported and managed.</p> <ul style="list-style-type: none"> recruitment challenges in professional service areas including procurement and engineering posts within the Specialist Estates Services department which had been discussed during an earlier agenda item on TEL <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the report 	
7. ITEMS FOR INFORMATION/DISCUSSION		
National Improvement Plan (MIP) Update		
7.1	<p>The verbal update on the work of the National Improvement Plan (NIP) was received.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the update 	
National Procurement Service (NPS) Update		
7.2	<p>The verbal update on the work of the National Procurement Service (NPS) was received.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the update 	
Audit Committee Highlight Report		
7.3	<p>The Shared Services Audit Committee Highlight report was received.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the report 	
ISO14001 Environmental Management		
7.4	<p>The report on re-attaining the ISO14001 environmental management system was received.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the update 	

WAO Public Procurement in Wales and National Procurement Service Reviews		
7.5	<p>The Wales Audit Office (WAO) reports on Public Procurement in Wales and the National Procurement Service were received.</p> <p>MR gave a summary of the reports and also referred to a letter received from Nick Ramsay AM, Chair of the National Assembly for Wales' Public Accounts Committee inviting comments and questions on Welsh Government's leadership role in public procurement and the effectiveness of governance arrangements. Draft responses were required by 22 January 2018.</p> <p>MR advised that Procurement fitness checks were not an easy process to benchmark to assess how organisations were performing. The WAO reports made reference to reviewing fitness checks as a way of measuring performance and identifying areas for investment.</p> <p>MR informed the Committee that there was a separate independent review being undertaken on the NPS which was an internally led programme review and that NWSSP had been asked to be involved in the consultation. A governance structure to support the review would be in place by Autumn 2018.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the reports 	
Strategic Outline Programme Feedback		
7.6	<p>The report on feedback from the strategic outline programme was received.</p> <p>AB advised that all organisations were required to submit a standing operating procedure (SOP) IT to Welsh Government. The feedback received on NWSSP's SOP had been very positive.</p> <p>AB advised that the feedback was a good result and provided the Committee with an assurance that NWSSP were on track and had clear direction of travel for IT.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update 	
8. OTHER MATTERS		
Any Other Urgent Business		
8.1	No other business matters were raised.	

Date of next meeting		
	<p>Date of Future Meetings:</p> <p>27 March 2018, Boardroom, NWSSP HQ, Nantgarw</p> <p>17th May 2018, Boardroom, NWSSP HQ, Nantgarw</p> <p>21st June 2018, Boardroom, NWSSP HQ, Nantgarw</p>	

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ACTION LOG

SHARED SERVICES PARTNERSHIP COMMITTEE (SSPC)

UPDATE FOR 27th MARCH 2018 MEETING

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS MARCH 2017
1	SSPC/11/17	16 th November 2018	<u>Prudent Procurement Report</u> The forward work plan of the All Wales Medical Consumables Group (AWMCG) to be presented to a future meeting	AB	April 2018	Discussion is ongoing.
2	SSPC/11/17	16 th November 2018	<u>Pharmacy Rebate Scheme</u> The Chair requested that a progress report be presented to Committee in 6 months time with an assessment of progress.	NF/MR	May 2018	Not yet due
3.	SSPC/11/17	16 th November 2018	<u>Laundry Review Project</u> As Laundry Services did not fall under the current NWSSP portfolio of services the Committee agreed for members to seek support from their own organisations before NWSSP proceeded to the development of a full business case for the laundry review project. Updates given at January 2018 meeting, further updates required at March 2018 meeting.	NF	March 2018	On agenda
4.	SSPC/1/18	18 th January	<u>Draft Integrated Medium Term Plan (IMTP) 2018-2021</u> An in-depth conversation on the future financial	AB	March 2018	On agenda

List No	Minute Ref	Date	AGREED ACTION	LEAD	TIMESCALE	STATUS MARCH 2017
		2018	requirements for NWSSP to be discussed at the next Committee meeting.			
5.	SSPC/1/18	18th January 2018	<u>Audit and Assurance Strategy</u> The Audit and Assurance strategy previously discussed by the Committee would be brought to the next meeting.	NF/SC	March 2018	On agenda
6.	SSPC/1/18	18th January 2018	<u>Business Case Welsh Language Hub/Welsh Language Standards</u> AB advised that work had begun on developing a business case for a “Welsh Language Hub” and this would be presented to a future Committee meeting for consideration. Presentation on new Welsh Language Standards Regulations on agenda.	AB	March 2018	On agenda
7.	SSPC/1/18	18th January 2018	<u>Staff Pensions Allowance Changes</u> Paul Thomas Director of Employment Services to draft a communication to be issued to all NHS Wales staff outlining the potential impact of the Pensions allowance changes for staff and to inform them that NWSSP were unable to offer pensions advice and that queries should be directed to the NHS Business Services Authority.	NF/PT	March 2018	Verbal update at meeting



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Shared Services
Partnership

EITEM AGENDA ITEM: 2.2
27 Mawrth 2018
27 March 2018

Mae'r Adroddiad wedi/ddim wedi ei Eithrio

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Welsh Language Standards [No7.] Regulations 2018

**ARWEINYDD:
LEAD:**

Andy Butler,
Cyfarwyddwr Gwasanaethau Cyllid a
Chorfforaethol.
Director of Finance & Corporate Services

**AWDUR:
AUTHOR:**

Non Richards,
Swyddog yr Iaith Gymraeg
Welsh Language Officer

**SWYDDOG ADRODD:
REPORTING
OFFICER:**

Jacqueline Maunder
Pennaeth Gwasanaethau Corfforaethol
Head of Corporate Services

**MANYLION
CYSWLLT:
CONTACT DETAILS:**

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

To provide the Partnership Committee with an update on the delivery of the Welsh Language at NWSSP to the Partnership Committee.

Llywodraethu/ Governance

**Amcanion:
Objectives:**

Excellence – to develop a bilingual organisation that delivers a seamless service in both English and Welsh to patients, service users and the public in Wales.

**Tystiolaeth:
Supporting
evidence:**

Explanatory memorandum, Welsh Language Standards [No7.] Regulations 2018¹

Ymgynghoriad/ Consultation :

¹ Explanatory memorandum, Welsh Language Standards [No7.] Regulations 2018, National Assembly for Wales <http://www.assembly.wales/laid%20documents/sub-ld11429-em/sub-ld11429-em-e.pdf>

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Adduned y Pwyllgor/Committee Resolution (insert ✓):							
DERBYN/ APPROVE		ARNODI/ ENDORSE		TRAFOD/ DISCUSS	✓	NODI/ NOTE	✓
Argymhelliad/ Recommendation		The Committee are requested to: <ul style="list-style-type: none"> • NOTE the report • DISCUSS the potential of NWSSP offering "Welsh Language Unit/Hub" to support NHS bodies in complying with the Welsh Language Standards (No. 7) Regulations 					

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	The Equality Act 2010 describes nine protected characteristics upon which grounds it is unlawful to discriminate, this includes race. Whilst, Welsh language is not specifically referred to under the Act, this report demonstrates NWSSP's commitment to equality and ensuring that people do not suffer discrimination and are not disadvantaged when accessing services.
Cyfreithiol: Legal:	The Welsh Language Standards (No. 7) Regulations 2018 were laid to Welsh Government on the 27 th February 2018 by the Minister for Welsh Language and Lifelong Learning. If passed by the Assembly, these will be the seventh Welsh Language Standards Regulations to be made. It has been decided that the title of these Regulations will refer to (No. 7) as they follow on from the Welsh Language Standards (No. 6) Regulations 2017 made in January 2017. It is intended that all the Regulations made under section 26 of the Welsh Language (Wales) Measure 2011 ('the Measure') will be made in a series, in the same way as commencement orders. It is felt that this approach will make the Regulations easier to deal with and to refer to, particularly when Compliance Notices refer to Regulations.
Iechyd Poblogaeth: Population Health:	No direct impact.
Ansawdd, Diogelwch a Profiad y Claf:	NWSSP is committed to creating a fully bilingual service for NHS Wales, providing equally high

Quality, Safety & Patient Experience:	quality services in both Welsh and English which support and contributes towards positive patient experiences.
Ariannol: Financial:	To fully implement the provisions of the Welsh Language Standards [No7.] Regulations 2018 financial resource may be required to strengthen capacity and human resource.
Risg a Aswiriant: Risk and Assurance:	Non-compliance with provisions of the standards could result in financial penalties and potential reputational risk.
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Standard 2, 4,5,6 & 7
Gweithlu: Workforce:	The Welsh Language Standards [No7.] Regulations 2018 require a commitment to developing a bilingual workforce that can provide a bilingual service and this report outlined steps that are being taken to achieve this.
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open.

Welsh Language Standards [No7.] Regulations 2018

1. CEFNDIR/BACKGROUND

The Welsh Language (Wales) Measure 2011 (the Measure) makes provision for the specification of standards of conduct in relation to the Welsh language ("standards"). These replace the system of Welsh language schemes provided for by the Welsh Language Act 1993. The Welsh Language (Wales) Measure 2011 makes Welsh an official language in Wales. This means it must be treated no less favorably than English.

These Regulations specify standards in relation to the conduct of 27 bodies listed in regulation 3 of the Regulations (which are referred to in the Regulations as "bodies"). The Regulations also authorise (subject to certain exceptions set out in regulation 3) the Commissioner to give a compliance notice to those bodies, in relation to standards specified by the Regulations.

The Welsh Language Standards (No. 7) Regulations ('the Regulations') specify service delivery standards; policy making standards; operational standards; and record keeping standards.

The Regulations also make the standards specifically applicable to the Local Health Boards and National Health Service Trusts in Wales, enabling the Welsh Language Commissioner ('the Commissioner') to issue Compliance Notices to those organisations in relation to the standards specified. Velindre NHS Trust includes NHS Wales Informatics Service, the NHS Wales' Shared Service Partnership and the Welsh Blood Service.

The Regulations also made an amendment to the Welsh Language Standards (No. 4) Regulations 2016 by adding Social Care Wales to Schedule 6 to the Regulations. The regulations focus on key areas that require in-depth policy deliberations including proposals on clinical consultation and the approach to delivering bilingual primary care services.

2. CRYNODEB/SUMMARY

On the 27th of February 2018 Dr Andrew Goodall, Director General/Chief Executive NHS Wales, wrote to the Chief Executives of Health Boards, Trusts and the Welsh NHS Confederation, to inform them that following the Welsh Government's public consultation "Welsh Language Standards – improving services for Welsh speakers within the health sector"² undertaken between July and October 2016, the draft Draft Welsh Language Standards for the health sector "The Welsh Language Standards (No. 7) Regulations" were laid on the 27th of February 2018 and were published online for viewing.

During the process of reviewing the draft Regulations the Welsh Government identified opportunities to reduce the number of standards without eroding the policy aim of promoting and facilitating greater use of the Welsh language. Some of the individual standards have been merged, and some standards which were considered as onerous or overly bureaucratic have been removed. This has resulted in 64 less individual standards overall.

The letter issued on the 27th February 2018, noted that Welsh Government had considered the post consultation changes to the Welsh Language Standards for the health sector and advised that the approach taken by Welsh Government was reasonable and proportionate to support both health and Welsh language policy priorities and objectives.

²Welsh Government "Welsh Language Standards – improving services for Welsh speakers within the health sector" Consultation, July 2016 <https://beta.gov.wales/welsh-language-standards-improving-services-welsh-speakers-within-health-sector>

If the regulations are agreed and passed by the National Assembly for Wales in 2018, they will further support improvement in Welsh language services within the health sector and build on the good work that NHS bodies are already undertaking to demonstrate compliance with the objectives of the Welsh Government's "More than just words" original strategic framework for Welsh language services in health, social services and social care, launched in 2012, and the Follow-on strategic framework for Welsh language services in health, social services and social care 2016-2019, published in April 2017³. The timescales for the regulations being formally adopted are outlined in Figure 1 below:

Figure 1 – Timescales for Adoption of the Welsh Language Standards (No. 7) Regulations

Date	Action
14 March 2018	The National Assembly for Wales' "Culture, Welsh Language and Communications Committee" will take evidence on the Welsh language standards for health services.
20 March 2018	The vote on the Standards will be held in a Plenary session at the Senedd.
29 June 2018	This is the date the Regulations will come into force - this is the first date where the Commissioner will be able to place a draft compliance notice on NHS bodies.

2.1 The Next Steps for the NWSSP

The Service Delivery Standards and the Operational Standards within the updated regulations will present significant challenges for the NWSSP. The Standards are very clear in detailing what is required of health sector and the Welsh Language Officer has undertaken a baseline assessment of NWSSP's existing compliance level against the standards and is undertaking an Impact Assessment Exercise to identify gaps in compliance and to identify what additional support is required to fully comply with the provisions of the regulations.

³ Welsh Government "Follow-on strategic framework for Welsh language services in health, social services and social care 2016-2019"
<http://gov.wales/topics/health/publications/health/guidance/words/?skip=1&lang=en>

The NWSSP provide NHS Wales with a diverse mix of complex support services and the Impact Assessment Exercise will:

- Provide each individual directorate and service delivery team with the opportunity to understand the requirements of the Standards and to give due consideration to whether they are able to meet the requirements of each Standard;
- Identify how each service team currently comply with the Standards or intend to meet the requirements of the Standards;
- Identify areas where support will be required in terms of negotiating any lead in time; translation support/gauging increase in demand; training and development requirements/gauging increase in demand; workforce planning (recruitment and retention); establishing a protocol to identify and determine Welsh skill requirements for key positions within the organisation to meet our business requirements prioritising service delivery.

Findings from the Impact Assessment will be compiled into a report and will provide an evidence led platform to devise an implementation plan which identify focus areas that require attention which will provide lead time from the date NWSSP received its draft compliance notice which is expected by July 2018.

Once the draft compliance notice is received, there will be a period of consultation of approximately 6 weeks between our host Velindre NHS Trust, the NWSSP and the Commissioner. The consultation period will provide an opportunity to negotiate the reality of delivering full compliance against all of the Standards.

Once the consultation period has ceased the Commissioner will issue the final versions of the compliance notices. Once the final compliance notices are received NHS bodies will have at least 6 months until the standard must be fully implemented in accordance with the legislative framework.

In anticipation of the Welsh Language Standards (No. 7) Regulations being formally approved the NWSSP are developing a business case outlining how it can support NHS bodies in Wales to fully comply with the standards through offering a "Welsh Language Unit/Hub" service to interested parties.

3. LLYWODRAETHU A RISG/ GOVERNANCE & RISK

The Welsh Language (Wales) Measure 2011 (the Measure) makes provision for the specification of standards of conduct in relation to the Welsh language ("standards"). These replace the system of Welsh language schemes provided for by the Welsh Language Act 1993. The Welsh

Language (Wales) Measure 2011 makes Welsh an official language in Wales. This means it must be treated no less favorably than English.

This report demonstrates how NWSSP are preparing to fully comply with the Welsh Language Standards (No. 7) Regulations which specify service delivery standards; policy making standards; operational standards; and record keeping standards.

4. ARGYMHELLIAD/RECOMMENDATION

The Committee are requested to:

- **NOTE** the report
- **DISCUSS** the potential of NWSSP offering “Welsh Language Unit/Hub” to support NHS bodies in complying with the Welsh Language Standards (No. 7) Regulations

Shared Services – Collective Review Feedback – February 2018

General feedback	
<ul style="list-style-type: none"> • The plan is well written, organised and readable. The narrative is clear, and NWSSP's overall objectives come across strongly. • Colleagues felt that last year's feedback had been taken into account and were pleased to see clear KPIs, although these tend to be process driven and are not always linked to measurable outcomes. • Pleased to see the Well-being of Future Generations Act referenced well in the plan, which has led to a positive restructure. Particularly pleasing to see strong use of the 5 ways of working. • Prudent healthcare principles well reflected within the plan. • The plan outlines good alignment with local, regional health board and trust service changes. • Overall, this is a strong and confident plan. 	
Informal feedback	
<ul style="list-style-type: none"> • With hindsight upon reading back the feedback it reads harsher than intended • The plan is very clear and confident. It's a welcomed example of IMTP planning done well • This was considered a good plan last year and this year it has been strengthened further • Its apparent that NWSSP take the planning process seriously and could be considered cheerleaders for IMTP who continually plan throughout the year • The map is the best representation we have seen of national/regional planning • The plan was very positively received and only tweaks and refinements are needed for the resubmission 	
Essential: FOR ACTION This feedback must be addressed prior to resubmission of final draft plan	How/Where has this been addressed by the organisation?
<ul style="list-style-type: none"> • Plan does not reflect the impact and risks to NWSSP of HEIW coming out (£/staff/overheads etc). This must be addressed within the next iteration of the plan. 	<ul style="list-style-type: none"> • At present NWSSP do not perceive there to be any significant financial risks with HIEW coming out. Senior Finance are supporting the HEIW project in a number of ways including the creation of the ledger and designing the Finance and Corporate services Finance Structure. The finance chapter includes information on pay and non-

Shared Services – Collective Review Feedback – February 2018

<ul style="list-style-type: none"> • The plan should understand and reference the Public Health (Wales) Act 2017 and the role of NWSSP in supporting. • There is lack of evidence on activity in terms of support for health and wellbeing in the workplace. • No mention of the Healthy Working Wales Programme. • The plan mentions that Once 4 Wales benefits are only possible if partners are all willing to adopt on standard process. What's the process if one (or all) partners refuse to comply and what is the impact on the plan if not adopted? • Plan is light on work with health boards, which organisations are Shared Services working closely with? This doesn't come through in the plan. The plan also highlights multiple partnership risks, but no clear indication of ownership of these risks. • Page 42 – is the digital workforce solution linked to NWIS' work programmes? • The plan contains and additional request for capital. Has this request been made to Welsh Government's capital team, and what is the proposed impact? 	<p>pay costs in respect of WEDS transferring on 1st October 2018 as well as a reduction in WTE. Further detail has now been included to strengthen this.</p> <ul style="list-style-type: none"> • The Public Health (Wales) Act 2017 has now been included in Chapter 2 Strategic Overview, p23 • The health well-being strategy for NWSSP has now been included in Chapter 6 Enablers, p60 • Reference to the Healthy Working Wales Programme has now been included in the Key priorities for action over the next three years 3. Staff p7 • NWSSP understand organisations are in different places a reference to staged roll out highlighting missed opportunities has been included in Chapter 4 Opportunities and Challenges in 2018-21, p43 • NWSSP have not identified organisations we are working closely with because as a support organisation we work closely with all our partners across NHS Wales. Reference to ownership of risk in Chapter 4 Opportunities and Challenges in 2018-21, p44 • Information included on the digital workforce solution link to NWIS' work programme in Chapter 6 Enablers, p61 • Additional requests for capital have already been submitted to Welsh Government in respect of additional discretionary capital on an on-going basis and a number of the key schemes. Business cases in respect of new schemes will be developed and submitted to Welsh Government in early 2018/19. The delivery of the financial and qualitative benefits in the plan are very much dependent on NWSSP securing appropriate capital funding.
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Shared Services – Collective Review Feedback – February 2018

<ul style="list-style-type: none">No recognition of nursing as single largest workforce.		<ul style="list-style-type: none">Information has now been included on NWSSP supporting role for the Nurse Staffing Levels (Wales) Act 2016 in Chapter 2, Strategic Overview, p23	
Improvement areas: These aspects should be strengthened before final submission.			
	Feedback	How/Where has this been addressed by the organisation? NB This column is to be completed by health board/trust when the final plan is submitted in March.	Policy comments
Capital Estates and Facilities Contact: Nicola Powell	The plan contains an additional request for capital. Has this request been made to Welsh Government's capital team, and what is the proposed impact?	<ul style="list-style-type: none">Additional requests for capital have already been submitted to Welsh Government in respect of additional discretionary capital on an on-going basis and a number of the key schemes. Business cases in respect of new schemes will be developed and submitted to Welsh Government in early 2018/19. The delivery of the financial and qualitative benefits in the plan are very much dependent on NWSSP securing appropriate capital funding.	
Finance Contact: Alun Lloyd	Finance colleagues were content with the plan from a finance perspective, with no major issues identified. Colleagues felt that the plan could be more transparent about what isn't working well.	<ul style="list-style-type: none">The Plan has been updated to reflect a number of the detailed comments received as part of the Month 11 Monitoring return process. There are a number of areas where further investment has been identified to improve outcomes and address areas	

Shared Services – Collective Review Feedback – February 2018

	Scope to improve around payroll.	that require improvement. Eg investment in PMO, RPA and methods used to recruit and retain Professional Services staff eg procurement	
Healthcare Quality Contact: Janet Davies	There is information on helping to develop the new Once for Wales Concerns management System.	No further action required	
Nursing Contact: Paul Labourne	<p>No recognition of nursing as single largest workforce – lots of references to GPs.</p> <p>Though recommendations have been agreed at the NHS Executives meeting around the improvement of ESR information on community based nursing staff there is no specific reference to improving ESR information in this area.</p> <p>The plan does not set out how it will improve the shared service support to NHS organisations towards the Nurse Staffing Levels (Wales) Act.</p> <p>Once for Wales Roster System mentioned but not how this may relate to the Nurse Staffing</p>	<p>NWSSP work as a supporting organisation to support the NHS workforce as whole. Recognising the current recruitment difficulties within Nursing we have prioritised the nursing workforce in our national improvement projects such as reducing 75 day recruitment timeline and the student streamlining programme.</p> <p>We have now included a reference to the Nurse Staffing Levels (wales) Act 2016 throughout the plan with reference to our national improvements projects and in Chapter 2 Strategic Overview, p23 referencing the work we are doing to support the act.</p> <p>NWSSP will continue to support the all Wales Temporary Nurse Staffing group</p>	

Shared Services – Collective Review Feedback – February 2018

	<p>Levels (Wales) Act and provide operational solutions to the calculation and maintenance of the nurse staffing level in medical or surgical wards.</p> <p>The plan references support to the all Wales Temporary Nurse Staffing group but not how developing a national standards around temporary staff would support the universal implementation of the Nurse Staffing Levels (Wales) Act.</p>	and all Wales Bank which will positively impact on the Nurse Staffing Levels (wales) Act 2016.	
Performance Contact: Martyn Rees	Good to see profiles for improvement within the plan however these lacked underlying actions and milestones.	Statement included in Chapter 2, Strategic Overview, p31 referencing section 2 and the division's delivery plans, which will give the detail required on the underlying actions and milestones.	
Population Health Contact: Gareth Hewitt	No mention of delivery plan areas or any actions which may be relevant, though it is accepted NWSSP will have limited input in these areas.	No further action required	
Primary Care Contact: Karin Phillips	The NWSSP plays a significant role in supporting primary care. Plan includes what we would expect to see from a Primary Care perspective. Clear priorities and risks identified.	NWSSP will work to identify some measurable outcomes in relation to primary care for next year's submission.	

Shared Services – Collective Review Feedback – February 2018

	<p>Primary care colleagues commented that they have confidence in Shared Services to deliver, given previous delivery successes.</p> <p>Plan includes KPIs but it would be useful to also see measurable outcomes in relation to primary care.</p>		
Public Health Contact: Irfon Rees	<p>More information on the well-being support programme for staff would enhance the plan, along with details of how proposed further support will enhance the quality of employment for the workforce.</p>	<p>The health well-being strategy for NWSSP has now been included in Chapter 6 Enablers, p59</p>	
Science and Therapies	<p>On page 35 the plan states - 'Established a single point of contact that current and future primary care medical staffing and nursing staff can utilise for training and employment opportunities.' – Colleagues felt this seemed a missed opportunity to include the wider primary care workforce.</p>	<p>NWSSP recognise the benefits of single point of contact for the wider primary care workforce and are happy to support Welsh Government with its continued roll out linked to Train, Work, Live.</p>	
Welsh language Contact: Sioned Rees	<p>It would be helpful to see the detail and understand more on how the Shared Services Welsh Language Strategy will help NHS</p>	<p>Further detail on NWSSP supporting role in strengthening Welsh Language compliance has been included in Chapter 6 Enablers, p75</p>	

Shared Services – Collective Review Feedback – *February 2018*

	Wales strengthen Welsh language compliance		
Workforce Contact: Ian Owen	Workforce colleagues were broadly content with the plan.	No further action required	
Mental Health Ainsley Bladon	It was positive that mental health was mentioned in the context of workplace support. Good that support to health boards and NHS trusts is noted as an action for those with complex needs including those who are vulnerable and who have mental health problems. However little detail on what this will involve.	The health well-being strategy for NWSSP has now been included in Chapter 6 Enablers, p59	



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

2018 - 21

NHS WALES SHARED SERVICES PARTNERSHIP INTEGRATED MEDIUM TERM PLAN



Listening and learning

Working together

Taking responsibility

Innovating

NHS Wales Shared Services Partnership

Integrated Medium Term Plan 2018-21

Adding Value Through Partnership

Our Vision

To be recognised as a world class shared service through the excellence of our people, services and processes

Our Mission

To enable the delivery of world class public services in Wales through customer-focus, collaboration and innovation

If you require additional copies of this document, it can be downloaded in both English and Welsh versions from our website. Alternatively, if you require the document in an alternative format, we can provide a summary of this document in different languages, larger print or Braille (English only)

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Message from the Chair and Managing Director



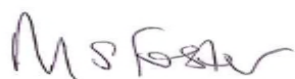
NHS Wales Shared Services Partnership (NWSSP) provides a wide range of professional, technical and administrative support services to the NHS in Wales and is effectively owned and directed by our core customers. Our Integrated Medium Term Plan (IMTP) has been developed in true partnership and describes who we are, the progress we have already made on our shared service journey and more importantly what we are planning to achieve together over the next three-year IMTP cycle

Looking back, 2017/18 was another positive year for the Partnership's development with lots of notable service achievements and improvements to many underpinning processes and systems. Much of the groundwork has been completed over the last few years and the building blocks have been put into place with the expectation that many of the benefits and greater efficiencies from our investments in the workforce, information technology, robotics and infrastructure will continue to come through over the next 12-18 months.



The recently published Parliamentary Review of Health and Social Care in Wales has firmly raised the spotlight on the need for action and we are pleased that NWSSP has been recognised as a significant national resource ideally placed to help support organisations to provide services through a model which can make a real difference to the citizens of Wales. Against a backdrop of continued financial and service pressure, our focus on providing value added support services has never been so critical and through engagement with our partners, we continue to better understand their needs and opportunities for further cost and quality improvements together with identifying potential areas for savings. There has never been a more opportune time for organisations to be bold and to work collaboratively to maximise the full benefits and potential of the Welsh Shared Services model.

As a trusted partner over the next three years and beyond we will continue to look at all opportunities including investing in automation and further technological solutions to deliver sustainable cost efficient services to the NHS in Wales and collaborate where appropriate with the wider public sector to deliver value for money services within the resources available. In particular, our ability to access capital monies will continue to be a limiting factor. We fully recognise that in our transformational journey, the professional and technical value adding services are equally as important as transactional ones and as a result, we will continually review and develop our service offering to respond to the unprecedented increasing demands put on our modern health care system. Change is constant and for the first time since the inception of NWSSP part of our service offering, the Workforce Education Development Service will transfer out of the organisation in October 2018 to form an integral part of the Health Education and Improvement Wales Special Health Authority. We know that we can be proud of our track record that it leaves us as a well-run and valued service which has delivered significant value for money and qualitative benefits whilst it has been under our stewardship. The vision we continue to set ourselves remain challenging, however we are confident that we have the dedication and capability to deliver against this plan.



Margaret Foster,
Chair of the Shared Services
Partnership Committee



Neil Frow,
Managing Director
NHS Wales Shared Services Partnership

Contents

SECTION 1

This section will provide you with the IMTP for NWSSP as a whole pulling together the detail from each division's delivery plan into a whole organisation picture. At the end of the chapters (2-6) is a summary page outlining the well-being goals and key priorities for action from that chapter.

Executive Summary

1. Introduction <i>Who are we and what do we do?</i>	10
2. Strategic Overview <i>Where do we want to go?</i>	17
3. Achievements in 2017/18 <i>What difference are we making?</i>	26
4. Opportunities and Challenges in 2018-21 <i>What do we need to develop and improve?</i>	30
5. Service Change <i>How will we develop and improve?</i>	42
6. Enablers <i>What will enable us to get there?</i>	47

SECTION 2 *How we will deliver our plan?*

This section contains our divisions delivery plans to refer to if you would like further detail on any of their individual three years plans. Each delivery plan can be read without the requirement to read section 1.

APPENDICES

Our appendices provide supplementary information that may be of interest.

Appendix 1 – Our Services and journey to world class

Appendix 2 – Our Engagement and Review Process

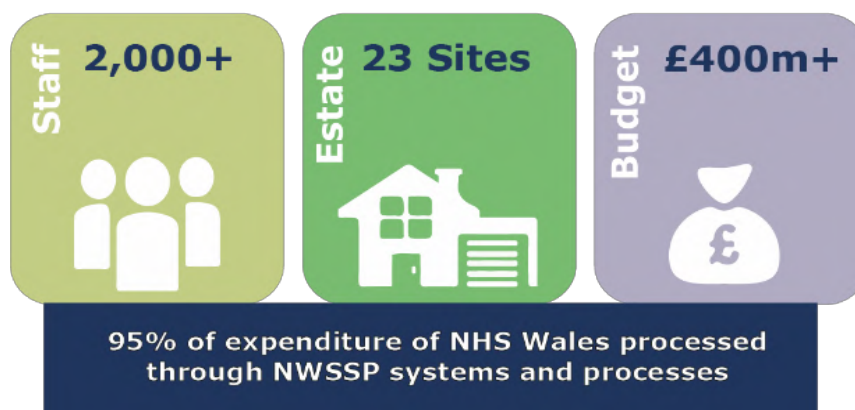
Appendix 3 - Our Structure

Appendix 4 – Shared Services Partnership Committee Membership

Appendix 5 – Workforce Statistics

Executive Summary

NHS Wales Shared Services Partnership (NWSSP) provides a range of high quality, customer-focussed professional, technical and administrative services to NHS Wales. NWSSP was created to allow Health Boards and Trusts to focus on the delivery of front line services and to provide a greater focus on transactional functions and the development of high quality professional services.



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

Our Services	
Audit and Assurance Services	Legal Services
Employment Services	Welsh Risk Pool
Primary Care Services	Procurement Services
Workforce Education and Development Services	Counter Fraud Wales
GP Specialist Registrar Trainees (Lead Employer)	Specialist Estates Services
Health Courier Service	Digital Workforce Solutions
Surgical Medical Testing Laboratory	Finance Academy (host)
Central E Business Team	Wales Infected Blood Support Schemes
Students Award Services	Lease Car Salary Sacrifice

Workforce Education and Development Services (WEDS) are excluded from this plan due to their imminent transition. A full summary of all of our services is included in appendix 1.

Our Overarching Goals

We have reviewed our overarching goals from last year and integrated them with our well-being objectives to set our strategic direction. These are our long-term goals and demonstrate how we are contributing to the Wales we want in 2050. Over the next three years, we will be focusing on actions that help Wales tackle key issues, support the development of sustainable services and lead to a healthier Wales.



1

We will promote a **consistency of service** across Wales by engagement with our partners whilst respecting local needs and requirements



2

We will **extend the scope of our services** within NHS Wales and into the wider public sector to drive value for money, consistency of approach and innovation that will benefit the people of Wales



3

We will continue to add value by **standardising, innovating and modernising** our service delivery models to achieve the well-being goals and the benefits of prudent healthcare



4

We will be an **employer of choice** for today and future generations by attracting, training and retaining a highly skilled and resilient workforce who are developed to meet their maximum potential



5

We will maintain a **balanced financial plan** whilst we deliver continued efficiencies, direct and indirect savings and reinvestment of the Welsh pound back into the economy



6

We will provide **excellent customer service** ensuring that our services maximise efficiency, effectiveness and value for money, through system leadership and a 'Once for Wales'



7

We will **work in partnership** to deliver world-class service that will help NHS Wales tackle key issues, lead to a healthier Wales and supports sustainable Primary Care.



8

We will support NHS Wales **meet their challenges** by being a catalyst for learning lessons and **sharing good practice**. Identifying further opportunities to deliver high quality services.

Key priorities for action over the next three years

We have taken our strategic objectives and developed our key priorities for action over the next three years. These are our route map for 2018-2021 and demonstrate how we are building on the work undertaken in last year's IMTP.

1. VALUE FOR MONEY

To develop a highly efficient and effective shared services organisation which delivers real term savings and service quality benefits to its customers.

Deliver annual professional influence benefits > £100m and £2m cash releasing savings

Secure sustainable capital funding for technology, systems and infrastructure

Minimise the cost of transactional services through economies of scale, driving down costs by working with our partners.

Continue the focused effort to ensure cost containment and prevent cost growth

Invest in services aligned to our stakeholder requirements whilst maintaining a financially balanced plan including;

- Project management skills development
- IT technologies e.g. robotic process automation
- IT infrastructure e.g. cyber security
- Customer support systems
- Value Based Procurement

2. CUSTOMERS

To develop an open and transparent customer focused culture that supports the delivery of high quality services.

Build upon the good relationships we have with our trusted partners

Work with our customers to remove inappropriate variation

Turn our data into intelligent information to support the NHS Wales quality and safety agenda

Ensure we provide an excellent customer experience in all we do

Develop engagement and co-production to improve quality and user experience

Support customers in the delivery of their plans

Support our partners' significant service change whilst leading and facilitating NHS Wales's priorities including:

- Learning lessons from efficiency agenda
- Shift to Primary Care
- Data Driven System
- Major capital programmes

3. STAFF

To have an appropriately skilled, productive, engaged and healthy workforce resourced to meet service needs.

Improve recruitment, retention and succession planning ensuring we have the right skills in place aligned to our strategy that meets our customer needs

We will become an employer of choice, ensuring our staff are happy in the workplace by;

- Developing leadership, innovation and people skills; harnessing creativity and ideas
- Supporting the Healthy Working Wales Programme
- Further developing the emotional well-being support programme
- Continue to implement our action plan based on the latest national staff survey outcomes
- Ensure staff are supported through engagement working with our Local Partnership Forum
- Invest in staff development and training whilst promoting a flexible agile working environment

Further support NHS Wales Staff as a whole enhancing the quality of their employment experience

4. EXCELLENCE

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

Ongoing standardisation, modernisation and automation through the 'Once for Wales' principles and the use of our All Wales performance data to identify opportunities.

Work in partnership with Executive Director peer groups and national groups to drive excellences by supporting national organisations and projects including;

- Purchase to Pay
- Hire to Retire
- Student Streamlining
- Reducing Nursing Agency spend
- Financial and Procurement systems
- Health Technology Wales

Continue our investment in technology driving efficiency and quality improvements, including:

- Digital Workforce solutions
- Intelligent document scanning
- All Wales Risk Software
- Robotic Process Automation

Take full advantage of economies of scale through our regional centres of excellence

5. SERVICE DEVELOPMENT

To develop and extend the range of high quality services provided to NHS Wales and the wider public sector.

Engage with customers to define needs for new service areas

Seek to identify potential opportunities for further collaboration across the wider public sector

Oversee the identification and delivery of "invest to save" opportunities

Foster best practice and innovation through our structures such as Evidence Based Procurement Board

Develop our services under five themes;

1. Supporting sustainable Primary Care
2. Sharing best practice and informing decisions
3. Workforce modernisation
4. Supporting service re-design
5. Once for Wales systems

Act as an enabler for NHS Wales and support the implementation of Prosperity for all and the Parliamentary Review

Our enablers and risks

Business planning and risk management is at the centre of governance arrangements within NWSSP. There are a number of critical key enablers that need to be in place to ensure we can achieve our key priorities for action over the next three years. If these enablers are not in place to support us to deliver our ambitions they can become a risk. There are also risks that if not managed appropriately could affect delivery of our key priorities.

Our enablers

Capital Funding

Capital investment is a key enabler for the delivery of improved efficiency and service improvement. An increase of discretionary capital funding is essential to deliver the full benefits of cash releasing savings, cost avoidance, improved quality and health and safety developments.

Trusted Partnership

As trusted partners, we have the ability to drive forward prudent healthcare reducing inappropriate variation through evidence based approaches. We are uniquely placed to be a catalyst for change. The data we hold can highlight opportunities and shape required service re-design.

Once for Wales

We are able to make a fundamental contribution to wider All Wales priorities in support of prudent healthcare adopting a Once for Wales approach. We endeavour through collaborative working to manage carefully service improvements so benefits can be fully realised for NHS Wales. However, this is only possible if our partners are all willing to adopt one standardised process.

IT & Modernisation

IT modernisation is critical to driving efficiency through automation and innovation, as on organisation we run pan Wales IT Systems. However, we must be recognised as a strategic partner by our IT providers in order to ensure we can have the functionality we require to deliver the level of transformational change on a timely basis.

Our risks

Maximising the benefits of NWSSP

There a number of further opportunities to offer NHS Wales's bodies that would improve efficiencies and value for money. Although we are in a position to take these opportunities forward, we are not able to mandate adoption of them. We are only as successful as our partners allow us to be, if they do not want to adopt our Once for Wales processes then we cannot maximise the benefits of NWSSP.

Succession planning

The challenges of an ageing workforce must be recognised as a risk internally. Further succession planning is required to ensure we have future leadership capacity. Our leadership development programmes will be critical in helping develop the next generation of managers and staff at all levels in the organisation.

Recruitment and retention of our staff

A consistent risk within the professional services is recruitment and retention is challenging within A4C pay scales in comparison to the private sector. We will continue to develop 'social sourcing' strategies coupled with ongoing development of existing workforce to ensure we have the right staff with the right skills at the right time.

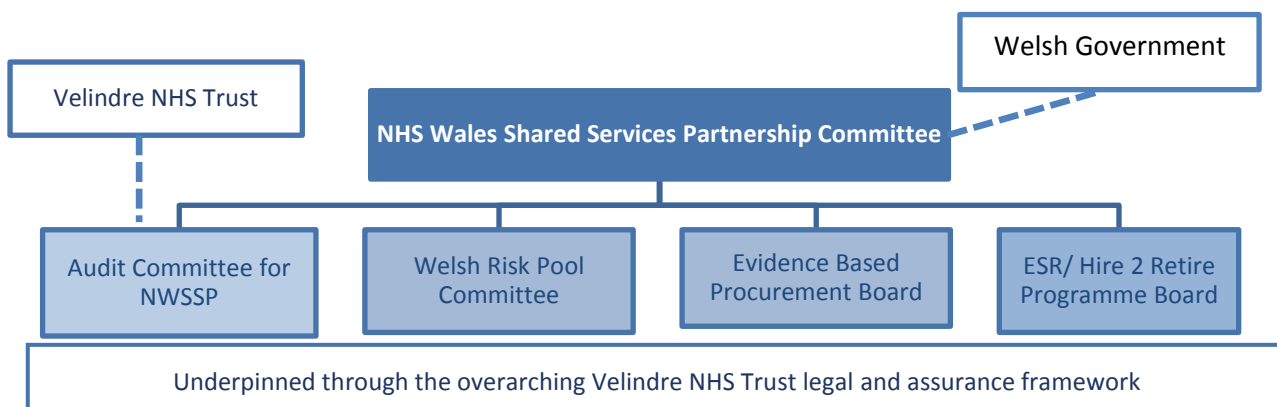
Collaboration and working in partnership

To take best advantage of Shared Services there must be an invigorated appetite for effective collaboration and co-production within NHS and beyond. During times of pressure, there can be a tendency to protect individual needs without seeing the bigger picture. In order to ensure success a step change of behaviour is needed that supports working together.

1. Introduction

NWSSP is an independent mutual organisation, owned and directed by NHS Wales. It was set up on 1st April 2011 to provide a range of high quality, customer-focussed professional, technical and administrative services on behalf of all Health Boards and Trusts in NHS Wales.

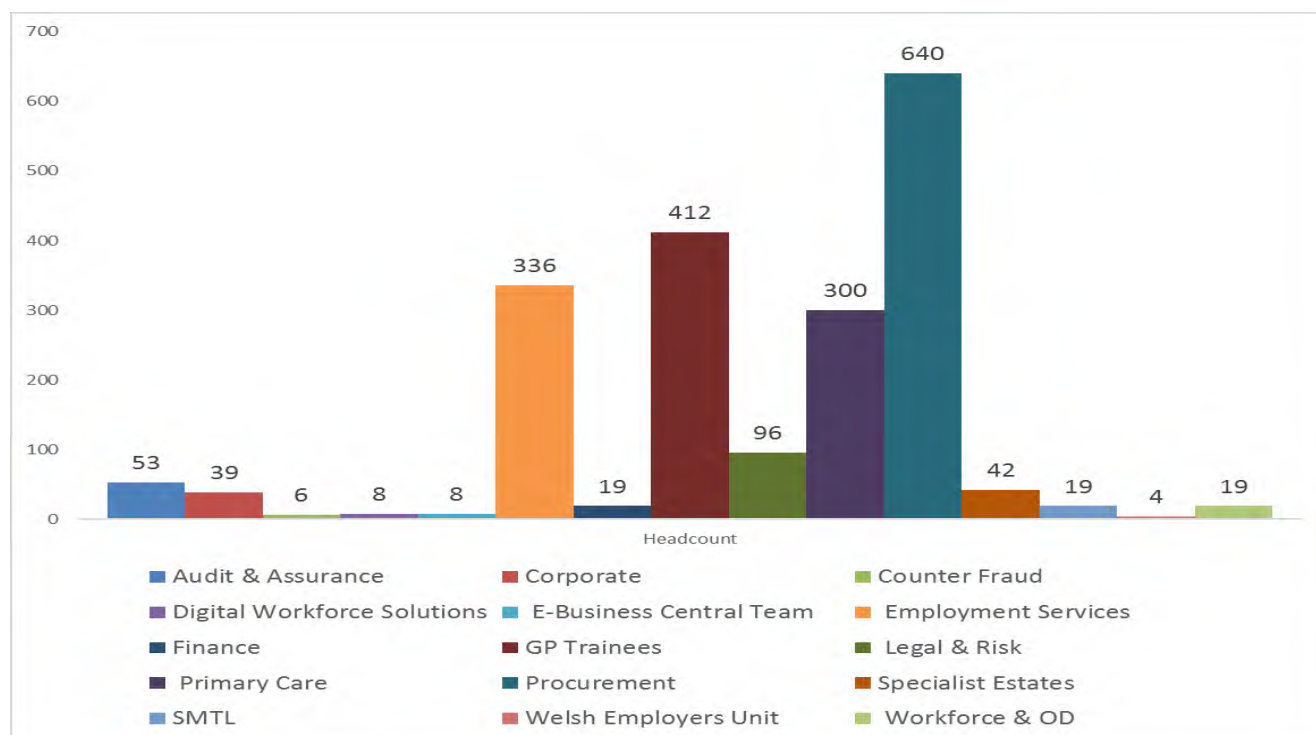
Our Structure



A full organisation chart is shown in Appendix 3.

Our Workforce

NWSSP currently employs 2,019 staff in technical, professional and transactional roles.



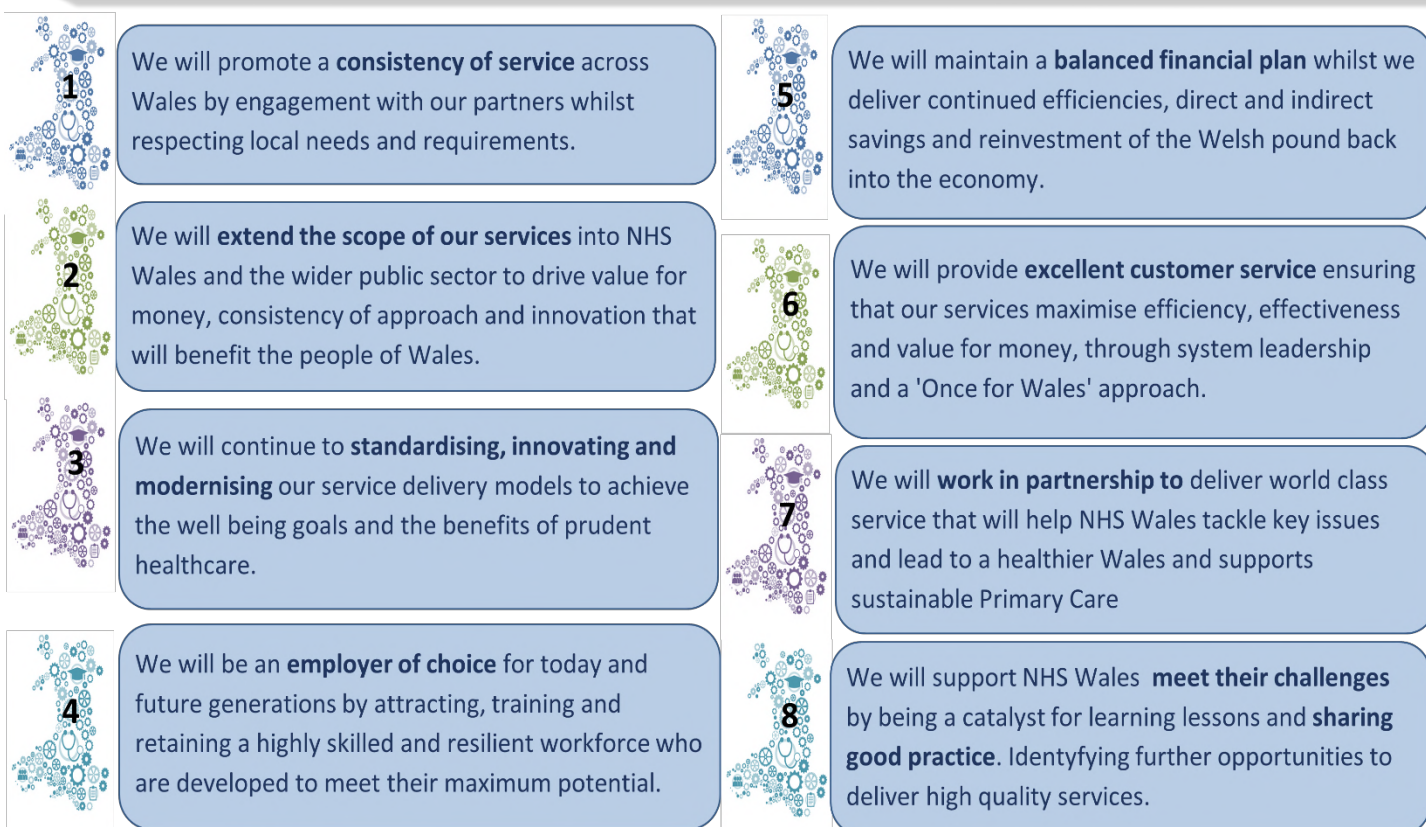
Our Strategic Direction

We shaped the NWSSP strategy map at our annual planning and horizon-scanning day with senior management from across the organisation. We have used this as a focal point for this year's IMTP development through our annual planning cycle.

Adding Value Through Partnership



Our Overarching Goals

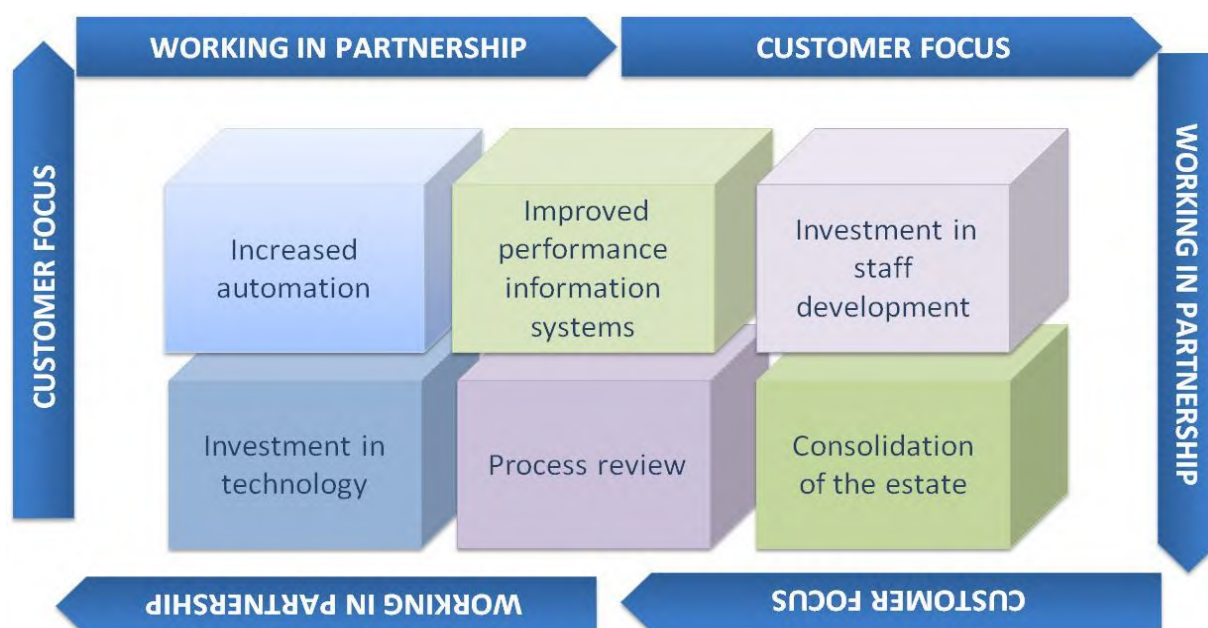


Transformation

We recognised that both the services we inherited from health bodies in 2011 and the new services joining us later would develop in 3 distinct phases:

- Establishment and consolidation;
- Transformation and modernisation; and
- Growth and development.

Significant progress has been made in consolidating, transforming, modernising all of our service divisions. This in the main has been facilitated through increased automation, investment in technology, investment in staff development, process review and the consolidation of the estate as part of an ambitious accommodation strategy.



Financial Performance

We have achieved all our financial targets and operated within budget during our first five years of operation. During this period we have made direct savings of more than **£26m**. These savings were used to fund agreed central costs, absorb cost pressures and generate surpluses of **£15m** that were distributed to health organisations and Welsh Government.

The financial benefits to be gained by health organisations from professional influence savings are significantly greater than those outlined above. Working with organisations, the professional influence and advice from our services has helped generate significant savings and cost avoidance for NHS Wales. Indicative financial benefits within health bodies over the first five years **exceed £550m**.

Direct Savings within NWSSP

Recruitment Services

Through streamlining of processes the average on boarding recruitment time has reduced from 60 to 34 days , creating an annual cost avoidance of **£8.4m** for NHS Wales.

Legal and Risk

The pro-active approach adopted by the Legal and Risk services and the Welsh Risk Pool ensures that claims are only settled where it is appropriate to do so. These avoided and reduced costs are estimated **£50m** each year.

Payroll

Through establishing a regional model for service delivery payroll services have saved each Health Board and Trust **£1** per payslip produced which equates to **£2.5m** savings.

Accounts Payable

Through establishing a regional model for service delivery accounts payable have reduced the cost of per invoice by **£1.10** . This reduction has saved NHS Wales **£1.5m**.

Professional influence savings within Health Boards and Trusts

Specialist Estate Services

Property management advice, management of leases, scrutiny of business cases and construction frameworks help Health Boards, Trusts and Welsh Government avoid and reduce costs of around **£4m** each year.

Procurement Sourcing

Through clinically driven evidence based sourcing ensure patient care quality and safety benefits. Financial savings by Health Boards and Trusts working with procurement are **£26m** each year.

WEDS

Working with health organisations, universities and student groups to significantly lower attrition rate in NHS Wales each year, creating an efficiency saving of **£7.5m**.

Audit and Assurance

Financial savings of approximately **£0.6m** per annum based on internal day rates of **£350** in comparison to commercial audit day rates of **£500**



Our Engagement and Partnership Working

Partnership working is very important to our journey in ensuring our successful development. We interact with our partners in a variety of ways. As an organisation, we wish to develop **trusted partnerships** across NHS Wales so that we can support the efficiency changes required through the data we hold ensuring we champion a data driven system.

Effective customer engagement processes are essential to establishing and responding to their needs and challenges. Due to the wide variety of our customers, we use a number of different methods of engagement, as illustrated in Appendix 2 and summarised in the diagram overleaf.



The Shared Services Partnership Committee is a decision-making committee setting the Shared Services policy for NHS Wales and performs a critical role in monitoring the performance and supporting the strategic development of NWSSP and its services. Our Chair and Managing Director also meets with each of the Health Board and Trust Chief Executives to gain a clearer understanding of their organisation's needs. Over the last year, we have developed assurance reports that are considered as part of Health Boards and Trusts executive board meetings.

In addition, Service Directors and other senior staff have a variety of mechanisms for local engagement with customers through routine customer liaison meetings to discuss performance and service delivery (outlined in *Section 2*).

Individual performance reports are shared with health bodies on a quarterly basis, detailing performance data in respect of a number of services we provide. Following feedback from stakeholders on the initial reports, a standard set of reports have been developed for each organisation providing data on all our services. These performance reports are a key part of our performance discussions with Shared Services Partnership Committee, and a crucial part of our internal operational review of each service, which are being strengthened to build in a systematic review of the key priorities in each Service Delivery Plan.

We value our staff and work closely with our trade union colleagues and through our Local Partnership Forum jointly address the management of change to safeguard the quality of service and employment opportunities.

2. Strategic Overview

We regularly review the existing and emerging strategic themes from Welsh Government, the wider NHS and the wider public sector that are informing our strategic direction. These key themes are summarised below, and have been built into our plan both from the perspective of NWSSP as whole into our overarching goals and for each service area when developing their delivery plans.

Key National Drivers

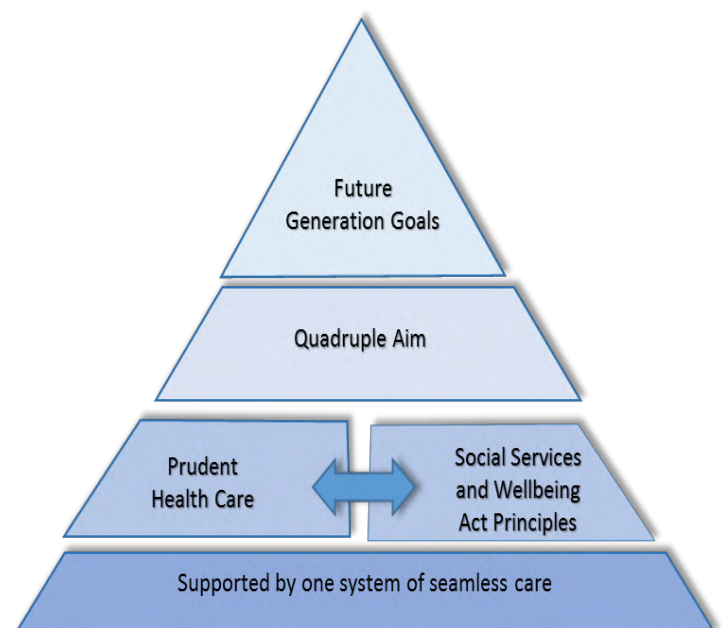
Our services are directed and impact upon a number of key national priorities, strategies and policy documents.

Prosperity for all

The National Strategy “Prosperity for All” has now been published supporting the strategic direction of collaboration and a focus on how all parts of the public sector can work together to achieve a healthier Wales. In order to meet this ambition, we need to; Deliver quality health and care services fit for the future, promote good health and well-being for everyone and build healthier communities and better environments. We need to continue to develop and strengthen relationships with key partners, third sector, social services and others involved in the provision of high quality patient care. Throughout our plan we have shown how we are supporting our partners not only to meet their short term delivery targets but also to develop a sustainable health care system fit for the future. We are committed to supporting the communities in Wales as evidenced by our strategy map and the inclusion of our well-being goals.

Parliamentary Review of Health and Social Care

The parliamentary review promotes the vision of ‘one system of seamless health and care for Wales. This aligns to the Social Service and Wellbeing of Future Generations Act and the work we have undertaken to support this legislation. We welcome the introduction of “workforce” into the Quadruple Aim through our role in workforce modernisation can be recognised within this. The review offers us the opportunity to take a greater role within the overarching governance and National Executive that is welcomed. As an all Wales organisation with rich data, we are uniquely placed to inform and support the transformation required and drive digital technology improvement. In addition, we share best practice promoting a health and care system that is always learning.



Well-being of Future Generations Act

The Well-being of Future Generations Act sets ambitious, long-term goals to reflect the Wales we want to see, both now and in the future.

As a non-statutory hosted organisation of Velindre NHS Trust, we are not specifically named in the Act and, as an organisation; we are not legally obligated by the Well-being Duty to produce a Well-being Statement and Objectives, but have voluntarily elected to develop the same as we recognise the importance of protecting future generations.

The Act sets ambitious, long-term goals to achieve the vision of the Wales We Want by 2050 and to safeguard the needs of future generations without compromising that of the present, by

ensuring governance arrangements improve the cultural, social, economic and environmental well-being of Wales, through utilisation of the Sustainable Development Principle.

Development of our well-being goals

In partnership with our Senior Management Team and key individuals across divisions, we have produced a Well-being Statement and Objectives which demonstrates how we are supporting achievement of the Well-being Goals that Wales should be; prosperous, resilient, healthier, more equal, globally responsible and a country of cohesive communities, have a vibrant culture and a thriving Welsh language. Additionally, our integrated reporting framework provides assurance to align with the seven themes contained within the Act.



We also hosted Well-being Workshops to develop our Objectives, carried out SWOT Analysis exercises and welcomed Rita Singh, Head of Policy, Future Generations Commissioner's Office and Sophie Howe, Future Generations Commissioner, to meet our SMT and discuss the well-being agenda.

Further, for 2018-2019, we have considered the long-term integration plans for the organisations Well-being Objectives and accordingly developed a more robust strategic view of well-being, through alignment of our Overarching Goals with our Well-being Objectives.

Our commitment to well-being and sustainable development

We are highly committed to developing and implementing Once for Wales approaches. Paramount to this is the Sustainable Development Principle and the associated five Ways of Working; to think about the long-term, to integrate with the wider public sector, to involve our partners, to work in collaboration, to prevent problems and take a more joined up approach to service delivery. The diagram overleaf demonstrates how our divisions are committed to delivering sustainable services aligned to the five ways of working.



Longterm

Focus on sharing best practice and common risks/challenges
 Added value through Hire2Retire services, that are safe, quick and efficient
 A holistic approach to development of apprenticeship roles
 Reduce the burden on GP practices by providing back-office administration support
 Consideration given for life cycle and sustainable, ethical procurement practices



Prevention

A digitally enabled workforce system that will eliminate paper
 Eliminate paper payslips and to administer e-payslips by April 2018
 Robust succession planning across the organisation
 Duty of care and compliance integration with e-expenses
 Focus on sharing best practice, turning our data into intelligent information
 ISO14001 environmental initiatives to reduce carbon footprint of organisation



Integration

Wider public sector engagement model within Digital workforce solutions
 Support the training to managers of GP practices
 Develop a network to support sharing the learning from Welsh Risk Pool
 Collaborative procurement strategy developed in partnership
 Equality Integrated Impact Assessments incorporated into the PMO System
 Frequent engagement with our partners to ensure continuous improvement



Collaboration

Build opportunities for expansion of audit services within the wider public sector
 Retention and efficient matching of healthcare graduates with employment
 Working in collaboration to increase the number of GP trainees and GP returners
 Support the development of a Once For Wales Concerns Management System
 Expansion of generic PCS services across additional Welsh public sector bodies
 Frameworks in areas such as environmental performance and community benefits



Involvement

Integration with additional service providers, for greater assurance levels
 Implement transferability of information from Welsh Health Graduate Education
 Public sector organisations onboarding to the Learning@Wales Moodle e-platform
 Offer legal advice services to other public bodies throughout England and Wales
 Awareness of Modern Slavery Act and Ethical Employment in Supply Chain Practice

Prudent and Value based healthcare

We are helping make prudent healthcare happen for NHS Wales through both our system leadership and support roles. Our key service developments (full summary in our road map p24-26) provide some examples of how we are driving the four principles of prudent healthcare.

Public and professionals are **equal partners** through **co-production**

- We are trusted partners in supporting service re-design, turning out data into intelligent information to inform decisions
- We work together with NHS organisations to identify opportunities for Once for Wales systems
- Supporting the laundry services design and ensuring our partners needs are consulted on as part of outline business case
- Supporting the GP2GP electronic transfer of patient records in partnership with GP practices

Care for those with the greatest health need **first**

- Enhancing single point of contact in support of train, work, live campaign to increase training and recruitment of the NHS Wales workforce
- Working with Health Boards to enable GP practices to rationalise estate and react to increasing Primary Care service demands through GP patients record storage with routine and on demand access service
- Certificate of Sponsorship management to deliver a timely professional service that supports the retention of staff

Do only **what is needed** and do **no harm**


- Working with Universities to streamline recruitment of healthcare students so that individuals are offered posts based on their preferences at the end of their course without the need to complete multiple applications
- Support the roll out of an innovative training style in Maternity and Obstetric services to inform better patient outcomes
- Programme of work to improve effective consent to treatment working together with NHS bodies

Reduce **inappropriate variation** through **evidence-based** approaches

- Support the sustainable and prudent procurement agendas through clinically driven evidence based sourcing ensuring patient care, quality and safety benefits
- Support the development and roll out of a Once for Wales Concerns Management System
- Undertaking a review of Stoma Care procurement and service delivery within Secondary care

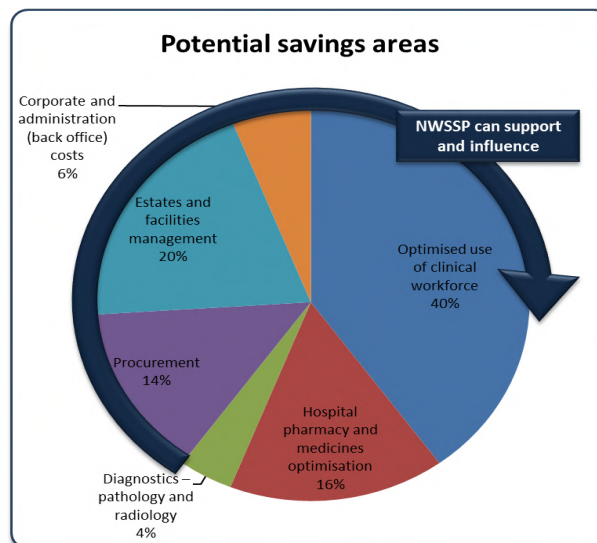
Prudent healthcare is engrained in all we do through our Once for Wales approaches. The diagram overleaf demonstrates how each of our divisions are on a path to prudent and Once for Wales.

Path to Prudent and Once for Wales

- 
- Co- delivery with NHS organisations through technology that promotes standardisation and innovation
 - Safe recruitment and employment of staff in accordance with employment best practice guidelines and immigration legislation
 - Working in partnership with Welsh Government, NHS Wales and suppliers/contractors to achieve better health and well-being outcomes through value based procurement
 - Establishment of an integrated ESR Self Service and Learning support function to promote standardisation of use and remove transactional queries
 - National service provision and solutions to reduce variation adopting best practice solutions Once for Wales
 - Technology enabled hire process where pre-employment checks are complete prior to individuals commencing work with no delay in payment of first salary
 - Supporting medical staff to order goods and services seamlessly via FMS systems, to deliver clinical services
 - Development of GP trainee exit documentation to establish views on Single Lead Employer service and consider improvements that can be adopted
 - To introduce a National Ophthalmic Performance comparators service at contractor, cluster and Health Board levels
 - Use of technology in P2P transactional processes to maximize efficiencies with performance comparable with 'Best in Class'
 - Constantly review the new NHS Building for Wales (BfW) construction frameworks to ensure that pre-determined benefits are continuing to be accrued.
 - Enable NHS Wales customers to develop and maintain modern and safe environments through the support of best practice estates and facilities guidance
 - Introduced a robust and transparent risk sharing agreement agreed by all health bodies.
 - Working with NHS Wales to support service change and service redesign
 - Provide training for clinical staff at all levels of experience and seniority at health bodies in Wales re the legal context of their practice
 - Work with Health Board partners to ensure equitable access to transport within expected timeframes supporting timely processing of clinical results

Driving efficiency

The Lord Carter Review (Operational Performance and Productivity in English NHS Acute Hospitals) calls for the NHS to deliver efficiency improvements through collaboration across the entire healthcare system. Many of the areas highlighted in the Carter report - clinical staff, pharmacy and medicines, diagnostics and imaging, procurement, back-office functions, and estates and facilities – are areas where we can provide systems leadership and business intelligence. We can help health organisations provide the best possible care to patients within the available resources. SES will further utilise the findings of the Lord Carter of Coles report in order to create and facilitate appropriate forums for estates related benchmarking.



The current level of compliance of contract usage in Wales is 75.3% we have a target set for 80% that is in line with the Lord Carter recommendations. The existence of a single Oracle platform across Wales provides structure and ease of data access that is not in place in England. Because of this and the joint vision of Finance and Procurement colleagues 20 years ago, Wales has full reporting capability across its non-pay expenditure. Further detail is in chapter 5, driving efficiency and delivering transformation.

Developing the role of primary care

Since the publication of the Primary Care Plan and the Primary Care Workforce Plan primary care clusters are being advanced across Wales to treat the root causes of ill health and prevent people from going into hospital unnecessarily. This requires a marked shift in the delivery of care from secondary hospital focused to care closer to home.

We have developed a number of our services to support the required shift to primary care in many cases providing a function absent from clusters and general practices previously. Examples of this include;

- GP rental reimbursement triennial reviews
- Assist in procuring commissioned services including dental and GP services where a need is assessed/required
- Provision of Clinical waste collections and disposals at GP premises
- Undertake cyclical audits of Primary Care's compliance with policies and procedures.

We became the lead employer for GPST registrars in February 2015, ultimately the initiative seeks to improve the recruitment and retention of GPSTRs and GPs. Last year we established a Single Point of Contact (SPOC) service in support of the Welsh Government marketing campaign of Train, Work and Live this resulted in an improved GPSTR fill rates to 91% following success of SPOC for employment queries. We support the sustainability of the primary care workforce and ensure employment opportunities are distributed among GP Trainees to improve GP Trainee retention in Wales. A further example is collaborative working with primary care sector extending hire to retire service delivery and single platform for working in NHS Wales.

Primary Care estate is in great need as Health Boards and Trusts undertake the necessary shift in the provision of health care. To support this our primary care services are offering a storage and Scan on demand of patient records. This will provide more space for patient care instead of record storage.

There are further development opportunities for NWSSP to support the required shift from secondary care to primary care these potentially include:

- Providing expert HR support and advice to GP practices

- Supporting GP and GP practice staff recruitment through the use of NHS Jobs and the processing of all pre-employment checks
- Providing payroll services to GP practices through the utilisation of the Electronic Staff Record
- Expenses and subsistence payments through an e-expenses system
- Governance training to GP practices on the following areas; record keeping, being a witness, clinical negligence claims and consent law
- Advice on national procured contracts
- Provision of Welsh translation services to primary care

This would bring a much wider range of benefits through the utilisation of all ESR functionality including consistent workforce information recording and reporting which would provide the baseline on which to effectively workforce plan. Additionally, we could provide support through the provision of advice and translation that would free up valuable clinical time that could be spent on directly providing patient care.

A data driven system

The Organisation for Economic Co-operation and Development report published in 2016 highlighted the importance of NHS Wales becoming a data driven system. We are already a rich source of data across the secondary and primary care through our procurement supply chain, procurement contract management and ESR Business Intelligence.

NWSSP processing 95% of NHS Wales expenditure through its processes and systems has the potential to act as a central catalyst. A system that is rich in information through sustainable systems has the ability to foster innovation and service improvements through lessons learnt. We are committed to developing our data analysis function to act as an enabler to organisations providing them real time information and trends that can shape the direction of their services for the future.

Social services and well-being act

The Social Services and Well-being (Wales) Act 2014 places duties on statutory bodies to improve services, work together with the public to promote well-being and give people a greater voice in and control over their care. This puts the individual at the centre, promoting independence, responsibility and coordinates services around people, motivating self-care and meeting their needs at or as close to home as possible. NWSSP are committed to supports integration between Health and Social Care through their enabling services such as procurement, specialist estate services, e-workforce solutions and employment services. Legal and Risk service have already developed guidance on how best to manage the developing relationships; manage the risks and remain compliant with the law.

National Improvement Programme

Through Team Wales seven priorities have been developed for Chief Executives to drive and deliver. Subsequently each Peer Group (Directors of Workforce, Directors of Finance and Nurse Directors etc) and our Senior Management team have considered what we can deliver for NHS Wales in line with seven priorities.

1. To develop a long term vision and ten-year strategy for sustainable health and care services in Wales
2. To develop a deliverable workforce and organisational development plan to support the long term strategy;
3. To make best use of the physical, financial, workforce and technological resources available;
4. To co-design, commission and provide joined up health services and to work with partners to provide patients with an integrated health and care experience;
5. To work with public sector partners to invest time and resources in services and actions that promote health, well-being and personal responsibility;
6. To drive consistently high quality services and outcomes and develop a performance management framework that supports this; and

7. To provide clear and consistent leadership and take strategic decisions on national priorities and programmes.

A number of enabling actions have been identified to deliver the national improvement programme. We are supporting this work by contributing under three actions we have provided a sample in the table below;

Enabling Action	Supporting Work from NWSSP
Identify no-value or low value adding activity that could be stopped	<p>a) <u>Removal of weekly pay (substantive staff)</u> We are working with ABUHB on the implementation of a migration of substantive weekly paid to monthly in February 2018.</p> <p>b) <u>Removal of paper payslips</u> All organisations agreed to remove paper payslips by 31st March 2018.</p> <p>c) <u>Streamlining Student Recruitment</u> Implementation now being planned for March 2018 cohort.</p> <p>d) <u>All Wales Staff Bank</u> A feasibility study has been undertaken and presented to CEOs. Confirmation of Welsh Government funding for project support is awaited to enable the detailed work to commence.</p> <p>e) <u>Influenceable Spend & Spend Analysis</u> Work completed to establish the proportion of organisational spend that may be reduced by Procurement Services intervention.</p> <p>f) <u>Priority Supplier Payment Programme</u> Successful assessment in February 2017 of the potential adoption of priority supplier payment programme. ABMU have agreed to act as the pilot for the scheme.</p>
Identify a further two good practices that could be rolled out across Wales within six months	<p>a) <u>Job evaluation collaborative</u> Confirmation of funding transfer is awaited from some organisations to enable the co-ordination team to be put in place.</p> <p>b) <u>ESR National helpdesk</u> Confirmation of funding to establish the All Wales ESR Helpdesk is still awaited.</p> <p>c) <u>Electronic Claims Transfer (ETC)</u> Complete accreditation and pilot of remaining suppliers' systems by December 2017. Deploy accredited systems to all community pharmacies by April 2018.</p> <p>d) <u>Patient Medical Record (PMR) Storage and Scan on demand</u> Business case for capacity expansion for up to 80% of Welsh practices to store their live records underway.</p> <p>e) <u>Proposal of introducing a common set of audits (all with the same scopes) for the 2018/19 financial year.</u> A paper is being prepared for the Shared Services Partnership Committee (and Board Secretaries).</p>

	<p>f) Streamlining Occupational Health assessments utilised for recruitment purposes</p> <p>All Wales OH lead has indicated go live will be by March 2018 at the latest.</p>
Develop national guidance on best practice in facilities management	<p>a) Benchmarking sub-group Established Benchmarking Sub-Group has been established to facilitate detailed analysis of major estates and facilities cost centres to better understand the data variances - Phase 1 – Cleaning.</p> <p>b) Estates Best Practice guidance Output of best practice guidance and saving opportunities to be discussed at NWSSP Partnership Committee, with a view to agreeing areas to take forward on a National/Regional basis.</p>

Strengthening health and care quality and governance in Wales

The Welsh Government's White Paper Services Fit for the Future, Quality and Governance in Health and Care in Wales, includes common standards and joint complaints handling; better decision making across health boards through a new Duty of Quality for the population of Wales; a clearer process for service change; and further promotes a culture of openness.

We are committed to supporting quality and governance across NHS Wales. This is demonstrated in the training provided to independent members by our Audit and Assurance Services. Our Legal and Risk Services also provide robust and useful feedback to health bodies re lessons learned.

Throughout our planning and service delivery we also consider and align with the following strategic drivers; NHS Wales Financial Position, NHS Wales Core Principles, Welsh Language Standards and Modern Slavery Act to develop a long term vision and ten-year strategy for sustainable health and care services in Wales.

Public Health (Wales) Act 2017

The Public Health (Wales) Act 2017 utilises legislation as a mechanism for improving and protecting the health and well-being of the population of Wales. We are committed to supporting NHS Wales tackle key issues and lead to a healthier Wales. We will continue to work to improve public health and reducing health inequalities by working with our partners to promote healthy lifestyles

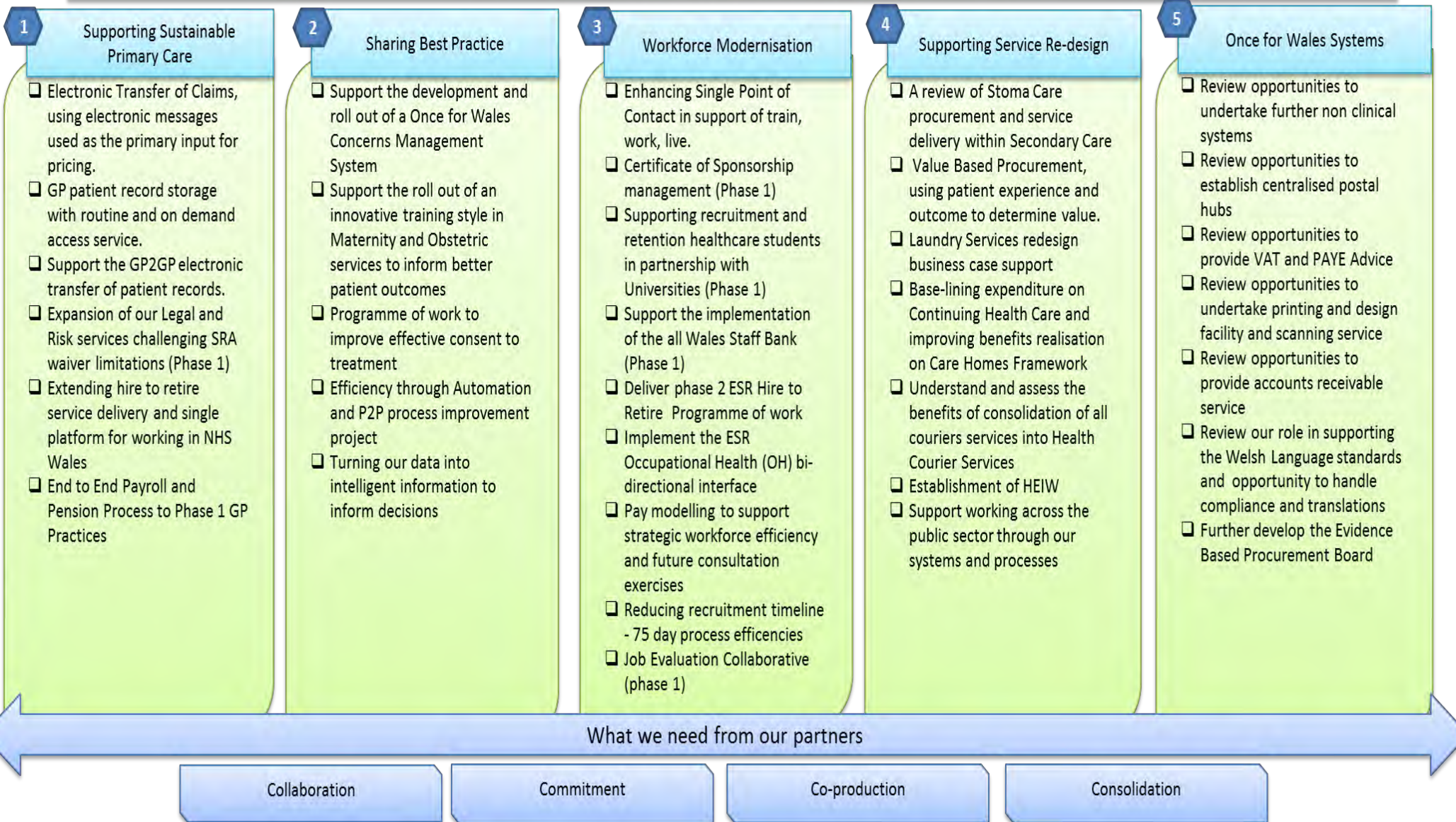
Nurse Staffing Levels (Wales) Act 2016

The Nurse Staffing Levels (Wales) Act 2016 sets out the overarching duty to have regard to providing sufficient nurses to allow nurses time to care for patients sensitively. We have been supporting the recruitment and retention of Nurses through our supporting role. This is demonstrated by the prioritisation of the nursing workforce in some of our key national improvement projects; student streamlining, 75-day recruitment timeline reduction and the reduction of nursing agency usage. We will continue this work and build on our achievements by supporting the implementation of an all Wales staff bank recognising nursing as the single largest workforce.

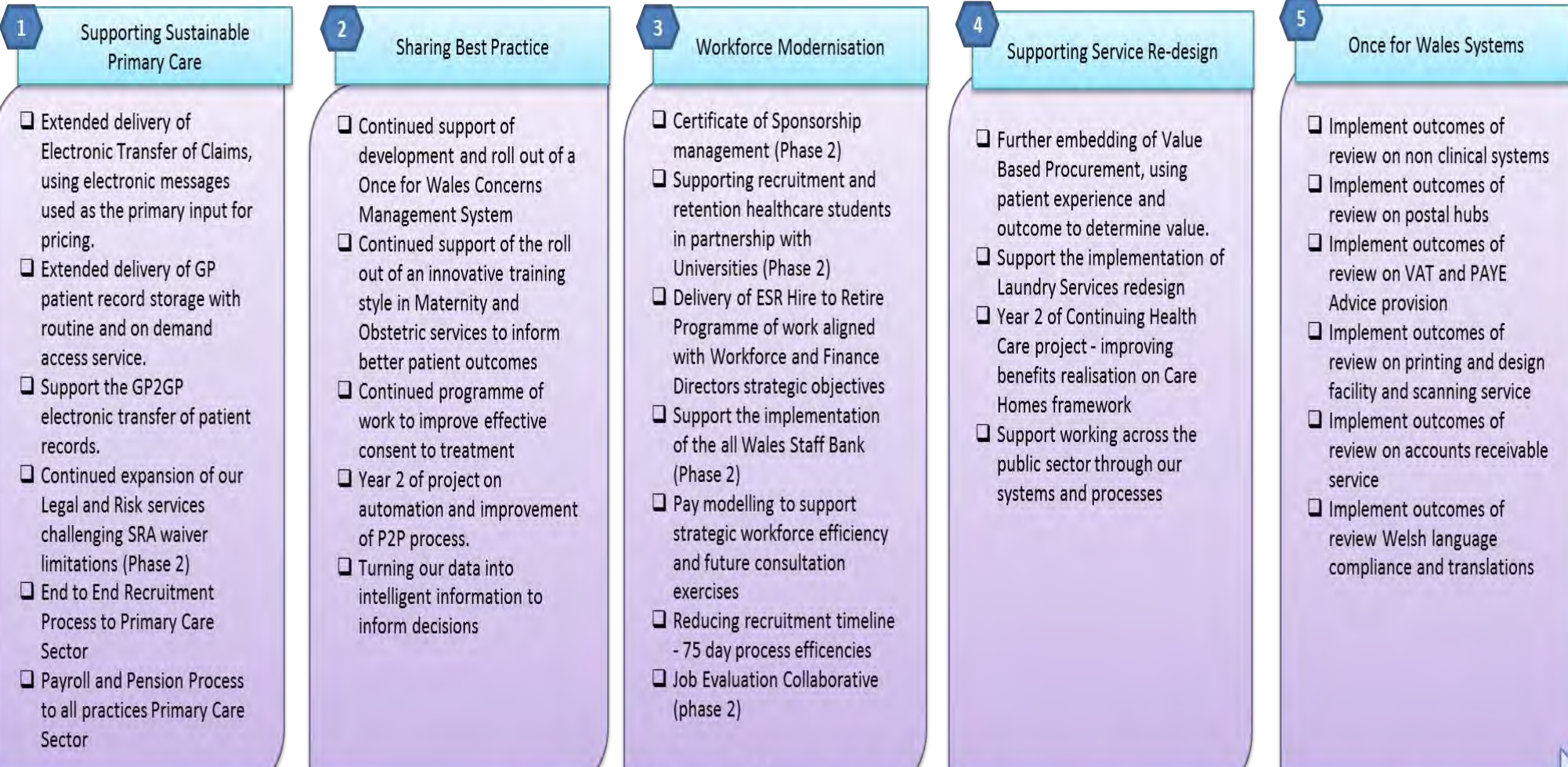
Our roadmap of development over the next three years

In the diagram, overleaf we have set our large service developments over the next three years against five themes. This demonstrates how we are helping NHS Wales meet its strategic objectives in a key support role, encouraging learning and the adoption of Once for Wales.

NWSSP IMTP SERVICE DEVELOPMENT ROADMAP 2018 -19



NWSSP IMTP SERVICE DEVELOPMENT ROADMAP 2019 -20



What we need from our partners

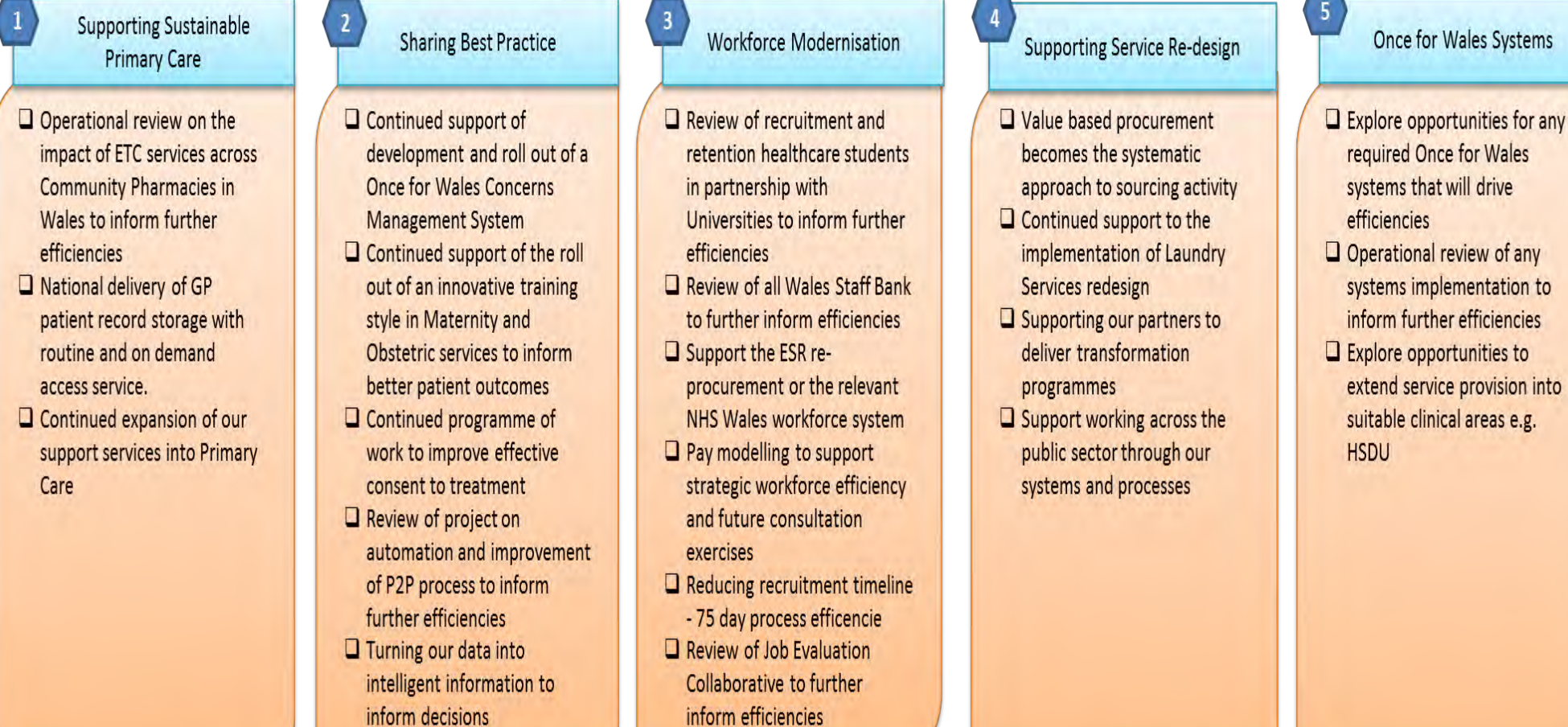
Collaboration

Commitment

Co-production

Consolidation

NWSSP IMTP SERVICE IMPROVEMENT ROADMAP 2020 -21



What we need from our partners

Collaboration

Commitment

Co-production

Consolidation

Future state – what good looks like in 3 years

Our vision is to be recognised as a world-class shared services organisation through the excellence of our people, services and processes. We are committed to creating and developing a positive approach to customer service in which we strive to consistently exceed the expectations of our customers and create an environment within which customer service is a core component of the management and delivery of services.

The table below identifies, against each of our key strategic objectives, some of the ways in which we will deliver and measure our *Success*.

VALUE FOR MONEY

To develop a highly efficient and effective shared services organisation which delivers real term savings and service quality benefits to its customers.

Delivery of overall financial targets

A well established, financially stable business model with future benefits and growth identified

Maximised utilisation of economies of scale through the implementation of the Regional centre accommodation model

Continued realisation of significant Professional Influence savings

Identification and maximisation of income generation opportunities

Centrally manage a range of salary sacrifice schemes for NHS Wales

IT technologies and robotic process automation embedded delivering efficiencies

Receiving and automatically processing 90% of prescription forms through the Electronic Transfer of Claims (ETC) rollout

Strategic procurement closely integrated with NHS Wales policy and strategy

Embedded project management skills development across the organisation

Maximising efficiencies for logistics and transport for -Patient Transport in NHS Wales

CUSTOMERS

To develop an open and transparent customer focused culture that supports the delivery of high quality services.

Ongoing customer appraisal, feedback and business review

An embedded trusted partnership relation across NHS Wales

Well-developed customer service strategy and customer focus realised through high customer satisfaction levels across all services

Providing our customer group with a quality service offering a timely single point of contact seconds and transparent monitoring of all customer transactional activity

Developed strong mechanisms for engagement and co-production to improve quality and user experience

Our data is used as intelligent information to support the NHS Wales quality and safety agenda

Responsive and supportive to our partner's significant service change whilst leading and facilitating NHS Wales priorities

The NHAIS systems will have been decommissioned and we will have implemented the NHS Wales Transition Programme with regard to GMS and GOS services

Supporting the transformational needs of Health Board/Trusts through the development of a new generation of construction frameworks aimed at improving the built environment

STAFF

To have an appropriately skilled, productive, engaged and healthy workforce resourced to meet service needs.

A multi-skilled and motivated workforce to support workforce development and continuous improvement

Developed the leadership, innovation and people skills in managers

Delivered the action plan based on the staff survey outcomes and reviewing its impact

Staff are supported through change management

Fully established pan organisation values based recruitment, recruiting the right people aligned to our values

A workforce which fully embraces the values of NWSSP

Workforce with the capacity and resilience to react to increases in demand or changes in requirements

Customer service excellence and Service improvement skills embedded in all roles

A fully implemented talent management strategy developed to address identified retention and recruitment challenges

Implemented agile working strategy, increasing the flexibility and productivity through effective team working

A well-established support programme for staff that promotes emotional well-being

Continuous improvement programme to have stronger links in to the PADR process

EXCELLENCE

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

Larger regional centres of excellence, resulting in greater resilience, efficiency, standardisation and collaboration across co-located services

Established suite of key performance indicators which drive continuous service improvement and established cycles of service performance reviews to monitor continuous service improvement

Established plan for service improvement priorities informed from innovation

Comparable assessments and benchmarking of our services and achievements against world class requirements and industry competitors

Continued innovation and development of ESR and interfacing workforce solutions

A greater understanding of the prioritisation required in the continuous improvement program (CIP) so we can have the greatest benefit of efficiencies

Using metrics to help improve our performance in a more proactive manner adding value through our service user contact management systems

The Single Point of Contact to be fully established as the central portal in enhancing recruitment across Wales

SERVICE DEVELOPMENT

To develop and extend the range of high quality services provided to NHS Wales and the wider public sector.

Fully maximising ESR e-learning and Moodle to support the technology enabled learning agenda for NHS Wales, local government, national government and the wider public sector in Wales

Storing up to 25% of GP Practice patient paper records within PCS and providing a scanning function to these practices wishing to receive records in our store and demand service

Leading the way as a Welsh Language Hub for NHS Wales

Developing our all Wales service following the review of current arrangements

Providing support and services to the all Wales temporary staff bank arrangements to increase the supply of nursing

Further develop a clear information management structure to help leverage the volume of data into a rich intelligence source for service development

Further specialities to be employed under the lead employer model offering the same streamlined processes

Provide a holistic legal advice service across the public sector in Wales

Extension of our support services into Primary Care sector e.g. payroll, recruitment and procurement

Provide a professional printing and design facility and scanning service for NHS Wales

GOVERNANCE

Refined governance arrangements based on a mutual model that reflect the complexity and diversity of the services provided

Mature, robust governance arrangements in place with fully engaged stakeholder groups

Enhanced leadership from Shared Services Partnership Committee to drive the strategic direction of NWSSP

Key Performance Indicators

The table below outlines our key performance indicators and targets. We have looked at our current year's performance and set ourselves improvement targets until 2021.

High Level - KPIs and Targets	Current Year	2018/19 Target	2019/20 Target	2020/21 Target
Internal Indicators				
Corporate				
Financial Position – Forecast Outturn	Break even	Break even	Break even	Break even
Capital financial position	Within CRL	Within CRL	Within CRL	Within CRL
Planned Distribution	£1.8m	£0.75m	£0.75m	£0.75m
NWSSP PSPP %	99%	99%	99%	99%
Agency % to date (Cumulative)	1.42%	<1.5%	<1.25%	<0.8%
<u>NWSSP Org KPIs Recruitment</u>				
% of Vacancies approved within 10 days	73.9%	80%	90%	90%
% of Shortlisting completed by Managers within 3 days	50%	80%	90%	90%
% Notifications of Interview Outcome to Recruitment within 3 Days	37%	80%	90%	90%

High Level - KPIs and Targets	Current Year	2018/19 Target	2019/20 Target	2020/21 Target
Internet hits per month	23k	15k	17k	20k
Intranet hits per month	62k	64k	68k	72k
Workforce				
Staff Sickness (Cumulative)	3.39%	3.3%	3.2%	3.0%
PADR Compliance	87.15%	>85%	>85%	>85%
Statutory and Mandatory Training	95.9%	>85%	>85%	>85%
External Indicators				
Professional Influence				
Professional Influence Savings	£101m	£100m	£100m	£100m
Procurement Services				
All Wales PSPP	95%	95%	95%	95%
Employment Services				
<u>All Wales Org KPIs Recruitment</u>				
% of Vacancies approved within 10 days	67.6%	80%	90%	90%
% of Shortlisting completed by Managers within 3 days	49.7%	80%	90%	90%
% Notifications of Interview Outcome to Recruitment within 3 Days	66.4%	80%	90%	90%
<u>NWSSP KPIs Recruitment</u>				
% of Adverts placed within 2 days	94.4%	99%	99%	99%
% of Applications sent to managers within 2 days	99%	99%	99%	99%
% of Conditional Offer letters sent within 4 days	98.3%	99%	99%	99%
Primary Care Services				
Payments made accurately and to timescale	100%	100%	100%	100%
Prescription - keying Accuracy rates	99%	99%	99%	99%
Internal audit				
Report turnaround LHB / Trust management response to Draft report	61%	80%	80%	80%
Report turnaround draft response to final reporting	99%	100%	100%	100%

High Level - KPIs and Targets	Current Year	2018/19 Target	2019/20 Target	2020/21 Target
Legal and risk				
Timeliness of advice acknowledgement - within 24 hours	100%	99%	99%	99%
Timeliness of advice response – within 3 days or agreed timescale	100%	99%	99%	99%
Welsh Risk Pool				
Acknowledgement of receipt of claim	100%	100%	100%	100%
Valid claims received within deadline processed in time for next WRP committee	100%	100%	100%	100%
Claims agreed paid within 10 days	91%	99%	99%	99%

In addition to our organisations key performance indicators each division have their own set of indicators as part of their delivery plans (section 2). The delivery plans outline the key actions and milestones that will be delivered over the next three years to achieve these key performance targets as well as service improvements that will enhance the services we provide to our partners.

Where do we want to go?

OVERARCHING GOALS

We will apply the lessons learnt from the Lord Carter of Coles report where appropriate

We will help NHS Wales strengthen primary care

We will help NHS Wales deliver the well-being of future generations

We will ensure our data can be used across NHS Wales as intelligent information

We will continuously enhance and improve our services driving forward the benefits of prudent healthcare

We will continue to support the National Improvement Programme

KEY PRIORITIES FOR THE NEXT THREE YEARS

Value for Money		Our Customers		
<ul style="list-style-type: none">• Deliver overall financial targets• Continue to realise significant Professional Influence savings• Value Based Procurement, using patient experience and outcome to determine value• Undertake Certificate of Sponsorship management for NHS Wales	<ul style="list-style-type: none">• Provide a quality service offering a timely single point of contact• Develop strong mechanisms for engagement and co-production to improve quality and user experience• Support the establishment of HEIW• An embedded trusted partnership relation across NHS Wales			
Service Development		Our Staff		Excellence
<ul style="list-style-type: none">• Extend our hire to retire services to GP Practices and Primary Care• Leading the way as a Welsh Language Hub for NHS Wales• Share best practice supporting the roll out of a Once for Wales concerns management system and a programme of work to improve effective consent to treatment	<ul style="list-style-type: none">• Customer service excellence and Service improvement skills embedded in all roles• Implement fully a talent management strategy to address identified retention and recruitment challenges• Have a well-established support programme for staff that promotes emotional well-being• Deliver and review the action plan based on the staff survey outcome	<ul style="list-style-type: none">• Deliver efficiencies through IT technologies and robotic process automation• Increase efficiency through automation and P2P process improvement• Reduce the recruitment timeline through the 75 day process efficiencies• Further develop the Evidence Based Procurement Board		

Adding Value Through Partnership

Adding Value Through Partnership











3. Achievements in 2017/18

We have made a significant number of organisational achievements, most notably;








1. We have an approved and financially balanced IMTP
2. We have delivered significant professional influence savings for NHS Wales
3. We have been a key enabler in delivering the National Improvement Programme
4. We have maintained service delivery during periods of organisational change
5. We have successfully created new all Wales services

This is our assessment of our achievements against our overarching goals from last year as at 31st January 2018.








Goal 1 - We will use our resources effectively to address additional service pressures and demand whilst maintaining a **balanced financial plan**

-  Deliver financial targets
-  Deliver procurement savings target
-  Deliver cost efficiencies across Hire to Retire transactional services
-  Deliver allocative efficiency principles by investing in value added services in particular procurement services, employment and legal services to deliver further savings and meet increased demand
-  Redistribute annual budget of primary care service and specialist estates services, whilst expanding services
-  Phase 1 of certificate of sponsorship management for medical and dental trainees resulted in £22,288 estimated savings made for NHS Wales and £111,434 estimated savings made to individuals
-  Secure capital budget that enables us to progress our key priorities
-  Reduce staff sickness and ensure the target of 3.3%








Goal 2 - We will **support NHS Wales** to improve quality of patient care and the quality of the employment experience through **continuous improvement** and innovation

-  Centrally undertaken the Certificate of Sponsorship management for NHS Wales reducing risk and costs
-  Introduced new service delivery models including providing 24 Hour cover within HCS and expanding "Blue Light" Non Patient Emergency Transport
-  Fully implement TRAC and reduce the average Wales vacancy approval time from 45 days to 12 days
-  Achieve Statutory and Mandatory higher than compliance target of 85%
-  Improve PSPP performance across Wales and achieve 95% target
-  Maximising the Welsh seat on the ESR Programme Board to have Welsh specific requirements recognised
-  Increase pace and progress in standardisation of processes and investment in technology to deliver savings







Goal 3 - We will maximise **efficiency, effectiveness and value for money** through system leadership and a '**Once for Wales**' approach

-  SES: Meet rebates and recoveries targets
-  Provide QlikView 2nd Line Support and complete developments in house saving £60k per annum
-  Continue our investment in technology driving efficiency and quality improvements including intelligent document scanning and service user contact management systems
-  Invest in project management support to drive excellence in systems and procedures e.g. purchase to pay and hire to retire
-  Take full advantage of larger regional centres of excellence for resilience, efficiency, standardisation and collaboration
-  Provide greater automation through the use of 'BOTS'
-  Worked with Version One to provide a suitable solution for financial management systems to meet the needs of NHS Wales








Goal 4 - We will ensure **business continuity** offering a consistency of service across Wales as we further develop existing and additional service areas and our staff

-  Successful transfer of PMCAT into NWSSP
-  Improved PADR compliance despite the implementation of the pay progression policy
-  Recruitment and retention of some staff within our professional services due to market influences
-  Continue to deliver existing services whilst exploring new all Wales functions such as the Welsh Infected Blood Service
-  Develop and implement an action plan based on the 2016 national staff survey outcomes
-  Complete business continuity plans for all divisions
-  Complete assurance mapping exercise for all divisions








Goal 5 - We will **add value** as exemplars of good practice and use our skills and expertise to help NHS Wales **tackle key issues**

-  Improved patient safety through good risk management and sharing of lessons learnt through the WRP and improved procurement processes
-  Established new Value Based Procurement team to add pace to the work programme
-  Continued focus by our Audit and Assurance services on sharing lessons learnt and good practice across organisations
-  Provided dedicated resource to project manager the All Wales Staff Bank feasibility study that generated an accepted model for NHS Wales
-  Successful roll out of ESR Employee Self Service to all GP Trainees
-  Introduced new HCS Service Delivery Models to include providing 24 Hour/ Out of Hours cover









Goal 6 - We will continue to **enhance and improve the quality of all of our services, driving forward the **benefits and principles of prudent healthcare****

-  Continued project management support to the Temporary Nurse Staffing Capacity Steering Group and the underpinning workstreams
-  Offered a straightforward route to access legal services as and when they are needed
-  Shared learnt lessons from Welsh Risk Pool audits
-  Successful transfer of staff to Matrix House, Swansea
-  Over 70,000 NHS Wales employees with ESR Self Service access
-  Disposed of surplus health related property to the value of £3m in 2016/17.
-  Pace of initial recommendations from the All-Wales Medical Device and Consumables Strategy Group






Goal 7 - We will help NHS Wales deliver their **key strategic objectives and continue to **support health bodies** in the delivery of their **efficiency programme** to maximise value**

-  Unlocked capacity of GP Practice Managers by managing all employment processes
-  Established a single point of contact that current and future primary care medical staffing and nursing staff can utilise for training and employment opportunities.
-  Removal of variation and waste through deployment of ESR and interfacing technologies
-  Offer a high quality employment experience for GP trainees
-  Privatisation of NHS England Primary Care services and the impact of this on NHAIS system replacement
-  Managed new Student Bursary Scheme to support commissioned training places
-  Develop All Wales Assurance Strategy

Goal 8 - We will continue to develop and strengthen **communication, partnerships and engagement with our staff and our partners to ensure we address their priorities and needs**

-  Chair and Director to meet all NHS bodies' Boards during year
-  Complete Procurement Strategy for Wales
-  Regular meetings with health bodies' Executive Teams
-  Regular feedback obtained through service questionnaires and telephone interviews
-  Targeted communications about our service developments that include workshops, education, information bulletins, e-learning, and use of social media
-  Continuation of annual staff recognition awards and linked pay progression to innovation and compliance with core values
-  Improve ratings for Wales Quality Centre and Customer Service Excellence reviews
-  Continue refinement of Key Performance Indicators in partnership with customers

Goal 9 - We will **develop partnerships** and provide services with **other public sector organisations** to provide mutual benefit

-  Development of the Store and Scan on Demand service within Primary Care Services reducing pressures on GP Practices estates
-  Enhanced the e-learning solution to enable accessibility to over 300 courses for NHS Wales and the wider public sector including Local Authorities and Welsh Government
-  Substantially increased advertising vacancies for Primary Care sector
-  Introduced a "One Wales Primary Care Rebate Scheme" to include a new IT platform
-  Provide new shared services to NHS Wales and the wider public sector e.g. Single lead employer and National Clinical Assessment Service

Benefits of additional services

This financial year NWSSP has transferred in the Wales Infected Blood Support Scheme (WIBSS). This is a new service hosted by NWSSP on behalf of Welsh Government. Established in October 2017 WIBSS aims to provide support to people who have been infected with Hepatitis C and/or HIV following treatment with NHS blood, blood products or tissue in the 1980s and 1990s. Taking over from the existing UK schemes (Eileen Trust, Macfarlane Trust, MFET Ltd, Skipton Fund and Caxton Foundation), WIBSS also aims to provide seamless service with a single point of contact as well as

- A dedicated support service operated by experienced Welfare Rights Advisors
- A reliable, responsive, and accurate Payments Process
- A dedicated website that will be maintained with useful information
- Ensure the beneficiaries circumstances are understood, providing a sensitive and dignified service
- Supporting people navigate the healthcare system by acting as their key worker
- A development of outcome based reporting measures and an independent appeals process

What difference are we making?

OVERARCHING GOALS

We will use our resources effectively to address additional service pressures and demand

We will ensure business continuity as we further develop new and transferred service areas


We will continuously enhance and improve the quality of all of our services

We will add value and use our skills and expertise to help NHS Wales tackle key issues

We will continue to improve communication, partnerships and engagement to ensure we address our partners' priorities and needs

We will develop partnerships and provide services with other public sector organisations to provide mutual benefit

KEY PRIORITIES FOR THE NEXT THREE YEARS

Value for Money	Our Customers	 Adding Value Through Partnership	
<ul style="list-style-type: none"> Continue to maintain sickness levels below our target of 3.3% Continue to have a balanced financial plan ensuring we contain any cost growth Share learnt lessons from Welsh Risk Pool audit 	<ul style="list-style-type: none"> Obtain regular feedback through service questionnaires and telephone interviews Improve ratings for Wales Quality Centre and Customer Service Excellence reviews Communicate about our service developments through bulletins, workshops, e learning and social media 		
Service Development	Our Staff	Excellence	
<ul style="list-style-type: none"> Minimise the impact of privatisation of NHS England Primary Care services and the NHAIS system replacement ensuring Wales has the best solution to meets its needs Development of the Store and Scan on Demand service within Primary Care Services reducing pressures on GP Practices estates Provide new shared services to NHS Wales and the wider public sector 	<ul style="list-style-type: none"> Work to improve recruitment and retention of staff within some of our services Ensure we are developing our own pool of professional staff to meet future service needs Maintain our PADR compliance whilst embedding the pay progression policy Continue to offer a high quality employment experience for GP trainees 	<ul style="list-style-type: none"> Continue to increase the number of employees with ESR Self Service access Increase pace and progress in standardisation of processes and investment in technology to deliver savings Invest in project management support to drive excellence in systems and procedures 	

4. Opportunities & Challenges in 2018-21

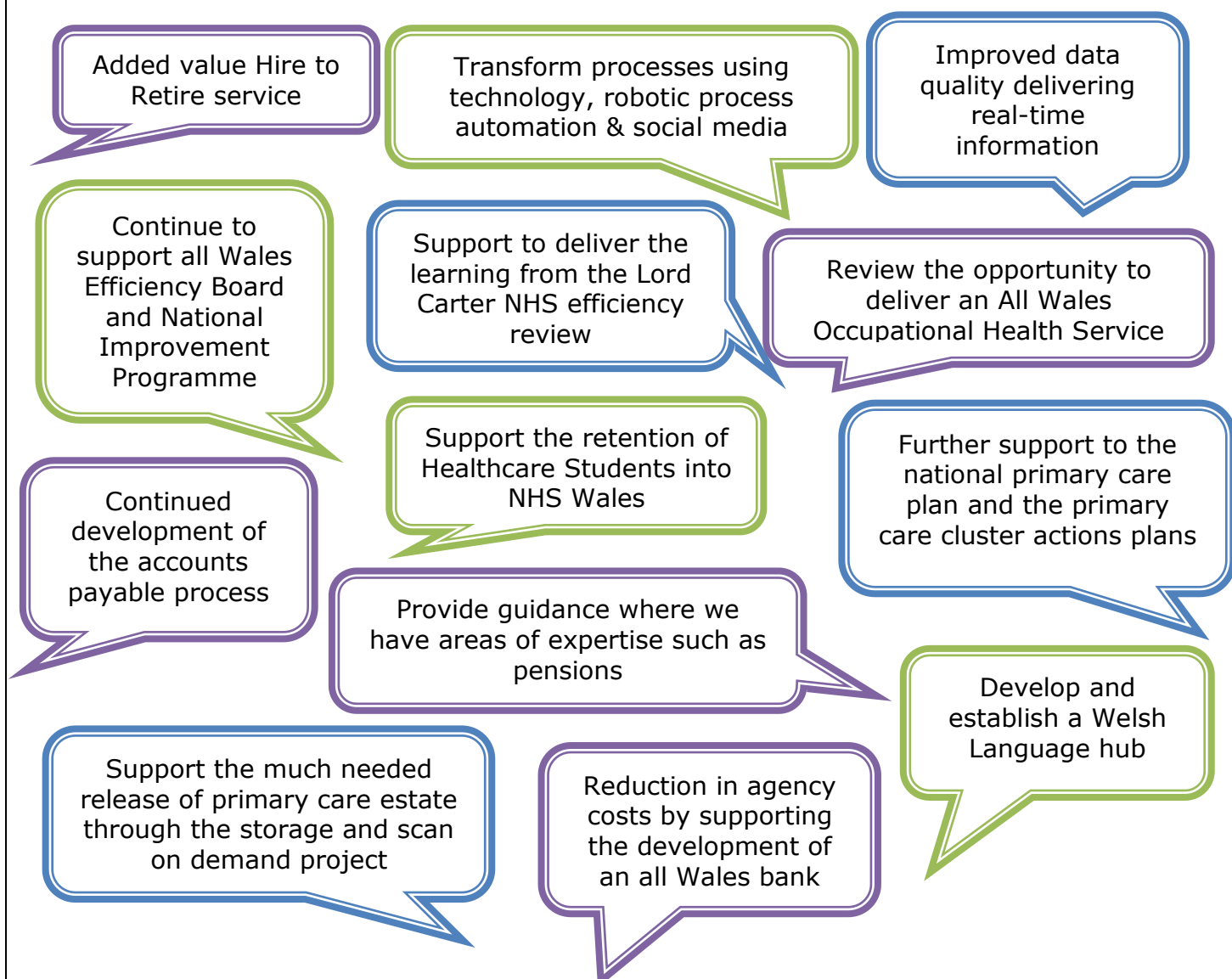
Throughout this chapter, we will address how we can further develop our trusted partnership relationship outlining the needs and challenges of our partners, how we are working to meet those needs and what we need from our partners. Additionally, we will identify the risks and issues that could prevent us meeting the needs of our partners and our continuous efforts to improve quality in all that we do.

Central to our planning are conversations with our partners about their plans for the future and how we can support them. The Shared Services Partnership Committee are regularly asked how we can enable them to deliver for the communities in Wales the committee members provide us with insight into how we can align our service developments with their needs.

The needs and challenges of our partners

As a support organisation, we have to ensure that we are meeting the needs and challenges of our partners. This has been the most austere decade in terms of funding growth and the Health Foundation have outlined £600m savings are required to support the sustainability of the NHS in Wales. This undoubtedly places great financial pressures on our partners and in response to those pressures; we have a key role in ensuring sustainable workforce and finance.

We have engaged with our partners to understand what they want from us over the next three years. This is evidenced by each of the divisions in their delivery plans (*Section 2*) below are the key areas highlighted through all of our ongoing conversations and engagement.



Our partners have told us what they would like us to focus on and we have taken these on board and delivered the following actions aligned to our well-being goals:

How we are supporting the needs and challenges of NHS Wales	
We will promote a consistency of service across Wales by engagement with our partners whilst respecting local needs and requirements	<p><i>Audit and Assurance Services</i> – provide assurance to boards and chief executives on governance, risk management and control. We also use our audit software to facilitate a more interactive audit process with our organisations</p> <p><i>Primary Care Services</i> – Continued delivery of timely and quality focused stakeholder service developments that support Health Boards in the development and delivery of modern services to meet the Primary Care Sustainability Agenda</p> <p><i>Procurement Services</i> - Supporting "Referral to Treatment" targets within Health Boards via various outsourcing arrangements with non NHS Wales providers.</p>
We will extend the scope of our services into NHS Wales and the wider public sector to drive value for money, consistency of approach and innovation that will benefit the people of Wales	<p><i>Specialist Estates Services</i> – support strategic development of primary care estate, including development of Primary Care Resource Centres that interface between clinical settings</p> <p><i>Legal and Risk Services</i> – supporting the development of 111 and the extension of GP Out of Hours</p> <p><i>Technology Enabled Learning (TEL)</i> - Programme providing e-learning support, content design and hosting solutions to NHS Wales and the wider public sector</p>
We will continue to standardise, innovate and modernise our service delivery models to achieve the well-being goals and the benefits of prudent healthcare	<p><i>Employment Services</i> – ensure safe timely recruitment through improving internal processes and supporting organisations to streamline local processes developing an added value Hire to Retire service.</p> <p><i>Primary Care Services</i> – facilitate service change and modernisation through a one site one service model, increased use of automation and technology,</p> <p><i>Procurement Services</i> – support the provision of high quality and clinically and cost effective patient care through engagement with suppliers and customers, including clinicians</p>
We will be an employer of choice for today and future generations by attracting, training and retaining a highly skilled and resilient workforce who are developed to meet their maximum potential	<p><i>NWSSP wide</i> – a series of Mindfulness courses have been offered to staff across all our regions to support managing stress in the workplace</p> <p><i>Single lead employer for GP registrars</i> – increase recruitment through consistent standard of training and simplified processes</p>
We will maintain a balanced financial plan whilst we deliver continued efficiencies, direct and indirect savings and reinvestment of the Welsh	<p><i>NWSSP wide</i> – release cash resources and support cost improvement and avoidance through professional influence savings</p>

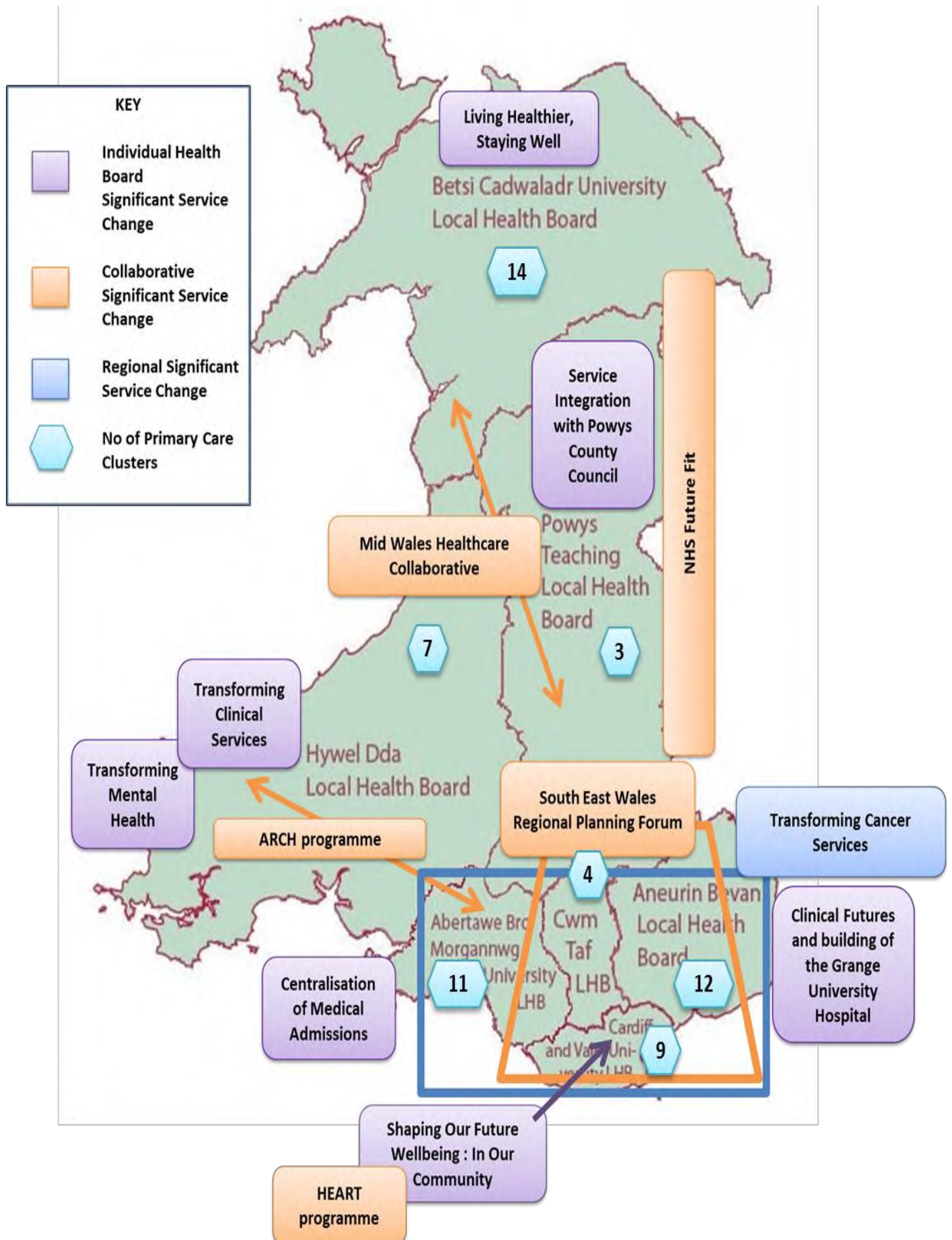
pound back into the economy	<i>Specialist Estates Services</i> – support strategic change, capital probity and effective use of resources through business case scrutiny and construction procurement frameworks
We will provide excellent customer service ensuring that our services maximise efficiency, effectiveness and value for money, through system leadership and a 'Once for Wales' approach.	<i>Audit and Assurance Services</i> - provide further financial savings by removing the recharges for Capital audit work and integrating into the main audit plans <i>Central Team E Business</i> - provide a 2nd line and 3rd line Business Intelligence service desk to assist our customers to understand immediate business operational incidents <i>Digital Workforce Solutions</i> – developed 10 new ESR BI dashboard analysis reports for Wales
We will work in partnership to deliver world class service that will help NHS Wales tackle key issues and lead to a healthier Wales	<i>Employment Services</i> - meet the increased recruitment needs of health organisations to meet safe clinical staffing levels and introduce changes in skill mix and structures to deliver significant service changes <i>Health Courier Services</i> – provide efficient, timely transport of samples and results between primary and secondary care through simplification, centralisation and economies of scale <i>Procurement Services</i> – provided dedicated support to each Health Board to increase the supply of nursing through contract agencies.
We will support NHS Wales by influencing innovation, modernisation and consistency through sharing lessons learnt and delivering high quality services	<i>Legal and Risk Services and Welsh Risk Pool</i> – reduce harm and risk through sharing good practice and lessons learnt and supporting the development of safe clinical processes; and supporting patient quality and satisfaction through “Putting Things Right”

How we are supporting local needs and challenges

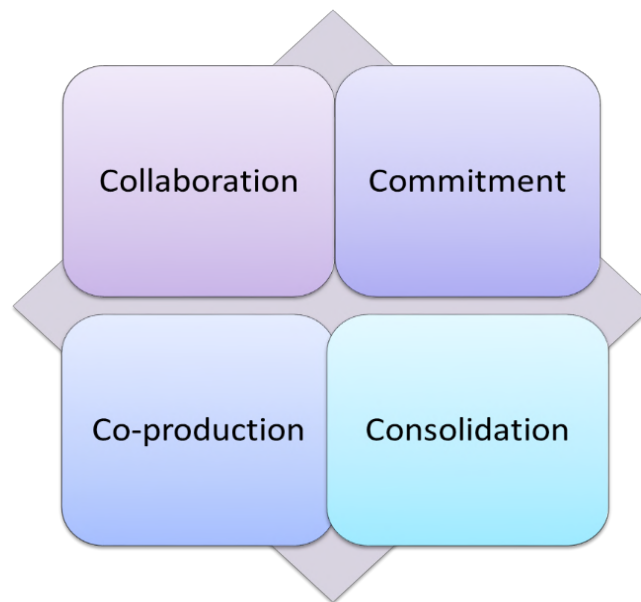
As well as the socio-economic pressures, NWSSP must be in a place to support and respond to the significant local service change-taking place through attendance at the IMTP winter event we were able to engage with our partners about their planned service changes.

As a supporting organisation, we are a critical enabler to service change across Wales including the boundary changes that will affect Health Boards and supporting the development of services such as 111. When models of care change within Health Boards and Trusts this has an impact on their recruitment, procurement and estates infrastructure. We can also provide valuable intelligence to organisations highlighting areas through procurement that they can make non-pay savings through reducing inappropriate variation.

In the diagram, overleaf we highlight some of the significant service change that is planned over the next three years by our partners. We have gathered this information through our ongoing conversations in different forums such as the IMTP winter event, Shared Services Partnership Committee and Assistant Directors of Planning. The map only shows some of the significant service changes at this point time and they are likely to change over the next three years.



What we need from our partners



Central to being an enabling trusted partner is the requirement for organisations to adopt the once for Wales systems and processes we put in place to drive efficiency. Without the cooperation of our partners, we can't truly implement a continuous improvement through a unified approach. If systems and processes are not adopted in a consistent manner and different organisations, require variations the full benefits can't be realised across Wales.

We understand that each organisation in NHS Wales is on its own journey of transformation to meet the needs of their population. Therefore, they might not all be in a place to adopt our services or projects at the same time. Where needed we will roll out our once for Wales systems and processes on a staggered basis highlighting the positive impact on driving efficiencies to encourage remaining organisations to adopt at a later date.

NWSSP Service Developments	Purpose	What we need from our partners
Full deployment digital workforce solutions and systems (incl ESR Enhance)	<ul style="list-style-type: none"> Easily accessible and interactive workforce solutions Automate and streamline processes removing waste 	<ul style="list-style-type: none"> Engagement with local IT leads Full roll out and use of ESR self-service portal Implement recommendations of Hire to retire Occupational Health Interface
Purchase to Pay	<ul style="list-style-type: none"> A modern world class end to end Purchase to Pay process Lower unit costs Better information 	<ul style="list-style-type: none"> All organisations to implement no PO no Pay policy Maximise cash savings from Priority payment programme
Value based procurement – Evidence Based procurement Board	<ul style="list-style-type: none"> Reduce unwarranted variation Purchase medical consumables and devices, optimum patient outcomes 	<ul style="list-style-type: none"> Medical Director and clinicians buy in Adopt the recommendations of the Board
Student Streamlining Recruitment Process	Recruitment of healthcare students in partnership with Universities	<ul style="list-style-type: none"> Consistent agreement and application of one procedure

Ongoing development of paper-lite payroll processes	Reduce the reliance on paper within local payroll processes	<ul style="list-style-type: none"> Stop the use of paper payslips from 31st March 2018 Full implementation of ESR
Prescription - Electronic Transfer of Claims in Primary Care	<ul style="list-style-type: none"> Reduce the reliance on paper Increase efficiencies Better financial information 	<ul style="list-style-type: none"> Consistent application of the process Collaborate NWSSP & GPW
Storage and Scan on demand in Primary Care through the electronic storage of records	<ul style="list-style-type: none"> Free up the Primary Care estate Improvement Grant savings Shift to primary care 	<ul style="list-style-type: none"> Promote in Primary Care Plans Support to clusters
NHAIS replacement	<ul style="list-style-type: none"> Replacement of the system for registering patients and making payments to primary care practitioners 	<ul style="list-style-type: none"> Consistent application of the changes and ongoing communication through deployment Engagement and support
Audit and Assurance Engagement	<ul style="list-style-type: none"> Ability to implement, improvements and share best practice 	<ul style="list-style-type: none"> Greater engagement around creating action plans Smarter management responses

Risks and Issues

As an organisation, we routinely manage the risks and issues that could prevent the delivery of the goals and objectives outlined in our IMTP. We hold a central risk register that is discussed monthly at our SMT meetings. The Finance and Corporate Services Division work with Directors and their Senior Management Teams to ensure that the risks recorded within each register remains up-to-date and that there is focus on achievement of planned actions to mitigate the risk. This is reinforced through the quarterly review process of each division where review of the division risk register is a standing agenda item.

Additionally, as part of their delivery plan development, we all asked all divisions to identify the risks for each delivery objective and overarching risks that would be detrimental to their steps in world-class journey they wish to achieve by 2021. These are summarised into four categories below:

Critical Relationships	External Factors
<ul style="list-style-type: none"> Engagement and ability to release resource in NHS Wales due to competing priorities Ability to engage about planning & priorities by Health Boards and Trusts Health Boards and Trusts expectations may exceed resources Capacity to redirect resource to support unpredictable peaks in activity Cascade of information within Health Boards and Trusts about service developments and projects 	<ul style="list-style-type: none"> Impact of major projects e.g. Specialist & Critical Care Centre Financial pressures and continued austerity will require us to demonstrate Value for Money Delay in delivery of required legislative change, in particular regard to paper records reduction. Establishment of Health Education Wales and the impact on our staff Financial uncertainty from commercial income generation and Brexit

- Unwillingness of Health Boards and Trusts to adopt a once for Wales approach

Capital Funding, IT & Modernisation	Recruitment, Retention and Retirements
<ul style="list-style-type: none"> • Competing demands on strategic partners NHS Wales Informatics Services (NWIS) to deliver required infrastructure support • Ability of our ICT network to cope with demand • Access to technical expertise to support ICT systems • Our current Estate will limit our ability to expand with the increasing service demand • Lack of available capital for the modernisation of equipment and IT systems 	<ul style="list-style-type: none"> • Business continuity and loss of skilled staff as a result of cessation of excess travel and age profile • Inability to recruit to vacant positions from the market due to the scarcity of professionals in some areas and the restrictions of the A4C system • Ability to attract and retain staff with required technical expertise to support systems • Inadequate delivery of succession planning

Improving Quality

Many of our divisions as part of their journey to world class have increased the quality in their provision of service using automation. For example, Primary Care Services have enabled this across the organisation through their scanning services removing the requirement for staff to input information. Additionally, e-Workforce solutions have a fundamental role in facilitating an increase in quality in workforce data through supporting the use of the full capabilities of ESR and technology enabled learning. The once for Wales approach in itself is a quality measure reducing inappropriate variation and ensuring consistency of application in processes.

Meeting and exceeding performance standards

Supporting progress towards the achievement of excellence is the commitment to continuous development through the adoption of a number of best practice quality models, awards and standards. These provide quality assurance as well as sustained short-term and long term improvement.

NWSSP working with DoFS and WODs through the delivering excellence programme are striving to improve performance and incorporate good practice amongst health boards and trusts. Key performance indicators will be further refined following the output from the Hire to Retire and purchase to pay national and local workstreams. We create individual action plans for the delivering excellence programme to resolve any ongoing issues with clear timescales and responsibilities in terms of ownership of actions.

Quality performance indicators

Key performance indicators have been identified for each service, and are summarised in their delivery plans (Section 2). A number of these relate specifically to quality and service improvement. The continued development of the balanced scorecard and associated performance reporting during 2016-17 will seek to consolidate and take forward work in this area.

Quarterly performance reports that incorporate detailed Key performance information are prepared for each Health Board and Trust. These reports form the basis for discussions with executive officers during regular meetings throughout the year. In addition, individual services produce more detailed key performance indicators that are discussed with LHB and Trust managers during the course of the year. The information provided to each Health body contains key performance indicators for all Health bodies and areas of good practice and strong or performance are highlighted.

Service Level Agreements (SLAs)

A key element of effective service provision clear understanding of the respective roles of NWSSP and the requirements of the individual NHS Wales. The SLAs ensures:

- That each party to the agreement understands their role and responsibilities. This is done through clear definition of duties with quarterly review meetings to monitor progress
- that risk is shared equally between all organisations
- Appropriate performance measures are in place to measure both qualitative and quantitative information

As well as providing performance reports to offer quality assurance, SLAs define the service and quality service users can expect. These are monitored in liaison with our key customers.

Customer Service Excellence Standard

Supporting our objectives that focuses on our customers, a number of our divisions, including; Procurement, Employment Services, Primary Care Services, Specialist Estates Services and Legal and Risk have all achieved and maintain the Cabinet Office's Customer Service Excellence Standard. Other NWSSP services are working towards this as part of their service development as we strive to provide services with increased efficiency and quality.

Wales Quality Awards

Our commitment to customer service has been recognised through a number of our services gaining both the Wales Quality Centre "Business Excellence Award" and the Customer Service Excellence Award, both of which are nationally recognised awards for good practice.

To achieve these awards, the services undertake a robust assessment across a range of criteria. These assessments are undertaken through a document review and site visits by independent assessors, are a valuable part of our quality improvement process. Every year we work hard within our divisions to attain accreditation from the Wales Quality Centre who undertake an in-depth assessment on the following criteria;

- | | |
|---------------------------|-------------------------------------|
| • Leadership | • Society Results |
| • Strategy & Planning | • Key Business Results |
| • People Management | • Customer Insight |
| • Partnership & Resources | • The Culture of the Organisation |
| • Processes | • Information and Access |
| • Customer Results | • Delivery |
| • People Results | • Timeliness and Quality of Service |

Each year our services continue to improve the scores received by the Wales Quality Centre. Over the last year each service has been putting in place, the recommendations received to strengthen their services. Next year it is the intention that we will undertake the assessment as a whole organisation rather than individual services.

Awards and Recognition

Awards and Recognition is an important to encourage staff of the value of their work. We believe it helps to drive the quality of our services encouraging a culture of continuous improvement. In support of this, we continue to hold our annual staff recognition awards aligned to our values. The awards are positively received by staff and planning for the 2018 is underway as this is an established annual event in the NWSSP calendar.

A measure of the quality of our services is the recognition we have received from national bodies. Our services have been nominated for and won a number of prestigious external awards;

- Chartered Institute of Professional Development
- Health Service Journal
- GO, Excellence in Public Procurement
- Healthcare People Management Association

- Institute of Directors Wales
- The Law Society of England and Wales

This year and we will continue to support staff to enter awards to recognise their dedication to our journey of being a world class shared services organisation.

Improving quality together

Quality services can only be provided if the driving forces, the staff, are appropriately skilled and empowered to deliver excellence. Our organisational values are intrinsic to supporting our staff to listen, learn, take responsibility, innovate and work together to achieve quality. Coupled with this our staff development programme has a strong focus on quality. All staff are required to undertake the Bronze Improving Quality Together (IQT) training and encouraged to do the Silver and Gold IQT. Innovation is a Core Value of NWSSP and an essential element of IQT Silver. There are seven cohorts of 15 places for IQT Silver planned across NWSSP next year and further cohort dates to be released.

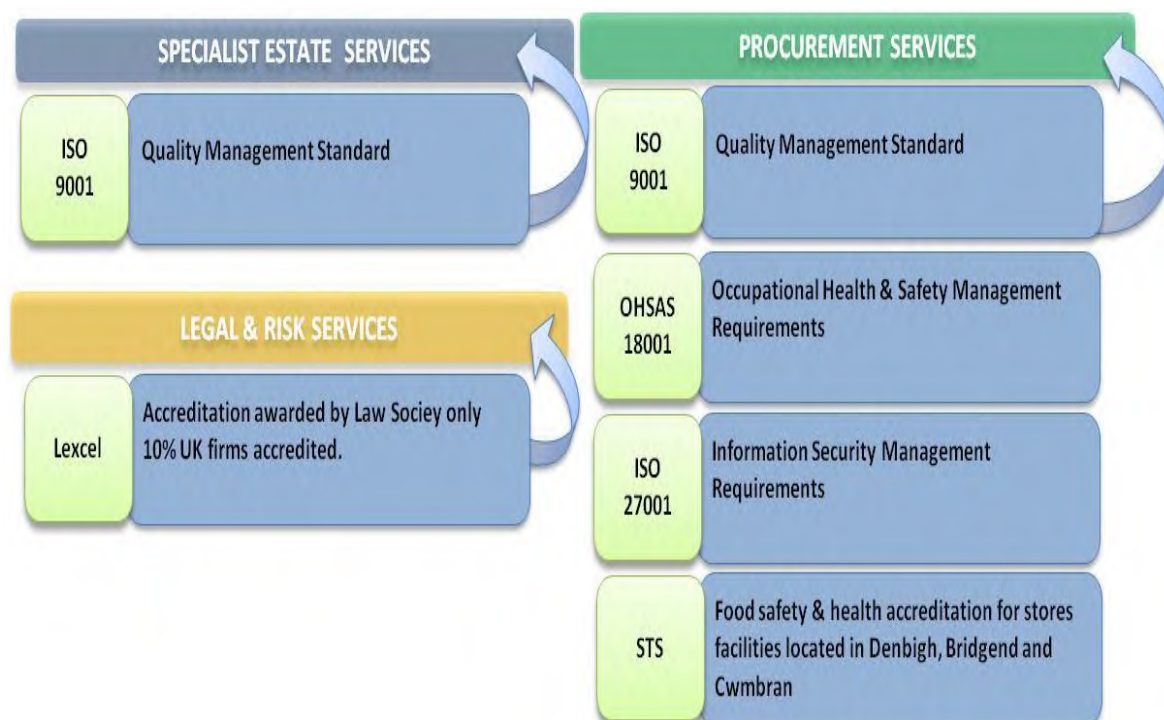
Quality Standards

As an organisation, we achieved the ISO14001:2004 Standard with our Environmental Management System and have maintained continued certification since 2014. Looking forward, we are aiming to transition to the ISO14001:2015 Standard in May 2017 and extend the accreditation to include our newest services, such as Health Courier Services.

Procurement services undertook the OHSAS 18001 this year and the external audit was an extremely good outcome with no non-compliances raised. In addition to this the ISO 9001 standard was majorly revised in 2015, procurement services were able to meet the revised standards for their external audit this year.

It was agreed by the SMT that we would ensure as an organisation we have the ISO27001 Information Security Management Standard (ISMS). We have developed an organisation wide cyber-security action plan that will be implemented prior to ISO 27001. We recently took part in a cyber –security audit and our plan will be updated following the receipt of the recommendations. The standard aims to improve resilience and responsiveness to threats to information, preserving confidentiality, integrity and availability of information (CIA) by applying a risk management process. It deals with the need for prevention and all aspects of protocol including technical, physical and legal control.

Each of our divisions are undertaking quality initiatives and gaining recognised quality accreditation and awards that are appropriate to the services provided. Some examples include:



What do we need to develop and improve?

OVERARCHING GOALS

We will help NHS Wales respond to the socio-economic pressures it is facing

We will ensure our staff are appropriately skilled and empowered to deliver excellence


We will support and respond to Health Boards and Trusts significant regional service change

We will continue to increase the quality in our services through the use of automation

We will work with our partners to ensure consistent application of our systems and processes, through a Once for Wales approach

We will maintain our commitment to and delivery of excellent customer service

KEY PRIORITIES FOR THE NEXT THREE YEARS

Value for Money	Our Customers	 <p>Adding Value Through Partnership</p>	
<ul style="list-style-type: none"> Ongoing development of paper-lite payroll processes Reduce unwarranted variation in purchasing of medical consumables and devices through value based procurement Reduce the reliance on paper and increase efficiencies within Primary Care through the roll out of Electronic Transfer of Claims 	<ul style="list-style-type: none"> A 'Once for Wales' approach to the recruitment and pre-employment checks of healthcare students in partnership with Universities Work towards all our services being recognised by the Cabinet Office's Customer Service Excellence Standard Continue the development of the accounts payable process 		
Service Development	Our Staff	Excellence	
<ul style="list-style-type: none"> Further support to the national primary care plan and the primary care cluster actions plans Support the strategic development of primary care estate, including the development of Primary Care Resource Centres Develop and establish a Welsh Language hub 	<ul style="list-style-type: none"> Continue to support staff to undertake the Improving Quality Together Silver training Continue to support staff to enter awards to recognise their dedication Ensure our staff recognition awards are a standing event in the NWSSP calendar recognising how our staff live our values 	<ul style="list-style-type: none"> Improve our data quality so we are able to deliver real-time information to our partners Undertake the Wales Quality Centre audit as a whole organisation Transition to the ISO14001:2015 	

5. Service Change

Service change is a necessary component to ensure continuous improvement and to reflect the needs and challenges of our partners. Each division will be undertaking service developments over the next three years as part of their journey to being world class these are outlined in detail in their delivery plans (*Section 2*). This chapter provides an overview to the significant service change NWSSP will experience over the next three years.

Driving efficiency and delivering transformation

We have already begun implementing processes that will maximise efficiency, effectiveness and value for money, supporting organisations to apply lessons from the Lord Carter Report by minimising variation through world class standards.

The primary focus of reducing unwarranted variation is explicitly linked with the work already progressed on Prudent Healthcare. In his report Lord Carter identifies four themes Workforce, Hospital Pharmacy and Medicine Optimisation, Estates Management and Procurement. Some examples of where we are driving the work across NHS Wales to optimise resources, increase quality and efficiency are:

Workforce	Hospital Pharmacy and Medicine Optimisation
<p>Hire to Retire automated modernised processes that support staff from first job application to payment of pension. The benefits include quicker recruitment, better performing staff improved communication with staff and portability of staff information.</p> <p>Implementing key digital information systems including the developments in ESR functionality which will empower managers to manage and staff to take responsibility for their own data to drive up data quality</p> <p>Collaboration of workforce processes supporting a once for Wales approach that will drive standardisation in areas such as workforce planning, helpdesk support and job evaluation supporting the implementation of the All Wales Staff Bank.</p>	<p>Drive automation and efficiency in prescribing by receiving and automatically processing prescription forms through the Electronic Transfer of Claims (ETC) rollout</p> <p>All Wales Drug Contracts provide hospital pharmacy departments the drugs they purchase, ensuring quality of product at value for money prices. The contracts cover all branded drugs (patented), as well as generic contracts and provide a One Wales approach to procurement and rationalisation to one provider where clinically possible.</p>
Estates Management	Procurement
<p>Centrally procure and manage National and Regional construction and consultant frameworks for use by NHS Health Boards and Trusts on major capital projects in excess of £4m construction cost.</p> <p>Assistance to Health Boards and Trusts in the management of contractor and designer supply chains with the establishment of Project Manager and Cost Adviser frameworks</p> <p>Initial NHS Wales Estates benchmarking data shared and discussed at the All-Wales Directors of Planning Group</p>	<p>Purchase to Pay looking to ensure that goods and services are sourced, ordered, delivered and paid for efficiently, ensuring NHS Wales has what it needs at the right time and at the best price.</p> <p>Clinically led procurement acting as a focus for developing and refining local professional opinions on products purchased by reviewing evaluations and assessments to test the existing evidence base and support the rationalisation/standardisation agenda.</p>

Service Change across NWSSP

All of our divisions and services are on a continuous journey to being world class and undertaking service improvements these have been summarised in appendix 1 –Our services and their journey to world class. As a growing organisation we also undergo significant service change on an annual basis with the growth of existing services, addition of new services, service relocations through the realisation of our accommodation strategy and the reallocation of services to other health bodies. Many of the services changes that are being implemented have common themes.



In order to embed our well-being objectives we have considered how to grow our services aligned to the five ways of working and ultimately to drive forward the requirements of Prosperity for All.

Service change aligned to :



Collaboration

Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives.

NWSSP Wide

Consider opportunities for additional work outside of NHS Wales by building on current non-NHS work to widen coverage to other areas that impact significantly on the work of NHS Wales

Health Courier Services

Continue work with the NHS Wales Collaborative on centralisation of Specialist Pathology Services to centres of excellence.

Procurement Services

Introduction and application of Value Based Procurement principles as a new way of working to be embedded by March 2020.

**Service
change
aligned to :**



Integration

Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their other objectives, or on the objectives of other public bodies.

Digital Workforce Solutions

Deployment of an agreed programme of ESR e-Learning products for NHS Wales and the wider public sector

Employment Services

Payroll and Pension Process to all practices Primary Care Sector to generate capacity to redirect teams to patient care.

Specialist Estate Services

Develop the current property related service to support the investment of new capital, revenue and third party funding for Primary Care developments.

**Service
change
aligned to :**



Involvement

The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.

Digital Workforce Solutions

Establishment of an accredited 'All Wales' Self Service & Learning Support Function that maximises economies of scale and enables local capacity

Primary Care Services

General Ophthalmic Data Warehouse development in order to provide required assurance through improved collaboration with NHS Wales Counter Fraud Services

SMTL

Pilot Usability Testing to provide procurement with additional evidence on which to select devices for Welsh contracts, and to enable clinicians to have confidence in the products that are awarded as a result of the process

**Service
change
aligned to :**



Prevention

How acting to prevent problems occurring or getting worse may help public bodies meet their objectives.

Employment Services

Certificates of Sponsorship management centrally undertaken for all Medical and Dental staff this will ensure Once for Wales portability, reduced costs to NHS Wales, HEIW and individual

Procurement Services

Roll out of Action Point across Procurement Services due to internal need to improve call logging and management.

Welsh Risk Pool Services

Support the development and roll out of a Once for Wales Concerns Management System. To address the Evans Report "Using the Gift of Complaints" and to identify and focus on themes

Service

change

aligned to :



Long term

The importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.

NWSSP Wide

Expansion of the use of Robotics to ensure we are working in a modern and efficient manner; releasing and redirecting resource capacity to qualitative value added activities.

Primary Care Services

Internal service review to consider further service consolidation and site rationalisation through a potential restructure.

Procurement Services

Utilising technology and Oxygen Finance for prompt payment. P2P process efficiencies will be ongoing and realised over the contract term until 2023.

How will we develop and improve?

OVERARCHING GOALS

We will implement processes that will maximise efficiency, effectiveness and value for money

We will continue to develop and integrate our new services

We will apply lessons from the Lord Carter Report by minimising variation through world class standards

We will support the growth of existing services to meet our partner's needs

We will recognise that we are on a continuous journey to being world class undertaking service improvements to support this

We will expand our services into the wider public sector supporting the Wellbeing of Future Generations

KEY PRIORITIES FOR THE NEXT THREE YEARS

Value for Money

- Apply Value Based Procurement principles and embed as a new way of working
- Develop the current property related service to support the investment of new capital, revenue and third party funding for Primary Care developments
- Support the development and roll out of a Once for Wales Concerns Management System

Our Customers

- Roll out of Action Point across Procurement Services
- Improve customer information through the use of technology
- Deliver excellent customer service during times of service change

Adding Value Through Partnership



Service Development

- Support the implementation of the all Wales staff bank
- Pilot Usability Testing to provide procurement with additional evidence on which to select devices for Welsh contracts
- Establish an accredited 'All Wales' Self Service & Learning Support Function
- Payroll and Pension Process to all practices in Primary Care Sector

Our Staff

- Make sure that staff feel supported through change management
- Promote agile working environments in all of our staff relocations
- Work in partnership with LPF through all service changes that affect staff

Excellence

- Expand the use of Robotics to ensure we are working efficiently
- Develop General Ophthalmic Data Warehouse in collaboration with NHS Wales Counter Fraud Services to provide required assurance
- Continue work with the NHS Wales Collaborative on centralisation of Specialist Pathology Services to centres of excellence

6. Enablers

Throughout this chapter, we will address what will enable us to deliver our plan. Many components support us in our journey to being world class; our people, finances, infrastructure, ICT and governance. Without these components working together, we would not be able to continue to add value through partnership.

Our people

The workforce and OD plan sets out the key priorities to support the delivery of the service development strategy outlined in this plan. The improvements made to date as an organisation have been achieved through the support, hard work, dedication, commitment and skill of our workforce. Our staff will continue to play a fundamental role in ensuring that this plan, the service commitments and developments are successfully delivered.

Organisational Change

Ongoing organisational change has been a reality for NWSSP since its inception and will continue over the period of this IMTP. Re-structuring of services and organisational structures continues and is an ongoing requirement as services continue to develop and grow.

In addition, further relocations of staff will also be a reality for the foreseeable future as we continues to implement the strategic Accommodation Strategy, further align and reduce the number of sites. This included the transfer of circa 150 staff from central Swansea to Matrix House in autumn 2017 and will include the transfer of some services to NWSSP HQ at Nantgarw when space becomes available following the transfer of WEDS staff to HEIW in 2018. . In addition, there is a proposal to relocate Health Courier Services from various locations in the Aneurin Bevan Health Board area to Mamhilad Park Estate in 2018.

New roles are being developed aligned to service need. Service improvement team roles have now been established in all transactional areas and the benefit and expansion of these roles and other complimentary roles will continue to be explored and implemented.

The new roles will include further expansion and integrated provision of helpdesk services to fully support stakeholder needs to provide an accessible and responsive service to all users. In addition, new roles are being developed to support the utilisation of robotic technologies that will facilitate the automation of identified labour intensive transactional processes.

Alignment of future staff levels/skill to service plans will continue to be reviewed and adjusted to reflect the changes in service models and the requirements of individual services plans. In summary, the broad areas of significant change are highlighted below, with further detail outlined in individual plans.

Welsh Risk Pool Refocusing staff to fully support lessons learnt agenda across NHS Wales	Legal and Risk Services Potential to continue to expand legal team to further supply in house solution to NHS Wales and further reduce the instruction and cost of external legal services providers	
GPSTR Potential to further develop services to provide a wider range of workforce services to primary care partners.	Audit and Assurance Services Further recruit a small number of substantive staff as the dependency on external support is reduced	
Specialist Estates No significant change to overall resourcing levels	Counter Fraud No significant change to overall resourcing levels	SMTL No significant change to overall resourcing levels

Corporate Functions

Small number of additional posts for Robotics, Project Management Office and IT

Student Awards Service

No immediate change in early years of plan and future staff needs contingent on the Welsh Government policy position regard student bursaries

WEDS

TUPE transfer to staff into HEIW should be completed during the first year of the IMTP period

HCS

Further small-scale expansion of workforce as additional services transfer from Health Boards and integrated into HCS model. Further attempts to recruit HGV drivers and a wider development of the management of the transport function.

E workforce solutions

Future review of funding and staffing levels in light of development in Local Government and Welsh Government users and the potential to establish an all Wales ESR helpdesk facility. Additional resource will be required. Business cases submitted to Welsh Government and W&ODs.

Procurement

Local/Central Sourcing – recruitment to vacant posts and further investment in staffing levels in professional procurement roles continues as requested by stakeholders. Internally delivered CIPS development programme to support future supply of qualified staff. A number of band 5 roles have been established to facilitate career progression and the internal talent pipeline

Supply Chain – no material changes to resourcing levels but ability to supply short-term gaps to be supplemented by internal driver bank. Some potential increase in staff numbers where additional Receipt and distribution opportunities and a wider supply chain service might develop.

Accounts Payable – the ongoing review of staffing levels continues as progress made in automating processes may reduce staff needs. Eradicate the use of agency staff through recruitment to substantive posts and the utilisation of the in house bank. Wider adoption of home working for some aspects of the function

Employment Services

Payroll– development of services provided to primary care will require additional staffing to be deployed. In addition a small investment in pay modelling expertise will be required to support the strategic pay agenda for NHS Wales. A Head of payroll services to be appointed during 2018.

Pensions – No significant change to overall resourcing levels for pension transactional activity although short-term capacity will need to be identified to support the TUPE transfer of Cardiff University staff into HEIW. A review of expertise requirements to proactively support pension implications of changes to annual and lifetime allowances will be undertaken and may need additional investment.

Recruitment – development of services provided to primary care will require additional staffing to be deployed. Ongoing support and potential increase in staff levels to support the Train, Work, Live campaign and Single Point of Contact service. Refocusing of roles to support end to end process change and work in closer partnership with stakeholders to support the development and improvement of local processes

E expenses - - No significant change to overall resourcing levels

Primary care

Most notable area of change relates to the overall reduction in staff required for prescription pricing as automated process are further rolled out. Retraining/redeployment strategy will be required to support affected staff

Service Improvement team – further development across full range of services maximise process efficiencies

Technology Advancement – Investment in dedicated developer roles to deliver customer portal and process efficiencies through robotics and digital technology

New services, including SMTL, PMCAT and the management of NCAS from Welsh Government have recently transferred into NWSSP. The effective integration and alignment of these services into NWSSP workforce operating practices will continue. Subject to the outcome of the current review and business case there is also potential for the provision of laundry services to transfer to NWSSP in the future. In addition, following extensive scoping work led by NWSSP work will continue on supporting the establishment of an All Wales Staff bank.

Transferring services – a significant change within the first six months of this plan will be the transfer of WEDS staff to Health Education and Improvement Wales. This process requires significant support from the workforce team to ensure that the consultation process, management of change and the ultimate TUPE process is effectively managed, working with the key stakeholders such as the Welsh Government, Cardiff University and Wales Deanery.

Values

The journey to embed the NWSSP values of Listening and Learning, Taking Responsibility, Innovation and Working Together continues. To address this a number of targeted interventions continue to be provided:

A values invasion group was established and it mapped all the broader NHS Values and Core Principles to NWSSPs Values. The group also developed an action plan which includes:

- Branding and awareness campaign
- All staff to update their signature strip to reflect our branded values–
- PADR Pay progression process has been aligned to our values
- Each service area to demonstrate how they are putting values into action with a planned intervention with workforce
- Values shields for all training events including corporate induction events
- Staff recognition awards are aligned to our values
- Staff Newsletter will continue to campaign and promote values based stories
- Values based recruitment models
- Values have been built into all team based working programmes
- Progress on its implementation will be reported to NWSSPs corporate communication group
- Regular updates are provided to Welsh Government on our values agenda

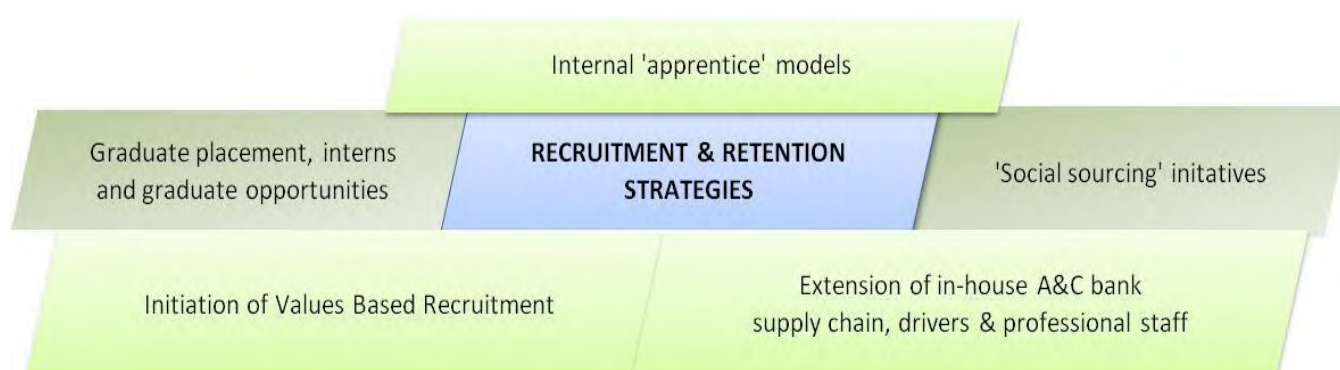
In addition, the organisation has developed a poster to display the work done in embedding the values for display at the NHS Confederation Exhibition in February 2018.

Recruitment and Retention

Recruitment and retention continues to be one of the most significant areas of challenge to NWSSP. The constraints of Agenda for Change pay has a detrimental impact on both recruitment and retention in a number of the professional and technical services where NWSSP competes for staff with the private sector and other parts of the public sector. The services most notably affected are Procurement Services, Specialist Estates Services and Audit and Assurance Services where remuneration levels in the private sector and other parts of the public sector are generally higher and the local labour market is very competitive.

A further review of the opportunities to improve recruitment and retention in these services is critical to ensure that a lack of a skilled and adequate workforce does not have a detrimental impact on service delivery and development.

A blended portfolio of recruitment initiatives will continue to be deployed, to include:



In addition, the Clerical Bank has provided a resource solution as individuals registered on the Bank have been recruited into permanent posts within the organisation.

Recruitment to transactional services remains robust. However, long-term retention of junior staff remains challenging. These staff gain very transferable skills that are attractive to other employers.

The On-boarder and Exit questionnaire mechanisms that have been put in place in 2016 has provided a critical insight into what needs to be improved and what action needs to be taken to ensure that staff are retained in the organisation as far as possible. The feedback from these surveys has provided a very useful insight in the behaviours of staff. The outcomes of the 'On border' survey has indicated that NWSSP should review the skills and experience of staff appointed to these 'junior' roles. Often, highly educated individuals have been recruited. The consequence is that NWSSP at times is unable to meet the career aspirations of these staff, which in turn results in unplanned turnover.

NWSSP recognises that to ensure that staff retention is maximised all staff need to have a 'best in class' employment experience and feel engaged, supported, motivated and enabled to develop their careers within NWSSP. This will rely heavily on the 'people management skills' of our leaders, managers and supervisors which is being addressed as part of the organisations learning and development strategy.

Staff Survey

The 2017 staff survey provides positive news for NWSSP. The results for NWSSP show that 91% of all questions reported positive improvement between the 2013 and 2016 surveys. In addition, NWSSP survey results were more positive than the rest of Wales in 70% of areas.

One of the main target areas remains the drive to improve the Engagement Index Score. Whilst this shows an improvement since the 2013 survey the overall score lies just below the average score for NHS Wales.

An overarching action plan has been developed and in addition, each service area has identified its own top priorities for action. These include:

- Staff Development
- Health & Wellbeing
- Improved Communication between Senior Management & Staff
- Leadership & Change Management
- Engagement & Feedback

Regular organisation wide and local staff pulse surveys will be routinely used during the duration of the plan to monitor progress and improvement.

Each service area will provide a regular update to LPF detailing progress and improvement and in addition to this NWSSP staff survey action group will be exploring cross cutting themes emerging from the results - the group will be responsible for delivering the staff survey action plan.

Our programme of work to date includes:

- A number of service areas conducting pulse surveys working towards improving the communication and staff engagement agenda
- Ongoing work of staff focus groups within Employment Services, Primary Care and Procurement Services
- Launch of the AP Triple 3 Cultural Change Programme
- Team Based programmes within Procurement and Employment Services to embed team based working philosophy

Workforce Performance

Positive improvement continues to be achieved across a range of core workforce performance indicators.

Sickness absence - Significant focus has been given to driving down levels of sickness absence with a challenging organisational target of 3.3% being set. This target has now been achieved but maintenance at the target performance is an ongoing challenge. The rolling average sickness

rate is currently 3.39%. Performance against this will continue to be closely monitored. The management of both short-term and long-term absence remains a priority. In recognition that stress, anxiety is the most common cause of sickness absence, active steps are being taken to address the impact of this as detailed below to provide staff with tools and strategies to handle difficult situations, breakdown the stigma surrounding mental health and enable staff to be able to hold sensitive conversations.

A number of further developments will be delivered during the duration of this plan, including:

A further small reduction in the agreed sickness absence target. Improvements in the management of long-term absence through a review of the provision and access to occupational health services. The option to access OH support from external providers has now been put in place and is utilised on a case by case, needs based assessment where this may deliver improved absence management and facilitate quicker return to work

Improved awareness and training on the management of stress and anxiety in the workplace for both managers and staff. In the first year of this plan, a comprehensive suite of training and awareness events will be provided to support both managers and staff in better understanding and supporting mental health in the workplace.

PADR and Pay Progression – work will continue to fully embed PADR and pay progression within NWSSP. Compliance rates have stabilised over the last year at around 83-85%. Focussed activity will continue to ensure that the Welsh Government target of 85% is achieved and maintained.

The staff survey results indicate that the PADR process has a significant positive impact with 80% of staff stating that they had clear work objectives. However, there is more that can be done and the content of the PADR and pay progression conversation will be further developed to ensure that all staff discuss prudent principles and their contribution to these during the review discussion.

Ongoing audits will continue with NWSSP to ensure that the agreed pay progression criteria are appropriately assessed during the PADR process.

Turnover –this current stands at circa 10% and reducing staff turnover continues to be a challenge. To better understand the reasons driving turnover and On-boarder and Exit survey process has been established which have provided useful feedback and insight. These mechanisms have provided critical intelligence to inform what action is needed to improve current turnover rates, which have been previously referred to above.

Statutory and Mandatory Training – significant effort has been put into ensuring that all staff are fully compliant with these training needs. Compliance is current in excess of 94% and a further detail training analysis has been undertaken to identify staff requiring a higher level of skill in the workplace consistent with their job role.

Developing our staff

The development of staff remains a key priority for NWSSP. Significant progress has already been made and the staff survey results show a significant improvement between 2013 and 2016 in all of the 25 training and development measures. However, for 57% of all training and development measures the NWSSP results show a less positive position than the all Wales average.

These results reinforce the continued focus and investment that NWSSP must continue to make ensuring appropriate development opportunities for staff.

In response, NWSSP has recently approved a new Learning and Development Strategy to underpin and provide focus for the future provision of staff development and growth.

We will continue to develop and offer a comprehensive range of in-house programmes that support the professional and personal development of our staff. To underpin the L&D strategy and in recognition that Leaders, Managers and Staff need support and development to enable them to function effectively within the context of delivering a world class service, our Leadership, Management and Staff Development framework supports this aim. The NHS Health Care Leadership Model as well as the Management Competency framework underpin it.

The programmes supported within the framework includes:

Leadership Development – the blended suite of leadership options will continue to be offered within NWSSP. As a minimum, this will include continued access to ILM3, ILM4 and 5 programmes. The internally delivered Healthcare Leadership Model programme will also continue to be run. These programmes will be supplemented by a short behavioural based leadership development intervention, commissioned from and delivered in partnership with a local university

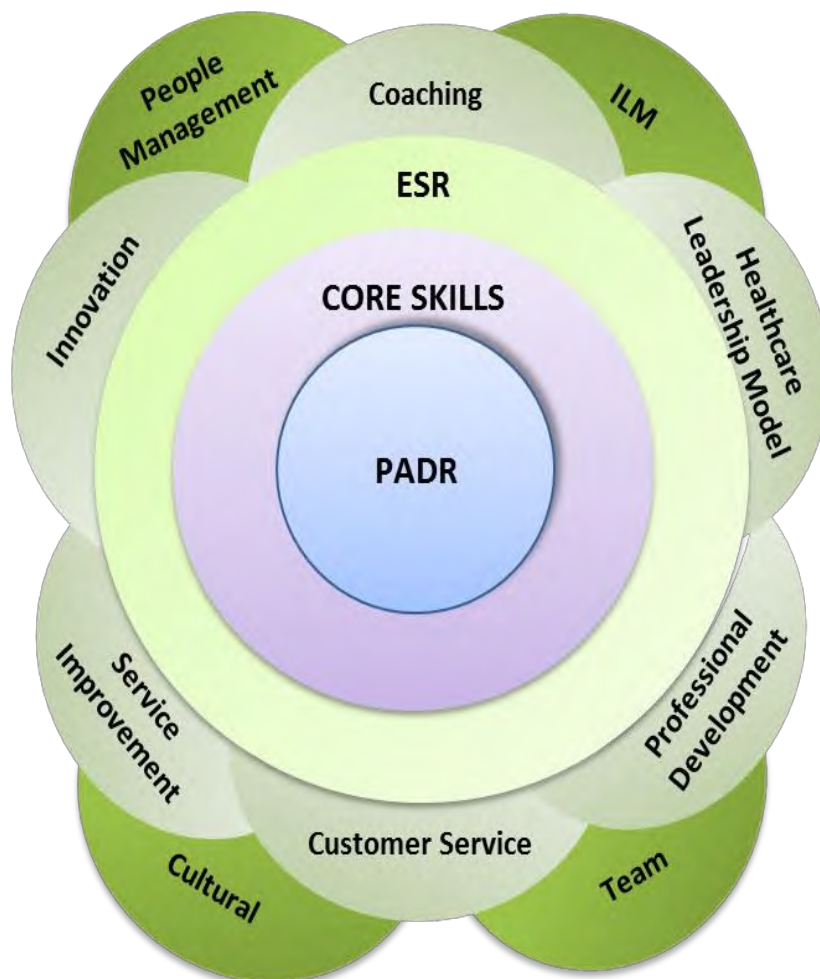
Management Development - People Skills - improving the people management skills of all managers and supervisors has been a key strategic priority for NWSSP. The staff survey results confirm that positive progress has been made with the results demonstrating an improvement in every area since the 2013 survey. However, the focus on people management skills will continue and further development interventions deployed to ensure that all managers are equipped with robust skills to best manage staff. A skills passport that illustrates the core competencies all managers are required to evidence and demonstrate have been developed and will now be implemented across all parts of NWSSP.

Innovation and service improvement – IQT Silver Qualification In partnership with Public Health Wales we continue to deliver the IQT Silver programme. IQT Silver explores the Model for Improvement in detail, looking at how you can apply these to improvement projects in the workplace. We are currently reviewing our ROI and exploring knowledge transfer in the workplace as part of our evaluation and impact work.

Customer Service we continue to source and offer Customer Service NVQs and to date over 150 staff from across NWSSP have undertaken this qualification. Training will continue to be provided to key front line staff on dealing with customer conflict to provide staff with conflict de-escalation skills.

Professional Development we continue to support service areas with their professional development and in 2018, we shall continue our work in partnership with Employment services and Specialist Estates to implement apprenticeship schemes. In addition to this, L&D will be working in collaboration with service areas to co-produce a professional competence map of the workforce that will feature in ESR.

Team working -we will continue to offer a range of team based working programmes which will assist managers and teams in identifying and implementing better ways of working together. A new feature for 2018 will be a values challenge for the teams to demonstrate and evidence how they live NWSSPs values.



Cultural Change - we will complete our cultural change programme within AP, which is being facilitated in partnership with Unison in 2018. Upon completion of the programme, through our evaluation and impact work, we shall be able to identify and articulate the transformation and modernisation of the service and the staff. Following completion and review of this pilot programme, it is envisaged that this model will be rolled out to other areas of NWSSP.

Coaching for managers - we will continue to invest in accredited coaching programmes and work with service areas to imbed a coaching culture within NWSSP.

Induction - We continue to review and refresh our Corporate Induction Programme to ensure it is truly fit for purpose and reinforces the vision and values of NWSSP as well as meeting the core induction needs for staff. In 2018 we need to work in partnership with services to refresh our local induction toolkit and we need to utilise ESR to evidence staff have been locally and corporately inducted in a timely and appropriate manner.

Succession planning and talent management

Over the duration of this plan, it is likely that a number of very senior staff will retire and effective succession planning is key to ensuring business continuity. Consideration has already been given as to how a number of the most senior posts can be effectively recruited to in the future. In addition, a number of senior post holders within individual services will retire during the duration of the plans and plans have again been formulated to explore how these posts can be filled in future years – from internal progression or from the external labour market.

The NHS Wales National Succession Strategy sets out the ambition to deliver a pipeline of talent of NHS staff at local and national levels, underpinned by a technical solution through ESR. In 2018 NWSSP will utilise the National strategy to better support consistent mechanisms for succession planning and inform senior level succession planning across NHS Wales.

To ensure that the training needs and training provision for all posts is fully aligned the ESR Talent management functionality will be rolled out across all services during the duration of the IMTP. This will ensure that the competencies required for each post are fully identified and the progress staff make to meet these competencies can be monitored on an ongoing basis, enable targeted and intelligent investment decision to be made.

Health and Well-Being Strategy

In support of the Healthy Working Wales Programme, we have developed a health and wellbeing strategy which aims to improve the wellbeing of workforce and to shape a culture and environment that supports a healthy level of physical and mental health. In order to continue striving towards a World Class service, we must ensure a resilient workforce, capable of withstanding organisational changes and demanding pressures. We want to make the following achievements;

- Maintenance of a safe and healthy working environment
- Reductions in longer term sickness absence by supporting staff to attend work in a healthy capacity
- A workforce making healthier choices and managing their own health and well-being
- A well-being support network and resources available to all staff members
- Promotion and maintenance of the mental, physical and social well-being of employees

Digital Workforce solutions

The utilisation of ESR is well embedded in NWSSP good progress continues to be made.

A number of developments have been achieved, including:

- Full portal deployment across NWSSP. Utilisation audits demonstrate that in excess of 87% are using the new functionality.
- Withdrawal of paper payslips
- Utilisation of ESR through mobile technologies
- Migration of all e learning into ESR
- Utilisation of employee relations technology

However, there will be an ongoing and continued focus on the ongoing development and further utilisation of a wide portfolio of e workforce solutions, including:

- Establishment of an ESR Project board/project plan to ensure full deployment of ESR functionality from hire to retire
- Deployment of all ESR Enhance functionality including the utilisation of Talent Management and Appraisal
- Full deployment and maximum utilisation of ESR Manager and Employee self-service and the resultant removal of paper systems where they continue to be used
- Further development use of ESR BI reporting technology
- Procurement of bank management software
- Streamlining expenses and study leave e systems for GPSTRs

Conversations have been instigated with NWIS to discuss the inclusion of digital workforce solutions in their work programme.

Further opportunities

A number of 'national workforce related services' are currently very successfully provided by the NWSSP wider workforce team. These include:

- E workforce solutions, including ESR Enhance, Hire to Retire Programme and Technology Enabled Learning
- Lead Employer for GPSTRs, GP returner and inductees, the GP Incentive Scheme and the national marketing campaign Single Point of Contact (SPOC)

There are potential opportunities to expand further national workforce related services, which, subject to agreement could include:

- National/Regional Bank management
- Lead Employer for a wider range of junior doctors
- GP locum management
- Job Evaluation collaboration
- All Wales ESR helpdesk
- All Wales HR helpdesk
- Job Evaluation collaboration

Our finances

The financial plan sets out our financial strategy, which enables the delivery of the service development strategy outlined in this plan. Together with NHS Wales, NWSSP is facing significant challenges to enable major service changes to be delivered within our financial resources to ensure high quality services are provided. We have a key role to play to enable NHS Wales to deliver their required changes and the financial plan aims to reflect this.

The financial context for NWSSP will continue to be very demanding and with the exception of any pay award/pension changes in 2019/20 and 2020/21 and specific new Welsh Government funded initiatives, no further funding for growth has been assumed. The financial plan is balanced over the three year period and will continue to provide a revenue distribution to NHS Wales of £0.750m per year and deliver significant professional influence benefits.

To ensure the achievement of our plan and enable the changes required in the delivery of our services, we will need to:

- Identify savings to cover increased demand for our services, absorb cost pressures and make service investments
- Adopt allocative efficiency principles and transfer funding between our services to help us meet NHS Wales's priorities and demands.
- Develop a reinvestment reserve to invest in service modernisation technology to provide more cost effective and higher quality services
- Work in partnership with our stakeholders to deliver change and modernise services
- Utilise benchmarking techniques to make further efficiencies
- Increase the number of professional healthcare training places at Universities to help NHS Wales meet future workload requirements

- Manage clinical negligence claims and implement a more sophisticated risk sharing agreement and mechanism to spread best practice and lessons learnt.
- Receive sufficient capital funding to enable revenue savings

Finance continues to support and enable change through the management and control of budgets within the four key areas:

- NWSSP Core Services
- Non Medical Education and Training (*until 1st October 2018 when this budget will transfer under the control of Health Education and Improvement Wales*)
- All Wales Risk Pool
- Capital

NWSSP revenue budgets

2017/18 has seen a number of developments and expansion of Services provided within NWSSP including:

- The management of the National Clinical Assessment Service SLA into our Primary Care Services division from 1st April 2017 which was previously managed by Welsh Government
- The establishment of the Wales Infected Blood Support Scheme (WIBSS) from 1st November 2017
- The re-tender and implementation process for the all Wales Oracle support provider

Finance has once again enabled significant change within NWSSP during 2017/18 through the planned reinvestment of funds within Service priority areas to provide greater capacity to support and enable the delivery of change across NHS Wales.

Looking ahead, 2018/19 will see the transfer of the Non-Medical Education and Training Budget to Health Education & Improvement Wales (HEIW) from 1st October 2018, in addition to the management of the All Wales Oracle consortium recharge mechanism, which will transfer from ABMU.

The table below summarises the revenue income available to NWSSP to enable the changes required to support Service delivery plans:

NWSSP Revenue Position	2018/19 £m	2019/20 £m	2020/21 £m
WG Allocation			
NWSSP Core Services	55.559	56.155	56.763
Non Medical Education and Training	49.500	0.000	0.000
Welsh Risk Pool Service core allocation	75.000	75.000	75.000
TOTAL ALLOCATION	180.059	131.155	131.763
Other Core invoiced income	94.826	107.137	107.728
Welsh Risk Pool - PIDR Funding (HM Treasury)	30.000	30.000	30.000
Welsh Risk Pool Service - risk sharing agreement income	0.000	15.000	38.000
TOTAL INCOME	304.885	283.292	307.491

NWSSP core services

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

Core Services	2018/19 £m	2019/20 £m	2020/21 £m
Income			
WG Allocation - Core	55.559	56.155	56.763

Other income	4.698	3.840	3.840
Health Courier Service	4.757	4.757	4.757
GP Trainees - Single Lead Employer	25.000	25.000	25.000
Stores issues	36.160	36.160	36.160
Relocation expenses	0.855	0.855	0.855
ESR 2	2.222	2.150	2.208
Depreciation	2.073	2.478	2.525
SMTL	0.516	0.516	0.516
WIBSS	2.000	2.000	2.000
NMET Bursaries (from 01.10.2018)	12.528	25.364	25.850
Legal & Risk Income Generation	2.023	2.023	2.023
Oracle Managed Service Consortium	1.994	1.994	1.994
Total Income	150.385	163.292	164.491
Expenditure			
NWSSP Expenditure	113.475	126.382	127.581
Stores Purchases	36.160	36.160	36.160
Total Expenditure	149.635	162.542	163.741
Expected cash distribution	0.750	0.750	0.750

The Welsh Government allocation has been taken from the 2018/19 Health Board Revenue Allocation (Table 3 – Shared Services Funding top-slice) issued in December 2017 which has been adjusted for the recurrent impact of the removal of NMET funds. The allocation includes a core uplift in respect of 2018/19 pay and prices funding.

The return of £1.000m brokerage funds has been assumed in 2018/19.

Recurrent funding has been assumed for an anticipated 1% pay award and a 20p increase in the living wage award in each year 2019/20 (£0.602m) and 2020/21 (£0.608m) although it is recognised that any pay award or associated funding has not been confirmed by Welsh Government. Recurrent funding has also been assumed to cover the increased costs resulting from the potential increase in the pension discount rate from 2019/20 (£0.559m).

The summary income and expenditure table indicates we will generate a surplus in each of the 3 years and enable a cash distribution to be made to Welsh Government and NHS Wales. The expected cash distribution will be repatriated to individual NHS bodies in line with the allocation contribution formula, unless organisations have already agreed a recurrent reinvestment of any savings within NWSSP. The table below indicates the distribution percentages and identifies where funds will be retained within NWSSP as agreed by LHBs/Trusts from 2018/19.

Health Board /Trust	%	Planned Distribution £	Agreed Reinvestment £	Total Cash Distribution £
Aneurin Bevan	9.85	73,844		73,844
ABMU	12.43	93,251		93,251
BCU	11.98	89,815	(89,815)	0
Cardiff and Vale	10.49	78,652		78,652
Cwm Taf	6.97	52,305		52,305
Hywel Dda	7.77	58,293	(58,293)	0
Powys	1.95	14,598	(14,598)	0

What will enable us to get there?

Enablers

Velindre	1.17	8,781		8,781
WAST	1.28	9,580	(9,580)	0
Public Health Wales	0.87	6,530	(6,530)	0
Welsh Government	35.25	264,351	(264,351)	0
Total	100	750,000	(443,167)	306,833

In setting budgets for 2018/19-2020/21 we will absorb a number of recurrent cost pressures in relation to cost growth, demand/service growth and local cost pressures as identified in our delivery plans and detailed in Table C5. These are summarised in the table below, together with a summary of how these will be funded:

	2018/19	2019/20	2020/21
	£m	£m	£m
Brought forward pressures funded non-recurrently	0.488		
Inflationary/Cost Growth	0.233	1.670	1.117
Demand/Service Growth Core	1.616	0.302	0.100
Local Cost Pressures	1.525	0.130	0.090
TOTAL PRESSURES	3.862	2.102	1.307
Funded by:			
Savings Plans – identified	0.471		
Savings Plans – to be identified	0.497	0.799	0.699
Brokerage	1.000		
Income Generation	1.040		
Internal re-investment	0.571		
WG funding/allocation	0.283	1.303	0.608
UNFUNDED PRESSURES	0.000	0.000	0.000

The WG funding included primarily relates to specific schemes being undertaken upon the request of Welsh Government including Primary Care Hire to Retire services, Strategic pay modelling and Nursing & Midwifery Single Point of Contact in addition to future years assumed pay award/pensions funding. The table also identifies £1m of non-recurrent investments that we are looking to make in 2018/19 that will be enabled through the use of brokerage funds from 2017/18.

Work continues to identify further savings schemes to meet the pressures included with the aim of reducing unidentified savings to zero by the start of the 2018/19 financial year. Savings schemes identified to date are in the main attributable to pay savings from the review of posts as we refine structures and some smaller non-pay savings resulting from a review of budgets.

All Wales Risk Pool (WRPS)

WRPS accounts for its share of the liabilities (i.e. amounts over £25,000). Long-term liabilities include provision in respect of ongoing matters and the estimate of future costs associated with settling claims using a periodical payment order (PPO). PPOs are used for large value claims which include large elements of care. Historically a significant lump sum would be paid and be invested by the claimant to enable care to be purchased. Since 2008 periodical payments have become common place for large value claims, with the payment of a smaller lump sum and annual

payments to cover care costs. The care package annual sums agreed at settlement have increased significantly and annual amounts in excess of £100,000 are not uncommon.

Welsh Risk Pool expenditure

The settlement of a claim by a Health Board or Trust or the payment of a PPO by WRPS uses in-year resource from the Departmental Expenditure Limit budget for NHS Wales. This budget also funds NHS Wales and therefore any WRPS expenditure re-directs funds from patient care.

WRPS receives a base annual allocation of £75m with the service bearing the risk of any deviations from the estimate. A new robust risk sharing agreement aligning clinical risk management with the financial regime has been agreed and implemented.

In February 2017, the Lord Chancellor announced a change in the Personal Injury Discount rate (PIDR) from 2.5% to – 0.75% with effect from March 2017. The PIDR change has had a significant effect and the projected 2017/18 forecast outturn increased to £105 million.

Welsh Government have received assurance from HM Treasury that the £30m impact of the PIDR change for 2017/18 will be funded and this will be formally ratified by the Welsh Government. Accordingly the WRP core budget, plus PIDR impact cover amounting to £105m is forecast to be sufficient to cover the assessed maximum liability of £105m in 2017/18. On this basis, WRPS will not invoke the risk sharing mechanism in 2017/18.

Estimated resource requirement for 2018 to 2021

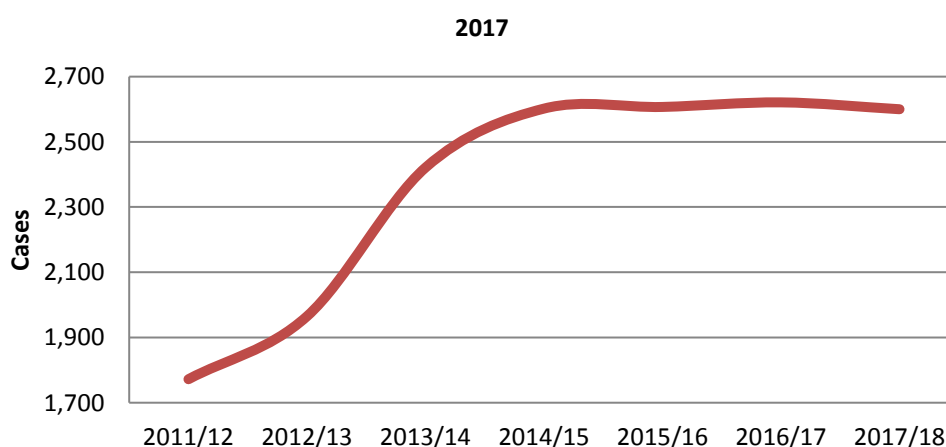
As part of the three-year planning framework, resource modelling over the forthcoming three financial years has been undertaken. However, the complexity and uncertainty of the underlying liabilities has long been recognised and this is increased as the timeframe extends.

The graph below shows the number of cases has remained consistently high year on year since 2014/15. The value of the liability has increased, mainly due to the PIDR impact on the future losses element of lump sums within the damages quantum.

However, the work required on the open cases has increased as those new matters from several years ago become highly active in litigation both following issue of Court proceedings or involving complex investigations or negotiation. As such the average value of damages and costs are rising.

The graph below shows the movement in the number of cases since 2011/12.

Total Clinical Negligence Open Cases 2011-2017 @ December



A high-level analysis of claims by probability and gross value shows the scale of the financial challenge faced by NHS Wales.

Assessment of Probability	Number of claims	Estimated Value £'m
Unspecified	65	£0.16m
Remote	55	£35.30m
Possible	1,649	£933.77m
Probable	138	£127.14m
Certain / Finalised	693	£537.45m
Total	2,600	£1,633.81m

The forecast for 2018/19 to 2019/21 is identified in the table below.

FINANCIAL YEAR	2018/19	2019/20	2020/21
FORECAST SPEND	£105m	£120m	£143m

The Welsh Government expects (in line with the Lord Chancellors announcements at the time of the PIDR change) any PIDR impact on the 2018/19 position to be met by Treasury. This will involve another budget exercise between WG and HM Treasury in 2018/19.

Further change to the PIDR is anticipated - potentially prior to the end of 2018/19 - due to legislation being proposed by Ministry of Justice. This could materially affect the level of expenditure on cases settled for a proportion of the year. Therefore, it is too early for Treasury to agree to a budgetary adjustment.

Any change relating to PIDR is expected to be covered (although the amount cannot be quantified at this stage) but consistent with prior years budgetary management neither Treasury nor WG will cover any movement above the £75m that does not relate to PIDR change (i.e. relating to general growth in claims costs).

Further analysis will be undertaken and further negotiations will take place between the WG and Treasury however, current modelling and evaluation identifies that the difference between the £105m and the £75m core allocation relates entirely to the PIDR impact.

Until the further work is completed it is prudent to acknowledge that the total 2018/19 spend could be in the range of £100m - £110m with the impact on the core allocation being between £70m and £80m. Currently it is not anticipated that the risk sharing agreement will be invoked in 2018/19 but this could change in-year as analysis work, forecasting and negotiations with HM Treasury develop.

However, on the basis of the current projections the risk sharing agreement will be invoked in 2019/20 and 2020/21.

Asset and Capital expenditure plan

Context

When we were established as a hosted organisation in June 2012 a review of fixed assets was conducted. Our review of our initial assets identified that:

- The IT assets inherited were in many cases old and beyond their economic life. (A survey undertaken by NWIS identified the need to replace two thirds of the PCs and laptops).
- Stores buildings need considerable work to bring them to a modern operational standard.
- No capital funding and limited depreciation budget had been transferred.

A capital plan was developed with the following aims:

- To upgrade IT capability including significant PC and Laptop replacement as well as upgrade of a number of aging servers.

- To modernise key processes across the services provided by NWSSP by using specific software applications.
- To support the implementation of the accommodation strategy with the intent to consolidate services in 3 regional centres.

In recent years we have, with Welsh Government support, made a significant investment to achieve those aims. The benefits of this have included a significant reduction in the number of sites and enabled us to bring together a number of disparate teams to concentrate its operations from three main regional centres. Whilst this has already produced some efficiency, the reduced number of sites now provides a firm foundation for us to modernise and enhance a number of key services with relatively modest capital investment.

In addition, we have taken on a number of additional services including the transfer of Health Courier Services and more recently SMTL. Both services require significant investment to modernise the service.

Current capital position

In 2017/8 discretionary funding is £381k, additional funding has also been secured through applications for additional funding for specific schemes. This relates to completion of the new regional centre in Swansea £370k and replacement of the Pandemic Store £2,081k The utilisation of this funding is shown in the following table:

Area of Spend	Discretionary Funding £000	Additional Funding £000
IT Hardware	219	
IT Software	109	
Vehicle Replacement	-	
Equipment Replacement	30	
Accommodation	23	2,451
Total Spend	381	2,451

Future Expenditure Programme

We have identified that further spend will be required to develop the organisation further to deliver quality and efficiency benefits. In assessing our future capital need we have identified 5 main areas of capital spend. The position and need in each area is outline below.

- **Accommodation** –In recent years we have implemented an accommodation strategy which has resulted in a significant site consolidation. Funding is need in future years for modifications to current sites as part of service development plans. An on-going annual cost of £100k is forecast for this area of spend.
- **Service support equipment** – This relates mainly to the supply chain and processing areas. Due to the age of larger items of equipment it is anticipated that annual spend of £140k will also be required on an annual basis. This includes replacement stores scanners and handling equipment. This equipment is need to maintain service continuity.
- **IT infrastructure** - This is a major area of spend for us both in replacing aging equipment and enabling efficiency improvement. Assessment identifies a need for circa £300k per year. This is split between £200k on end user equipment and £100k on Network related assets This spend is key to support the changes outlined in the service improvement programmes contained within this plan.
- **IT Software Solutions** – We have looked to procure software to enable efficiency improvement. Spend in this area includes digital dictation software, and application development to support service improvement. The current forecast identifies that there is an annual on-going need for investment of circa £60k per year in new software

developments to support service change and development. This spend is key to support the changes outlined in the service improvement programmes contained within this plan.

- **Vehicle replacement** - In addition to the discretionary funding requirement we will require funding for the Health Courier Service Vehicles which transferred from Welsh Ambulance Service Trust in April 2015. The cost of the vehicle replacement programme is significant and is shown in the table overleaf.

The investment outlined above will not only ensure business continuity for the services that we provide to NHS Wales it will also enable delivery of a number of key saving schemes outlined within this plan. The benefits of these schemes will in part be reinvested in the services and the balance will be returned to health bodies and the Welsh Government.

A number of service development projects which will require additional capital funding have been identified. These are major investments which are not covered by the discretionary capital allocation. These investments are important in delivering the service transformation outlined in this plan. The main schemes are outlined in the following table:

Scheme Title	2018/19 Spend £000	2019/20 Spend £000	2020/21 Spend £000
Employment Services Electronic Platforms	205	86	
PMR Roller Racking and Fire Suppression	1,112		
Document Management and OCR	126	115	
Legal Case Management System		240	105
Swansea site replacement HCS	50		
Contractor Payments System (NHAIS Replacement) Hardware	350		
SMTL Improvement Programme	52	38	41
Total Development Projects	1,895	479	146

Funding Summary

A number of discussions are being held with Welsh Government in respects of the discretionary capital requirement. The future funding required during the plan period is as follows:

Scheme Type	2018/19 Spend £000	2019/20 Spend £000	2020/21 Spend £000
Discretionary – IT Software	60	60	60
Discretionary – IT Hardware	300	300	300
Discretionary - Accommodation	100	100	100
Discretionary – Support Equipment	140	140	140
Discretionary Funding Total	600	600	600
HCS Vehicle Funding	1,063	214	214
Service Development Projects	1,895	479	146
Total Forecast Capital Needs	3,558	1,293	960

Capital investment is a key enabler for the delivery of improved efficiency and service improvement. All capital schemes will deliver revenue benefits in terms of cash releasing savings, cost avoidance, improved quality or health and safety developments. **Review of annual spend requirements indicates that our on-going discretionary capital need is circa £600k per annum.** The current base level allocation of £381k has been in place for some time and does not take into account the development and expansion of our services. An increase in discretionary

capital funding is essential to deliver the full benefits that arise from the changes proposed in this IMTP. Without this funding capital schemes would need to be scaled down and prioritised based on the level of benefits that they could be deliver.

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

It should be noted that we have limited funding for depreciation and that revenue funding would need to be provided for this spend. It is anticipated that the revenue effective of the above programme would be for a full year:

	Full Year Programme Impact £ 000	Cumulative Impact £ 000
Year 1	560	560
Year 2	236	796
Year 3	170	966

Our Capital Programme is based on an overall Capital Plan which is reviewed on an annual basis with input from all services; sign off at senior management level and final approval by the Shared Services Partnership Committee. This ensures that capital plans remain relevant and maximise benefits to the organisation.

Our ICT journey so far

The business systems and informatics department was established in 2014. When established we had ICT services provided by 10 organisations and did not have a centralised ICT team. ICT support was provided by staff based within services and providers in other NHS Wales organisations. A review concluded that we needed to put in place a coordinated team to centralise Information and Communications Technology (ICT) support and implement a more strategic focused approach.

Since establishment the BS&I team has:

- Set up a core team and processes
- ICT Strategy developed following detailed consultation
- Implemented an Initial Desktop and Laptop replacement programme now 95% complete
- Developed a working partnership with NWIS and reduced the number of organisations supporting our staff
- Established an ICT Project Management Capability
- Produced a Strategic Outline Programme Case for ICT which is currently being finalised following detailed review and comments from a range of stakeholders.

Development of ICT during the next 3 years

We have recently refreshed its ICT strategy to support a move to data-driven systems and processes. During this review process, four themes have been identified as outlined below.

- **Partnership** – We work in partnership with NWIS as a key strategic partner with continued collaboration with Health Boards and Trusts. IT support consolidation has resulted in the reduction of providers from nine to six.

Migration of our users to NWIS desktop support will continue during 2017/18 with the intention to reduce the number of IT support providers by a further three. We are also working on ways to develop and improve our partnership which will improve services for end users and aid faster implementation of improvement projects.

- **Business Continuity** - National Programme funding was provided in 2016/17 to enable the implementation of a modern and resilient infrastructure including telephony. Systems will be migrated onto this infrastructure in the next 12 months. The new infrastructure is robust and scalable to enable necessary expansion as existing infrastructure become obsolete.

This change will result in improved resilience and disaster recovery as new servers will be mirrored and backed up to a secondary remote location. Our new infrastructure will help consolidate and rationalise the server estate. Initially the review revealed we had systems and services on over 120 servers which made change management and resilience planning very difficult. The server estate is now less than 90 with further reduction planned over the next 12 months as systems are migrated to the new infrastructure.

- **Security** - With growing cyber security threats, corporate information and systems are increasingly under risk of attack and theft. To attain an effective position, we need to put in place better detection, prevention and monitoring solutions e.g. security incident and event management system (SIEM). This work is being progressed as part of the ICT work plan over the next 12-24 months. A cyber plan has been developed and will be reviewed regularly to reflect best practice and continuous improvement.

We completed a cyber-threat assessment and following this work undertook the development of an action plan to improve its readiness to respond to Cyber threats and to improve resilience. Lessons from recent global cyber incidents has further emphasised the importance of having robust security measures in place.

We are working in partnership with NWIS to provide the monitoring and management system needed to actualise elements of the plan. NWIS intends to make the SIEM system available on all-Wales basis after the pilot with us.

- **Service Development** - To meet IMTP objectives around service quality and efficiency IT service development is critical. The BS&I department and NWIS will continue to implement ICT solutions to support service improvements. This will include the implementation of Robotic Process Analysis (RPA) and a modern telecommunications system to enable more flexible and resilient working arrangements.

Governance and Risk Management

Oversight of the NWSSP ICT strategy is undertaken by the ICT Steering Group which has representatives from all NWSSP functions and acts as a key communications link and provides appropriate scrutiny. The Steering Group is responsible to the NWSSP SMT for ensuring that the ICT Strategy continues to develop and meet the needs of the organisation.

The group also monitors and reviews the ICT risk register and escalates and delegates as appropriate to ensure that risks are managed / mitigated.

Research, development and innovation

Innovation is encouraged throughout the organisation and is one of our four values. We encourage divisions to consider how they innovate their services to drive efficiencies. A primary example of this is the future use of robotics with an initial programme of work within three services; Accounts Payable, Supply Chain and Payroll. RPA principles is about using suitable tools that can replicate and automate repeatable human tasks performed on systems to assist staff freeing them to undertake more value added duties. During 2017 we have piloted the use of RPA on a few processes for test purposes and following completion of successful trials is currently establishing an RPA team to drive forward the use of this technology. This will not only improve process efficiency but evidence from other organisations shows it improves process quality as well leading to improved customer satisfaction.

Innovation through the use of technology and automation is a central strategic theme to many of our divisions. Over the next three years further advancements will be made in these areas with Primary Care Services continuing to roll out Electronic Transfer of Claims and Patient Medical Records store and scan on demand programme. Employment services will build on the success of the electronic New Appointment Form. This form is integrated into the Recruitment process and

provides an improved user experience for hiring managers, new members of staff and to the Payroll Teams who enrol on average 900 new appointees a month across NHS Wales.

Innovation through technology will continue to play a vital role in the delivery of services over the next three years. Procurement are continually improving the procure to pay process through the use of technology an example of this for the future is the implementation of voice pick technology at regional stores. Paperless online communication is a consistent theme through our delivery plans. Divisions such as Student Awards Services decommissioning their paper based bursary system with all sources being directed to the online system. Legal and Risk services operate solely within an electronic virtual cabinet significantly reducing their use of paper across the division and will expand this with case management software. e-Workforce Solutions are committed by 2020 100% of workforce processes and transactions will be achieved through direct interaction with electronic solutions including ESR, interfaces and mobile enabled technology.

Research and development will play a key part in the successful implementation of the driving excellence projects we are taking forward with the Finance Academy– Purchase to Pay, Hire to Retire and Record to Report.

We are also developing our relationships with local universities who can support us with our research. CEB Shared Services Leadership Council provides key data, diagnostics, tools, answers, and training to heads of shared services and their teams in an effort to help companies globalize and/or expand operations, maximize cost savings and efficiencies, and improve performance.

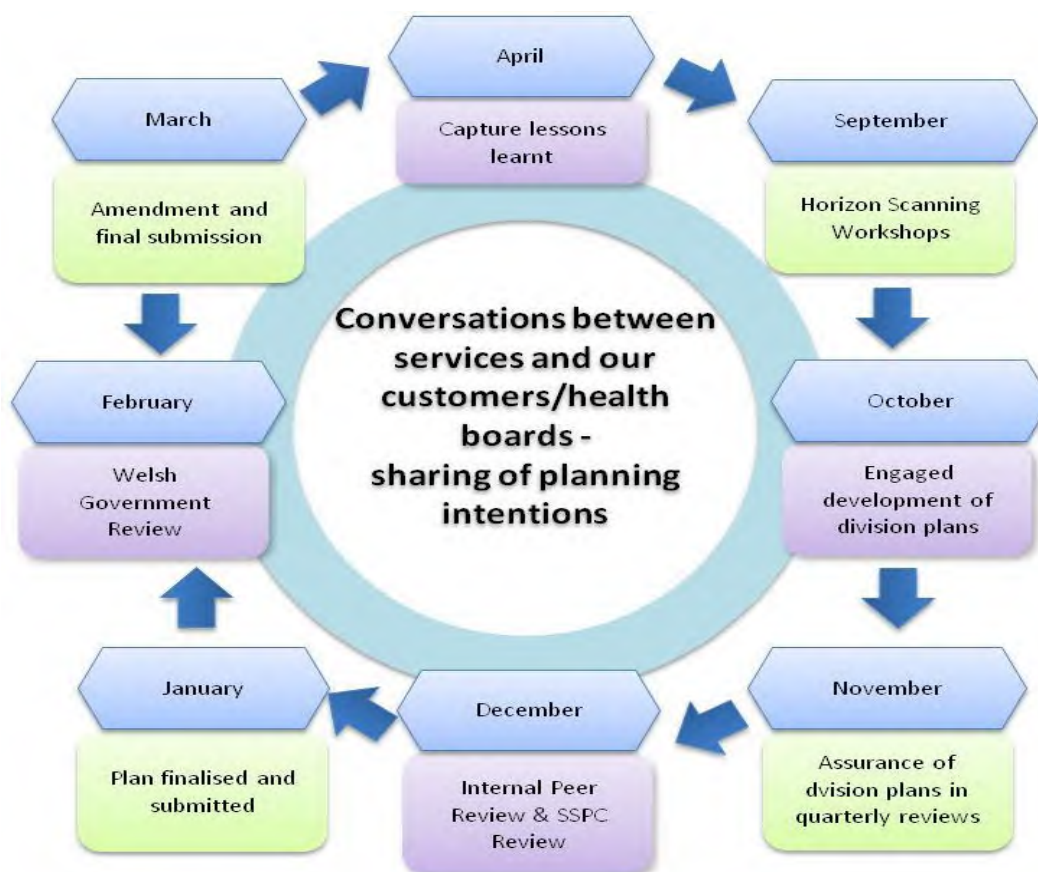
Governance

Our planning model

The next challenge in our planning progression is to continue to ensure that planning is a continuous and embedded process and is much more than the development of a paper document that is produced once a year. NWSSP endeavour to develop an integrated planning system which is; dynamic and engaging, grounded in quality information and successfully balancing ambition with realism. To achieve this aim we have strengthened our planning model this year through the following arrangements:

- IMTP Lessons Learnt workshops held across the organisation
- NWSSP strategy map developed through the SMT horizon scanning and planning day
- Planning guidance issued to SMT and divisional planning leads outlining; national drivers, Welsh Government requirements and NWSSP key planning assumptions
- Each division allocated a finance and workforce IMTP link to support planning process
- All divisions are required to present their draft delivery plan to the Managing Director, Director of Finance and Corporate Services and the Director of Workforce and Organisational Development in their individual quarterly review meetings
- NWSSP held an internal peer review to review quality and assurance prior to the document being submitted to Welsh Government

Our plan is formally reviewed and updated annually, and the Shared Services Partnership Committee (SSPC) review and approve the plan prior to submission to Welsh Government.



Co-production and delivery

The development of our plan is supported by a structured formal and informal partner engagement process led by our SMT, predicated on frequent, open and honest dialogue which ensures effective working relationships are maintained and developed.

Progress against our overall plan is monitored and reviewed on an ongoing basis by our SMT and the Shared Services Partnership Committee.

We also use a number of other mechanisms to determine whether we are delivering our plan's objectives. Our detailed performance reports demonstrate whether we are achieving targets against KPIs, and these are also systematically reported to health organisations and to the Shared Services Partnership Committee. We also use our formal and informal engagement processes at a number of levels to gain feedback on our plan delivery and discuss actions we can take to ensure our objectives are achieved.

Progress against individual service delivery plans is monitored within each service area and are reported and reviewed through a formal performance review by the Managing Director, Director of Finance and Corporate Services and Director of Workforce and Organisational Development with each Service Management Team on a quarterly basis.

In tandem with the business intelligence and learning obtained from our internal planning model we have also developed a quarterly review process with Health Boards and Trusts. These are the mechanism for regular and effective consultation and engagement to ensure our individual service areas are meeting their wants and needs. Each quarter now has a specific focus and progress against the delivery plans is scrutinised at the most senior level.

Risk management

During 2017/18 the risk management framework and approach was subject to a detailed review by a risk management specialist which built on the recommendations of an internal audit report that was issued in March 2017. This report contained a number of findings that highlighted the

need to make risk management both more effective and dynamic within NWSSP and two workshops were held in the spring of 2017 to share the findings with directors and senior management.

Changes have since been made to the format of both the corporate and division risk registers to ensure that they are both consistent and that they provide a more concise picture of the current position with each risk. The Finance and Corporate Services Division work with Directors and their Senior Management Teams to ensure that the risks recorded within each register remains up-to-date and that there is focus on achievement of planned actions to mitigate the risk. This is reinforced through the quarterly review process of each division where review of the division risk register is a standing agenda item.

In 2017/18 assurance maps were produced for each of the divisions to provide a view on how their key operational or business-as-usual risks were being mitigated. These were presented to the Audit Committee in November 2017 and it is intended that they will be updated and reviewed by the Audit Committee annually. This exercise also identified that further forms of assurance were needed in two specific areas (Business Systems & Information and Health Courier Services) and more work will be undertaken in 2018/19 to action this.

While much of the approach that was already in place (e.g. escalating red-rated division risks to the Corporate Risk Register) will remain unchanged, there is a need to update the Risk Management Protocol for NWSSP to ensure that it reflects the revised arrangements.

Leadership and accountability

As Accountable Officer, the Managing Director has responsibility for maintaining a sound system of internal control that supports the achievement of NWSSP and our hosts - Velindre NHS Trust's - policies, aims and objectives. The Managing Director safeguards the public funds and departmental assets for which he is personally responsible for, in accordance with the responsibilities assigned to him. The Managing Director is also responsible for ensuring that NWSSP is administered prudently and economically and that resources are applied efficiently and effectively. For further information, please view our Annual Governance Statement 2016-2017 on this link.

<http://www.nwssp.wales.nhs.uk/sitesplus/documents/1178/Annual%20Governance%20Statement%202016-17.pdf>

Effective governance is paramount to the successful and safe operation of NWSSP's services. This is achieved through a combination of "hard governance" systems and processes including standing orders, policies, protocols and processes; and "soft governance" involving effective leadership and ethical behaviour (Nolan principles).

The Managing Director of Shared Services is accountable to the Shared Services Partnership Committee in relation to those functions delegated to it. The Managing Director is also accountable to the Chief Executive of Velindre in respect of the hosting arrangements supporting the operation of Shared Services and to the Velindre NHS Trust Audit Committee for NWSSP.

The SMT are responsible for determining NWSSP policy, setting the strategic direction and aims of NWSSP to ensure that there are effective systems of internal control and that high standards of governance and behaviour are maintained. In addition, the SMT are responsible for making sure that NWSSP is responsive to the needs of the Health Boards and Trusts.

Health and Safety

We have a duty of care towards approximately 2,000 employees located in its various locations across Wales and a legal duty to put in place suitable arrangements to manage for health and safety. We promote a positive Health and Safety culture through regular training, communication and awareness raising. We are committed to continual improvement, to prevent injury and ill health and to comply with all applicable legislation.

We encourage a common sense and practical approach to managing for health and safety. We view health and safety as part of the everyday process and it is an integral part of workplace behaviours and attitudes. An analysis of the past 18 months was undertaken into accidents and incidents. This has shaped our seven health and safety objectives and the associated action plan we will implement over the next three years.

1. Aim to reduce work related slips, trips and falls in the workplace, aspiring to a 10% reduction over 2 years.
2. Aim to reduce work related contact-with-an-object incidents in the workplace, aspiring to a 10% reduction over 2 years.
3. Aim to reduce work related manual handling incidents in the workplace, aspiring to a 10% reduction over 2 years.
4. Develop and enhance the health & safety and risk management knowledge and skills of managers and supervisors throughout NWSSP.
5. Continually improve the health and safety culture within NWSSP.
6. Regularly monitor and evaluate the health and safety performance throughout NWSSP.
7. Promote a zero tolerance culture in relation to violence and aggression incidents across NWSSP, aspiring to improve incident reporting and investigations and reduce the number of incidents by 30% over two years.

Equality, diversity & inclusion

We are committed to eliminating discrimination, valuing diversity and promoting inclusion and equality of opportunity in everything we do. Our priority is to develop a culture that values each person for the contribution that they can make to our services for NHS Wales.

As a non-statutory hosted organisation under Velindre NHS Trust, we are required to adhere to Velindre NHS Trust's Equality and Diversity Policy, Strategic Equality Plan 2016-2020 and Equality Objectives, which set out the Trust's commitment and legislative requirements to promoting inclusion.

We work together with colleagues across NHS Wales to get involved with events, facilitate workshops, training sessions, issue communications and articles as to equality, diversity and inclusion, together with the promotion of dignity and respect. We are in the process of setting up a South Wales LGBT+ Staff Network and have successfully worked together with Betsi Cadwaladr and WAST to facilitate a North Wales LGBT+ Staff Network, Celtic Pride.

We also benefit from the proactive work, undertaken by our host organisation, to strengthen compliance with equality and diversity legislation; the Trust has received the Positive About Disabled People "Double Tick" symbol which demonstrates we encourage application for people who identify as having a disability. In addition, the Trust has attained "The Rainbow Mark" which is an equality mark sponsored by the Welsh Assembly Government and supported by the Welsh Local Government Association and Tai Pawb. The Mark is a signifier of good practice, commitment and knowledge of the specific needs, issues and barriers facing those who identify as lesbian, gay, bisexual, and transgender (LGBT+) in Wales.

We have worked with the NHS Wales Centre for Equality & Human Rights (CEHR) to introduce our own process for undertaking Equality Integrated Impact Assessments (EQIIA), which we are working to fully integrated into our Project Management System software. The EQIIA will consider the needs of the protected characteristics identified under the Equality Act 2010 (including the Welsh specific duties), Human Rights Act 1998, Wellbeing 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 aspects.

We have provided key Managers with training on the EQIIA process and we have introduced an "Equality Integrated Impact Assessment Panel" to review completed assessments to ensure that our policies, projects and events do not discriminate against any vulnerable or disadvantaged people. We also ensure compliance with the engagement provisions of the "Gunning Principles"

and the duty to have “due regard” laid out in the “Brown Principles” when reviewing existing policies, or assessing new policies for impact on protected characteristics.

Our Assistant Director of Workforce and Organisational Development is also member of the Equality Group within Velindre NHS Trust and any NWSSP specific issues are integrated into this process. Our Head of Corporate Services is a member of the NHS Wales Centre for Equality and Human Rights (CEHR) Business Planning Group and the NHS Wales Equality Leadership Group, together with our Compliance Officer, who also sits on the All Wales Senior Offices Group for Equality. We adhere to the CEHR “Governance and Scrutiny: A Guide for Boards” in respect of EQIIAs.

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 Ethnic Origin; Nationality; Country of Birth; Religious Belief, Sexual Orientation and Welsh language competencies.

NWSSP has a statutory and mandatory induction-training programme for all new recruits that includes the NHS Wales “Treat Me Fairly” e-learning module that focuses on equality and diversity. The module is a national training package and the statistical information pertinent to NWSSP completion contributes to the overall figure for NHS Wales. NWSSP provides a “Core Skills for Managers” Training Programme and the “Managing Conflict” module includes an awareness session on the Dignity at Work Policy and Procedure.

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 that there are no discriminatory elements.

Information governance

We take Information Governance (IG) very seriously and have established arrangements in place to ensure that information is handled in a confidential and secure manner and that the right information is available to the right people, when and where it’s needed.

Currently, work is being completed to ensure that changes to the Data Protection law, initially introduced in 1984, are considered. The new regulation, from May 2018, will be known as the General Data Protection Regulation (GDPR). This is currently being achieved by:

- A local work plan in place to address the changes to the law and the introduction of the General Data Protection Regulation (GDPR) by May 2018;
- An established list of Information Asset Owners and Administrators (IAO/IAA) and a detailed Information Asset Register (IAR);
- The Information Governance Manager chairs a meeting to develop All Wales “Your Information, Your Rights” information that will replace the existing one with updates to reflect arrangements to be considered under GDPR;
- Representation at a National working group and local Velindre Task & Finish group in relation to GDPR; and
- A full Privacy by Design (or Privacy Impact Assessment) process.

Furthermore, we will continue to maintain our standards through;

- Holding quarterly “Information Governance Steering Group” meetings comprising of “Information Asset Owners” from each division. The group focuses on IG issues including GDPR, Data Protection, Freedom of Information, IG breaches, data quality, information security and records management;
- Completing the annual Caldicott Principles into Practice (C-PIP) self-assessment. Compliance for the 2017/18 assessment is measured at 96%;

- Participating in a training audit undertaken by the Information Commissioners Office (ICO) in September 2017 and participating in internal audits that relate to Information Governance;
- Ensuring that, under openness and transparency, that Freedom of Information requests are handled in an effective and timely manner;
- Delivering face-to-face Information Governance training to staff and ensuring staff complete the information governance module contained within the online core skills training framework. Currently over 1,000 staff have been trained in a classroom based environment and over 90% are fully compliant in the eLearning module.

Welsh Language

We are committed to treating the English and Welsh language equally alongside the English language in everything that we do. As a non-statutory, hosted organisation we are required to adhere to the Velindre NHS Trust Welsh Language scheme and the provisions of the Welsh Language (Wales) Measure 2011.

We provide a wide range of support services for all members of staff at the NWSSP that include:

- Welsh Language Awareness Raising
- Welsh Language Training at Work
- Advice, guidance and support with regards to providing a fully bilingual service
- Ensuring that the Welsh Language is treated fairly and equally at all times
- Managing Compliance with the Welsh Language Act of 1993, the Welsh Language Measure of 2011
- Ensuring we meets its current requirements to offer a high quality service in both Welsh and English equally
- Achieving the KPI's within our existing Welsh Language Scheme
- Positioning ourselves to meet the requirements of the Welsh Language Standards [Health Sector] Regulations 2016
- Translation services for the NWSSP

All these functions support and influence each division in realising their Welsh language agendas and providing their services bilingually to our partners, stakeholders, staff and patients.

Our Welsh Language Strategy will be launched in the Autumn of 2018, following being served with the Formal Compliance Notice for The Welsh Language Standards [No7.] Regulations 2018. Our Welsh Language strategy will focus closely on:

- Service Delivery Standards;
- Policy Making Standards;
- Operational Standards;
- Record Keeping Standards
- Supplementary Standards

The aim of our Welsh Language Strategy is for us to is to improve our Welsh Language offer in how we conduct our every-day business as a support organisation we increase welsh language compliance for all our partners. Our 5 Key Strategic Areas as outlined below will enhance the Welsh Language Offer for the Health Boards and Trusts, especially in Strategic Areas 3 – 5.

Having a Welsh Language Strategy will in turn offer a better and improved service in Welsh for people who wish to receive our services in Welsh.

Strategic Area 1: Welsh Language Services and the workplace.

Vision: High quality services are available in Welsh and English equally and without delay.

Outcome: Increase in the use of Welsh language services across all NWSSP service delivery areas.

Strategic Area 2: The Welsh Language Prominent in our Corporate Identity

Vision: All websites, publications, communications, and corporate branding resources available in Welsh

Outcome: All forms of communications, marketing and corporate resources available to service users, stakeholders, patients and the public and the NWSSP proactively welcoming the use of Welsh in day to day business operations and delivery.

Strategic Area 3: Welsh Language Workforce Planning

Vision: A bilingual workforce that is confident in meeting the requirements of the service user, stakeholders, patients and the public in both Welsh and English equally without delay.

Outcome: Increase in the number of staff that can speak and understand Welsh within the organisation and to utilise Welsh reading and writing skills in day to day operations and service delivery.

Strategic Area 4: Welsh Language Considerations in the Procurement and Delivery of Contracted Services

Vision: To provide a sourcing, supply chain, purchasing and accounts payable service to Health Boards and NHS Trusts across Wales through the medium of both Welsh and English equally and without delay.

Outcome: Specific service delivery contracts with a Welsh language requirement are done so effectively and within the realms of the Welsh Government Procurement Strategy.

Strategic Area 5: Primary Care Services

Vision: Engagement and collaboration with stakeholders and patients in order to support the primary care sustainability agenda in Welsh and English equally and without delay.

Outcome: Provide a wide range of services to and on behalf of Health Boards and NHS Trusts covering primary care contractors, and patient registration services in Welsh when required and/or requested

What will enable us to get there?

OVERARCHING GOALS

We will continue to support the professional and personal development of our staff

We will continue to establish effective succession planning to ensure business continuity

We will enable major service changes delivery within our financial resources to ensure high quality services are provided

We will evolve the ICT strategy to support a move to data driven systems and processes

We will ensure that planning is a continuous and embedded process

We will continue to promote equality of opportunity in everything we do

KEY PRIORITIES FOR THE NEXT THREE YEARS

Value for Money

- Identify savings to cover increased demand for our services, absorb cost pressures and make service investments
- Invest in service modernisation technology to provide more cost effective and higher quality services
- Work in partnership with our stakeholders to deliver change and modernise services

Our Customers

- Support NHS Wales to strengthen Welsh language compliance
- Ensure that NWSSP is responsive to the needs of the Health Boards and Trusts through peer group engagement
- Continue to develop our quarterly review process with Health Boards and Trusts to ensure our individual service areas are meeting their priorities

Adding Value Through Partnership



Service Development

- Development of the SPOC service to support train, work, live
- Achieve 100% of workforce processes and transactions through electronic solutions including ESR, interfaces and mobile enabled technology

Our Staff

- Develop new roles aligned to service need
- Continue the alignment of future staff levels/skill to service plans
- Aim to reduce work related slips, trips and falls in the workplace
- Migration of our users to NWIS desktop support will continue

Excellence

- Address the introduction of the General Data Protection Regulation (GDPR) by May 2018
- Modernise key processes across the services by using specific software applications

SECTION 2 *How we will deliver our plan?*

This section includes all the individual divisions delivery plans to provide the considerably more detail on each divisions integrated medium term plan for 2018-2021.

Audit and Assurance Services	80
Central e-Business Team Services	93
Digital Workforce Solutions	105
Employment Services	119
GP Speciality Training Registrar Lead Employer	138
Health Courier Services	150
Legal and Risk/ Welsh Risk Pool Services	164
Primary Care Services	179
Procurement Services	191
Surgical Medical Testing Laboratory	209
Specialist Estate Service	221

APPENDICES

Appendix 1 – Our Services and journey to world class

Appendix 2 – Our Engagement and Review Process

Appendix 3 - Our Structure

Appendix 4 – Shared Services Partnership Committee Membership

Appendix 5 – Workforce Statistics

Audit and Assurance Services

To provide world class internal audit and consulting services to NHS Wales

WHO ARE WE AND WHAT DO WE DO?



Deliver professional internal audit, assurance and consulting services to NHS Wales.

We add value by helping organisations accomplish their objectives through a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, systems of internal control and governance processes.



60 staff
Regional and specialist teams

Tailored
assurance audit
and response at
each Health
body

400 reviews
across our **8**
assurance
domains
supporting
improvements

Increased
automation of
audit processes

Focus on **added value**
consulting work
to support
organisational
change

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Strategy focus through the Shared Services Partnership Committee • Board Secretaries network • Chairs of Audit Committees network • Individual meetings with Finance Directors • Welsh Government • Audit feedback forms • Annual SLA update • Tailored approach at each HB and Trust to meet specific audit needs • Director of Audit & Assurance is a member of the Public Sector Internal Audit Standards Board 	<ul style="list-style-type: none"> • Internal Audit delivering high quality independent assurance and consulting support • Benchmarking and sharing good practice • A focussed risk based approach to audit programmes • Early warning on potential risk areas identified • Avoiding any unnecessary duplication with other regulators and assurance providers • Effective liaison on issues and approach through Board Secretaries and Audit Committee Chairs 	<ul style="list-style-type: none"> • Develop further the IM&T capacity and capability through targeted training and development • Client use of our Team Mate audit software to facilitate a more interactive audit process with integrated recommendation tracking. • Implement the results of our External Quality Assessment (EQA) against the Public Sector Internal Audit Standards • Share best practice and opportunities to deliver value added service and improvements • Link, where appropriate, with external providers to supplement specific areas of knowledge • Use the outcomes of the stakeholder meetings to focus developing audit programmes
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Financial savings of approximately £0.6m per annum based on internal day rates of £350 in comparison to commercial audit day rates of £500 • Cost avoidance opportunities across a number of risk areas • Consistency in audit reporting and opinions • Resilience to respond to resource pressures • Rigorous assurance process to support organisations manage key risks • Profile of Internal Audit raised at board and committee level across Wales • Training for Independent Members on governance and risk matters 	<ul style="list-style-type: none"> • Effective assurance around risk management, internal control and governance • Provide a service wide Quality Assurance and Improvement Programme • Investment in training and skills to secure the long term future of internal audit • Used external support to augment own skills • Effective support of national initiatives such as the FD's Financial Governance, P2P and Hire to Retire. • Positive feedback from Audit Committee annual reviews and audit satisfaction surveys. • Delivering a quality service evidenced by no recommendations in the Wales Audit Office review of Internal Audit. 	<ul style="list-style-type: none"> • Greater focus on information Governance and cyber security • Working more with the wider public sector • A more forward looking audit to support organisations with their response to the Well-being of Future Generations and Social Care (Wales) Acts • Audit focus on automated processes • Taking on the audit of HEIW – additional

KEY PRIORITIES 2018-21

Value for Money	Our Customers
<ul style="list-style-type: none"> • Providing further financial savings by removing the recharges for Capital audit work and integrating into the main audit plans • Continue to recruit externally to augment skills and reduce use of framework and agency contracts • Sharing more good practice and opportunities for improvement • Supporting Health Boards and Trusts delivery of the efficiency programme to maximise value 	<ul style="list-style-type: none"> • Further investment in senior posts to adopt a business partnering approach • Focus on sharing best practice and common risks/challenges as they emerge • More integrated assurance reporting to audit committees • Work with Welsh Government to ensure their requests for UHBs and Trusts to provide them with any 'limited/no assurance' audit reports does not hinder internal audit's independence • Supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts, by delivering tailored audit reviews and risk focused workshops.

Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> • Working with NWIS to increase assurance on key IM&T systems • Greater focus on IM&T data led audits • Consider national audit programmes to address common risks/challenges • Audit software used to facilitate a more collaborative audit approach • Provide support to national projects such as Hire to Retire and P2P • Develop additional quality based KPIs Opportunity to take on wider public sector work that supports skills development and the breadth of audit coverage • Development of our service to meet the needs of Primary Care 	<ul style="list-style-type: none"> • Supporting professional and skills training • Structure that provides opportunity for development and promotion • New accommodation for South Central team • Succession planning • Recruit externally to augment skills and reduce use of framework and agency contracts • Work with Universities to develop talent pipeline 	<ul style="list-style-type: none"> • Develop further our Quality Assurance and Improvement Programme • External Quality Assessment in 2017 and repeated before 2021 • Work with Board Secretaries to introduce a more streamlined audit planning and opinion approach • Continued involvement with the Welsh Quality Centre • Greater focus on supportive consultancy work to drive organisational improvements



In 3 Years We Will Be

OUR JOURNEY

Operating with modern business systems and approaches, particularly around IT audit and assurance, to deliver a fully collaborative approach with our health organisations.

At the forefront of Assurance provision across NHS Wales and the wider public sector.

Developing the service further to ensure we are an all-Wales, future looking service linked to the aspirations of our organisations and the Well Being of Future Generations and Social Care (Wales) Acts.

Using our audit software to derive and support improvement across NHS Wales.



Taking
Responsibility



Listening and
Learning



Innovating



Working
Together

- **The risks to achieving this could include;**
Recruitment and Retention difficulties in particular in South East Wales
- Insufficient resources to invest in IT audit hardware and software
- Insufficient resources to invest in relevant training and development
- Insufficient resources effectively manage succession planning

PATH TO PRUDENT AND ONCE FOR WALES

Co- delivery with NHS organisations of recommendation tracking through audit software technology.

Greater audit focus on Clinical Audit and Governance. Focusing on priority areas and the ability to respond to concerns in order to support the management of risks around the quality and safety of patient services.

Sharing best practice with effective and necessary controls.

Providing Health Boards with the opportunity to identify and implement key improvements.

Greater focus on consulting support early on in change management to support improvement.

Continued development of risk focussed work that reflects the risk appetite and tolerance of our organisations.

Continued focus in all audit work on the principles of Prudent Healthcare.

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Achievement of sustainable workforce	To ensure the structure is fit for purpose to deliver an All-Wales future focussed service	Introduction of additional management, graduate and specialist posts with reduction in more general audit posts	December 2018	In partnership with staff	Failure to recruit and retain puts risk on service delivery.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: full complement of staff to deliver services and reduction in temporary staff costs							
Successful outcome from External Quality Assessment	Required by the Public sector Internal Audit Standards (PSIAS)	External validation of own self-assessment	By March 2018 and implement in 2018/19	Staff and stakeholders	Inability to demonstrate quality of service provided.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	
Success will be: Report highlighting compliance with PSIAS							
Recognised Information management & technology (IM&T) focus that leads to a data led audit approach and focus	Staff survey recognised this area as a key focus for training and development and service re-provision	Further recruitment into the IM&T Team and roll out of 'champions' in each office	December 2018	Heads of Internal Audit (HIAs) & IM&T Team	Investment does not provide the benefits anticipated. The aim is greater coverage	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: a data led audit process for risk assessment and prioritising work							

Fit for purpose accommodation and IT provision for the South central (Cardiff) team to support delivery	Current accommodation and IT is undermining service delivery and adversely impacts on staff morale	Discussions with senior management in NWSSP and needs assessment of the South central team	Spring/Summer 2018	NWSSP and South central team	Availability of appropriate accommodation.	Value for Money	
						Customers	
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: accommodation and IT that allows the team to deliver effectively							
Further roll out of audit software to our NHS organisations after a pilot in BCUHB	To help improve roll out and effective and implementation of audit recommendations	Use roll out at BCUHB to raise awareness and secure further requests for the approach. Velindre Trust have expressed interest on an early implementation.	September 2018	HIAs and IM&T team	Unable to deliver a more 'integrated' audit approach with NHS organisations	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: improvements in the process for responding to and implementing audit recommendations							
Further enhanced planning and opinion process	To provide a shorter and clearer rationale for our internal audit work programmes and year end opinions	Work with stakeholders to refine current approach	Plan and Strategy June 2018 Opinion April 2018	Director of A&A, HIAs and key stakeholders	Unable to modernise audit approach to meet client expectations	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: easier and more understandable audit planning and opinion process for stakeholders							
Specific audit plans for major	To ensure audit focuses on key	Agree long terms audit plans for	During 2018			Value for Money	✓

NHS change programmes	strategic risks for NHS Wales	approval by Audit Committees		Director of A&A, HIAs and key stakeholders	Audit misses opportunity to add value and provide longer term assurance	Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: recognised long term support on key areas of strategic change							
Focus on succession planning	A number of staff are potentially due to retire at around this time	Continued focus on training and development, both professional and skills/competencies based, aiming to improve recruitment and retention.	March 2019	Key staff and stakeholders	Training and recruitment /retention.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: smooth transition as a number of staff leave NWSSP							
Sharing best practice	Recognition that we could share more learning for the wider benefit of NHS Wales	Identify areas where audit outputs could be shared to benefit all NHS Wales organisations	During 2018	Key stakeholders	Not seen as an all Wales service but need to factor in requirements of confidentiality	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: seen as a more informed critical friend for NHS Wales organisations							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • To continue to support training of professional qualifications, CPD and skills updates • Succession planning to be implemented effectively • To consider more flexible working for part of the workforce to respond to fluctuating demands • Recruit to outstanding vacancies particularly for South East Wales teams 	<ul style="list-style-type: none"> • Continued non-recurrent funding to support structure and changes to audit approach, as well as IT and accommodation requirements. • Continued funding of training and developing. • Restructure of budget setting, recharging and reporting to reflect all-Wales approach • Additional funding for new posts to create a resilient structure with both development and promotion opportunities 	<ul style="list-style-type: none"> • Continued investment in new hardware and software • Resolution of IT and accommodation issues for the Cardiff & Vale team • Additional hardware and software to support the data led audit approach
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • Further roll-out of Team Mate functionality • Further roll-out of audit software functionality working with Health Boards, Trusts and customers to take advantage of the full functionality of Team Mate • Revisions to the Quality manual to reflect EQA outcomes and revised Public Sector Internal Audit Standards 	<ul style="list-style-type: none"> • Continued close working with key stakeholders • Greater need for partnership working with other public sector bodies and Boards • Closer working with both National Counter-Fraud team and Post Payment Verification team (PPV) assurances from • IM&T work Likely need to work closer with NWIS to deliver NHS Wales wide 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Closer working between NWSSP divisions.	To improve overall effectiveness and integration of service provision.	Discussions and possible implementation of closer working arrangements	During 2019	NWSSP senior management	Time for cooperation between divisions.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: recognised improvement by stakeholders in terms of 'assurance' offering from NWSSP							
Consider opportunities for additional work outside on NHS Wales	To complement work in the NHS and to reflect partnership nature of Well Being of Future Generations and Social Care (Wales) Acts	Build on current non-NHS work to widen coverage to other areas that impact significantly on the work of NHS Wales	During 2019	NWSSP senior management	Resources to deliver NHS Wales work in first instance.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: clear focus and findings on NHS areas that impact on other organisations							
Implementation of New / Upgraded audit software	To ensure audit processes stay best in class	Research and discussions of audit need with key stakeholders.	During 2019	A&A senior management	Funding and resource for implementation process.	Value for Money	✓
		Implementation project.				Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓

Success will be: recognised modern and best in class audit approach							
More flexible working to reduce accommodation needs and travel costs	To reflect modern working patterns based on technology in order to support recruitment and retention.	Better IT and connectivity. New policies and procedures.	During 2018 and 2019	All staff, NWSSP senior management	IT functionality and appropriate policies and procedures.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: flexible and efficient workforce and reduction in staff turnover							
Continuation and refinement of 2018/19 objectives	To further develop and improve internal audit	Using actions set out for 2018/19	During 2018 and 2019	All staff, NWSSP senior management, and stakeholders	Available resources.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: continued view of Internal Audit adding value to NHS Wales							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Continue training and development programme for professional qualifications, specific skills e.g IT and a CPD policy to ensure staff can meet requirements of professional bodies. 	<ul style="list-style-type: none"> Capital to support new software and hardware 	<ul style="list-style-type: none"> Tablets to allow more flexible working Remote working technology
Processes		Dependencies
<ul style="list-style-type: none"> Continue to keep up to date on best practice Implement any changes to the PSIAS 		<ul style="list-style-type: none"> Close working with WAO, NWIS and other assurance providers

WHAT WILL WE DELIVER IN 2020-21?

- ✓ Continued development of best in class approach
- ✓ Refresh of audit approach
- ✓ Greater integration with other assurance providers
- ✓ More collaborative work with other parts of the public sector

The risks to achieving this include

Pressure on costs and resources as we are a support function and resources require targeting at front line patient services.

To achieve this we will need; Resources

As above, focus on training, development and skills

We will continue to engage with; Customers and Stakeholders

Continued dialogue with key stakeholders

BEYOND 2021

Recognition as a specialist and future focused provider of assurance to NHS Wales

Full use of functionality of Team Mate or successor software

Closer integration with other assurance providers in both NHS Wales and the wider public sector

Structure that balances individual organisational needs and national specialist delivery 'Once for Wales' approach

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

External Quality assessment

Capacity and resilience

Skills training and development

Develop internal specialism around IM&T

R&D and market intelligence
Income generation opportunities

Demonstrating professional influence

Restructure at other grades

Recognised expert in Internal Audit

Entering new markets across the Welsh Public Sector

Visible external profile

Partnership working

Recognised IM&T Specialism

Fit for purpose accommodation

Succession Planning

Sharing best practice

Refresh of audit process in line with expected developments in internal audit

Continued refresh of audit software and hardware to deliver a more efficient audit process – likely more home based working and less need for office accommodation

Greater integration with other assurance providers to deliver a more joined up assessment of governance and control.

More collaborative work with other parts of the public sector

More "Future Focus Audits"

Further refresh of audit process in line with expected developments in internal audit

Review of structure and processes to ensure fit for purpose for next IMTP process.

Full use of functionality of Team Mate or successor software

Closer integration with other assurance providers in both NHS Wales and the wider public sector

Structure that balances individual organisational needs and national specialist delivery 'Once for Wales' approach

KEY PERFORMANCE INDICATORS

The KPIs reported monthly for Internal Audit are:

Description of Key Performance Indicator	SLA	2018/19 Target	2019/20 Target	Oct 2017 Actual
Audit plans 2017/18 agreed/in draft	√	100%	100%	100%
Audit opinions 2016/17 delivered	√	100%	100%	100%
Audits reported vs. total planned audits – as at 31 st October	√	35%	40%	33%
% of audit outputs in progress	No	20%	20%	21%
Report turnaround fieldwork to draft reporting [10 days]	√	80%	90%	86%
Report turnaround management response to draft report [15 days]	√	80%	80%	61%
Report turnaround draft response to final reporting [10 days]	√	80%	90%	99%

Central Team eBusiness Services (CTeS)

Deliver value to our customers, be an enabler to support the delivery of world class processes whilst acting as the Centre of Excellence on service, change and programme management on all matters pertaining to enterprise digital technologies for Finance and Procurement users (FMS Services) across the NHS in Wales and potentially broader.

WHO ARE WE AND WHAT DO WE DO?



Manages and supports the strategy enterprise Oracle Financial and Procurement system, associated services on behalf of NHS Wales.

The team activities include: monitoring the ERP contract and SLA, managing change requests and financial costs, taking forward strategic programmes/projects, as well as providing operational and technical support



9 staff,
excluding student placements

Complete
developments in
house saving
£60k per annum

£2.5b
of spend
BI/Reporting
services

10,000 users.

100%
standing data item
requests and
document imaging
errors in 48 hours

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Structured Customer Satisfaction Surveys, Annual Visits held with individual Health Boards and Trusts, with feedback presented through Governance Groups • CTeS facilitates and is represented on all FMS Governance Groups (Strategy & Development, Accounting, Purchase to Pay, Business Intelligence and Contract Retender Group) • CTeS provide a 2nd line and 3rd line Business Intelligence service desk to assist our customers to understand immediate business operational incidents • STRAD reviewed and developed work plan in partnership. • Regular engagement with DoFs 	<ul style="list-style-type: none"> • Access to FMS Services that are fit for use and purpose • FMS Services supported by CTeS and by Version One Solutions Ltd • Continual Service Improvement support to enhance existing services and deliver modern digital services • FMS Services Retender to be Programme Managed by CTeS, reducing resource reliance on customers 	<ul style="list-style-type: none"> • To be a centre of excellence in terms of skills, knowledge and expertise on relevant digital services • Quality controls, procedures and maintaining high professional standards • Horizon scan and benchmark services against similar structured departments in NHS England and other Public Sector Organisations • Working through the STRAD group to co-produce and agree improvements based on operational requirements
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Working in partnership with NWSSP Procurement Services and Health Organisation leads have awarded the FMS Services Managed Contract resulting in the same level of support being offered to NHS Wales with no increase in contributions for Consortium members. • Provide QlikView 2nd Line Support and complete developments in house saving £60k per annum • Realising over £50k of service credits in the present managed service contract • Worked with Version One to provide a suitable solution to meet the needs of NHS Wales • Developed a solution in house which when fully rolled out will replace Discoverer • Replaced the fax line solution with a web based solution reducing service risk and realising ongoing costs savings • Develop offering to take on more first line support in house 	<ul style="list-style-type: none"> • Proven track record of project, programme, change and risk management • Manage and support the FMS Governance Groups – including preparing agenda, papers & meeting notes • All aspects of Contract and Service Management – with third party supplier recommending the CTeS approach to their other customer base • Work collaboratively and act as a conduit between Health Organisations and Suppliers • Comprehensive documentation and procedures 	<ul style="list-style-type: none"> • Provide services to wider Public sector bodies and non-departmental government bodies • On-board and support Health Education Improvement Wales into FMS Services Extending the use of software robotic ('Bots') automation • Ensure we are achieving and exceeding expectations • Extending the present support offering thereby providing greater value to our customers • Provide 2nd Line Support for all FMS Services • Develop enhancements, working in partnership with Managed Service Provider to deploy • Developing QlikView for NHS Wales

KEY PRIORITIES 2018-21

Value for Money

- Deliver developments in-house, previously completed by 3rd parties, based on Consortium approved scope
- Transfer BAC's processing in-house for NHS Wales and review any wider offering to other Public Sector bodies
- Support implementation of Health Education Improvement Wales
- Expand Business Intelligence 2nd line support to all FMS Services
- Fully replace current Reporting solution with a replacement delivered in-house, saving at least £70k development costs on 3rd party proposal and recurring support costs
- Continue to review our existing internal lean activities, agile approach, skills and expertise to ensure we continue to add value
- Supporting Health Boards and Trusts delivery of the efficiency programme to maximise value

Our Customers

- Presence at all FMS Governance groups to agree work programme with all NHS Wales Trusts and Organisations, including NWSSP
- Review of all Governance Groups to ensure they align to the FMS Retender requirements
- Provide a value added conduit between our customers and Service Providers
- Complete annual customer service excellence reviews and enhance KPIs to measure quality
- Provide timely updates to Customers on key Programme deliverables through Newsletters and Howis updates
- Ensure we are supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts



Service Development

- Engagement with Public Sector 3rd party support teams to share knowledge
- Roll out and All Wales utilisation of QlikView enhancements to support reporting, such as intercompany transactions
- Ensure any developments are delivered in accordance with the Common Operating Model (COM) and documentation remains up to date
- Enhance the COM to ensure further alignments of settings and processes for FMS Services
- Review Service Desk tools to ensure CTeS can deliver services as required to customers
- Development of our service to meet the needs of Primary Care
- Expand the use of 'BOTS'

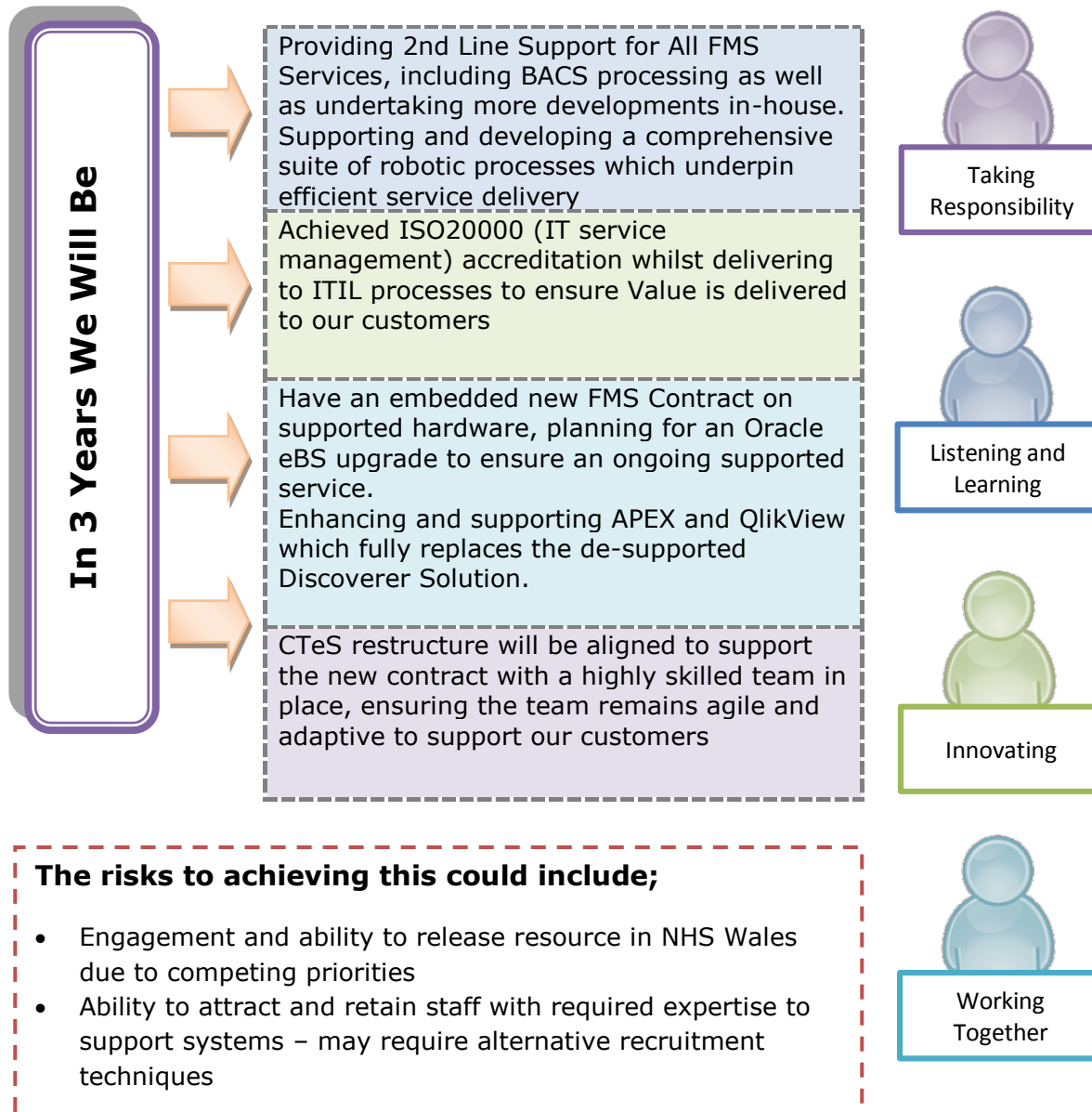
Our Staff

- Ensure PADR's, Statutory and Mandatory Training are completed
- Retain full complement of staff
- Ensure staff development and training is provided where necessary, particularly to support broadening of support provided to NHS Wales colleagues and new Services supported
- Appointing into restructure planned 2017-18 to align to FMS retender

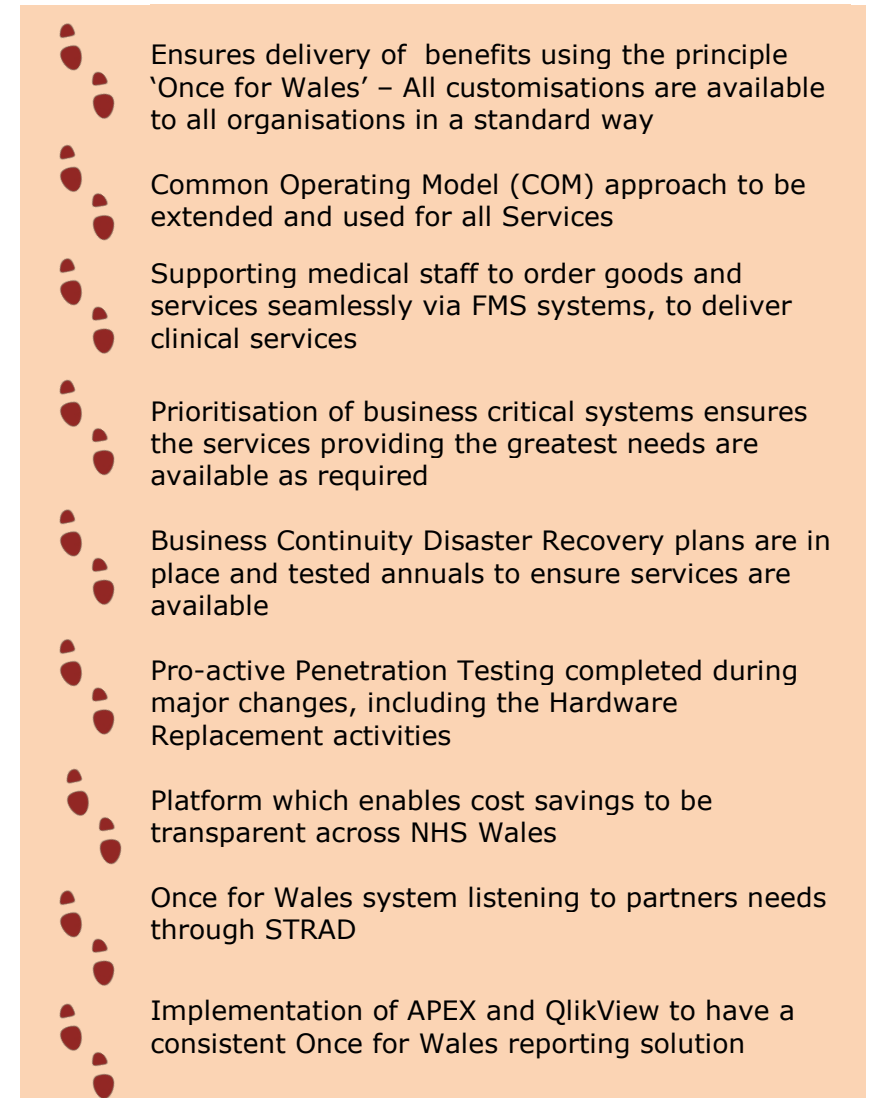
Excellence

- Continuous Service Improvement policies in place to facilitate and drive CSI whilst maximising use of existing toolset
- Ensuring all services remain on fully supported versions and plan to replace legacy systems such as Discoverer and upgrades where necessary
- Full hardware refresh of all services to ensure optimum server architecture to support availability, call response and resolution times as well as performance timings across all services

OUR JOURNEY



PATH TO PRUDENT AND ONCE FOR WALES



WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
BI/reporting solution for the legacy Oracle Discoverer Business Intelligence tool fully replaced and supported	Discoverer was de-supported in 2017. Presently still significant reliance on the tool	Deliver replacement solutions using Oracle APEX and QlikView	By April 2019 as potentially will not be supported in future FMS Contract and requires gaps to be presented by Health Organisations	CTES supported by supplier(s) and customers	Retention and recruitment of skilled staff.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: No reliance on the Discoverer reporting tool by NHS Wales							
Programme to deliver a new FMS contract by April 2018 for the complex range of FMS services	Present Managed Services Contract with Version 1 ends in May 2018 – no option to extend	Programme Manage and support the Programme of work	Transition to be complete by April 2018	NHS Wales and third party supplier	Availability of NHS Wales colleagues	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: FMS Retender Programme delivered to timetable							
Phase 1 Using software automation ('BOTS') solutions more extensively	Release resources to focus on more value adding tasks, reduce errors, increase productivity	Configure BOTS to replicate relevant activities to create a "virtual" workforce	Embedded five robotic processes by April 19	CTeS	Insufficient funds to purchase additional software robot licences	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Reducing workers undertaking non value adding activities and carrying out more value added tasks							

Team restructure to support FMS Retender and to ensure in house services can be supported and extended	Reducing reliance on third party and costs – to be more self-reliant by transferring some activities in house	Restructure and recruitment of additional resources	By April 2018	CTeS	Staff recruitment Additional funding Training requirements Business Services resistant to change	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Fully resourced team providing value added benefit to the Consortium at expected satisfaction levels							
On-board HEIW into Consortium arrangements	HEIW is a new Organisation from April 2018 to support the deployment of the workforce requiring FMS Systems	Working with Welsh Government programme to deliver the financial supporting systems infrastructure	By October 2018 at the latest	CTeS Managed Services Provider HEIW Programme and Testing Team	Lack of HEIW testing resources Availability of CTeS resources to support and Project Manage the Programme alongside the FMS Retender Programme	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: HEIW go live on all FMS Services and attending all Governance Group Meetings							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Restructure including head count increase, due to widening of support services and duties performed by the team • Given the nature of the specialist expertise and skills provided, it is important we continue to enhance skills through professional training courses and research / development 	<ul style="list-style-type: none"> • A review of existing funding and staff resources will be required to support the FMS Retender Programme • Securing additional funding has continued to remain a challenge for the department 	<ul style="list-style-type: none"> • NWSSP IT to support bi-annual Penetration Testing for all Oracle, QlikView and OCR services in order to ensure no vulnerabilities are introduced • NWSSP IT to support testing of FMS systems as part of FMS Retender Programme during build • Ongoing engagement with Cardiff and Vale IT for continued Data Centre Support • Access to the latest digital technologies
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • Team familiar with PRINCE 2 methodology, ITIL and Managing Successful Programmes (MSP), Management of Risk (MoR) and Lean Six Sigma processes 	<ul style="list-style-type: none"> • Managed Service Provider and other 3rd parties • Continued collaboration and standardisation of operating processes • Continuation of a Once for Wales approach 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Agreeing Work programme and priorities for any transformation projects post transition	Change freeze will be released	Work with Governance Groups and Service Provider to identify requirements	Once transition is complete and all services are business as usual	NHS Wales and third party supplier	Insufficient funds or willingness of NHS colleagues	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Restoring quarterly patching cycles and implementing continuous service improvement requests (CSI)							
Delivering 2 nd line support for all Services	Reduce 3 rd party costs and increase skills and knowledge within NHS Wales to support all Services	Managed through FMS Contractual provisions	June 2019	CTeS	Tools such as Service Desk and CTeS restructure to ensure resources are in place. Co-operation of Managed Service Provider for change to contractual provisions.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: CTeS achieving SLA's in place and satisfied customers							
Commence Phase 2 - Using software automation ('BOTS') solutions more extensively	Release resources to focus on more value adding tasks, reduce errors, increase productivity	Configure BOTS to replicate relevant activities to create a "virtual" workforce	Working with wider NHS on non-clinical administrative processes by April 20	CTeS	Insufficient funds to purchase additional software robot licences	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Reducing workers undertaking non value adding activities and carrying out more value added tasks							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Appoint based on team restructure and knowledge required to ensure appropriate level of support is provide to customers 	Consideration of any funding requirements to implement CSI changes once the change freeze has been lifted – over and above the All Wales SIP Fund	<ul style="list-style-type: none"> Service Desk Tool that’s fit for purpose and use to enable timely call resolution and reporting for enhanced call volumes and priority calls Access to the latest digital technologies
Processes		Dependencies
<ul style="list-style-type: none"> Ongoing review of revised processes in line with ITIL to support providing extended services to include 2nd line support and BAC’s processing Finalising and enhancing processes to align with any new Managed Service provider Consideration of any processes which can be automated through the use of BOTS 		<ul style="list-style-type: none"> Managed Service Provider and other 3rd parties NHS Wales Colleagues

WHAT WILL WE DELIVER IN 2020-21?


✓ Revised Support Model
✓ Plan to ensure Oracle eBusiness Suite is upgraded before support expires – Horizon scanning for the right version / product
✓ Processes to ISO 20000
✓ More developments in-house
✓ Ongoing support for further Continuous Service Improvement
✓ Excellent relationship with our Customers adding expected Value

The risks to achieving this could include;

Resources to deliver
 Lack of Organisation engagement to develop All Wales solutions
 Team Skills

To achieve this we will need;	We will continue to engage with;
Resources Financial Support An adequately resourced team in place Agreed procurement strategy	Customers and Stakeholders Health Boards NWSSP 3rd Party Providers Public Sector Bodies

BEYOND 2021



Ensure team structure and skills remain aligned to customer and business requirements

Focus will remain on CSI and extending support offering

Ensure all Services remain on supported platforms and consider cloud technology. Replacement of all current hardware

Review Supporting Wider Public Sector for FMS Services and beyond

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Resource shift to support contract retender exercise

Established cycles of implementing improvement initiatives, aligned for all Services

Continue to develop relationships with other Public Sector organisations for mutual benefit

Business Intelligence roll out and enhancements

Complete annual customer service excellence reviews and enhance KPIs to measure quality

Required skills mix – consider team restructure to support new contract

Upgrade reporting services to remain supported and to gain from improvements/enhanced offering

Continued training and professional development to enhance existing expertise

Provide greater automation through the use of 'BOTS'

Resource shift to support contract retender exercise

Upgrade aging and unsupported hardware as part of transition for all services

Expertise in IT and enterprise systems and technical architecture

Implement team restructure to support retender exercise, shape of support and customer requirements

Plan to ensure seamless support to Consortium end users where services have transition into CTes

Enhance internal KPI's with customers to ensure support meets requirements

Provide greater intelligence to customers on calls being raised to reduce repeat failures

Excellence in ISO 20000 processes

Consolidation of systems and IT service skills

Broader cross functional expertise

Seamless infrastructure, technology and application boundaries

Staff development plan fully implemented

Enhanced process automation and appropriate management of administrative activities

Extended team service offering

Enhance in-house support offering to include BAC's services and 2nd line support for all services

Broaden offerings to wider Public Sector if and where appropriate, within the context of the COM

Critical review of standards and practices against industry best practice

Maximise existing toolsets

Strategic IT and systems services integrated with NHS Wales policy and strategy

Value chain optimisation

Ability to freely innovate and provide enabling technologies and IT services for businesses

Agile department structure

Mature partnerships with Public Sector Organisations driving change for mutual benefit

Professional highly skilled workforce

Innovation to inform service development to drive improvement and reduce cost of ownership of IT services

Ongoing modernisation to improve service quality and standardisation of processes or services

Start to consider future Oracle FMS upgrade and options to move to a cloud based offering

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	2017-18 Target	2018-19 Target
KPI 1 - Successfully process All Wales Oracle standing data item requests and document imaging errors within 48 hours of the request being received and to 100% accuracy rate	100%	100%
KPI 2 - Support governance groups - prepare agendas and minutes within 5 days of planned meeting	90%	90%
KPI 3 - Undertake Oracle contract service reviews with managed service provider on a monthly basis	100%	100%
KPI 4 - To undertake monthly/annual Oracle audit and control reviews	100%	100%
KPI 5 - Deliver services within allocated annual department budget	100%	100%
KPI 6 - Undertake PADR reviews for all staff on an annual basis and 2 months prior to staff anniversary date	100%	100%
KPI 7 - Achieve a customer satisfaction index of good (80%) or better on an annual basis	95%	95%
KPI 8 – All incidents raised with the Central Team are responded to within 2 hours between the time of 9am-5pm	95%	95%
KPI 9 – All P1 and P2 incidents raised with the Central Team are resolved within 8 hours (within capability)	95%	95%
KPI 10 – Agreed All Wales developments deliverable by the Central Team are included in the next Central Team patch release to ensure momentum of CSI is maintained	95%	95%

Digital Workforce Solutions

To provide world class electronic workforce and learning solutions accessible through internet and mobile technologies in a real time environment. To replace paper dependant manual workforce transactions with ESR, interfaces, mobile technology and robotic solutions. Acting as the Centre of Excellence using technology to deliver significant change and improvement in processing.

WHO ARE WE AND WHAT DO WE DO?



Manage the national Electronic Staff Record (ESR) contract and 'Hire to Retire' streamlining programme for NHS Wales

'ESR is a digital solution that integrates with other workforce and finance systems providing an end to end streamlined solution to manage the employee journey from recruitment through to retirement.

Through robust governance and a complex stakeholder engagement model, ESR capability is developed, promoted and deployed through an NHS Wales wide 'ESR Hire to Retire' Programme



10 staff

Over **70,000**
NHS Wales
employees with
ESR Self Service
access

15% increase in
Statutory and
mandatory
compliance
across NHS
Wales

10 New ESR BI
Dashboard
analysis reports
developed for
Wales

£1.2 million cost
avoidance savings
through
technology
enabled learning
solutions

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • ESR Hire to Retire audits and reviews with individual Health Boards and Trusts and local ESR hire to Retire Programme Boards • Through a formerly managed programme structure that is functionally organised, project driven and encompasses national and local agendas • Targeted communications that include workshops, education, information bulletins, e-learning, guidance documents and use of social media • Represent NHS Wales at national ESR project and special interest groups • Establishing a work programme which underpins the changes needed by Health Boards, Finance Academy, NIP, WODs and DoFs 	<ul style="list-style-type: none"> • An intuitive, easily accessible modern workforce system that removes paper processes, duplication and waste • Timely, accurate workforce intelligence available to inform business decisions at the 'touch of a button' • Simple, standardised workflows and processes • Guidance and support to enable a consistent approach to maximising ESR functionality in line with world class standards • Continued ESR enhancements in line with organisational priorities and NHS Wales policy 	<ul style="list-style-type: none"> • By removing unnecessary duplication of data entry and waste through use of technology and robotic solutions • Through a professional digital workforce solutions team that centrally supports the national and local agendas through an expert knowledge base. • Through improving the accessibility of ESR through mobile technology and Apps • Through facilitating costing and benefits workshops within organisations to join up and streamline processes whilst providing evidence of improved benefits and efficiencies • Facilitating their ability to use once for Wales systems
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Removal of variation and waste through implementing the ESR Occupational Health bi-directional interface across 3 organisations. This will enable an estimated £1 million costs avoided per annum when fully deployed (March 19) • Improved quality and completeness of workforce data to inform business critical decisions • Improved visibility of assurance, productivity and compliance • Significant cost efficiencies and cost avoidance savings through deployment of ESR e-Learning • Improved skills and capacity across NHS Wales through provision of ESR and e-learning training • Maximising the Welsh seat on the ESR Programme Board to have Welsh specific requirements recognised 	<ul style="list-style-type: none"> • Maximise the ESR contract through a co-productive partnership with the DH ESR Team and NHS key stakeholders • Programme manage the NHS Wales Hire to Retire strategic workforce improvement agenda • Support and deploy national projects that deliver workforce capabilities and solutions that meet service requirements • Sharing best practice through formal conferences and all Wales events, ESR bulletins, Local ESR Programme Boards • Catalyst for collaboration between WODs and DoFs • Manage the contract and interface with Department of Health for NHS Wales • Deliver excellence: <ul style="list-style-type: none"> ➢ HSJ Finalist 2017 ➢ HPMa Wales Winner 2017 ➢ HPMa National Winner 2017 	<ul style="list-style-type: none"> • Establish an integrated Learning and Self Service Support function. Requested by the service this will enable economies of scale and remove a significant volume of transactional ESR queries • Standardise the Occupational Health (OH) contract and enable economies of scales through a 'Once for Wales' contract • Implement the ESR Occupational Health bi-directional interface across all NHS Wales organisations • Enable transferability of OH information from NHS Wales health graduate education • Full deployment of the ESR Deanery Interface to streamline and automate the doctors and dentists in training rotation • Extend provision of e-learning materials to the two remaining local authorities and wider public sector • Organisations to make better use of ESR and Business Intelligence functionality

KEY PRIORITIES 2018-21

Value for Money

- Further enhance the national integrated ESR and Learning Support function to maximises economies of scale and standardisation
- Enhancing the national e-learning materials in line with national policy and local business requirements available in Welsh and English
- Manage the on-boarding of other public sector organisations to the Learning@Wales Moodle e-learning platform
- Evidence costs efficiencies and value for money for all Hire to Retire projects through a costing model steeped in academic and financial rigour
- Fully deploy ESR Occupational Health bi-directional interface across all NHS Wales organisations
- Support Health Boards and Trusts delivery of ESR capability, interfacing technology and use of robotics

Our Customers

- Continue to increase the ESR capacity and capability of workforce and OD practitioners so ESR can be deployed throughout organisations in line with world class standards
- Provide a service that is agile and responsive to the requirements of stakeholders
- Continue to champion the workforce solutions requirements of NHS Wales at national forums including ESR Programme Boards, Special Interest Groups, National User Groups etc
- Ensure we are supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts
- Provide an ESR helpdesk to NHS Wales

Service Development

- Working in collaboration with key stakeholders to enhance the design and capability of the ESR national solution
- Provide digital and interfacing solutions including use of robotic software
- Deploy the ESR Self Service Portal
- Deploy ESR Self Service and Manager Self Service through mobile and tablet devices
- Develop and deploy the ESR solution in line with national and service requirements
- Maximise a 'Once for Wales' solution where possible to enable capacity within organisations and align to Prudent Healthcare principles
- Automate transactional processes and remove duplication & variation through maximised use of ESR, workforce interfaces, digital solutions and use of robotics

Our Staff

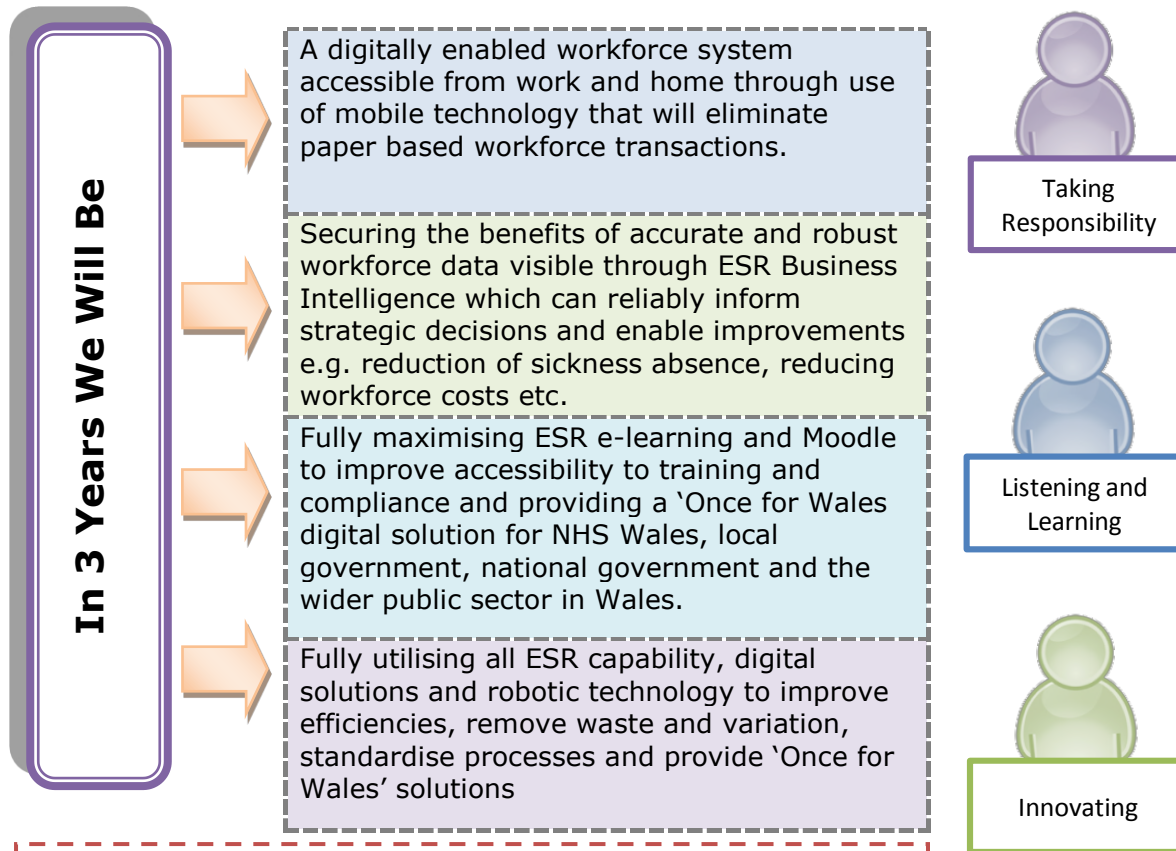
- The Digital Workforce Solutions Team have:
- ESR technical expertise
 - E-learning development and quality assurance expertise
 - Accredited to national training standards
 - Project and Programme Management technical expertise
 - Expertise in use of Blue Prism robotic software
 - Expertise in process mapping and opportunities costing
 - Enable ESR developments and enhancements through stakeholder engagement and leverage at an all Wales level

Excellence

- Programme delivered in line with Managing Successful Programmes (MSP) standards
- Formal governance established to manage the complexity and diversity of the Hire to Retire work programme
- National awards and recognition received for the ESR Hire to Retire Work Programme
- Nationally published articles and case studies showcasing excellence, value for money and service development
- Utilise CAMMS project management capability to transparently manage a complex portfolio of projects with effective governance and controls
- Working with Health Boards and Trusts to maximise the benefits and using full functionality of ESR



OUR JOURNEY



The risks to achieving this could include;

- Competing demands on strategic partners NWIS to deliver required infrastructure support
- Non-compliance with required IT standards and capability
- Lack of capacity and capability within Health Boards and Trusts to effectively manage business change to deploy the benefits of ESR and integrated systems fully
- Failure to maximise 'Once for Wales' solutions and financially 'pump prime' enabling projects
- Failure to embrace technology with continued dependency by organisations on paper and legacy systems
- Failure to implement standard operating processes

PATH TO PRUDENT AND ONCE FOR WALES

Once for Wales Technology

Provision of a centralised e-learning service to develop, assure and host e-learning for NHS Wales and the wider public sector

Service Redesign

Remove duplication and non-added value workforce transactions through effective use of workforce technology

Reduction of service variation

Standardisation of workforce processes in line with world class standards through published operating procedures and process maps

Maximisation of interfaces

Development and implementation of new interfaces to remove manual data input

Improved data quality

Implementation of data standards programme of work. Continued development of ESR Business Intelligence and KPIs that reflect the requirements of NHS Wales

Expansion of Services

Establishment of an integrated ESR Self Service and Learning support function to promote standardisation of use and remove transactional queries from Health boards and Trusts

Improving capacity and capability of the NHS Wales Workforce family

Provision of guidance, support, education and conferences to ensure the skills of the workforce family are enhanced in line with the requirements of the ESR Hire to Retire work programme

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Deliver phase 2 ESR Hire to Retire Programme of work	To deploy ESR capability that promotes the redesign of workforce processes that maximise efficiencies and reduce duplication and variation	Deployment of a range of prioritised workforce projects that meet the priorities of the NHS Wales Workforce and Finance Directors	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions Team, NHS Execs, NHS Service, WG, Suppliers, Workforce and ESR Users	Organisational capability & capacity and appetite for change	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Deployment of ESR Hire to Retire Programme of Work and Project Deliverables Within Timescales							
Establishment of an accredited 'All Wales' Self Service & Learning Support Function that maximises economies of scale and enables local capacity	To release capacity within NHS Wales workforce functions, remove variation and promote standardisation	Extend the existing e-Learning Support function already established within the Digital Workforce Solution Team	By Apr 18	NWSSP Digital Workforce Solutions Team	Funding/resources for establishment of team	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Establishment of an Integrated ESR Self Service & Learning Support Function for NHS Wales							
Maximised use of ESR capability across NHS Wales through a structured Blue Prism robotics work programme	To maximise efficiencies & use of resources, remove variation & waste and standardise workforce processes across NHS wales	Through ESR Hire to Retire Work Programme, Governance and stakeholder engagement and robotic technology	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions Team, NHS Execs, NHS Service, WG, ESR DH, Suppliers, Workforce and ESR Users	Lack of capacity within organisations Workforce & OD Teams	Value for Money	✓
					Failure to maximise ESR Portal or manage IT requirements	Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Maximised use of ESR, Digital Solutions and Robotic Capability							
Delivery of Costing and Benefits	To maximise efficiencies and	Utilise Costing and Benefits	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions	Failure by organisations to review processes,	Value for Money	✓

workshops across NHS Wales to: <ul style="list-style-type: none">Standardise processesMaximise ESR and digital capabilityDemonstrate efficiencies and benefits	modernise processes across NHS Wales workforce functions	methodology designed by PHW and Professor Nick Rich and endorsed by NHS Wales Directors of Finance as a costing mechanism for Workforce efficiencies		Team, NHS organisational Workforce and ESR Users	standardise procedures embrace change	Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Financial Efficiencies and improved processes with agreed financial and governance controls							
80% of all workforce transactions will be undertaken through paperless processes and full deployment of the ESR Self Service portal	Remove duplication, waste and non-added value processes and maximise efficiencies in line with prudent health care principles	Remove paper payslips	By Apr 18	NWSSP Digital Workforce Solutions Team, NHS Wales organisations	Lack of one Wales Self Service function (to maximised local capacity)	Value for Money	✓
		Fully deploy ESR Self Service via Portal, external access and use of workflow notifications across all NHS Wales organisations.	By Jun 18			Customers	✓
						Excellence	✓
						Staff	✓
		Remove legacy paper systems for key self-service transactions	By Jun 18		Failure to maximise ESR Portal or manage IT requirements	Service Development	✓
Success will be: Paperless transactions for 80% of all workforce processes							
Deployment of an agreed programme of ESR e-Learning products for NHS Wales and the wider public sector	To maximise efficiencies, economies of scale, reduce variation of learning and enable portability	Using PMO project software to enable visibility of project scope and deliverables.	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions Team, NHS L&D e-learning leads, Public Sector e-learning leads, TEL SMB	NHS Wales organisational capacity to support the delivery schedule	Value for Money	✓
						Customers	✓
					Capacity of the NWSSP Digital Workforce Solution Team to meet demand	Excellence	✓
						Staff	✓

	of learning and competence	Development of a suite of e-learning modules that are aligned to service and WG priorities			NWIS capacity to improve server capacity and support developments including improved reporting.	Service Development	✓
Success will be: 100% e-learning undertaken through ESR for NHS Wales Employees with agile e-learning development programme							
Delivery of an enhanced Learning@Wales solution and ESR Learning Server hosted within NWIS DMZ including full service support model	To stabilise and enhance the IT infrastructure, improve the reporting solution and maximise the security of the e-learning hosting Servers	Through a project managed approach that has been agreed and resourced by NWIS	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions Team, NWIS, Identified Suppliers	Capacity of the NWIS to resource the project work	Value for Money	✓
					Financial implications not yet identified	Customers	✓
					Scarcity of Moodle experience	Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Fully supported e-Learning Server and Support through NWIS in line with NWSSP specifications							
Maximise the use of ESR to effectively manage appraisal, performance, talent & succession planning	To ensure sufficient capacity and capability safely provide Services aligned with IMTP and workforce plans	Provide support, education and training so ESR capability is maximised	Between Apr 18 and Mar 19.	NWSSP Digital Workforce Solutions Team, ESR DH Team, ADoDS Trust & Health Boards L&D and ESR Leads	Lack of capability and capacity within organisations to fully utilise ESR	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: OLM fully utilised to Manage Performance, Talent and Succession Planning							
Implement the ESR Occupational Health (OH) bi-directional interface across all NHS wales organisations providing OH	To reduce recruitment times, speed up OH clearance processes, enable safer recruitment and improve the	Develop one Cohort OH contract for Wales that includes the latest technology and applications.	By Dec 17	NWSSP Digital Workforce Solutions Team,, NWSSP Recruitment Team, ESR DH Team, Medgate (Cohort Supplier), NHS Wales	Lack of standardised procedures across NHS Wales OH services	Value for Money	✓
					Adherence and compliance with required IT specifications	Customers	✓
						Excellence	✓
						Staff	✓

services. This will include deployment of Cohort Version 10 and hosting technology	employee on-boarding experience	Deploy Cohort Version 10 to release improved technology that will enable portability of data and digital processes	Between Apr 18 and Mar 19.	OH Service, Medical Workforce, Resourcing & ESR Teams	Failure by organisations to meet project milestones through conflicting priorities	Service Development	✓
Success will be: Deployment of Cohort Version 10 hosted solution across all OH provider NHS Wales organisations							
Develop and Implement Key Data Quality measures	To assure the quality of key data within ESR to enable accurate workforce reporting and workforce planning	Develop Key Data Quality measures: <ul style="list-style-type: none">Workforce Information VerifierClinical Professional Registrations	Between Apr 18 and Mar 19.	Digital Workforce Solutions Team, Data Standards, Health Boards, Trusts, WEDS, ESR DH Team	Capacity and conflicting priorities of the ESR DH Team to deploy BI reports for NHS Wales	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Implementation of all Data Quality Measures by Health Boards and Trusts							
Develop ESRBI Dashboards in line with NHS Wales Workforce Policies and priorities	ESRBI analysis enables quick, consistent and easy reporting for Organisations and Managers	Small T&FG to develop key dashboards in line with NHS Wales BI development flowchart	Between Apr 18 and Mar 19.	Digital Workforce Solutions Manager – Data Standards, Health Boards, Trusts, WEDS, DH ESRBI Central Team	Failure to maximise ESR Business Intelligence and develop reporting solutions that meet the requirements of NHS Wales	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Complete Reporting Capability available digitally for Improved Management of Services							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Funded and established Digital Learning Solutions team to include: <ul style="list-style-type: none"> 1 Band 6 1 Band 5 1 Band 4 1 Band 3 (over and above existing structure) ESR Through an agreed resource model with Health Boards and Trusts Maintain the existing substantive Digital Workforce Solutions structure Accredited support staff Key links with stakeholders through robust programme management and governance to embed ESR within Trusts and Health Boards 	<ul style="list-style-type: none"> Continued financial support from Welsh Government to secure the Digital Learning Solutions element of the ESR Hire to Retire programme Funding to update and provide to the NHS Wales and wider public sector appropriate Articulate (e-learning software) licences Support from Health Boards to finance ESR helpdesk 	<ul style="list-style-type: none"> Laptops, MS Office 2016 including Skype for at least 6 of the team Prioritised service and established escalation to NWSSP/NWIS IT support for ESR and Learning@Wales all Wales issues/solutions Continued support for the use of bespoke software and systems essential to the delivery of the Digital Workforce Solutions Service incl Blue Prism Migration of ESR e-Learning Server to NWIS DMZ or appropriate solution Full NWIS service support and server capacity for Learning@Wales Enhanced Moodle reporting solution from NWIS
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> Develop standard operating processes and enhance governance for the Digital Learning Solutions work programme Establish standard operating processes, process maps financial controls and governance for all ESR transactions Identify the benefits realised from all ESR self-service transactions Utilise robotic solutions (Blue Prism) to maximise the use and deployment of ESR Developed KPIs within Zen Desk (support software) for monitoring service and support provided to Trusts and Health Boards 	<ul style="list-style-type: none"> NWIS for Moodle and server support, software updates and maintenance ESR DH Team & IBM for ESR developments that reflect Wales policy and legislation Adherence by organisations to the ESR MM-0100 minimum IT requirements NHS Wales stakeholders and governance to embed the ESR capability realised through the Hire to Retire work programme Technology Enabled Learning Service Management Board NHS Wales and Public Sector networks to ensure deployment of ESR and e-learning is maximised 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Streamlined recruitment processes	To improve the on boarding experience, reduce recruitment timescales, maximise efficiencies and reduce duplication of processes	Maximise ESR Deanery Interface, review ESR e-reference functionality and enhance TRAC to negate the requirement for direct hires	Dec 2019	Digital workforce Solutions, Employment Services, ESR DH, Trusts & Health Boards	Limitations and length of timescales incurred to enhance TRAC and ESR Business process changed required by organisations.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: full implementation of Deanery Interface or use of TRAC to remove use of Direct Hires							
Extend access to Learning@Wales for wider public sector	Economies of scales are significant and the Moodle learning platform is easily flexed and up scaled	Effective project management of Moodle and definitive on-boarding SLAs	Between Apr 19 and Mar 20	Digital workforce Solutions, Public Sector organisations, NWIS, TEL Service Management Board	Capacity of Moodle to ensure no system degradation Capacity of Digital Workforce Solutions Team	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Extend the usage of Learning@Wales to the wiser public Sector							
Deploy an agreed programme of ESR e-Learning products for NHS Wales and the wider public sector	Maximise efficiencies, economies of scale, reduce variation of learning and enable portability of learning and competence	Development of a suite of e-learning modules that are aligned to NHS service, local authority and WG priorities	Between Apr 19 and Mar 20	NWSSP Digital Workforce Solutions Team, NHS L&D e-learning leads, Public Sector e-learning leads, TEL SMB	NHS Wales organisational capacity to support the delivery schedule Capacity of the NWSSP Digital Workforce Solution Team to meet demand NWIS capacity to improve server capacity and support developments including improved reporting.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Delivery of suite of prioritised e-learning modules for NHS Wales and wider public sector							

Manage the deliverables of the ESR contract for NHS Wales	To ensure ESR enhancements and operability reflect NHS Wales requirements	Through a robust governance structure with NHS Wales organisations, ESR DH Team and complex network of stakeholders	Between Apr 19 and Mar 20	Digital Workforce Solutions Team, NWSSP, Welsh Government, ESRDH, NHS Wales organisations	Limitations of ESR and interfacing technology Capacity of organisations to deploy and maximise ESR capability	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Maximised deployment and use of ESR and interfacing technology across NHS Wales							
Delivery of ESR Hire to Retire Programme of work aligned with Workforce and Finance Directors strategic objectives	Deploy ESR and interfacing capability that promotes excellence in Workforce processes and maximises efficiencies	Deploy a range of prioritised workforce projects that meet the priorities of the NHS Wales Workforce and Finance Directors	Between Apr 19 and Mar 20	NWSSP Digital Workforce Solutions Team, NHS Execs, NHS Service, WG, Suppliers, Workforce and ESR Users	Organisational capability & capacity and appetite for change	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Deployment of ESR Hire to Retire prioritised programme of work to agreed timescales							
Improved data quality and almost real time reporting for operational and strategic workforce planning and analysis	To enable informed operational and strategic decisions to be undertaken based on accurate workforce data	Adherence by organisations to the Data Quality and Data Standards programme of work	Between Apr 19 and Mar 20.	Digital Workforce Solutions Team, WEDs, ESR DH, NHS Wales organisations	Capacity within organisations to comply with data quality work programme	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved data quality and real time reporting capability across NHS Wales							

To achieve this we will need:		
Workforce	Finance & Capital	IT
Welsh Translation support for e-learning modules	No additional finance required	No additional requirements. Same requirements as already stated
Processes		Dependencies
Continued development of paperless process through full use of ESR and integrated workforce solutions		As previously stated

WHAT WILL WE DELIVER IN 2020-21?

- ✓ Full deployment of the defined ESR solution across NHS Wales including education support and training
- ✓ Management of a new programme of ESR and workforce enhancements to reflect NHS Wales requirements
- ✓ Improved capacity and capability of the NHS Wales workforce with regards to ESR competence and usage
- ✓ Continued management of Learning@Wales including help desk and an agreed e-learning development programme that will be available in both Welsh and English
- ✓ Enhanced use of ESR business intelligence reporting and alerting for improved operational management and efficiencies
- ✓ Continued communications, support and engagement with NHS Wales organisations to ensure maximised use of ESR
- ✓ Continued implementation of data standards in line with the national workforce data sets

The risks to achieving this could include;

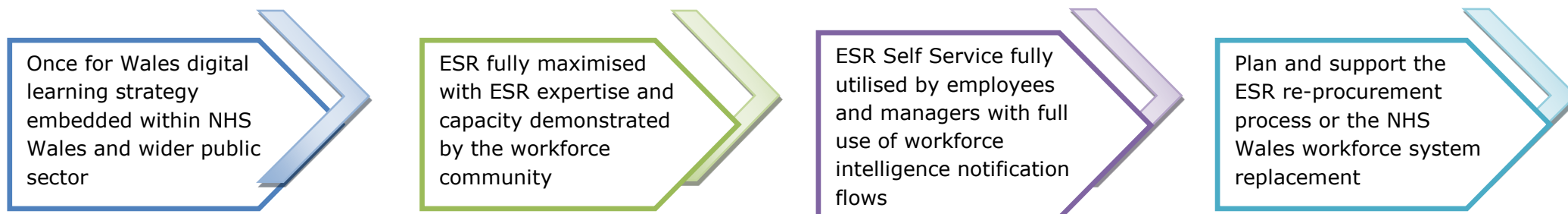
- Capacity of Digital Workforce Solutions Team to deliver full efficiencies and maximise all benefits available
- Lack of capacity, skills and prioritisation by organisations to implement ESR capability to defined timescales
- Lack of 'Once Wales' approach and centrally funded programme support
- Failure to secure NWIS support and resources to deliver the requirements defined from a Server and support perspective
- Competing NWSSP agendas and priorities
- Non engagement with national and local IT to maintain the required IT specification to maximise ESR capability

To achieve this we will need;**Resources**

- Fully resourced central Digital Workforce Solutions Team to lead and deliver ESR Hire to Retire outputs
- NHS Wales organisational compliance with IT minimum specifications (locally and nationally)
- Executive engagement and support from Workforce and finance Directors

We will continue to engage with;**Customers and Stakeholders**

- Finance and Workforce Directors
- NHS Wales organisations
- ESR DH Central Team / IBM
- NWIS
- ESR professional stakeholders

BEYOND 2021

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Full deployment of ESR enhanced capability in line with contractual requirements

Full deployment of ESR Self Service and portal

Proof of concept for ESR Occupational Health bi-directional interface and hosted solution pilot

Implementation of Manager Self Service via the internet with email workflow notifications fully enabled

Transition to ESR e-learning for NHS Wales employees

Migration to Moodle for Local authorities and public sector

IT dependencies reflected in NWIS IMTP and delivered in line with project timescales

Deliver the ESR Hire to Retire work programme within timescales

Continued development of e-learning development schedule in Welsh and English

Deployment of the ESR OH project deliverables to support the reduction in recruitment timescales

Scale up Learning@Wales enabling access to common and national e-learning content for other public sector organisations

Mature use of talent management and succession planning in ESR

All workforce transactions undertaken through ESR and interfacing technology (no paper)

Continued enhancement of ESR in line with requirements through established ESR networks and communities

Transactional processes undertaken (where relevant) using robotics to release efficiencies and enable added value where human interaction is required

Continued central programme support to 'maximise 'Once for Wales' solutions and ensure unnecessary variation is avoided

Support the ESR re-procurement or the relevant NHS Wales workforce system

A culture engaged in use of e solutions for workforce transactions, learning, managing talent and succession planning, revalidation etc.

Complete and accurate workforce data and mature use of data analysis

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator
100% deployment of ESR Self Service Portal across all NHS Wales organisations
100% deployment of ESR Employee and Manager Self Service across all NHS Wales organisations including internet access
100% of absence recorded by NHS Wales organisations in ESR within 11 days of the absence occurring
10% IT compliance with ESR MM-0100 IT specification (all NHS Wales organisations)
100% compliance with the ESR data quality and data standards work programme (all NHS Wales organisations)
85% compliance (minimum) with Core Skills & Training Framework Statutory and Mandatory level 1 competences (all NHS Wales organisations)
100% compliance with ESR Self Service for Personal Changes (all NHS Wales organisations)
Compliance with Digital Learning Solutions Help Desk KPI (95% of calls answered within 2 working days)
Full compliance by Digital Workforce Solutions team of quarterly service reviews with NHS Service and Local Government
95% compliance with auto Inter Authority Transfers (IAT) (all NHS Wales organisations)
No Direct Hires generated for new employees with agreed exceptions (all NHS Wales organisations)
95% of Occupational Health Clearances updated to Recruitment Services (TRAC) within 2 working days
75% of CSTF Level 1 competence requirements undertaken via e-learning within ESR (all NHS Wales organisations)
100% of appropriate CSTF competences accepted by L&D for the Applicant via the pre-IAT process (all NHS Wales organisations including medical and dental, Bank and local resources teams)
100% of applicants with ESR Self Service enabled via the internet for immediate access to CSTF e-learning (all NHS Wales organisations)

Employment Services

Delivering a prudent, efficient, cost-effective hire to retire modern service through our Trusted Partnership Approach 'Once for Wales'

WHO ARE WE AND WHAT DO WE DO?



Employment Services provides a range of hire to retire processing services to Health Boards and NHS Trusts across Wales. The service includes Recruitment, Payroll, Pensions, staff Expense Payments and Lease Car administration. These functions provide key influence to Health Bodies in realising their strategic workforce and patient agendas.

Employment Services has established strong collaboration with their stakeholders to deliver the best service through the provision of teams with specialist knowledge, skills and experience.



330 staff
6 service improvement
228 payroll services
91 recruitment services

Payroll Customer Service Team delivering **99.8%** responsiveness to calls

Recruitment Helpdesk **98%** responsiveness (increase of 200 calls per month)

Produce **1.4million** payslips

98% Student Bursary Applications processed in <20 days

99.88% payroll accuracy rate

3 days average time appt letters to managers

1.3 days average time adverts placed

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Structured annual SLA modernisation reviews held with individual Health Boards and Trusts • Monthly operational performance reviews • Quarterly performance reviews facilitating collaboration of service modernisation • Service Director member of Assistant Workforce Directors • Once for Wales driving innovation of systems at National and 3rd party provider level • Professional influence at Hire to Retire Performance work streams • Customer Pulse Surveys and workshops • Service development and modernisation through Shared Services Partnership Committee • National innovation sharing Efficiency Board • Advisory stakeholder to Welsh Government 	<ul style="list-style-type: none"> • Added value Hire to Retire service delivering safe recruitment, accurate payments, monitoring and pro-active management of activities • A service based on quality interactions through strong governance and innovation • Transparent service modernisation that sets out individual HB/T implementation plans • Facilitate recruitment and retention numbers through pro-active management • Professional guidance and tips in specialist areas • Transform transactional processes using technology and social media • Improved data quality delivering real-time information and evidence based change proposals • Once for Wales salary sacrifice 	<ul style="list-style-type: none"> • Cease all non-value-added activity to drive quicker and more effective processing • Pulse surveys to really understand what our customers and partners need • Driving modernisation through policy and technology enabled process redesign • An enablement team working directly with operational partners driving quality improvements • Consistent safer recruitment service for Primary Care Sector • Retention and quicker recruitment of Graduate Students in NHS Wales • IMTP Peer Reviews delivering customer needs
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Managed new Student Bursary Scheme to support commissioned training places • Agreed Student Streamlining Model to quickly match graduates with employment • Vacancy advertising for Primary Care sector • Supporting Welsh Government Train, Work, Live campaign increasing professional appointments • Strong governance across Hire to Retire transactional service Home Office Audit compliance • Reduced costs and risk through Certificate of Sponsorship management • Delivered new legislative compliance on behalf of HB/T on IR35 and Widening Access Schemes • Customer Service Excellence Compliance+ for implementation of TRAC • Added value Hire to Retire service that is safe, quick and efficient releasing clinical time to patient care 	<ul style="list-style-type: none"> • Advisory stakeholder for NHS Wales Pay Award implementation and T&C negotiations • We are a catalyst for change - Recognition as an exemplar service sharing best practice and experience hosting UK wide shared service visits • Forged strong relationships performing an advisory and professional influencing role to Welsh Government, Department of Health and 3rd part system providers • Reactive to local pressures and national programmes supporting delivery of service plans • Savings to HB/T through reduced cost per payslip and recruitment FTE • Frequent engagement capturing customer needs to inform service modernisation • Hub of excellence driving system development and procuring Once for Wales e.g. roster system • Capture and monitor performance against benefit outcomes as a result of service improvement deliverables 	<ul style="list-style-type: none"> • Remove non-value-added local process and policy variations • Improved use of data intelligence to assist HB/T achieve greater local service performance and quality • Extend Salary Sacrifice scheme to maximise next generation technology • Full Hire to Retire service delivery to Primary Care, Local Authorities and HEIW • Extend Certificate of Sponsorship service in line with Home Office Regulations • Increase customer engagement through workshops and road shows • Greater use of technology to provide customers with flexible communication • Once for Wales process and policy redesign resulting in financial re-investment delivered with pace

KEY PRIORITIES 2018-21

Value for Money

- Pro-active support to drive down recruitment timeline e.g. Occupational Health self-declaration and ESR interface
- Robust pay modelling to inform Welsh Government position on pay awards
- Once for Wales Certificate of Sponsorship savings to HEIW, HB/T and individual
- Robust Student Bursary recovery process
- Direct savings from robotic technology and Once for Wales redesign delivering re-investment opportunities to expand service
- Extract further benefit efficiencies through pro-active data analysis
- Create opportunities to drive down costs on contract negotiations
- Cost avoidance and efficiencies with increased time deployed to patient care through retention and matching of healthcare graduates with employment in NHS Wales
- Supporting Health Boards and Trusts delivery of the efficiency programme to maximise value

Our Customers

- Collaboration on a simplistic Hire to Retire cycle facilitating quicker movement of staff during winter pressures and clinical service redesign
- Supporting customers to maximise qualitative and financial benefits on Modernisation Outcome Tracker (MOT)
- Performance framework that measures the consistency of our service quality and customer experience
- Develop comprehensive customer journeys that empower our service users with improved interactive sign-posting 'what is required of them'
- Strengthen understanding of NHS pay bill with harmonisation of pay elements e.g. development bank and locum cap
- Ensure we are supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts e.g. Duty of Care, Salary Sacrifice Lease Cars, more staff development increasing service delivery through welsh language



Service Development

- Interactive and transparent Customer Portal to monitor activity flow and service performance
- Pro-active focus on supporting HB/T achieve 75-day reduction in recruitment timeline and fulfilment of Student Streamlining graduates with employment
- Eminent in our area of expertise influencing discussions and developing strong working solutions through stakeholder co-production e.g. alternative pathway for overseas recruitment
- Once for Wales opportunities e.g. single ESR Record and pre-employment checks Medical and Dental staff
- Development of our service to meet the needs of Primary Care and HEIW

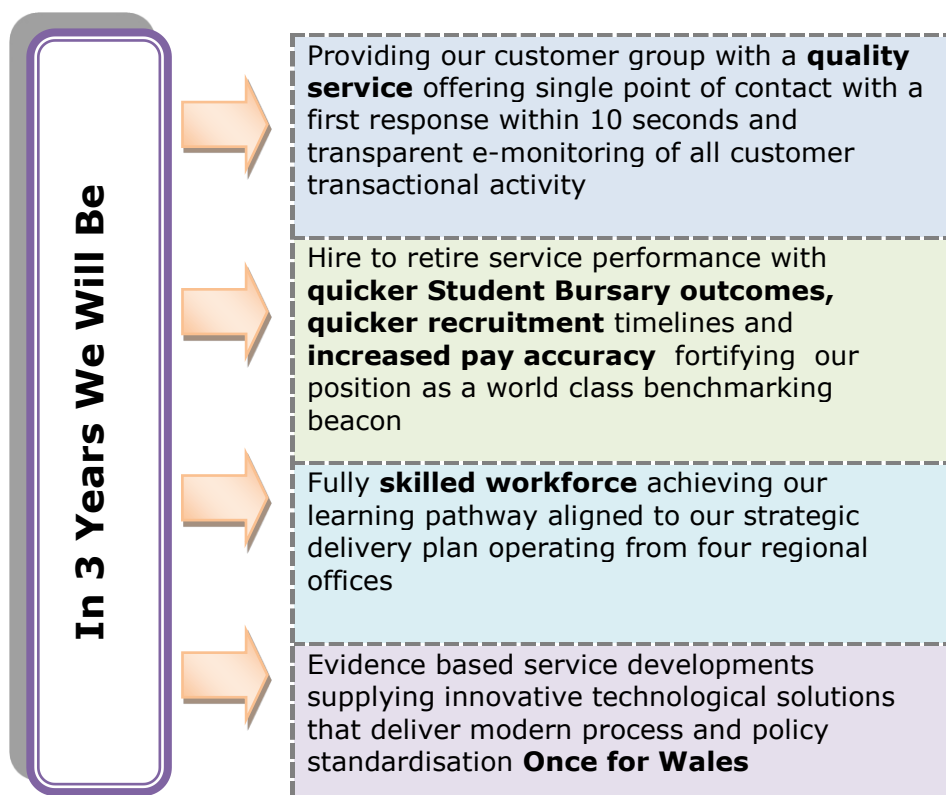
Our Staff

- Engaged workforce facilitated by staff group incorporating NWSSP Values to focus on enhancing staff morale and participation in service change
- Staff development programme, succession planning and exploration of apprenticeship role
- Quality assessment of PADR experience developed by Staff
- Problem solvers embracing NWSSP Core Values
- Strengthened team working identifying and extending talent across service boundaries
- Modernised team structure to equal service innovation calling for the development of new roles such as business analysts, pay modelling and customer first responders

Excellence

- Robust Hire to Retire service delivering on strong governance and legislative compliance; leading benchmark position
- Removal non-essential paper transactions
- Bespoke MOT to support HB/T achieve qualitative and financial savings
- Service decisions driven by quality data enhanced through technology automation
- IQT approach to planned service change utilising evidence based drivers, measurable outcomes effective KPI's
- Quality Service measured by improved EFQM assessment and full compliance Customer Service Excellence

OUR JOURNEY



The risks to achieving this could include;

- ESR Contract extension to Primary Care Services
- New levy for Certificates of Sponsorship £1kp.a.p.p
- Business continuity and loss of skilled staff as a result of cessation of excess travel and age profile
- Inability to achieve succession planning
- Capacity to redirect resource to support unpredictable peaks in activity and support to service redesign
- Commitment to reinvest technology and infrastructure in parallel with demand to improve services
- Lack of timely collaboration from customers
- Telephone infrastructure essential to Customer needs



PATH TO PRUDENT AND ONCE FOR WALES

Once for Wales:

Application of Student Bursary terms and conditions supported by efficient recovery process

Time released by streamlining hire to retire record for M&D Trainees to single lifetime record

Duty of Care deployment to ensure staff remain compliant with legislation to claim expenses

Savings and portability by extending Certificates of Sponsorship management for all M&D staff

Reducing Recruitment Timeline

Synchronised to Student Bursary commitment to work in NHS Wales increase conversion rate of students into posts through Student Streamlined process

Technology enabled hire process where pre-employment checks are complete prior to commencing work with no delay in payment

Collaborative working with primary care sector extending hire to retire service delivery and single platform for working in NHS Wales

Skilled Workforce:

Successful staff development programme delivering succession planning, quality PADR and apprenticeships

Quality Service:

Safe recruitment and employment of staff in accordance with employment best practice ensuring staff are safely and quickly recruited

Improved pay accuracy and standardisation

Interactive Customer Portal and efficiency tracker delivering transparency and improved performance

Redesigned processes based on improved data intelligence and robotic efficiencies

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Once for Wales: Train.Work.Live Single Point of Contact (SPOC)	Extend SPOC to AHP's Alternative pathway for overseas recruitment	Co-ordinated management of professionals seeking to train.work.live in wales	Feb 2018	NWSSP SPOC in partnership with Welsh Government and HB/T Leads	Successful registration with UK professional bodies Agreement on alternative pathway for overseas recruitment	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Increased appointments to posts via Train.Work.Live campaign							
Once for Wales: Pay Modelling	Informed decision on pay award and application through ESR	Data analysis and modelling award options and impact	May 2018	Director ES NHS Confederation WG	Variation to pay award	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Accurate application of Pay Award in ESR							
Once for Wales: Student Bursary	Support new bursary T&C's Recovery of bursary Alignment Student Streamlining	Development Bursary application system and recovery process	Jan 2018	Student Award Service Enablement Team WEDs	System development to support March 18 cohort Notification from Universities of students no longer training	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Recovery of all bursary payments in line with T&C's							
Once for Wales: Single lifetime record for medical and dental trainees	Removes duplication bi-annual peaks of transactional volume through use single ESR system	Identify single ESR entity develop transition plan using MOCP process	Nov 2018	Payroll Managers supported by enablement team	Availability of ESR MOCP process Volume and timeline critical	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Medical and Dental hire to retire managed through single lifetime record							

Once for Wales: Certificates of Sponsorship management – M&D	Once for Wales Portability Reduced costs to NHS Wales, HEIW and individual	Develop process, roles and responsibilities under memorandum of association	2018/19	Enablement Team in partnership with operational leads	Financial impact of £1,000 p.a. government levy per individual Timely change of circumstances from HB	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Portability of Certification and reduced costs							
Once for Wales: Duty of Care Compliance	All staff claiming expenses hold appropriate levels of certification	Deployment of expenses functionality across Wales	March 2019	Business Support Alder House	NWSSP Committee ratification Timely adoption by HB/T Financial investment in resource and functionality roll-out costs	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: 99.9% of staff claiming expenses holds vehicle licence, MOT, business insurance							
Once for Wales: End to End Payroll and Pension Process to Phase 1 GP Practices	Response to primary care request to provide service Generate capacity to redirect to patient care	Engagement GP Practices Scoping T&C variations Rollout of core hire to retire systems	Jun 2018	Payroll Managers Working in collaboration with Enablement Team Primary Care Dedicated T&FG	ESR extended contract to Primary Care Sector Outcome of T&C variations and adoption of NHS Wales hire to retire systems	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Payroll and pension process delivered within 99.8% accuracy							
Once for Wales: Single point advertise and on boarding	Standardisation policy and process Release Generate capacity to redirect to patient care	Engagement GP Practices Rollout of core hire to retire systems	Sept 2018	Recruitment senior Team working in collaboration with Enablement Team, Primary Care Dedicated T&FG	Current process variation and expectations of customer as result of introducing NHS Standard	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Efficient and safe recruitment process delivered within service KPI's							

Quality Service: Customer Excellence	Peer review of service delivery and quality by industry standard	Independent assessor	March 2018	Enablement Team	Availability of assessor	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	
Success will be: Awarded Customer Excellence Certification							
Quality Service: EFQM Excellence Model	Peer review of service delivery and quality by industry standard	Wales Quality Centre Assessment	Summer 2018	Employment Services Senior Team	Availability of assessor	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	
Success will be: Improved Assessment score							
Quality Service: Customer Support Point	Transparency, clear and consistent response times for customers	All Payroll calls CH via Team Scope transfer first point calls HDUHB Capital investment in telephony infrastructure	Jan 2018	Customer Support Team in partnership with E-enablement and Operational Team	Alignment of first response Funding for additional resource and upgrade of telephones to support call recording	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: First point of contact achieving 98% responsiveness to calls							
Quality Service: Improved Data Intelligence	Effective use of data intelligence to inform business redesign Realise financial savings aligned performance	Use core system data inform policy and process change eg Trac/EARL Data correlation Qlikview	Dec 2018	Enablement Team Operational Teams	Investment in role Implementation of data standards e-Enabled technology and portal development HB utilisation of ESR SS 3 rd party interfaces	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Performance platform that informs business redesign and financial savings							

Quality Service: 95% reduction in Paper Transactions	Remove manual paper processes to deliver data validation and timely submission all activity outside ESR MSS	Customer Portal development Regional scanning and document management	March 2019	Payroll Managers	Server capacity Funding for additional scanner licences Allocation of dedicated system developer	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: 95% of Transactional activity received electronically							
Quality Service: Process efficiencies through Robotics	Standardise and automate hire to retire processes Releasing and redirecting resource capacity to qualitative activities	Identify 3 priority processes suitable for automation Engage stakeholders Programme robotics	March 2019	Enablement Team working collaboratively with operational teams external stakeholders and corporate function	New skill set – effective training and capacity to support roll-out Availability of capital funding	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved quality, quicker processing routine tasks							
Quality Service: Improved Payroll Accuracy and Assurance	Poor quality and late transactions Requirement additional manual or over payment unnecessary duplication and rework	Development customer portal removing paper submissions Internal Audit assessment	March 2019	Enablement Team working collaboratively with operational teams external stakeholders and corporate function	Dedicated developer resource	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Sustained payroll accuracy 99.8% - Substantial Assurance							
Quality Service: Customer Modernisation Outcome Tracker	Adoption of service change programme by HB/T at different rate Missed opportunities and financial savings	Individual assessment of HB/T progress on modernisation change programme	April 18	Developed by ES Presented at performance reviews		Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: 95% adoption of modernisation change programme							
Quality Service:	Duplication Release time clinical/departmental resource	e-Payslips NWSSP Extract references	March 18 April 18 April 18	HB/T Employment Services	Not supported by NIP Commitment by local teams to adopt	Value for Money	✓
						Customers	✓
						Excellence	✓

Cease non-added-value activity	Wellbeing-Future Generation Act	Once for Wales manual Payments Policy	Jan 18			Staff	✓
		Remove CSD from Contract	Mar 18			Service Development	✓
		Electronic WLI payments	Jan 18				
		Stop half pay letters	Jan 18				
		NWSSP retain appointment files	Apr 18				
Portability of O/H							
Success will be: All non-added-value activity ceased							
Reducing Recruitment Timeline: Student Streamlining	Retention of Healthcare Graduates in NHS Wales Retention of Healthcare Graduates in NHS Wales Avoid unnecessary duplication - associated costs quicker start times to clinical areas	Collaborative working with HB/T and education sector	October 2018	E-enablement team working in collaboration with recruitment senior team and dedicated multi-disciplinary T&FG	System development High volume Lack of collaboration from HB/T	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Financial savings and student benefits as result of match allocation							
Reduce Recruitment Timeline: Mandate DBS Update Service	Remove duplication and cost of multiple DBS checks 60 day refresh update Graduates already subscribe Negate 3 year check requirement DBS Capita contract expiry May 18	Policy decision to mandate subscription Change safer recruitment standard	April 18	Head of Recruitment in consultation with AWOD	Reliant on NHS Wales Policy decision to mandate Requirement to procure replacement Capital DBS contract May 18	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Financial savings and quicker recruitment							

Reduce Recruitment Timeline: Occupational Health Self-Declaration for applicants	Efficient processing of health clearance Quicker start dates resulting in increased operational time	Engagement Occupational Health clinicians Development of Trac and e-form ESR Interface	Mar 2018	Co-design with Occupational Health and workforce leads	Minimal collaboration from HB/T Enablement capacity to develop e-form Timeline for development of recruitment Trac system	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Quicker Occupational Health checks							
Reducing Recruitment Timeline: 75 day process efficiencies	Local steps in process exceed agreed performance levels Cost of agency and locum expenditure WOD work stream objective	Maximise technology Appointing Manager Workshops KPI focus on hot spot areas Pro-active intervention by NWSSP driving outcomes	June 18	Head of Recruitment Appointing manager AWOD	Commitment of appointing managers to achieve performance targets Re-direct NWSSP recruitment teams from non-value added tasks	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	
Success will be: Options Appraisal and Recommendations for consideration by ESMT							
Reducing Recruitment Timeline: Recruiting Manager Efficiencies Pilot BCUHB	Work with BCUHB to reduce time to hire Quicker turnaround by appointing manager Reduce agency and bank spend Continuity of service through quicker recruitment	Pro-active intervention by NWSSP driving outcomes Maximise use of Trac functionality	Sept 18	Head of Recruitment Appointing managers BCUHB	BCUHB funding 3FTE B3 for Pilot proof of concept Commitment of appointing managers to achieve performance targets	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Options Appraisal and Recommendations for consideration by ESMT							
Skilled Workforce: Exploration of Apprenticeship Opportunities	Availability of applicants meeting Person Specifications Develop staff with core values	Establish requirements of apprenticeship Develop options appraisal make recommendation	March 2018	Enablement Team working collaboratively with Workforce & OD and local educational bodies	NHS Wales Policy Impact apprenticeship levy calculation May 2017	Value for Money	✓
						Customers	✓
						Excellence	✓

	Flexibility across service Widening employment opportunities in community	and draft JD's				Staff	✓
						Service Development	
Success will be: Options Appraisal and Recommendations for consideration by ESMT							
Skilled Workforce: Staff Development Programme	Response to Staff Survey and People Skills Survey	HCLM Jun 18 Launch Jan 18 Evaluation Dec 18	Dec 2018	Asst Director ES Staff Focus Group Head of Learning & Development	Availability of training resource Release of operational team to attend training	Value for Money	✓
	Support PADR/PDP process					Customers	✓
	Workforce plan and succession planning					Excellence	✓
						Staff	✓
						Service Development	
Success will be: Programme launch and evaluation							
Skilled Workforce: Staff Survey Action Plan	Response to Staff Survey	Staff Focus Group Pulse Survey Identify in-house subject matter experts Develop quality PADR tools Customer Pulse Survey results	March 2018	Staff Focus Group Asst Director ES Head of Learning & Development		Value for Money	✓
	Improved engagement/Communication					Customers	✓
	Quality PADR process					Excellence	✓
						Staff	✓
						Service Development	
Success will be: Action Plan complete							
Skilled Workforce: Payroll Restructure	Standardise process and modernise service	Understand local variations, restrictions Develop new job roles and structure	2018	Enablement Team Payroll Managers Staff Representative	Skill mix to support regional model	Value for Money	✓
	Skill mix and structure inconsistencies					Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Payroll Restructure complete							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Student Streamlining: 1FTE B4 (NM & GP Trainee) • Deliver hire to retire service to 10,000 staff primary care sector: Recruitment - 1FTE B3 (F/T to Perm) Payroll – 2FTE B4 • Customer Contact Point: Inconsistencies grade in single model (B2/3) Team Leader 1FTE B6 • Quality/Data Analyst: 1FTE B6 • Duty of Care: 1FTE B3 (F/T to Perm) 1 FTE B4 (F/T to Perm) • Certificate of Sponsorship: 1FTE B4/5 • TWL SPOC: 1FTE B6 (WG) • HEIW: 1FTE B4 Payroll; 1FTE B3 Recruitment • Salary Sacrifice: 1FTE B4 • Pay Modelling: 1FTE B6; 1FTE B8b (WG) • Training requirements: Customer Services; Lean Techniques IQT Silver and Gold, Telephone Conflict Training, HCL • Payroll Service Review (reinvestment opportunities)exploration of apprenticeship role 	<ul style="list-style-type: none"> • Budget setting to support workforce expansion • Training costs for staff over training budget • Business continuity review including expiry of capita contract e-DBS service and Software Europe e-expenses (May 19) • Additional system set-up and annual costs in region of £12,000p.a. per primary care cluster for recruitment through Trac • Additional system set-up and annual costs in region of £12,000p.a. to support Trac and Expenses for HEIW • Introduction of £1,000 p.a. government levy per individual for Certificate of Sponsorships • £240,550 Capital requirement to support: <ul style="list-style-type: none"> • Document Management (£36,000) • Student Streamlining (£50,000) • Customer Point of Contact and Portal with process automation through technology (£154,550) • Once for Wales procurement e-Rostering system 	<ul style="list-style-type: none"> • Extension of ESR IBM contract to primary care services • Dedicated developer to deliver agile track able transactional processes via web-based Customer Portal supported by 'apps', interactive FAQ's and web-chat functionality • Agile working through external development of social media, 'apps' and web-based forms • Evaluation of e-solution to support matching of Graduates to employment opportunities – inform permanent solution • Expertise and developer access to deliver process modernisation through Robotics • Procured project management software specification meets requirements to fully embed all projects • NWSSP telephone upgrade to support call recording and infrastructure upgrade NWRO and SWRO – Licensing to support model • Move to laptops to support agile working and business continuity
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • Unknown effects of EU exit on legislation and operational impact • Effective NHS Wales Student Bursary recovery and appeal process • Evaluation of Student Streamlining end to end process and matching algorithm including adaptability of model to GP Trainees • Adoption of recruitment timeline efficiencies by all stakeholders • Alternative recruitment process to support Overseas appointments • Uncertainty of strategic requirement to support Single Bank e.g. increased demand for weekly pay and annualised hours • Change management methodology aligned to NWSSP Programme Management Office (PMO) • Process redesign to support 'Once for Wales' Certificate of Sponsorship; Single Bank; Salary Sacrifice and Duty of Care 	<ul style="list-style-type: none"> • Welsh Government funding to support Train.Work.Live campaigns B6 • Primary care terms and conditions and long term considerations against national NHS terms • Timescales and operational support to TUPE transfers e.g. HIEW • Sufficient allocation of capital funding to advance service change through technology • Collaboration of HB/T to adopt innovation in a timely manner • Impact of legislative changes e.g. bursary and government levy being applied to certificate of sponsorship • Compatibility of telephone infrastructure upgrade with Contact Centre Software • Uptake of Welsh Language functionality for Applicants • NWIS: NHSJ 3rd party provider for Primary Care; Core operations 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Once for Wales: Streamlining GP Trainees	Avoid unnecessary duplication - associated costs quicker start times to primary care	Adopt NWSSP Streamlining Strategy to GP Trainee	Aug 2019	WF&OD E-Enablement Team	System development High volume Lack of collaboration from HB/Trusts	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Reaching World Class Status for Hire to Retire Measures							
Once for Wales: Payroll and Pension Process to all practices Primary Care Sector	Standardisation policy and process Generate capacity to redirect teams to patient care	Engagement GP Practices Rollout of core hire to retire systems	Mar 2020	Enablement Team Working in collaboration with Payroll Managers, Primary Care Dedicated T&FG	Current process variation and expectations of customer as result of introducing NHS Standard	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Efficient payroll and pension process delivered within 99.8% pay accuracy							
Once for Wales: Certificates of Sponsorship management – non M&D	Once for Wales Portability Reduced costs to NHS Wales and individual	Develop process, roles and responsibilities under memorandum of association	March 2020	Enablement Team in partnership with operational leads	Financial impact of £1,000 p.a. government levy per individual Timely change of circumstances from HB Home Office Audit	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Portability of Certification and reduced costs							
Quality Service: Pay Element Review	Improved data governance of all elements NHS pay bill	Standardisation of pay elements across all organisations Use of Robotics to apply new standard Once for Wales	Mar 2020	Payroll Managers AWOD NHS Confederation	NHS Wales agreement to streamline and standardise elements Capacity of automation available to service to support transition	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Robust pay bill data based on standard definitions and application of pay elements							
Quality Service		Identify core hire to retire	Dec 2020	Enablement Team working		Value for Money	✓
						Customers	✓

Maximise Robotics opportunities	Standardise and automate hire to retire processes Releasing and redirecting resource capacity to qualitative activities	processes suitable for automation Engage stakeholders Develop detailed process maps		collaboratively with operational teams and external stakeholders	New skill set – effective training and capacity to support roll-out Availability of capital funding	Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved quality, quicker processing routine tasks							
Quality Service: Internal Audit Standard Terms of Reference assessing Hire to Retire Process	Demonstrate Substantial Assurance Strong Governance controls	Review 2017 terms of reference Assessment of 2017 service redesign	April 2019	Internal Audit ESMT	Development of e-processes Timely submissions by operational managers	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
					Service Development	✓	
Success will be: Substantial Assurance across Payroll Teams							
Quality Service: Customer Excellence	Peer review of service delivery and quality by industry standard	Independent assessor	March 2019	Enablement Team	Availability of assessor	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
							Service Development
Success will be: Awarded Customer Excellence Certification							
Quality Service: EFQM Excellence Model	Peer review of service delivery and quality by industry standard	Wales Quality Centre Assessment	Summer 2019	Employment Services Senior Team	Availability of assessor	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
							Service Development
Success will be: Improved Assessment score							
Reducing Recruitment Timeline: End to End Recruitment Process to Primary Care Sector	Consistency of approach and compliance NHS Safer Recruitment Standards	Engagement GP Practices Rollout of core hire to retire systems	Mar 2020	Enablement Team Working in collaboration with Recruitment senior Team, Primary Care Dedicated T&FG	Current process variation and expectations of customer as result of introducing NHS Standard	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
							Service Development

Success will be: Efficient and safe recruitment process delivered within service KPI's							
Skilled Workforce: Succession planning	Sustainable skilled workforce Well-being of Future Generations Act	Educational links to provide work experience and summer placements Staff Training Programme	Jan 2019	E-Enablement Team	Engagement of educational providers Uptake	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Annual appointment to placement programme							
Skilled Workforce: Workforce alignment to leadership model with full use of ESR Talent Management	Evaluation and modernisation of Staff Training Programme Understand skills and training needs Support succession planning	Training needs analysis Full roll-out of ESR Talent Management	Sep 2019	Enablement Team	Workforce capacity to deliver ongoing HCL programme	Value for Money	
						Customers	
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Full utilisation of ESR Talent Management							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Deliver hire to retire service to 10,000 staff primary care sector: Recruitment – 1FTE B3 WG single platform NHSJ (early demand require additional resource in 18/19) Payroll - 1FTE B5; 4FTE B4 Dedicated lead for CoS 1FTE B4 Expand service improvement roles within operational teams Role redesign supporting process automation Apprenticeship Role and work experience programme Training requirements include; Lean Techniques, IQT Silver and Gold, Telephone Conflict Training in-year appointments 2 nd Healthcare Leadership cohort	<ul style="list-style-type: none"> £86k capital to deliver e-platforms and process automation Continued access to Robotics software/server, developer training and subject matter expert 	<ul style="list-style-type: none"> Maintenance and ongoing development of payroll performance module Internal development of e-training platforms through ESR Web-enabled forms managing activity outside of ESR Self Service through customer portal and aps Collaborative working with Department of Health scoping NHS Jobs Platform requirements Operational system support to core systems and software upgrades
Processes	Dependencies	
<ul style="list-style-type: none"> Cost effective hire to retire processes comply with legislation changes affected by European Union exit Continue to extend service across health and social sectors Document management that supports electronic personal files and strong document management governance 	<ul style="list-style-type: none"> Access to dedicated developer time to support web-enabled forms and customer portal Ongoing investment in technology to deliver process automation Upgrade to telecommunications to support regional customer contact point 	

WHAT WILL WE DELIVER IN 2020-21?

✓ Payroll service delivery accuracy rate of 99.9%
✓ Impact Assessment of exiting European Union
✓ Customer Service Strategy delivering a customer focused service
✓ Paper-lite transactional processes to support hire to retire activities
✓ Professional, highly skilled workforce aligned to service improvement
✓ Continuous service improvements to meet internationally recognised management standards

The risks to achieving this could include;

- Pay awards in Wales and England
- True partnership approach by stakeholders
- Transparency of future legislative changes with direct impact on hire to retire service
- Detailed forecasting and workforce planning by HB to inform activity volumes

To achieve this we will need;

Resources

Reinvestment of monies to deliver continued process redesign through technologies and IT platforms
Continuous development of workforce skills e.g. data analysts
Co-operation of local resource to apply agreed process and performance measures

We will continue to engage with;

Customers and Stakeholders

Continued professional influence and engagement with core workforce system providers, Welsh Government, HMRC, Pension Agency, Health and social care sector

BEYOND 2021



KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

NHS pay bill capped locum/bank elements and Pay Modelling
Application Student Bursary
Student Streamlining 1st Cohort
TWL Overseas Pathway
Customer Service Contact Centre for NHS Wales
Develop Customer Portal
Reduced Recruitment Timeline (74d)
Occupational Health Self Declaration
Mandate e-DBS Update Service
Evaluation Duty of Care Pilot
Certificates of Sponsorship M&D
First phase service to Primary Care
Development customer
Modernisation Outcome Tracker
Full implementation of NWSSP
Leadership Model
CSE and EFQM Excellence Model

Sustained payroll accuracy rate of 99.8%
Trainee Medical Staff paid by single VPD
Roll-out of Duty of Care Model
95% reduction of paper transactions to payroll
Robotic development of 3 priority processes
GP Trainee Streamlining
Extend service delivery to HEIW
Remove non-added-value activity
Evaluation Staff Development Programme
2018 Pulse Surveys
Deliver Apprenticeship and succession plans
Ongoing harmonisation and development of paper-lite payroll processes and robotics
CSE and EFQM Excellence Model

Payroll service delivery accuracy rate of 99.9%
Internal Audit assessment achieve Substantial Assurance
Full review of NHS Wales Pay bill and standardisation of elements
Full roll-out services to Primary Care
Certificates of Sponsorship to non M&D staff
Customer Service Strategy delivering a customer focused service
Professional, highly skilled workforce aligned to service improvement
Robust benchmarking demonstrating sustained reductions in key business performance areas
Continued transformation through robotics
Monitoring of workforce alignment to leadership model with full use of ESR Talent Management
CSE and EFQM Excellence Model

Payroll service delivery accuracy rate of 99.9%
Impact Assessment of exiting European Union
Customer Service Strategy delivering a customer focused service
Paper-lite transactional processes to support hire to retire activities
Professional, highly skilled workforce aligned to service improvement
Continuous service improvements to meet internationally recognised management standards
Maximise transformation through robotics
Innovative Policy development driven by evidence based intelligence
CSE and EFQM Excellence Model

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	Current 2017-18	2018-19 Target	2019 -20 Target	2020-2021 Target
KPI 1: Time to Place Advert (2 working days)*	1.3	2	2	2
KPI 2: Send Applications to Manager (2 working days)	1.7	1.6	1.6	1
KPI 3: Send Conditional Offer Letter (5 working days)	3	5	4	3
KPI 4: Send Unconditional Offer Letter (2 working days)	3.3	2	2	2
KPI 5: NWSSP Pay Processing Accuracy	99.88%	99.92%	99.94%	99.97%
KPI 6: Reduce Manual Payments Produced (impact on accuracy)	99.95%	99.97%	99.98%	99.99%
KPI 7: Reduce Over Payments Produced (impact on accuracy)	99.95%	99.97%	99.98%	99.99%
KPI 8: Customer Calls Answered – Recruitment	95%	97.5%	98.5%	98.5%
KPI 9: Customer Calls Answered – Payroll	90.4%	95%	97.5%	98.5%
Health Board / Trust Indicators:				
KPI 10: Time to Approve Vacancy (10 working days)	12.7	10	8	6
KPI 11: Time to Shortlist Applicants (3 working days)	9.1	8	7	6
KPI 12: Time to Notify of Interview Outcome (3 working days)	4.6	4	3	2
KPI 13: HB/T Pay Processing Accuracy	99.5%	99.8%	99.94%	99.97%
KPI 14: Reduce Manual Payments Produced (impact on accuracy)	99.74%	99.83%	99.91%	99.97%
KPI 15: Reduce Over Payments Produced (impact on accuracy)	99.82%	99.86%	99.91%	99.97%

*Intention to retain performance during transition of extending service delivery into primary care sector

GP Speciality Registrar Lead Employer

An innovative service managing the employment of all GP trainees in Wales, providing a consistent employment arrangement for the duration of the GP's training. The service plays a fundamental role in the All Wales Primary Care agenda

WHO ARE WE AND WHAT DO WE DO?



Provides a dedicated HR resource to support the GP Trainees and their host organisations.

The Medical Workforce team ensure that all matters related to the GP trainees' employment are managed and supported effectively. The team works collaboratively with all Health Boards and GP Training Practices in Wales and have a close working relationship with the Wales Deanery who continue to provide the training for Trainees.



3 staff

435
GP trainees
employed in
Wales


12
GP Schemes in
Wales

156
GP Practices

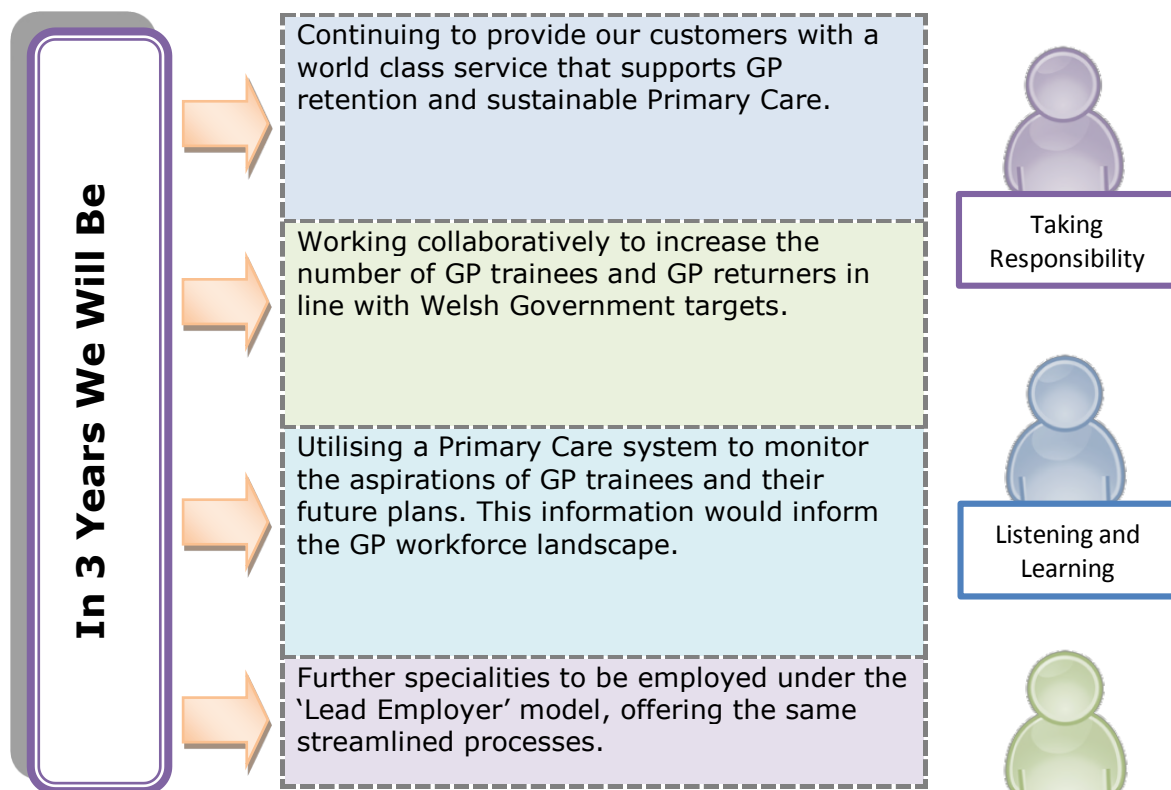
ESR Self Service
successfully
implemented for
all GP Trainees

How and who have we engaged with to develop our IMTP?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Structured annual SLA modernisation reviews held with individual Health Boards and Trusts • Monthly GP Executive Group • All Wales Medical Workforce Managers • Bi Annual GP School Board • Practice Managers meetings • Programme Directors meetings • Wales Deanery • Welsh Government • Directors of Primary Care • Development of Service Level Agreements with Wales Deanery and GP practices 	<ul style="list-style-type: none"> • Primary Care data identifying transition from trainee to GP • Robust sickness management process • Wales as place of choice for training and working • Provision of best in class expert workforce advice • Improved recruitment and retention to GPSTR programme and subsequently qualified GPs • Pro-active Single Point of contact mechanisms to support the Wales Offer and national marketing campaign • Seamless and efficient workforce processes • Responsive customer service 	<ul style="list-style-type: none"> • Engagement with all GP trainees • Continual engagement with your partners such as the Wales Deanery and host organisations • Manage and monitor the GP incentives within the Wales Offer • Sickness monitoring system • Working in partnership with Deanery and Welsh Government to deliver agreed service levels
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Continued indemnity savings • Inductees and returners implemented • Correct management of doctor's sickness in line with the All Wales sickness policy • ESR Self Service successfully implemented for all GP Trainees • Removal of paper payslips with all GP Trainees now receiving electronic payslips • Improved GPSTR fill rates to 91% following success of the Single Point of Contact (SPOC) for employment queries • Streamlining of Expense claiming process, including the introduction of a paperless system • Enhanced Occupational health interface to streamline rotations between placements • Development of the incentive agreement, Terms & Conditions, repayment guidelines and FAQs in conjunction with Welsh Government, along with providing administrative support for incentive payments • 	<ul style="list-style-type: none"> • Response times in dealing with any queries submitted through Action Point • Workforce data for GP trainees • Frequent engagement with our partners to ensure continuous improvement in the services we provide • Minimising the use of direct hires by utilising the interface between the Wales Deanery Intrepid database and ESR • 100% compliance for payroll enrolment by start date • Provide high-quality HR advice • Provide support for the Single Point of Contact in association with the 'Train.Work.Live' campaign • Monitoring of incentive payments and ensuring trainees adhere to the incentive contract • Use of Contact point as the single point of contact for the GPSTR SLE team • Facilitation of 4 year programme implementation for Global Health Trainees 	<ul style="list-style-type: none"> • Lead employer model for other medical specialities • Assist in improving GP recruitment through promotion of the 'Train.Work.Live' campaign • Study leave processes • Introduction of Placement feedback questionnaires • Facilitate use of ESR Manager Self Service • Enhanced sickness management • Streamlining of Core Statutory and Mandatory Training requirements • Informative quarterly newsletters • Landscaping of future career intentions to inform GP workforce planning • Support/ training to Health boards/ Practice managers in managing sickness absence at informal stages of the policy

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<ul style="list-style-type: none"> • Robust sickness management system for GP trainees in line with the All Wales Sickness Policy • Responsive customer service based on best practice and knowledge sharing from other “lead employer” providers • Supporting Health Boards and Trusts delivery of the efficiency programme to maximise value • Ensure employment opportunities are distributed among GP Trainees to improve GP Trainee retention in Wales 	<ul style="list-style-type: none"> • The responsibility of GP Inductee and returner through a terms of engagement relationship • Increasing the number of GP trainees employed by NWSSP through employing those trainees who have chosen the GP route following their 2-year Broad Based Training • Continual engagement with the GP Executive Group and GP School Board. Direct participation in any changes that would impact on the GP trainee’s journey • Engagement with Practice Managers at workshops to ensure a continually improved service is offered • Ensure GP Inductions meet the needs of the trainees • Excellent support for customers to ensure delivery of services in line with the Well-being of Future Generations and Social Care (Wales) Acts • Placement feedback to enhance available data and improve trainee experience 	
Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> • Data capture to assist in the improvement of GP training and to increase the GP workforce capacity • Exploring further opportunities for lead employer arrangement within Primary and Secondary Care settings • Partnership working with current GP trainees and Customers to continue development and improvement of current service provision. 	<ul style="list-style-type: none"> • Stabilisation of knowledgeable Medical Workforce team to maintain a professional and expert service • An engaged and motivated Medical Workforce team with NWSSP values embedded into their daily routine • Share best practice, skills and knowledge across the Workforce team. 	<ul style="list-style-type: none"> • Sharing of ‘Lead Employer’ experience both within and outside of Health Education across the UK • Streamlining of Core Skills Training Framework

OUR JOURNEY



The risks to achieving this could include;

- Stabilisation of Medical Workforce team
- Difficulties in appointing in GP recruitment rounds, particularly in the more rural training areas
- Availability of Primary Care and GP Trainee data
- Possible resistance from Health Boards on further Lead Employer arrangements

PATH TO PRUDENT AND ONCE FOR WALES

- Recruitment processes compliant with legislative and best practice guidelines ensuring GP trainees are safely and quickly recruited
- Development of GP trainee exit documentation to establish views on SLE service and consider improvements that can be adopted
- Integral member of the GP Executive Group and GP School Board to ensure continued awareness of the changes in GP training
- Streamlining of all expenses including travel and study, enabling a paperless system.
- Consistent application of Medical and Dental Terms and Conditions of service providing NHS Wales with consistent workforce data.
- Partnership working with key partners to support the Primary Care agenda by delivering health services with Primary Care at its core.
- Central role in the Welsh Government Medical Recruitment campaign
- Extend the lead employer model to other medical specialities

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/ Limitations	Strategic Objective	
Stabilisation of the Medical Workforce team	Maintenance of expert knowledge within the Medical Workforce team to ensure quality of service provided is continued	Recruitment of Medical Workforce Administrator Sharing of knowledge among team Transition operational HR issues to the wider Workforce Team	April 2018	Senior Medical Workforce Manager	Experience in Medical workforce Decrease in quality of service Decrease in customer satisfaction	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Stable Medical Workforce team							
Transfer of Pre-employment checks to Employment Services within NWSSP	Function better suited to skill set of Employment Services	Partnership working with Employment Services to facilitate movement of functions	March 2019	SLE team and Employment Services Service Improvement team	GP Trainee related queries sent to personal email addresses within the Medical Workforce team Employment Services resources	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Successful transfer of Pre-employment process to Employment Services							
Full Statutory and Mandatory training compliance	Ensure all GP trainees are compliant with training requirements	Streamlining of inductions to determine Core Skills Training Framework exemptions	March 2019	SLE team	Timely compliance by GP trainees	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Full Statutory and Mandatory training compliance							
Demonstrating the uptake in GP training and recruitment following ongoing recruitment campaign system to monitor the	To measure the success of the recruitment campaign	Comparing the single point of contact details to those successfully appointed into GP training schemes Demonstrate the number of training posts filled	March and September 2018	SLE team	Recruitment to training schemes Number applying for GP Trainee Scheme Number of Doctors meeting the pre-requisite criteria	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓

payment of GP incentives							
Success will be: Increasing GP medical recruitment following the National recruitment campaign							
Introduction of quarterly GP Trainee/ Manager specific newsletter	To provide updates, contact details and FAQs to both trainees and managers	Quarterly newsletters circulated via email	April 2018	SLE team	Availability of SLE team to prepare newsletters	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	
Success will be: Introduction of informative quarterly newsletters							
Introduction of ESR Manager Self Service (MSS) to GP trainee managers	Enable input of all absences (sickness, annual leave etc) at time of occurrence	Manager set up on ESR if required (GP practice) Training for managers on MSS Understanding of best practice from across UK	March 2019	SLE team, WFIS team and GP trainee managers	Resistance from managers to use of MSS Lengthy rollout resulting in continued use of current sickness reporting mechanism	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Successful implementation of MSS and use by all managers							
Introduction of surveys to GP trainees to review placements and capture future plans	Improve availability of primary care data to assist with workforce planning Understanding career intentions following the completion of GP speciality training Placement review to highlight any placement specific issues	Completion of exit survey prior to completion of GPST Year 3 Completion of placement review survey following placement completion	6 months prior to CCT date Within 1 month of completion of placement March 2019	SLE team	Engagement of GP trainees	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Full understanding of the landscape for newly qualified GP's in Wales							
Developing relationships with newly created Health Education	Newly created training body, which includes Wales Deanery, key to GP trainee scheme	Continual liaison with the Medical training body	March 2019	SLE Team	Timescale to introduce newly created body	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓

and Improvement Wales							
Success will be: Good working relationship with Health Education and Improvement Wales							
Maximisation of ESR-Intrepid interface	Streamline daily processes	Understand ability of ESR	March 2019	SLE Team		Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Streamlining of daily processes through maximisation of technology							
Provide support to host organisations in managing sickness absence at the informal stages of the policy	Improve and enhance the management of sickness absence	Provide training and advice to Practice Managers and health boards	Provide training and advice to Practice Managers and health boards	SLE Team	Engagement of host organisations	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓

To achieve this we will need:

Workforce	Finance & Capital	IT
Team structure will remain consistent	Employment of 1 FTE Band 3 Medical Workforce Administrator	Increase in use of ESR (Manager Self Service)
Processes	Dependencies – Internal and External	
None	Employment Services Workforce Information Services (WFIS) GP Trainees GP Trainee managers HEIW Wales Deanery	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Increase number of GP trainees	To increase the number of practicing qualified GPs within Wales	Utilise the same Lead Employer model Assist in the promotion of the GP training scheme	March 2020	SLE team and Wales Deanery	Number applying for GP Trainee Scheme Number of Doctors meeting the pre-requisite criteria	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: An increase in number of Doctors choosing GP training following Broad Based Training							
Increase the number of GP returners	To assist with the GP workforce	Utilising the Lead Employer model Assist in the promotion of Return to Practice	March 2020	SLE team and Wales Deanery	Number applying for GP returner schemes Numbers passing the exams and assimilations to progress	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: An increase in number of Doctors returning to GP practice in Wales							
Occupational Health interface for medical students	Streamline information between University and Health Board	Co-ordinated working with Workforce Information teams and Universities	June 2019	SLE team Workforce Information team	Commitment from University and functionality between systems	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Fully functioning Occupational Health interface with Universities							
Continued streamlining of processes	To ensure the continued provision of a quality service to customers	Update of processes to minimise low value adding steps	March 2020	SLE team	Disruptions to SLE team	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Minimisation of low value adding steps in routine processes							

To achieve this we will need:

Workforce	Finance & Capital	IT
structure will remain consistent	None	Working with external bodies' systems such as Universities
Processes	Dependencies	
None	Wales Deanery Universities HEIW	

WHAT WILL WE DELIVER IN 2020-21?

Increasing numbers of GP trainees in line with Welsh Government targets
Full interface functionality for workforce information
Explore use of additional lead employer services
Statutory and Mandatory training fully reported

The risks to achieving this could include;

- The numbers of potential applicants for General Practice training
- Potential future changes to the Medical and Dental contract in Wales
- Possible objections to additional Lead Employment arrangements

To achieve this we will need;

Resources

Team structure will remain consistent

We will continue to engage with;

Customers and Stakeholders

Continued engagement with Wales Deanery, Health Education and Improvement Wales, Health Boards, Primary Care, Universities and BMA/GPC Wales is critical

BEYOND 2021

Additional lead employer arrangements explored and fully embedded into service

Continual increase in number of GP training posts filled

Continual increase in number of GP returners

Continual review and streamlining of processes

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Single point of contact for Welsh Government national recruitment campaign

Successful roll out of ESR Employee Self Service to all GP Trainees

Introduction of paperless expense claims

Enhanced Occupational health interface between rotations

Improved GPSTR fill rates to 91%

Removal of paper payslips and introduction of electronic payslips

Facilitation of 4-year programme for Global Health Trainees

Development of the incentive agreement

Transfer of SPOC to Employment Services

Understanding GP landscape by capturing the future plans of GP Trainees

Full compliance of GP Trainees with Statutory and Mandatory training

Developing relationships with Health Education and Improvement Wales

Transfer Pre Employment Checks to Employment Services

Introduction of Placement review surveys

Introduction of Manager Self Service

Discussions on future lead employer arrangements

Increase in GP Speciality training scheme fill rate

Increase in potential GP workforce by engaging more GP returners

Full use of Manager Self Service

Occupational Health Interface for medical students

Increase in number of GP's in the workforce

Partnership working with Health Education and Improvement Wales on GP workforce landscape

Additional lead employer arrangements explored and embedded into service.

2017/18

2018/19

2019/20

2020/21

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	Current 2017-18	2018-19 Target	2019-20 Target	2020-21 Target
100% DBS Compliance	100%	100%	100%	100%
100% compliance rate for enrolment on payroll by start date	100%	100%	100%	100%
100% compliance on pre-employment checks	100%	100%	100%	100%
Distribution of contracts of employment within 8 weeks of commencement	100%	100%	100%	100%
Compliance in all stat and mandatory training appropriate to the GP trainees	6.37%	85%	85%	85%

Health Courier Service

To provide a world class leading logistics service for NHS Wales incorporating Pathology Services, Blood Services, Internal Mail, Medical Records and Hospital Supplies with excellent governance, traceability and reporting.

WHO ARE WE AND WHAT DO WE DO?



Supports front line services across Wales, operating where required 24 hours a day, 365 days a year providing vital Clinical Logistical Support services for Primary and Unscheduled Care in Hospitals, Clinics, Surgeries, GP Practices, Pharmacies and Schools.

We transport specimens, pathology blood / blood products, whole blood, platelets, vital medicines, CSSD, Clinical Staff, Medical Records, Linen and a wide variety of other non- patient items in routine, urgent and emergency (Blue Light) conditions.



137 staff
16 Sites

In excess of **8m**
Items of
Pathology a Year


In Excess of **7m**
items of Internal
Mail and Medical
Records

120
vehicles

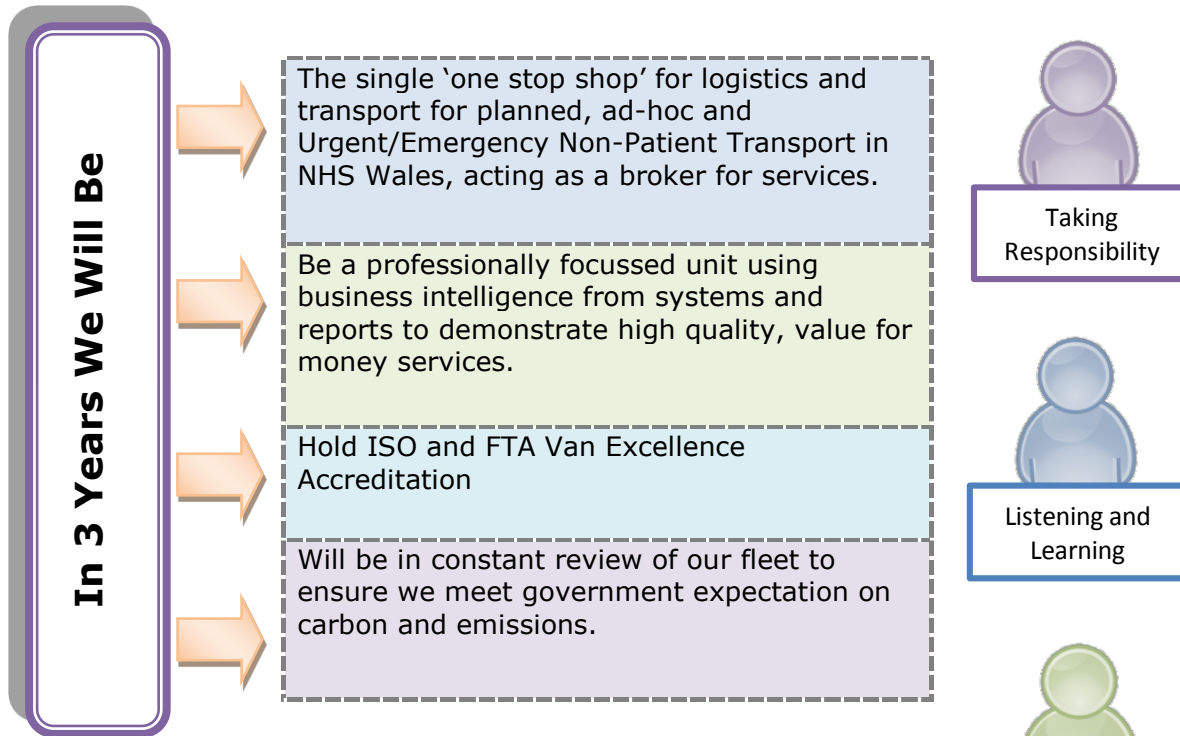
Covering Every
**Hospital &
Primary Care
Centre** in Wales

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> Regular reviews held by Local managers with individual Health Boards and Trusts, and Meeting framework: <ul style="list-style-type: none"> Tier 3 – Operational Group with HCS & Health Board departmental managers from transport, pathology etc. Tier 2 – Health Board Group with HCS Senior Managers and Heads of Department/Service Delivery Tier 1 – Strategic Group linking into Directors, DOP's and DOF's including NWSSP Committee Engagement via the National Pathology Transport Board (NPTB) & NHS Wales Collaborative Use of geographical Flyers and Information Bulletins Engagement meetings with non NHS Partners. E.g. Welsh Government, Councils 	<ul style="list-style-type: none"> Seamless logistical/transport support without geographical boundaries Auditable handling of transported items including pathology and Pharmacy (to include Temperature Control) Visible scheduled services that interface with both unscheduled care and primary care Ability to evidence legal compliance such as MRHA/UKAS regulations Ensure that HCS is central to NHS Wales's reconfiguration, and that transport forms an integral part of its change in service delivery Act as a Transport Broker and as '1 Stop Shop' for non-patient transport Act as a Transport Risk (DGSA) Advisor Development of Mortuary Transport services between NHS sites Evidence of Value for Money Services by reporting on absorbed work Enhancement of Micro & Histo services 	<ul style="list-style-type: none"> Work with Partners to ensure our services are fit for purpose Use of our Established Logistics Planning System 'Cleric' to support change and make specific quality improvements and track/trace items Provided planned and unplanned Transport & Logistics services with a modern diverse fleet. Support NHS Wales with Life Maintaining Transport I.e. Blue Light services for emergency blood/blood products, Histopathology, HSDU and transplant services Continued development of Online access to services to coincide with real-time data dashboards
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> Introduced a New Service Delivery Models to include providing 24 Hour/ Out of Hours cover. Support service transformation without boundaries, e.g. EMRTS, ARCH, Histo-Pathology (Frozen Section) and Welsh Blood. Provide support to Critical Care (EMRTS) on a Pan Wales Basis, without boundaries Integration of Primary Care Services transport and distribution to HCS and continued development of services provided to NWSSP Support to Welsh Government and NHS Wales as part of NHS Wales Mass Casualty Resilience 	<ul style="list-style-type: none"> Continually Undertake regular review of services provided to Health Boards to improve and enhance local service delivery via regular interaction Ensure service change is managed with high levels of governance and testing Delivery of core services with local focus Ensure services transferred from Health Board's and external providers are seamless with no disruption to service delivery. 	<ul style="list-style-type: none"> Continue to Remove duplication by working with Health Board partners, to streamline transport services and remove geographical boundaries Strengthen our relationship with partners with a focus on standardising systems and processes based on proven concepts Provide additional support to Primary Care Services and Home Care services Enhance Temperature Controlled Distribution for Pharmacy Continue to support Welsh Government with specialist distribution & Mass Casualty arrangements.

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<ul style="list-style-type: none"> • Use of the IT Scheduling System Cleric to report efficiencies and cost savings generated through absorbed work using data reporting and evidence based decision making • Continue to support, enhance and expand service transformation on NHS Wales initiatives such as EMRTS, Pathology, Pharmacy Services and Home care in line with Principles of Prudent Health Care • Work with Health Boards to identify Services that can be transferred to a single structure to provide financial efficiency, remove duplication and variation and reduce risk and 'Once for Wales' • Enhance relationships with NHS Wales Finance Managers • Review SLA vs. Top Slice arrangements 	<ul style="list-style-type: none"> • Have open and transparent discussions with All Wales groups and local partners to ensure we capture their service delivery needs • Ensure our customers are able to access our services with ease • Ensure our local management of services meet the needs of the local partner • Work towards a 'one stop shop' for non- patient transport in Wales including brokerage arrangements 	
Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> • Work closely with Health Board partners to ensure services meet legislative changes to ensure governance and regulations are met • Continue Development of live reporting dashboards from our IT system 'Cleric' • Development and introduction of the ability to book services online • Enhancement of traceability of Pathology with the ability to 'sign for' items to enhance compliance and governance for both Primary and Unscheduled care in Wales. • Work Towards Introduction of Bar Code capture on consignment 	<ul style="list-style-type: none"> • Ensure our staff are appropriately trained and have the skills to undertake the work that they do e.g. GMP training to handle Blood and Blood Products • Ensure our staff have access to the correct training and development • Be an employer of choice and target specific recruitment areas where we historically have difficulties in recruitment. 	<ul style="list-style-type: none"> • Establish plans to work towards ISO standards and Van/Fleet Excellence • Ability to evidence the flexibility to manage service change. • Development and introduction of a world leading 'Track and Trace' logistics system to include the ability to record temperature of consignments to meet MHRA licence requirements • Continue to use ever-changing technology to maximise innovation and change.

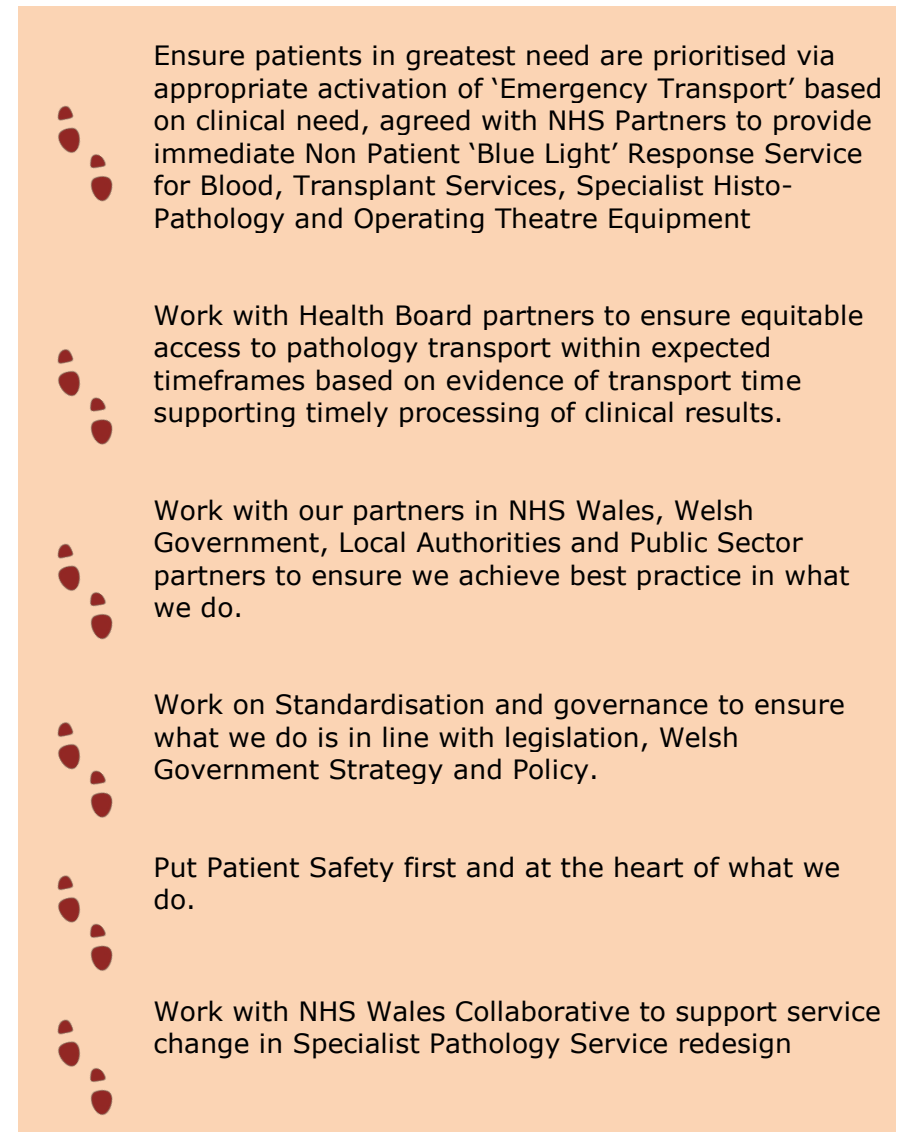
OUR JOURNEY



The risks to achieving this could include;

- Sufficient support structure to manage additional growth and service development
- Our current Estate will limit our ability to expand services in the ABMU or to support UGH in ABHB
- Financial pressures may impact on available capital for fleet replacement and accommodation changes.
- Sufficient relief to enable release of staff from operations for training
- Changes in legislation in relation to Vehicle Emissions will place pressure on service delivery and a financial pressure on vehicle costs.

PATH TO PRUDENT AND ONCE FOR WALES



WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Obtain Fleet/Van Excellence Accreditation	Evidence of Achievement of Industry Standard and Operator Compliance	Compliance with the 'Excellence Code'	By October 2018	HCS Fleet Supply Chain	Control of Fleet Management	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Accredited Status for Fleet & Van Excellence utilising a Modern Efficient Fleet							
Progression towards achievement of ISO Standards	To bring HCS in line with procurement services and NWSSP Standards	Implementation of processes and auditable evaluation	Development from Q4 2017 (Jan 18)	HCS Ops HCS BSU Procurement Services QMS Manager	Ops Management Capacity Business Support Unit Capacity	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Commencement of Work towards and achievement of ISO 9001, ISO 14001, ISO 27001							
Review Implementation of Home Care and Community care supply (Wound Management) and Pharmacy	Remove reliance on private providers and improve Governance	Auditable and traceable distribution of supply chain items monitored via Cleric Temp Control	2018	HCS PS Supply Chain Pharmacy & Sourcing PMO	Current contract arrangements and timescales & Funding Resources – management capacity, staff and vehicles PMO Capacity	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Incremental Introduction of a Pan Wales Distribution Network							

Continue Review of HB Transport Services to NWSSP, Current and Internal Services	Remove Duplication of Service delivery Economies of Scale Consistency	Strong Engagement and Review of Services to improve efficiency Possible Transfer of Cwm Taf	Ongoing April 2019	NWSSP Directors HCS Management Team PMO PCS Workforce	Engagements Staffing/Manager & PMO Capacity Accommodation Fleet Transfer of ABMU Services to Cwm Taf HB	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Transfer of service delivery models from identified HB's and Improved Working e.g BCU, Cwm Taf, Powys & PCS							
Continue Review of Health Board Partner Out of Hours Transport Services	Remove Duplication of Service delivery and private provider Economies of Scale Consistency	Strong Engagement and Review of Services	Ongoing	NWSSP Directors HCS Management Team Workforce	Engagements Staffing / Manager Capacity Accommodation Fleet	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Implementation of OOH work in ABHB, reducing reliance on private providers							
Continue Implementation of IT Transport & Scheduling System to include Online Access for HB's	To increase governance and record performance, compliance and traceability of items	Via the HCS Cleric System and Reports to Qlikview	Ongoing	HCS Team Procurement NWIS PMO	Connectivity and Management/PMO Capacity	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Continued roll out and development of Cleric, including online dashboards in Key NHS Departments							
Review use of Hybrid & Electric vehicles as the market evolves	Legislative shift to Low Carbon Emission vehicles (LCEV)	Monitor the Commercial Fleet market for introduction of LCEV's	Ongoing as industry develops	HCS Senior Management Procurement (Sourcing) Finance Fleet/Transport Manager	Current Market means very few LCEV commercial vehicles are available Capital Investment Cost is higher than standard carbon fuel vehicles	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Introduction of LCEV's as the Industry develops							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Fleet Management & Fleet Technical Expertise • Robust Back Office and Operational Functions • Increased management/supervisory capacity and support. • Increased ability to address recruitment shortfalls and lack of specialist drivers in the UK • Support and capacity to introduce Health Care Support Worker Training • Review the requirement for a Fleet Technical Specialist to support HCS and Procurement. • The introduction of staff/post to manage informatics and data from our systems. • Workforce support to deliver the service development and expansion (to include TUPE) 	<ul style="list-style-type: none"> • Appropriate funding for Fleet Profile/Vehicles with early engagement on Capital Bids to ensure the fleet replacement plan meets its requirements. • Estate – Appropriate accommodation for ABMU and ABHB (to support The Grange development) • Ensure any transferring services from HB's are assimilated with full and appropriate funding on transfer 	<ul style="list-style-type: none"> • IT Familiarisation for staff (with Cleric System, and Handheld/Portable devices) • Review of how we manage and replace handheld devices in line with moving technology • Robust s SLA with NWIS re support Cleric, Server and handheld maintenance.
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • Project management to ensure modernisation programmes succeed and release all benefits. • Well Managed Back Office Functions and administrative support • Targeted recruitment and retention • Complexity of change with transfer of services from Cwm Taf coinciding with Transfer of services from ABMU to Cwm Taf 	<ul style="list-style-type: none"> • Available capital funding for fleet. • Ability to support by internal departments to deliver change • ICT Firewalls • PMO Support 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Ease of access to Non patient Transport Services as a 'One Stop Shop' and broker for transport	To remove barriers and boundaries and have a once for wales approach	Single number 'once for wales' to enable access to services via National Transport Call centre	2019/2020	Area Managers HCS Control services. Procurement - Sourcing Health Board Partners	Managerial Capacity PMO Capacity HCS Staff Buy In geographically May require Organisational Change	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: HCS being the automatic choice and broker for all 'Non Patient' NHS transport needs in Wales							
Continue to develop Handover reports for key items	Proven Governance	Report against consignments via Cleric Development of Bar Code traceability		HCS Cleric Team Health Board Partners	Reluctance by HB Staff to responsibly sign ICT Support GS1/Barcode Development	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Assured governance for secure transport of supply chain goods and controlled/sensitive items							
Continued Review use of Hybrid & Electric vehicles as the market evolves	Legislative shift to Low Carbon Emission Vehicles (LCEV)	Monitor the Commercial Fleet market for introduction of LCEV's	Ongoing as industry develops	HCS Senior Management Procurement (Sourcing) Fleet/Transport Manager	Current Market means very few LCEV commercial vehicles are available Cost is higher than standard carbon fuel vehicles	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Introduction of LCEV's as the Industry develops							
Commence detailed review of ABHB Schedules	Planned Opening of SCCC and Satellite Cancer Centre at NHHA	Engagement and Formal Review	Autumn 2019/Spring 2020	HCS Management HCS Staff Engagement	Unknown at present	Value for Money	✓
						Customers	✓
						Excellence	✓

				ABHB Partners		Staff	✓
				Velindre CC		Service Development	✓
Success will be: Fit for purpose schedules to support service delivery							
Continue work with the NHS Wales Collaborative on centralisation of Specialist Pathology Services - (Micro/Histo)	Decision to Centralise to Centres of Excellence	Reduction of Units in Wales from 15 to Approx 3-5	Long term Strategy	NHS Wales Collaborative	Funding	Value for Money	✓
				HCS managers	Political Change	Customers	✓
				Welsh Government	PMO Support for service re-design	Excellence	✓
				Wider PMO Support		Staff	✓
						Service Development	✓
Success will be: Provision of Transport to centralised services.							
Likely Transfer of Cwm Taf Transport	Transfer of Services as part of Phase 2 of the National pathology project	Transfer of Staff/Capital Assets and Novation of private Contracts	Likely 2019	Cwm Taf	NWSSP Capacity to support	Value for Money	✓
				Workforce	Organisational Change with current management structure	Customers	✓
				Finance		Excellence	✓
				PMO		Staff	✓
						Service Development	✓
Success will be: Seamless Transfer of Services from Cwm Taf							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Robust Management with sufficient capacity to undertake change management & service development. • Effective Fleet Management • Robust Back Office and Operational Functions • TUPE Transfer support • Organisational Change 	<ul style="list-style-type: none"> • Fleet Profile/Vehicles • Estate 	Review Mobile Telephony and Technology
Processes		Dependencies
Governance Sign off and SMT/Board support		Health Board Buy In PMO Capacity & Support

WHAT WILL WE DELIVER IN 2020-21?

✓ Operational Roll Out of Service redesign in ABHB to support SCCC (The Grange)
✓ Operational Roll Out of Service redesign in Cardiff to support the New National Cancer Centre (NCC) to replace Velindre
✓ Operational Roll Out of Service redesign in ABHB to support the New Cancer Satellite Treatment Centre at Nevill Hall
✓ Support to NHS Wales Collaborative in relation to LIMS2 and links to Pathology Traceability

The risks to achieving this could include;

Age profile of workforce, Age profile of fleet, Operational Management Capacity, Business as Usual Capacity, External Market Pressures and Government Policy vs timing of capital for Low Carbon fleet (plus its cost), ICT Developments where systems changes are in advance of our system capabilities prohibiting progress.

To achieve this we will need;

Resources

Financial support
Appropriate Staffing
Managerial capacity
Suitable Vehicles/Fleet/Equipment

We will continue to engage with;

Customers and Stakeholders

Health Boards, Trusts and Public Health Wales
National Pathology Transport Board
NHS Wales Collaborative
Welsh Government
Internal NWSSP Departments

BEYOND 2021

Known High Quality
Brand, and provider of
choice

Quality customer
services and
engagement through
enhancements in
technology

Recognised award
winning services

Providing improved and
enhanced services
through modernisation
of service delivery
processes

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Provision of full Year Data

Establishment and implementation of reporting against customer/industry Standards (ISO)

Benchmarking against word leading providers

Planning and commencement of controlled acquisition of Health Board Partners Existing Transport Services and a partner to Welsh Blood Services

Development of a Driver Handbook with agreed Action Cards

Implement temperature controlled transport for pathology

Continuation of Controlled acquisition of Health Board Partners existing transport services and continuing partner to Welsh Blood Service

Identification of Private Healthcare opportunities to achieve additional revenue, including home care

Continue work towards ISO/CPA/UKAS standards

Grey Fleet Support/Review

Ensure 'Blue Light Services' are embedded pan NHS Wales

Acquisition of Van Excellence status

Phase 2 of NPTB and Project to transfer services from Cwm Taf

Embedding and review of all practices

Completion of Phase 2 of NPTB and transfer of Services from Cwm Taf

Implementation of One Stop Shop Brokerage arrangement for Non Patient Transport and possible National Transport Call Centre

Review of services to support the New SCCC and New NCC

Continued Support with Specialist Advice re Transport to the NHS Wales Collaborative and Service re-design Models for Histo & Micro Biology

Achievement of ISO Standards for ISO 14001, ISO 27001

Plan towards opening of SCCC

Plan towards opening of NCC

Continued Support with Specialist Advice re Transport to the NHS Wales Collaborative and Service re-design Models for Histo & Micro Biology

KEY PERFORMANCE INDICATORS

KPI Section A – PSPP/IOH/Invoicing

ACTIVITY DESCRIPTION – SSP	ACTIVITY DESCRIPTION – UHB/TRUST	OWNER(S)		QUALITY STANDARD / PERFORMANCE INDICATOR	DEMONSTRATED BY
KPI 1 – To ensure that HCS achieve the Welsh Government PSPP target		BSU		95%	Monthly System Driven Reporting from Failed Invoices report
KPI 2 – To ensure HCS meets the time deadline for return of Invoices on Hold (IOH) Reports	<ul style="list-style-type: none"> For IOH reports to be sent on time to HCS for scrutiny 	BSU		95%	Non-Compliant returns
KPI 3 – Ensure Monthly Invoices out via AR are managed to capture correct recharging for Ad-Hoc work		BSU		95%	Monthly Invoicing

KPI Section B – Pathology

ACTIVITY DESCRIPTION – SSP	ACTIVITY DESCRIPTION – UHB/TRUST	OWNER(S)		QUALITY STANDARD / PERFORMANCE INDICATOR	DEMONSTRATED BY
KPI 1 - To Ensure that planned schedules meet a 'Time in Transit' within 2 hours as per Section 1 point 3	<ul style="list-style-type: none"> Report areas where spoilt pathology has occurred as a direct result of delayed delivery 	LMT		70%	Planned Scheduled Times
KPI 2 – % of Frozen Section Histopathology managed within 90 minutes of request	<ul style="list-style-type: none"> Ensure notification of planned events as far as practically possible 	LMT		90%	Journey Log

KPI Section C – Blood Distribution in Relation to WBS

ACTIVITY DESCRIPTION – SSP	ACTIVITY DESCRIPTION – UHB/TRUST	OWNER(S)		QUALITY STANDARD / PERFORMANCE INDICATOR	DEMONSTRATED BY
<ul style="list-style-type: none"> To only utilise GMP (Good Manufacturing Practice) compliant staff when transporting Blood & Blood Products and evidence the required audit trail 	<ul style="list-style-type: none"> To ensure Blood/Blood products are appropriately packaged, sealed and handed over for transport to the identified destination 	LMT			GMP as part of Core Skills Compliance for all HCS staff
<ul style="list-style-type: none"> Only Transport Blood/Blood Products in line with GMP Regulations. This will include ensuring: <ul style="list-style-type: none"> Non Carriage of Animals (Assistance Dogs Exempt) Carriage of Passengers (unless an employee of the organisation/GMP trained) The most direct route is taken The journey is managed within Road Traffic Act requirements, notifying units of any delay Consignments are not tampered with. Ensuring any 'Blue Light' activation is managed as per agreed activation protocol 	<ul style="list-style-type: none"> Any Non-Compliance will be raised and addressed in reasonable timescales to reduce clinical risk 	LMT		South Wales (C&V): Blue Light – 1 Hour Urgent – 90 Minutes Routine – 4 Hours BCU- Collection Ad-hoc: 100% in 45 minutes 95% in 30 Minutes Blue Light OOH: 100% in 40 Minutes In Hours: 100% in 20 Minutes Delivery – YGC – 100% in 90m YGB – 100% in 150m WXM – 100 in 10m	Reports Database / Cleric

Legal and Risk and Welsh Risk Pool Services

To provide a world-class, comprehensive in-house legal service to NHS Wales that is recognised as approachable, responsive and reliable.

WHO ARE WE AND WHAT DO WE DO?



Act for NHS bodies in Wales, employing specialist solicitors to provide tailored, high quality, cost effective legal services and advice.



We work together to provide improved integrated risk management advice and to identify areas of concern for improvement purposes and good practice which is shared nationally. We add value by helping organisations accomplish their legal risk management objectives



95 staff
6 WRP Staff

2,619
clinical
negligence
claims

596
personal injury
claims

78 inquests


1,357
legal advisory
matters

Budget of £75m to
reimburse 384
claims and 114
periodic payments

100% agreed
claims paid in 10
days

How and who have we engaged with to develop our IMTP?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Strategy focus through the Shared Services Partnership Committee • Board Secretaries network and other All Wales meetings • Client feedback forms • Annual SLA update • Staff engagement at all levels • Provision of legal area focussed newsletters; facilitated network groups • All Wales and individual organisational annual performance reports • Regular "Lessons Learned" reviewed • Network Groups for Claims and Concerns managers • WRPS Technical Accounting Group incorporating all HBs, Trusts, WG and WAO • Annual Review encompassing Service and Financial information • Monthly reports to Directors of Finance 	<ul style="list-style-type: none"> • A one-stop shop that offers expert legal advice providing effective solutions for managing legal risks • Speedy responses to requests for legal services • Value for money solutions to legal challenges • Communications that are comprehensive and comprehensible • Easy access to experienced legal staff • Reduced risk of "in-year" financial pressures through careful claims management • Assurances around the capability to manage future liabilities within allocations and steps required where that is not possible • Transparent processes • Training and education on lessons learned • Tailored approach at each HB and Trust to meet specific audit needs • Performance improvement requests for additional legal assistance discussed 	<ul style="list-style-type: none"> • Retain a highly skilled workforce, enabling our staff to continuously develop their expertise • Improve our ICT processes to facilitate modernisation and manage high workload • Improve response times for legal advice by increasing qualified staff levels and use of ICT • Identify future legal support requirements by increased communication • Respond quickly to customer feedback issues • Improve communication and engagement • Enhance opportunity to learn from claims and concerns • Provide expert advice and support • Process reimbursement requests on a timely basis • Improve transparency around the WRP reimbursement process • Analyse data review KPI data with a view to benchmarking more effectively
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • We have achieved significant actual and professional influence savings for NHS bodies • Improved outcomes in employment matters and delivered training to prevent unnecessary future challenges • Our costs for employment, commercial, property and governance are between 21.1% and 28.3% lower than comparative on NPS framework • HBs and Trusts monitored and benchmarked on management of concerns • Standardised financial processes and treatment • Learning lessons from audits • Support the provision of assurance around financial position • Putting Things Right (PTR) has saved NHS Wales £5.75m since 2013 	<ul style="list-style-type: none"> • Deliver consistently high quality legal advice and litigation services to support customers and help them improve their services through feedback of lessons to be learned from cases • Engage with customers to understand their needs and provide targeted legal solutions • Apply our wide-ranging knowledge of NHS Wales to ensure bespoke service provision tailored to our customers' needs • Understand client needs and advise appropriately • Manage payments to ensure the annual allocation by WG for payments of clinical negligence claims is not exceeded if possible. • Manage reimbursement process efficiently. 	<ul style="list-style-type: none"> • Increase support in primary care areas without specifically advising individual GPs which is currently not covered by our Solicitors Regulation Authority waiver • Offer services to other Public bodies in England and Wales • Take on direct responsibility for managing the claims handling teams employed by NHS bodies in Wales, seeking to modernise their practices and reduce duplication of effort • Provide legal advice to a broader area of the NHS currently engaging private sector provider • Develop range of incentives for effective clinical risk management • Develop a network of clinical specialities to support improvement

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<ul style="list-style-type: none"> • Continue to represent Health Boards and Trusts in all litigated clinical negligence claims at a cost far below the private sector. • Our costs for provision of employment, commercial, property and governance are between 21.1% and 28.3% lower than comparative private sector providers on NPS frameworkContinue to ensure maximum savings are delivered on Claimants' legal costs as a result of accurate work and good negotiation • Continue to provide comprehensive litigation, risk management and general advisory assistance at low cost to the service • Continue to encourage use of PTR to improve savings in respect of lower value cases • Continue to manage the financial forecasting carefully effectively 	<ul style="list-style-type: none"> • Our customers will choose to continue to instruct us in all areas of legal practice which we offer and will increase their instructions to us • We will support our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts • We will continue to manage effectively the WRPS Accounting Group, provide accurate and timely financial forecast reports. • Analyse in greater detail data obtained from clinical negligence claims and concerns to allow better learning • Continue to support Health Boards and Trusts in their delivery of the efficiency programme to maximise value 	
Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> • Provide comprehensive employment, commercial and property services • Complete delivery of 95% paperless office, reducing stationary and reproduction costs and increasing efficiency and improving timeliness • Customer focussed teams to deliver advice, feedback and training • Appoint a full time IT technician to support increasing dependence on technology in the workplace • Develop our service to meet the needs of Primary Care providers • Deliver excellent WRP clinical assessments into specific areas of concern to enhance learning and patient safety 	<ul style="list-style-type: none"> • Provide clear and consistent leadership using a responsive team structure with an open door policy • Strategic and Targeted continuing professional development • Regular staff meetings for sharing and learning • Excellent team working • Good use of initiative and innovation • Progress our Succession Planning and structure • Monitor and maintain the quality of our Recruitment progresses • Review opportunities for staff progression 	<ul style="list-style-type: none"> • Lexcel accreditation by The Law Society of England and Wales appointed auditor • Consistent excellent responses from regular customer feedback • Favourable Wales Quality Centre audit assessment results • Customer Service accreditation

OUR JOURNEY

In 3 Years We Will Be

Operating with modern business systems and approaches. Procuring a new legal **case** management/ICT system to ensure efficient working practices, clear analysis of data and enable client access to information,

Maintain close scrutiny of our structure and practices, to ensure that we are an aspirational, forward-looking service, at the forefront of Legal Services provision across the NHS in Wales and the wider public sector.

Maintain and improve the quality of customer communications, promoting recognised, tailored legal services as provider of choice for NHS Wales.

Focus on Wales wide learning and risk reduction. Driving learning from events and using ICT to better understand patterns and trends.



Taking
Responsibility



Listening and
Learning



Innovating



Working
Together

The risks to achieving this could include;

- Internal service capacity/increasing workload
- Ability of our ICT network to cope with demand and access to technical expertise to support ICT systems
- Structural issues leading to lost expertise when staff leave

PATH TO PRUDENT AND ONCE FOR WALES

Engagement in the development and review of All-Wales policies to ensure the correct interpretation of legal principles, in line with the Well Being of Future Generations and Social Care (Wales) Acts.

Support NWSSP Procurement and SES in relation to lawful All Wales procurement and projects.

Provide robust and useful feedback to health bodies re lessons learned.

Encourage swifter implementation of rehabilitation measures to improve outcome for patients

Provide training for clinical staff at all levels of experience and seniority at health bodies in Wales re the legal context of their practice

Audit and support claims and concerns teams across Wales

Maintain an efficient payment system for payments made on claims including disbursements.

Develop an All-Wales policy re the management of claims and concerns and reimbursement.

Work with WG to develop new indemnity arrangements for GPs working in Wales

Introduce a robust and transparent risk sharing agreement agreed by all health bodies.

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Work in partnership with Health Boards and NHS Trusts to support them and minimise the adverse reputational and financial impact of clinical negligence, personal injury and employment claims	To minimise the adverse reputational and financial impact of legal risks to the NHS in Wales	Through maintaining and improving on the quality of our staff via experience and training; through good management of cases and careful allocation of tasks across teams	March 2019 and annually reviewed thereafter	L&R management team and our clinical negligence, personal injury and employment law and WRP teams.	High workload and limited customer responsiveness	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: High levels of Savings and Successes reported in our monthly KPI data							
Work in partnership with Health Boards and NHS Trusts to support them in caring for patients with complex needs, including those who lack capacity, are vulnerable or have mental health problems	To enable the NHS in Wales to make robust, lawful decisions about patients who have complex needs	Through maintaining and improving on the quality of our staff via experience and training; through having systems in place to maximise responsiveness.	March 2019 and annually reviewed thereafter	L&R complex patient team	High workload in the context of urgent need	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Favourable feedback from our clients via customer feedback questionnaires							
Work in partnership with Welsh Government, Health Boards, Trusts in the development of All Wales Policy across the range of legal issues that affect their activities	To foster good legal governance through consistent and lawful decision-making	Through establishing and maintaining good working relationships with clients and key contacts across all levels of ours and their organisations.	March 2019 and annually reviewed thereafter	L&R management team and our employment, commercial and general advisory teams	Limited customer engagement/percept ion of need	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved legal governance and fewer challenges to decision making							

Provide a responsive advice service for general advisory queries and advice under Putting Things Right, indemnity issues and risk management complying with our KPIs	To support the NHS in Wales in safe decision-making across the many challenges that face it on a daily basis	Through maintaining and improving on the quality of our staff via experience and training and creating specialist roles where demand requires it.	March 2019 and annually reviewed thereafter	L&R and WRP general advisory and PTR teams	High workload in the context of often urgent advice requests	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved confidence of clients’ staff in their management decisions							
Support workforce across Health Boards and NHS Trusts in managing their diverse and wide caseload of HR issues, pre-action and at tribunal stage	To support the NHS in Wales in fostering good workforce practices and to minimise the adverse effect when things go wrong	Through maintaining and improving on the quality of our staff via experience and training and taking on more staff where demand requires.	March 2019 and annually reviewed thereafter	L&R Employment Team	High/increasing workload and external competition	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improved workforce relations and fewer litigated matters							
Work in partnership with NWSSP Procurement to provide high quality legal advice in procurement exercises	To ensure that clear, robust processes are followed in individual and All Wales procurement exercises and to reduce the risk of challenge via Judicial Review	Through maintaining and improving on the quality of our staff via experience and training and taking on more staff where demand requires; strengthening our ties with NWSSP Procurement.	March 2019 and annually reviewed thereafter	L&R Commercial Team	High/increasing workload, sometimes complex client relationships with some external competition	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Closer working relationship and interdependence for high quality advice							

Work in partnership with NWSSP SES to provide high quality legal advice in property purchases, disposals and issues related to the NHS estate in Wales, including strategic land acquisitions for hospital expansion and office / headquarter relocation	To support NWSSP SES and NHS bodies in Wales in managing the wide and varied NHS estate in Wales in accordance with regulatory and good practice.	Through maintaining and improving on the quality of our staff via experience and training and taking on more staff where demand requires; strengthening our ties with NWSSP SES.	March 2019 and annually reviewed thereafter	L&R Real Property Team	High/increasing workload with some external competition	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Increased number of early instructions to advise							
Meet Health Board and Trust training needs across a wide range of legal, risk management and patient safety topics	To enable staff in the NHS in Wales to make robust decisions in relation to legal and risk management issues that they regularly face and to reduce the need to rely on external legal advice.	Through maintaining and improving on the quality of our staff via experience and training and employing sufficient staff to meet demand.	March 2019 and annually reviewed thereafter	L&R management team and all work type teams with WRP team	High demand for case related work, reduces capacity to offer training.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Increase client self-reliance on own knowledge and development							
Listen to the concerns and needs expressed by the Health Boards and NHS Trusts and respond to them promptly	To ensure customer service excellence and that we provide a service that matches need.	Through our customer feedback processes, including annual and case closure questionnaires and through our complaints process.	March 2019 and annually reviewed thereafter	L&R Management Team	High demand for legal case related work, reduces capacity to consider and change practices and processes.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Excellent customer feedback across all areas of work							

Engage in a comprehensive, strategic marketing exercise, to convince all Boards and NHS Trusts to come to us for their all legal and risk needs	To raise customer awareness of the high quality, value for money service that we provide and easy access to our services.	Through a focussed effort by the management team to devise a marketing strategy, involving stakeholders within and outside of L&R	March 2019 and annually reviewed thereafter	L&R Management Team and individual work type teams	High demand for legal case related work and limited budget (in the context of some competitors) reduces capacity to offer training.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Increase market share in legal provision and improve profile							
Improved process for minimising Claimants’ costs and legal costs	Reduce financial impact of litigation on NHS Wales	Increased in-house training & supervision in dealing with legal costs	March 2019	L&R Management Team	This will increase workload Limited influence on external factors Internal failure to engage with improved processes	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Savings to be used to improve service to patients							
Transparent Staff Structure	To manage staff career path To comply with Job Evaluation Policy	Develop a suite of national job profiles for legal staff	Sept 2018	JD review team	Capacity to review job descriptions Uncertain banding outcome	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Transparent staff structure a suite of banded job descriptions							
Improved processes and workflows for the initiating and managing new instructions	To improve effectiveness and efficiency	Working together with stakeholders to decide a new process Improved IT case management and links to Datix	March 2019	Team Managers led by Cardiff Team Lead	Lack of engagement by clients Reluctance to change ways of working	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Solicitors’ time focused on substantive legal work not administration							
Improve Learning from Events and management of Concerns	To strengthen a learning culture in Wales to reduce mistakes which saves the NHS money including ongoing issues	The review undertaken by the Head of Safety & Learning has been well received and has provided fresh	In progress and roll out of Safety & Learning Networks and Peer-Review Group during 2017-2018	Head of Safety & Learning in collaboration with other key WRPS and LARS staff	Benefits will take time to materialise and make an impact in terms of spend due to the current 2,600 cases	Value for Money	✓
						Customers	✓
						Excellence	✓

		impetus into this process			currently in the system Focus on a limited source of information which may not be current and represent current risks	Staff	
						Service Development	✓
Success will be: An improvement in scores across Wales in relation to the Concerns and Compensation Claims Standard (the Standard).							
Move to a new arrangement for invoicing client Health Boards and Trusts	Create an efficient process to reduce admin workload for clients and for L&R	Agree with DOFs to send invoice at the start of each quarter to cover expected level of activity. Report quarterly re type of activity, level and cost / forecast / adjustments	April 2018	L&R Director and NWSSP Business Partners	Customer Buy in	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Less time spent by L&R staff on invoicing							
Support the development and roll out of a Once for Wales Concerns Management System	To address recommendations in the Evans Report "Using the Gift of Complaints" and to enhance data compatibility to identify and focus on themes	Incorporate WG funded project into WRP, re all-Wales Development system Development of national Concerns dataset	WG Project scoping phase completed 2017 and transfer to WRP will commence in 2018	Head of Safety & Learning and Once for Wales CMS Project Coordinator	Difficulty in getting engagement from NHS organisations, financial limitations restricting work to development system	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Design and Roll out of Once for Wales Concerns Management System – with agreed national dataset							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Further investment in qualified and support staff • Continued high level of targeted education and training in accordance with SRA training and development plans • Opportunities for learning and training for all support staff • Appointment of Heads of Service to take forward functions as part of the succession planning process • IT technician support to assist with increasing dependence on technology in the workplace • Develop an 8a lawyer job description to improve flexibility 	<ul style="list-style-type: none"> • Sufficient resources in order to support world class delivery • Funding for improved training costs for staff and wider service • Re-invest income from fees earned • £250k of capital investment in enabling technologies 	<ul style="list-style-type: none"> • Improved IT hardware and infrastructure to replace old, outdated PCs and laptops to support drive towards paperless office. • Tendering for new case/document management software to integrate all applications for better IT stability and responsiveness • Dragon Dictation software
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • Planning of improved workflow, increase automation and appropriate task assignment through IT development • Increased space to enable responsive team meetings to occur in quiet workspace 	<ul style="list-style-type: none"> • NWSSP and Health Board/Trust Clients • External bodies focussed on risk and patient safety • Welsh Government • Further support / integration from NWSSP Business partners in both Finance and Human Resources 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Fully use enabling technologies	Effective use of business and case information to drive service improvement Automation of tasks and streamlined work distribution	Implementation of new case management system Using Lync Technology Dragon dictation	March 2020	L&RS and WRPS teams	Lack of funding for necessary complement of staff to achieve objectives Currently no capacity to move objective forward	Value for Money	✓
						Customers	
						Excellence	
						Staff	✓
						Service Development	✓
Success will be: Better delivery of risk management information to customers							
Expansion of services into Primary Care, Social Care and the Third Sector	Consolidation of legal resources into one team to achieve better value for money and world class service	Challenge SRA waiver limitations Develop marketing strategy	By March 2020	L&RS and WRP with Corp Services/ Welsh Government	SRA waiver will not permit Lack of drive to achieve aim New staff required	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Consistency of advice and support across all care providers							
Monitoring system for processes and workflows for the initiating and managing new instructions	Improve efficiency by reducing time spent on administrative aspects of opening new matters	Via our new/refreshed case/document management system	March 2020	L&R DB succession team liaising with client claims managers and their IT teams	Potential funding delays Lack of client engagement	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Reduced staff time spent and recorded on processing new instructions							
Use the information from our Databases to inform clients how they can improve practice	Reduce exposure to risk from serious incidents and claims arising from substandard practice	Via our new/refreshed case/document management system	March 2020	L&R DB succession team and WRP team liaising with client claims managers, patient safety teams and their IT teams	Lack of client engagement	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Positive feedback from Health Boards and Trusts							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Staff additions necessary to manage more work • A Succession Plan to ensure key staff are replaced effectively and on a timely basis 	<ul style="list-style-type: none"> • Adequate resource to recruit and retain appropriately qualified and experienced staff • Funding to support regular targeted training in workshops and conferences 	<ul style="list-style-type: none"> • Implementation of new case/document management system enabling automation of tasks and streamlined work distribution according to staff experience and skills
Processes	Dependencies	
<ul style="list-style-type: none"> • Recruitment: Attracting the right staff with the right skills and vision to drive the Service forward • Implementing of improved workflow, increase automation and appropriate task assignment through IT development 	<ul style="list-style-type: none"> • NWSSP and Health Board/Trust Clients • Welsh Government • Further support / integration from NWSSP Business partners in both Finance and Human Resources 	

WHAT WILL WE DELIVER IN 2020-21?

✓ Evaluation and further development of new case management system enabling automation of tasks and streamlined work distribution according to staff experience and skills
✓ Expansion of core business into primary and social care
✓ Achievement of world class scores in HB assessments of concerns, claims and learning from events
✓ Increased professional influence savings for the NHS
✓ Added value for money by being the preferred supplier of legal advice across the whole NHS in Wales

The risks to achieving this could include;

- Delays / deficiencies in the introduction of IT infra-structure
- Succession planning needs careful management with the right people in the right roles in a robust structure
- Pay erosion arising from austerity measures
- Lack of staff to continue to develop a world class service

To achieve this we will need;

Resources

Increase in Financial resources – this will increase value for money and generate savings for the NHS
Investment in IT infra-structure
IT technician support embedded in the Service

We will continue to engage with;

Customers and Stakeholders

Health Boards and Trusts
External leaders in field of risk and patient safety
Welsh Government
Other Services within NWSSP to drive synergy

BEYOND 2020

Delivery of services
to wider public sector in Wales

Legal / clinical lessons learned
audits integrated into Service to
ensure risks are mitigated and
lessons learned are implemented

Provide holistic advice service
across the public sector in
Wales

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Complete review of exiting ICT systems

Maintain high scores on Lexcel and CSE

Further invest in expertise in corporate legal services

Maintain high scores in client satisfaction surveys

Continue establishment the Service as the first "port of call" for legal advice

Enhance Annual Report encompassing all aspects of the business

Complete review of job descriptions, structure and succession planning

Progress marketing strategy for corporate legal services

Improvement efficiency and effectiveness of financial processes / services

Further digitise to improve efficiency, ease of access to documentation, reduce paper and create more green work practices

Further invest and strengthen the team to ensure standards of service are maintained and enhanced.

Implement refreshed case and document management systems with integrated functionality, enhanced client access, improved workflow, task attribution and automation

Maximise share of NHS Market re: Commercial, Property, Employment and General Advice

Complete full deployment of enabling technologies and review impact on quality.

Change culture across NHS by improving learning

Enhanced audits of areas implementing lessons learned to ensure benefits are maximised and risks reduced

Focussed training programmes for all staff

Improved communication with customers promoting recognised and individually tailored legal services as provider of choice for NHS

All Health Organisations scoring > 90% in all areas in assessment of concerns, claims and learning from events.

Full deployment of enabling technologies

Expansion of core business into Primary Care, Social Care and the Third Sector

Innovation informs service development and drives improvement

Maintain and further improve modernised work practices through the strategic use of ICT, via process mapping, workflows and automation

2018/19

2019/20

2020/21

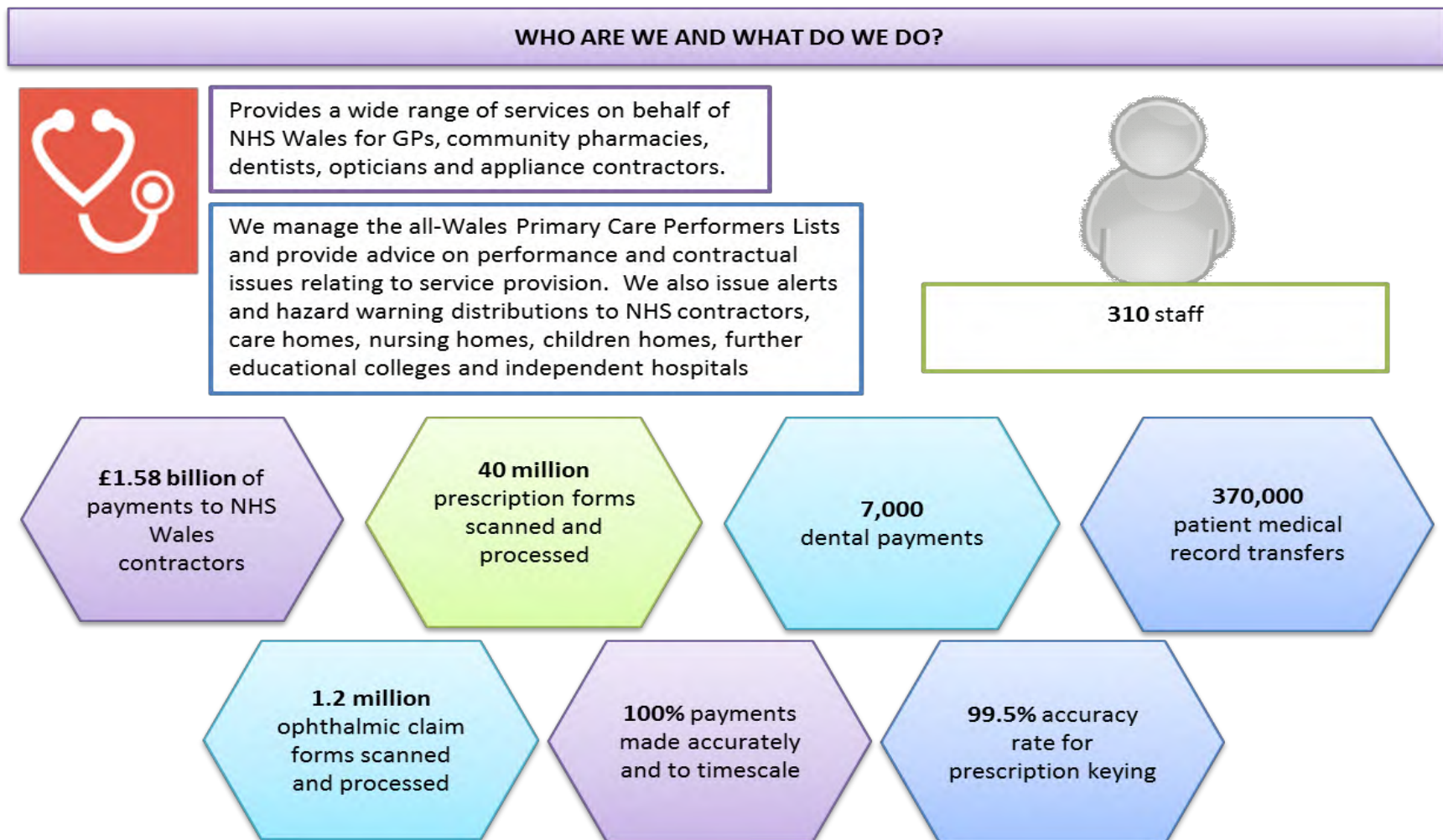
2021/22

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator
Timeliness of advice acknowledgement - within 24 hours – achieved 98.96%
Timeliness of substantive response – within 3 days or agreed timescale- achieved 98.55%
Acknowledgement of receipt of claims by WRP - achieved 100%
Valid claims received within deadline processed in time for next WRP committee - achieved 100%
Achieved 95% paperless to improve efficiency
Achieved increased share of NHS Market re: Commercial, Property, Employment and General advice
Achieved successful Lexcel and Customer Service Excellence audits ensuring quality across our services
Successful introduction of enhanced patient information contract


Primary Care Services

To transform the delivery of Primary Care Services across NHS Wales through service modernisation and automation whilst focusing on engagement and collaboration with internal and external stakeholders in order to inform and support the primary care sustainability agenda.



How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • Annual SLA modernisation reviews held with individual Health Boards and Trusts • Bi-annual SLA meetings with Welsh Government • Quarterly meetings with Contractor Professional Representative Bodies • Ad hoc meetings and presentations to contractor focus groups • Attendance and exhibiting at National, Local and HB Conferences • Collaborative working practices across divisions within NWSSP supporting prudent health care through co-production • World class journey training deployed within PCS to inform staff 	<ul style="list-style-type: none"> • Delivery of high quality, timely and accurate services • Continuous service delivery throughout a NHS Wales transformation programme • Engagement and service re-design aligned to the NHS Wales 'Primary Care Plan', 2018 • Service modernisation that promotes and supports sustainability within Primary Care Wales • Continued delivery of customer focused, high quality services • Increased focus on the development of Ophthalmic services inside primary care 	<ul style="list-style-type: none"> • Engagement with NHSE, NHS Digital and Capita during the transformation period • Enhanced accreditation with appropriate benchmarking in Customer Service Excellence (CSE) • Staff leadership programme and succession planning linked to the all Wales Primary Care workforce Plan • Continuous service review in line with prudent healthcare – only doing what is needed and 'do no harm' • Critical reliance on partnership working with NWIS who support ICT service and systems development and associated infrastructure
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • Process re-engineering achieving more with less resource in transactional areas • Reducing variation through review and modernisation of current service models. Supporting prudent healthcare – reducing inappropriate variation through an evidence based 'Once for Wales' approach • Reduction in annual running costs of over 20% (recurring) since the formation of PCS whilst expanding existing and introducing new services • Development of service offerings taking into account Customer/Stakeholder and NWSSP divisional needs • Scanning solutions to reduce paper transactions 	<ul style="list-style-type: none"> • Meet required performance criteria and maintain compliance against enhanced KPIs • Sustained quality in providing assurance for services delivered to Health Boards • Proactive engagement with all stakeholders driving continuous service improvement • Maintain effective assurance levels in respect of risk management, internal controls and governance. • Continued delivery of timely and quality focused stakeholder service developments • Reduce the administrative burden on GP practices by providing back office administrative support 	<ul style="list-style-type: none"> • Expand NWSSP services into Primary Care cluster networks and federations supporting primary care sustainability • Review legislation to enable paperless processes in line with other NHS Wales initiatives i.e.GP2GP • Live Patient Medical Records (PMR) storage and scan on demand service • Expansion of generic PCS services across other Welsh public sector bodies

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<ul style="list-style-type: none"> • Delivering existing and new high quality services that are cash releasing and contribute directly to Health Boards efficiencies during financial year • Promotion of scanning technology, enabling provision of services across numerous divisions within NWSSP • Service modernisation across prescription processing that improves quality and achieves an 80% efficiency increase compared to the existing manual process • Supporting the delivery of the efficiency programme to maximise value • Provide alternative services that contribute directly to the Primary Care Plan 	<ul style="list-style-type: none"> • Supporting Health Boards (HBs) estate strategy through the introduction of offsite 'live' GP patient medical record (PMR) storage • Roll out of electronic transfer of Claims (ETC) within Community Pharmacy processing, improving quality and accuracy of prescription claims • Redesigning Primary care demographic and payment services in line with the overall transformation programme in NHSE • Supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts • Supporting the ministerial primary care task force 	
Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> • Further development of Post Payment services (PPV) within Community Pharmacy supporting the NWIS migration to the CHOOSE pharmacy platform • Remote access to GP clinical systems enabling PPV resources to be reallocated to new areas of business whilst reducing the burden on GP practices and adopting a less intrusive approach to PPV principles • Development of Welsh specific informatics across Optometry services including General Ophthalmic services and the Wales Eye care programme • Collaborative working practices across NWSSP • Supporting HBs in the development and delivery of modern services to meet the Primary Care Sustainability Agenda 	<ul style="list-style-type: none"> • Maturity of Staff focus group, working in conjunction with senior management team. • Investment in staff development with a robust approach to workforce plans in line with 'A Planned Primary Care Workforce for Wales' • Development and cascade of training programmes within PCS to further embed the NHS/Academi Wales Leadership model and NWSSP values and objectives • Taking a holistic approach that's innovative to provide robust and informed succession planning • Workforce review and realignment is critical during the next 3-5 years to compliment system and legislative change • Continued delivery of a robust staff training and development programme enabling redeployment opportunities to be maximised 	<ul style="list-style-type: none"> • Imbed the core principles of the 'Well-being of Future Generations (Wales) Act 2015' • Continuous improvement measured and evidenced against the Customer Excellence Framework. Compliance plus standards achieved and maintained • To support as well as orchestrate service developments that support the primary care sustainability • Roll out of the PMR programme which will free up primary care estate enabling a shift of services from secondary care to primary care and treating patients closer to home • Remove/reduce the burden on GP practice by providing modern, efficient and effective service solutions

OUR JOURNEY

In 3 Years We Will Be



NHAIS systems will have been decommissioned and we will have implemented the **NHS Wales Transition Programme** with regard to GMS and GOS services.



Receiving and automatically processing 90% of prescription forms through the **Electronic Transfer of Claims** (ETC).



Storing up to 25% of GP Practice patient paper records and providing an electronic retrieval service to practices through our **Store and Scan on Demand** service.



A full organisation review will have been conducted and this will provide a roadmap for PCS through the development of a '**5 year Strategy for Improvement**' document.



Taking
Responsibility



Listening and
Learning



Innovating



Working
Together

The risks to achieving this could include;

- Capita privatisation within NHSE does not meet its delivery targets or allow for NHS Wales to utilise framework contract for future Payments systems
- NWIS working in isolation and not in partnership with NWSSP in order to deliver transformational
- Delay in delivery of required legislative change, in particular regard to paper records reduction
- Continued Health Board focus on secondary care with limited or no focus on Primary care agenda

PATH TO PRUDENT AND ONCE FOR WALES

Services Transformation

Implementation of successor systems, post decommissioning of the Exeter and Open Exeter suite of IT systems.

Modernisation of Services

Utilising technology to modernise and improve services. (ETC, PPV & GOS data warehouse)

Full review of legislative changes required and to develop a roadmap for implementation

Workforce Development

Promotion and deployment of NHS Leadership Model. Robust succession planning to future proof the delivery of Primary Care Services.

Reduction of Service Variation

National service provision and solutions to reduce variation (PMR, one site one service strategy)

Service Rationalisation

Continuous review of our SLA and KPIs to ensure compliance and provide assurance

Service Expansion (External Influence)

National service model agreed for Public Sector Wales Shared Services

Service Expansion (Internal Influence)

Expansion of Scanning services within NWSSP. An additional 18 services on catalogue

To introduce a National Ophthalmic Performance comparators service at contractor, cluster and Health Board levels

WHAT WILL WE DELIVER IN 2018-19

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Site and Service Rationalisation Project.	To review and consider further service consolidation and site rationalisation.	Internal service review and potential restructure.	December 2018	PCS, NWSSP.	Loss of knowledge and expertise. Decreased staff motivation. Loss of staff resource.	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Review of services across NHS Wales with high governance and performance demonstrating benefits							
Patient Medical Records (PMR), store and scan on demand programme.	Enables GP practices to rationalise estate and react to increasing Primary Care service demands. Supports sustainability agenda.	Removal of paper medical records from GP practice to a central archive and provision of a retrieval service.	March 2019	PCS, HBs, GP Practices.	Lack of resource. Limited Estate for central storage. Lack of capital funding. WG Support.	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	✓
						Service Development	✓
Success will be: Full benefits realisation review to increase capacity of service to accommodate GP practices across Wales							
Electronic Transfer of Claims (ETC).	Achieves an 80% efficiency increase.	Using electronic messages used as the primary input for pricing.	March 2019	PCS, WG, CPW, NWIS, Community Pharmacy Contractors and software suppliers	Loss of knowledge and expertise. Decreased staff motivation. Loss of staff resource. Reliance on NWIS for IT services.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: 95% roll out across NHS Wales with high governance and performance demonstrating benefits							

NHS Wales Transformation Programme.	A direct result of NHSE privatisation. Direct impact on Welsh systems and processes.	Through dialogue and SLA review with NHS Digital and a Legal contract with CAPITA via NHSE framework agreement	March 2019	NHSE, NHS Digital, Capita, NWIS, WG, professional committees and contractors.	Funding and development costs. Reliance on NHSE solutions. Reduction in Assurance. NWIS dependencies.	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Delivery of an agreed new service model to support Transformation Programme							
GOS Data Warehouse.	Produce intuitive products that deliver more effective analyses for PPV, counter fraud and performance management purposes.	Automatically produce reports currently collated manually. Introduction of a rules engine to inform PPV sampling principles.	March 2019	PCS, HBs, OW.	Funding and development costs. Reliance on NHSE solutions.	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Elimination of manual intervention and delivery of automated reports to stakeholder							
Replacement of databases that are populated by MDR extract and changes to prescription systems that are dependent on it.	NHS BSA provided the MDR extract and are migrating to a new data	Agreement of new extract format, new database design and software changes to dependent systems.	December 2018	PCS and NHS BSA.	Level of system change required is unknown until new extract is defined. This must be implemented to ensure continuity of prescription processing systems	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	
Success will be: Seamless transition to new data source with no disruption to the prescription pricing services							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Head count changes between -2% and -5% to include potential resource reallocation Training requirements to support ETC and commencing the up-skilling and retraining of staff affected by NHS Wales transformation 	<ul style="list-style-type: none"> IT £100k (See IT section) PMR expansion - Roller Racking £107k PMR expansion - Roller Racking £245k PMR expansion – Fire suppression £760k Equipment (resilience option for Bulk Mail folder/insertter) £15k 	<ul style="list-style-type: none"> PMR - records management solution to cater for increased capacity. Collaborative work with Procurement Services on Oracle stores configuration (£10k). Site & Service Rationalisation – increased capacity/additional functionality in OCR solution (£65k). Expansion of PMR scanning service (£25k) Development of replacement contractor payments system (in house £350k or supplier development costs TBC).
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> Completion of a 'one site one function' programme within Transaction service areas, including consolidation of functions at various sites with the provision of full business continuity Introduction of social media and real time services in support of primary care contractors information needs 	<ul style="list-style-type: none"> Reliance on NWIS to provide both internal and external IT support. As processes are automated and developed reliance increases across all divisions within NWSSP as well as with External parties. Reliance on Health Courier Service (HCS) to support the Patient Medical Records (PMR) Programme. Agreement of a future PMR model to support National service delivery to support GP practice sustainability. 	

WHAT WILL WE DELIVER IN 2019-20

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Site and Service Rationalisation Project.	To improve provision of services in to Primary Care clusters and federations.	Identify resources which can be realigned to support Primary care contractors and services.	March 2020	PCS, NWSSP, Primary Care Contractors.	Loss of knowledge and expertise. Decreased staff motivation. Loss of staff resource.	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Additional support services fully costed and deployed within Primary Care.							
Patient Medical Records (PMR), store and scan on demand programme.	Enables GP practices to rationalise estate and react to increasing Primary Care service demands. Supports sustainability agenda.	Removal of paper medical records from GP practice to a central archive and provision of a retrieval service.	March 2020	PCS, HBs, GP Practices.	Lack of resource. Limited Estate for central storage. Lack of capital funding. WG Support.	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	✓
						Service Development	✓
Success will be: Scan on demand service deployed to 40% of GP Practices.							
Electronic Transfer of Claims (ETC).	Achieves an 80% efficiency increase.	Using electronic messages used as the primary input for pricing.	March 2020	PCS, WG, CPW, NWIS, Community Pharmacy Contractors and software suppliers	Loss of knowledge and expertise. Decreased staff motivation. Loss of staff resource. Reliance on NWIS for IT services.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Full rollout and deployment of ETC within Community Pharmacies within Wales.							
NHS Wales Transformation Programme. New Registration Service.	A direct result of NHSE privatisation. Direct impact on Welsh systems and processes.	Through dialogue and SLA review with NHS Digital and a potential Legal contract with CAPITA via NHSE framework	March 2020	NHSE, NHS Digital, Capita, NWIS, WG, professional committees and contractors.	Funding and development costs. Reliance on NHSE solutions. Reduction in Assurance. NWIS dependencies.	Value for Money	✓
						Customers	✓
						Excellence	✓

		agreement. Alternative approach would be to progress with the NHS Wales Payments Solution to be delivered by NWSSP.				Staff	
						Service Development	✓
Success will be: Full deployment of the new Registration system across NHS Wales.							
GOS Data Warehouse.	Develop and expand PPV services in order to provide required assurance. Improved collaboration with NHS Wales CFS	Explore potential Contractor and Patient loss within GOS through targeted contractor visits outside 3 year cycle, with prior engagement with Optometry Wales	March 2020	PCS, HBs, OW.	Funding and development costs. Reliance on external bodies eg BSA.	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Development of protocols for engagement with LCFS and NCFS and necessary case transfer.							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Head count changes between -2% and -5% Training requirements to support ETC and commencing the up-skilling and retraining of staff affected by NHS Wales transformation 	<ul style="list-style-type: none"> IT (£115k) 	<ul style="list-style-type: none"> Further expansion of PMR scanning service (£25k) Site and Service rationalisation – full upgrade of IBML scanner software to ensure fully supported platform (£90k).
Processes		Dependencies
<ul style="list-style-type: none"> Introduction of social media services. 		<ul style="list-style-type: none"> Reliance on NWIS to provide both internal and external IT support. NWIS to recognise and acknowledge NWSSP requirements and incorporate these in to their IMTP Reliance on Health Courier Service (HCS) to support the Patient Medical Records (PMR) Programme

WHAT WILL WE DELIVER IN 2020-21

- ✓ Development of self-service on-boarding/accreditation processes for contractors and performers.
- ✓ Develop a strategy for delivery of on-line products, alerts, messaging services via mobile devices and social media.
- ✓ Provision of N3 spine smartcard service to GP practices.
- ✓ Change to legislation to facilitate a paper light/paperless GP Patient medical record process.
- ✓ Transformation Programme embedded and operational.

The risks to achieving this could include;

Unstable NHS Wales with potential restructure; Political influence/interference;
Quality degradation of demographic data;
Limited technical capability; Lack of Co -production/Partnership working with NWIS and the variable requirements of NHS Wales HBs
Skills deficiency;
Competition.

To achieve this we will need;

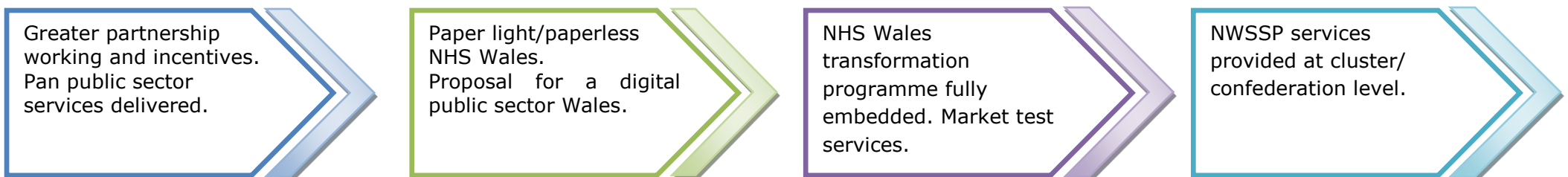
Resources

Transformation Programme development costs associated with potential contract with private sector provider (CAPITA) in NHSE or alternate in-house solution development programme and associated costs. Financial support to enable robust succession planning.
Capital funding to support key priorities

We will continue to engage with; Customers and Stakeholders

Primary Care Contractors (including mature Cluster networks and federations).
Professional representative bodies.
Welsh Government.
Health Boards.
NHS Wales Informatics Service (NWIS).

BEYOND 2021



KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Fully integrated one site one service functional rationalisation
Review of operational processes surrounding locally delivered services (PPV, Patient Registration)
ETC – 80% Rollout achieved across NHS Wales
Storage & Scan on Demand continued rollout
Continued implementation of modernisation/transition programme
Primary Care Ophthalmic Informatics Services available to contractors
Leadership Model embedded in workforce development plans
Non-core business services for boarder public sector
Financially stable business model in place with focus on pan public sector
Ensure all staff adopt the core principles of the 'Well-being of Future Generations Act'

Site rationalisation project consolidating service functions to reduce regional presence
ETC – 95% Rollout achieved
Storage & Scan on Demand continues
Review Primary Care Informatics Services across all contractor professions
Continued implementation of NHS Wales Primary Care Services modernisation /transition programme through in house provision or contracted out facilities
Electronic Customer Relationship Management (CRM) strategy developed
PPV integrated partnership arrangements with Audit and Assurance Services and counter fraud services
Strategy developed for the increase in automation of ALL transaction services
Continued delivery of a financially stable business model

Full rollout and deployment of ETC services across Community Pharmacies in Wales
Extended delivery of the Store and Scan on demand Service (40% and 50% uptake)
Rollout of revised services to Primary Care Contractors utilising benefits delivered by the NHSE privatisation programme
Including a new registration service provision through SPINE and automated claims processing
Revised provision of traditional services to Primary Care Contractors utilising modern communications tools to improve services
Improved provision of NWSSP services into Primary Care Cluster networks and federations
Integrated Primary Care Informatics Services across all contractor professions
Launch of Primary Care Ophthalmic data warehouse and informatics service system

Operational review on the impact of ETC services across Community Pharmacies in Wales to inform further efficiencies
National Programme delivery - Store and Scan on demand Service supporting GP Sustainability
Digital NHS Wales – Paper light/paperless Patient medical records programme
Continued rollout of revised services to Primary Care Contractors utilising benefits delivered by the NHSE privatisation programme
Deployment of a registration service provision through SPINE and automated claims processing
Rollout of the GMS and GOS payments services across Wales should in house system development be undertaken
Development and launch of Cluster/GP Practice service catalogue
Primary Care Services estate review and potential rationalisation

2017/18

2018/19

2019/20

2020/21

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	2017-18	2018-19 Target	2019-20 Target	2020-21 Target
KPI 1 - Primary care payments made accurately and against payment timescales	100.00	100.00	100.00	100.00
KPI 2 - Patient assignment requests are actioned within 24 hours	100.00	100.00	100.00	100.00
KPI 3 - Medical record transfers to/from GPs and other primary care agencies within 6 weeks - an indicator on practice performance for management review	95.00	97.00	98.00	98.00
KPI 3A - Urgent medical record transfers to/from GPs and other primary care agencies within 2 working days	100.00	100.00	100.00	100.00
KPI 4 - Acceptance/deduction to/from GPs lists for linked/non linked practices processed within an average of 2 working days except when an allocation of NHS number is required	100.00	100.00	100.00	100.00
KPI 5 - Additions to or variations or removals/amendments to Medical, Dental and Ophthalmic Performers Lists and the Pharmaceutical List processed within 10 weeks of receipt of full application	70.00	100.00	100.00	100.00
KPI 6 – Category A Cascade alerts to contractors to be issued within 4 hours of receipt.	100.00	100.00	100.00	100.00
KPI 6A – Category B Cascade alerts to contractors to be issued within 1 working day of receipt	100.00	100.00	100.00	100.00
KPI 7 – Bi-annual SLA meetings with HBs	100.00	100.00	100.00	100.00
KPI 8 –Produce KPIs quarterly and post to share point within 5 working days of the quarter end	100.00	100.00	100.00	100.00
KPI 9 – Post Payment Verification visits against programme of visits	100.00	100.00	100.00	100.00
KPI 10 - PPV practice files to be completed and closed within 3 months of the date of visit	100.00	100.00	100.00	100.00
KPI 11 - PPV practice files to be completed 2 weeks prior to the visit date	100.00	100.00	100.00	100.00
KPI 12 - Action point / service point queries resolved / closed within an agreed response time	98.00	99.00	99.00	100.00
KPI 13 - GP locum reimbursement claims assessed and passed to HBs within 3 working days of receipt	95.00	98.00	100.00	100.00
KPI 14 - Student Bursary applications processed within 15 days	100.00	100.00	100.00	100.00
KPI 15 - Prescription Keying Accuracy Rates	99.65	99.75	99.85	99.85
KPI 16 - Uptake of Electronic Prescription Returns System	98.00	98.50	99.00	100.00
KPI 17 - Uptake of Open Exeter claiming by Practice	70.00	90.00	100.00	100.00
KPI 18 - Uptake of Open Exeter claiming by overall amount of different service claims	50.00	90.00	100.00	100.00
KPI 19 - ETC uptake in Community Pharmacy	0.00	40.00	80.00	85.00

PROCUREMENT SERVICES

To provide world class procurement services to support the NHS Wales ambition of delivering world class health and social services to its population and communities, to sustain the health and well-being of future ..

WHO ARE WE AND WHAT DO WE DO?



Provides a complete Procure to Pay (P2P) customer focused professional service to NHS Wales through our Category Sourcing, Frontline Local Procurement, Supply Chain, Accounts Payable and eEnablement functions

Delivers significant cost savings for NHS Wales, and supports key healthcare service improvement and patient safety priorities. We also support the sustainable and prudent procurement agendas through clinically driven evidence based sourcing ensure patient care quality and safety benefits.



476 staff

£26m
purchasing
savings

652,000
orders
processed
totalling **£932m**

2,500
All-Wales
contracts

1.7m invoices
processed
totalling **£4.2b**


33 million
stores items

4,500
customers
across NHS

94.3% Customer
satisfaction

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> • 5-year Procurement Strategy developed in conjunction with Directors of Finance and HB's. • Annual SLA modernisation reviews held with individual Health Boards and Trusts. • Participation in Health Board/Trust Division meetings & service improvement Groups. • Working with customers to improve savings, efficiencies & service delivery through groups e.g. Commodity Advisory, Supply Chain Liaison etc. • Supporting Welsh Government hosted groups such as the All Wales Performance Improvement Team, All Wales P2P Group, All Wales Finance Academy • Regular meetings with NPS to assist the delivery of collaborative procurement benefits to Welsh Public Sector. 	<ul style="list-style-type: none"> • Non-pay financial Savings. • Sharing best practice and opportunities for efficiency savings/CIP. • Non-financial benefits – health care outcomes, sustainable solutions. • Robust procurement governance and assurance. • Procurement advice and support. • Emergency planning. • High quality, safe products. • Delivery of core P2P process. • Development of category expertise. • Professional advice and guidance. • Innovation and forward thinking. 	<ul style="list-style-type: none"> • Collaboration and co-production, ensuring priorities for service delivery and improvement are aligned and integrated into planning and operations. • Robust quality assurance programme verified by third party certification. • Working with customers and partners to integrate processes and standardise systems and processes. • Horizon scan and benchmark services against similar organisations. • Via skilled and professionally qualified staff.
What significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> • On target to deliver contract savings of £26m. • Achieved non-financial benefits to include improved patient outcomes & enhanced safety e.g. Mental Health Learning Disability agreement, CAMHS, Home Oxygen. • Supporting "Referral to Treatment" targets within Health Boards via various outsourcing arrangements with non NHS Wales providers. • Supporting Health Boards and Trusts with resource shortages in specialist areas e.g. Radiology Reporting, Advocacy Services. • Delivery of planned Capital Schemes and discretionary Capital Programmes including unplanned additional capital allocations e.g. Efficiency through Technology Fund. • Supporting service transformation & innovation e.g. strategic NHS Wales IM&T agenda, transforming Cancer Services in S.E. Wales, Specialist & Critical Care Centre Project. 	<ul style="list-style-type: none"> • Maintaining and exceeding performance targets • Improving customer satisfaction. • Responding to additional needs of HB/Trusts. • Developing relationships and partnerships to achieve beneficial outcomes. • Providing investment and support for staff training and development. • Working collaboratively with other NHS Organisations -NHS England, Scotland & Ireland. • First collaborative approach between NHS Wales, Police and Third Sector resulting in successful award and implementation of an All Wales Needle Exchange programme also adding significant benefits in terms of harm reduction. 	<ul style="list-style-type: none"> • Increasing activity in CHC/Commissioning. • Working with new strategic partners for new income opportunities. • Improvements to Accounts Payable service through process efficiency & technology. • Strengthening supplier relationship management/contract management. • Working together on HB/Trust cross cutting themes. • Extending procurement influence on non-pay spend. • Improving supply chain efficiencies and extending service to new customers • Supporting Welsh Government policy on Sustainability. • Joint working with councils to drive service change forward.

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<ul style="list-style-type: none"> Continued development of the business partnership model and joint working to identify and deliver non-pay expenditure agreed savings. Continuing the 'One Wales' approach. Modernising service delivery and achieving CIP savings through continued automation and standardisation of processes and systems. Continuing to provide robust procurement governance, which reflect key legislative changes and Welsh Government Policy such as Well-being of Future Generations Act, Modern Slavery Act & Code of Conduct for Ethical Employment etc. Supporting Health Boards and Trusts in the delivery of an efficiency programme to maximise value. 	<ul style="list-style-type: none"> Developing our website to provide customers with the business intelligence and service information they need. Continuing to encourage, receive and act upon customer feedback to improve our services. Supporting NHS initiatives and service improvement priorities with closer integration of planning and programme management activity. Delivering process and system improvements and efficiencies across the P2P process identified by the All Wales P2P Forum. Ensure we are supporting our customers to deliver services in line with the Well-being of Future Generations and Social Care (Wales) Acts Supporting service transformation programmes within NHS Wales including modernisation via the IM&T agenda. 	
Service Development	Our Staff	Excellence
<ul style="list-style-type: none"> Development of systems and processes resulting from the work of the All Wales P2P project, to focus on the continual improvement required within the Accounts Payable function. Identifying and realising opportunities to extend and improve our Supply Chain service including throughput, automation and stock management. Increasing capacity and capability to respond to ongoing developments and opportunities to deliver savings and benefits to our customers e.g., integration of primary and secondary care, IT procurements (non-NWIS), value based procurement, GS1 Standards-Scan for Safety etc. Development of our service to meet the needs of Primary Care. 	<ul style="list-style-type: none"> Develop our approach and processes for attracting and recruiting staff. Identify and deploy improved approaches to retain our staff. Develop an improved approach to manage succession planning. Implement a training and development programme to achieve full potential of staff to meet current and future needs of the service. Collaborate with local education providers (e.g. Universities) to strengthen links in order to provide opportunities for graduates and students and promote Procurement as a career of choice. Improve knowledge sharing and approach to succession planning to ensure business continuity in smaller niche areas of knowledge and skills. 	<ul style="list-style-type: none"> Maintain and extend our management systems certifications to embed best practice in key elements of performance such as customer service excellence, quality, information governance, health and safety and environmental management. Continue to develop the use of performance and process benchmarking activity to improve services. Continue to use technology and innovation to realise efficiencies e.g. robotics, invoice automation, Automatic Data Capture, stock voice pick etc.

OUR JOURNEY



The risks to achieving this could include:

- Clarity and timing of Health Boards procurement requirements
- Ongoing staff vacancy factor with failure to recruit into key roles.
- Failure to retain key staff in some areas with associated agency costs
- eEnablement funding not yet agreed on a recurring basis.
- Delivery of CHC/commissioning work and benefits dependent on Welsh Government or NHS Wales funding.
- Capacity & appropriateness of accommodation at some locations.
- Brexit/requirement to manage new contracts/inflation issues.
- NHS England Supply Chain restructure with potential loss of access to national contracts.
- Inability to influence some Health Board Supply Chain Teams.



PATH TO PRUDENT AND ONCE FOR WALES



WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
1. Second year to deliver agreed 5 year NHS Wales Procurement Strategy.	With challenging financial times ahead for NHS Wales we have a responsibility to work together to deliver value for NHS Wales.	Our strategy sets out our collective vision and goals to improve health outcomes for the patients and community in Wales.	Ongoing to 2022 measured via agreed SLA and KPI's	Collaborative strategy developed in partnership with all Health Board and Trust's Directors of Finance, Customers, Suppliers and Staff.	Cost pressures for NHS Wales, Change agendas from NHS England and Welsh Government, austerity throughout the community – maintaining levels of service whilst striving for improvements.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Delivering value for Wales							
2.Delivery of non-pay expenditure, contract Savings	Key customer requirement	Savings Plan, contract programmes aligned to HB/Trust objectives and work plan	Ongoing to 2022 measured via agreed KPI's	Sourcing and Front Line Teams	Cost pressures including currency fluctuations, Brexit, HB/Trust compliant spend Risk to delivery of savings targets if key recruitment activity is not achieved and sustained.	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: Contract savings realised with compliant spend by Health Boards and Trusts							
3. Robotic Process Automation (Phase 2). Use of software robotics for P2P & other potential areas (Phase 1 Pilot/test completed 17/18)	To meet cost/budget targets and release staff resource	Roll out of full capability to be implemented to support business processes.	Phase 2 to be completed by March 2019	E-Enablement, Accounts Payable Sourcing RPA Team	Corporate resource issue - skills set and management of RPA team. Capacity of robot and money to extend to other areas. RPA demand to be managed within Oracle SLA provisions	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Improved internal processing efficiencies releasing staff resource							

4. Efficiency through Automation and P2P process improvement project	An initiative of the DOF/Finance Academy	Multiple projects e.g. E trading. PEPPOL, catalogue validation, Fiscal tec, oxygen finance and associated AP structures.	Phased application- 2018-2021 linked to delivery plan of P2P work-stream	P2P governance arrangements	HBs/Trusts not fully and consistently embracing the move to standardisation of processes	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	
Success will be: Reduction in duplicate payments, improved speed of response to queries, reduction in storage required & Improved PSPP performance. Reduction in likelihood of services/goods being placed 'on stop'							
5.Introduction of key supplier account management including a cleanse of the Oracle Master Supplier file	To improve PSPP performance. This will include partnering with Suppliers participating in the Oxygen Finance Early Payment Scheme	Accounts Payable will lead a Project team	April 2018 – March 2019	Accounts Payable, Sourcing, Frontline teams	Limited staff resources Initiative to commence as soon as Robotics implemented.	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: Reduction in likelihood of services/goods being placed 'on stop' due to account queries, improved reputation and PSPP performance.							
6.Phase 1 of a 5 year programme to improve early payment performance	Investigating ways to save Health Boards/Trusts money through prompt payment	Utilising technology and Oxygen Finance for prompt payment. P2P process efficiencies will be ongoing and realised over the contract term until 2023.	Phased approach but all Health Orgs to be operational by March 2019 - (project to continue to 2023)	Accounts Payable, Sourcing, Frontline teams	Suppliers not wishing to participate. Standard approach not accepted/agreed	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: Delivering circa £9 million over 5 years. This initiative will also contribute to Social Value agenda.							
7.Introduction of warehouse management solution for storage and	Working with Primary Care Services to deliver process efficiencies to NHS	Utilising technology i.e. Warehouse Management Systems and	April 2018 – March 2019	Supply Chain, Primary Care Services	Outside scope of current work programme therefore there will be an impact on resources: staff and finance	Value for Money	
						Customers	✓
						Excellence	✓

management of patient medical records		streamlining process efficiency				Staff	
						Service Development	✓
Success will be: Benefits to be realised from utilising existing skills, knowledge and resources, maximizing efficiencies. Full traceability of patient records.							
8.Working with HBs and Trusts to deliver stock management efficiencies, including use of ADC Electronic cabinets & voice pick	HBs are looking to address inefficiencies in current practice	Utilising technology: Automatic data capture bar coding system programme rollout in ward and theatres	April 2018 – March 2019	Supply Chain, Front Line Procurement Teams	Impact on resources: staff and finance	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Improved stock management, reduction in cost of non-stock purchases, reduction in IOH and greater clarity of purchase behaviour to end users.							
9.Phase 2 of delivery of Medicines Homecare contract	Requirement is governance driven – without appropriate contract there is risk of non-compliance	Continuation of project which commenced 2017 with further rollout of the Medicines Homecare Project to all Health Boards	All Health Orgs to be operational by March 2019	Sourcing, HCS	Availability of funding, high complexity requiring specific skills sets	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: Improved governance compliance, removal of variability in service delivery, improved efficiencies utilising 'Once for Wales' principles and reduction of in-patient prescribing							
10.Delivery against Sustainable Procurement Policy Objectives; including Modern Slavery, WBFGA, Community Benefits	To meet our obligations and support NHS Wales and Welsh Government aims to create a more sustainable Wales	Implementation of the change programme by the Procurement Sustainable Development Group	To be completed by June 2018	Representation from all parts of Business. Group. In addition, experts on wellbeing & future generations and modern slavery will be invited to assist the Group.	Conflict between HB/Trust short-term budget priorities and budget required for longer term sustainable solutions. Dependent on support from wider NWSSP i.e. WOD, Corporate Team	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	

Success will be: Reduction in Procurement Services carbon footprint and environmental performance at key locations; delivering environmental, social and economic benefits through sourcing and procurement. To further embed the Well Being of Future Generations Act and the Ethical Employment in Supply Chains code of conduct in to our process, procedures and ways of working

11.Base-lining expenditure on Continuing Health Care and improving benefits realisation on Care Homes Framework/other areas of CHC in conjunction with NCCU	HBs/Trusts require improved governance, quality outcomes and savings	Liaising with CHC and MH/LD leads in HB's and WHSSC.	To commence at a high level during 2018/19 subject to funding	Sourcing	Lack of funding and resources. High degree of complexity requires specific skills set	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓

Success will be: Savings, efficiencies in commissioning, reduced risk of non-compliance with clinical and corporate governance requirements at HBs

12.Maintain and extend management system certifications	Extending existing best practice in quality management across the organisation; ISO 9001, CSE, OHSAS18001	Process mapping, documented procedures and training materials	To be completed by March 2019	Project Leads and Quality Manager	Impact on resources and potential for conflicting priorities <i>Note: ISO 27001, ISO14001 corporate led</i>	Value for Money	✓
						Customers	
						Excellence	✓
						Staff	
						Service Development	

Success will be: Compliance with governance and legislative requirements, internal efficiencies and improved quality of service

13.Roll out of Action Point across Procurement Services	Internal need to improve call logging and management	Extending use of existing service	To be completed by March 2019	Procurement corporate/excellence group, links to all teams	Impact on resources	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	

Success will be: Improved call handling and service management

14.Review the Carter recommendations	Benchmark NHS Wales relative position and new	Review Scan4Safety pilot sites performance. Assess PEPPOL for	To be completed by March 2019	Procurement Corporate	Impact on resources: staff and finance.	Value for Money	✓
						Customers	

	opportunities for efficiency	common exchange of data between order & invoice to ease payment & aid product traceability				Excellence	✓
						Staff	
						Service Development	
Success will be: Operational efficiencies, greater regulatory compliance and improved patient safety.							
15. Supporting delivery of Specialist & Critical Care Centre	Part of HBs Clinical Futures Strategy	Project team created to deliver the build of the specialist and critical care centre.	This is not due to open until 20/21 and there will be significant activity until this time	Capital Equipping Team dedicated to SCCC	Impact on resources	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: Successful delivery of project capital, goods and services procurement needs							
16.Embed & accelerate the scope of the evidence based Procurement Board for Medical Device Standardisation	Prudent Healthcare, 'Once for Wales'	Reformat of the AWMCDSG to facilitate better joint working with clinicians & stakeholders	Completed by October 2018	Sourcing, VBP team and SMTL	Impact on resources	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: Improved governance compliance, removal of variability in service delivery, improved efficiencies utilising 'Once for Wales' principles.							
17.Supporting Transforming of Cancer Care (Year 1 of 4 year project)	Cancer Services modernisation and expansion in SE Wales.	New build and equipment at Velindre Cancer Centre	This is a significant amount of work To be completed by March 2022	Capital Team and Velindre Frontline	Resources, legal costs, expertise given MIM	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: A new facility meeting the requirements of the population and the TCS Strategy							
18.Introduction and application of Value Based Procurement principles	Prudent Healthcare	Team established to assist and guide Sourcing Category Teams	Practice to be embedded as "business as usual" by March 2020	Sourcing, VBP team	New thinking and significant amount of patient outcome data needed	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • Develop a recruitment and retention strategy with support from WfOD to ensure we attract and retain appropriately skilled staff to meet current and future business. • Delivery of training required with support from WfOD to meet professional and health and safety requirements as well as the development of new skills. 	<p>Ongoing support in securing continuing funding streams for new cost pressures and initiatives. These include:</p> <ul style="list-style-type: none"> • Availability and retention of appropriately skilled and experienced staff to meet increases in service demands • Commissioning CHC and local pressures e.g., Capital and Primary Care Shift, surgical procedure outsourcing • Accommodation plan & improvements to frontline offices. • Investment in equipment (rolling programme) 	<ul style="list-style-type: none"> • Provision of off-site and across site access to systems and resolution of associated issues • IT resources for additional staff including laptops, licences, ADC handhelds etc. • Replacement of existing IT in line with rolling programme/redundancy plan • To identify and exploit opportunities for digitalisation and new technologies (including robotics) to improve agility of the workforce • Implementation of eLearning Tools across Health Boards and Trusts
Processes		Dependencies – Internal and External
<ul style="list-style-type: none"> • Project support to provide capacity to deliver identified projects and their associated benefits • Full implementation of project management process and system to support delivery of challenging programme of service improvement 		<ul style="list-style-type: none"> • Availability of funding for workforce and capital needs • Support of internal services including; Workforce, Corporate, Finance, Employment Services • Outcome of current Health Board and Trust planning activity • Impact of NPS performance on savings, staff resources and customer satisfaction • Outcome of NHS Supply Chain restructure & ongoing access to National Contracts

WHAT WILL WE DELIVER IN 2019-20

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Third year to deliver agreed 5 year NHS Wales Procurement Strategy	With challenging financial times ahead for NHS Wales we have a responsibility to work together to deliver value for NHS Wales.	Our strategy sets out our collective vision and goals to improve health outcomes for the patients and community in Wales.	Ongoing to 2022 Annual targets to be achieved by March 2019	Collaborative strategy developed in partnership with all Health Board and Trust's Directors of Finance, Customers, Suppliers and Staff.	Cost pressures for NHS Wales,– maintaining levels of service whilst striving for improvements.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Delivering value for Wales							
Delivery of non-pay expenditure, contract Savings	Key customer requirement	Savings Plan, contract programmes aligned to HB/Trust objectives and work plan	Ongoing Annual targets to be achieved by March 2020	Sourcing and Front Line Teams	Cost pressures including currency fluctuations, Brexit, HB/Trust compliant spend Risk to delivery of savings targets if key recruitment activity is not achieved and sustained.	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: Savings realised with compliant spend by Health Boards and Trusts							
Year 2 of project on automation and improvement of P2P process.	An initiative through the DOF/Finance academy	Multiple projects – E Trading (PEPPOL) RPA, Catalogue validation, Fiscal tec, oxygen finance, and associated AP structures.	Phased application 2018-2021 linked to delivery plan in P2P work stream	P2P governance arrangements	Resistance on part of HBs/Trusts to standardise their processes	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	
Success will be: Reduction in potential for duplicate payment, improved speed of response to queries, reduction in storage required.							
Year 2 of 5 year programme to improve early payment performance	Investigating ways to save Health Boards and Trusts money through prompt payment	Utilising technology: Oxygen Finance for prompt payment	2023 – completed programme	Accounts Payable, Sourcing, Frontline teams	Suppliers not wishing to participate. Standard approach not accepted/agreed	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	
Success will be: delivering circa £9 million over 5 years. Contribution to Social Value agenda							
Year 2 of Transforming	Cancer Services modernisation	New build and equipment at		Capital Team and Velindre Frontline	Resources, legal costs, expertise given MIM	Value for Money	✓
						Customers	✓

Cancer Care project	and expansion in SE Wales	Velindre Cancer Centre	To be completed by March 2022			Excellence	
						Staff	
						Service Development	✓
Success will be: Successful delivery of project capital, goods and services procurement needs							
Year 2 of project on Introduction and application of Value Based Procurement principles	Prudent Healthcare	Team established to assist and guide Sourcing Category Teams with implementation of new way of working	Ongoing from 18/19 Practice to be embedded as "business as usual" by March 2020	Sourcing, VBP team	New thinking and significant amount of patient outcome data needed	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: Contract delivery to focus on the patient outcome							
Year 2 of Continuing Health Care project - improving benefits realisation on Care Homes framework & other areas of CHC in conjunction with NCCU	HBs/Trusts require improved governance, quality outcomes and savings	Liaising with CHC and MH/LD leads in HB's and WHSSC	To commence to second phase subject to funding	Sourcing	Lack of funding and resources. High degree of complexity requires specific skills set	Value for Money	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: Savings, efficiencies in commissioning, reduced risk of non-compliance with clinical and corporate governance requirements at HBs							
Year 2 of project supporting delivery of Specialist & Critical Care Centre	Part of HBs Clinical Futures Strategy	Project team created to deliver the build of the specialist and critical care centre.	Ongoing- this is not due to open until 20/21 and there will be significant activity until this time	Capital Equipping Team dedicated to SCCC	Impact on resources	Service Development	✓
						Customers	✓
						Excellence	
						Staff	
						Service Development	✓
Success will be: Successful delivery of project capital, goods and services procurement needs							
						Value for Money	✓

Phase 1 of establishment of Estates Procurement	Opportunity identified with HB with a potential to develop to a wider category management approach	Analysis and review of non-pay expenditure	To be completed by March 2020	Front Line Procurement – ABMUHB, BCU	Buy-in from Estates Officers	Customers	
						Excellence	✓
						Staff	
						Service Development	
Success will be: Opportunities identified for savings, increased compliance with SFIs.							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> Resource support to assist with implementation of recruitment and retention strategy for Procurement Services to ensure current & future staffing needs are met. Resource support to meet training needs of existing workforce and expanding services. 	Continuing support in securing funding streams for new costs pressures. These will include <ul style="list-style-type: none"> ➤ Ongoing workforce pressures to meet increasing service demands ➤ Further recruitment and retention initiatives ➤ Accommodation needs ➤ Equipment needs 	<ul style="list-style-type: none"> Provision of off-site and across site access to systems and resolution of associated issues IT resources for additional staff including laptops, licences etc. Replacement of existing IT in line with rolling programme/redundancy plan To identify and exploit opportunities for digitalisation and new technologies to improve agility of the workforce
Processes	Dependencies	
<ul style="list-style-type: none"> Project support to provide capacity to deliver identified projects and their associated benefits 	<ul style="list-style-type: none"> Availability of funding for workforce and capital needs Support of internal services including; Workforce, Corporate, Finance, Employment Services Outcome of Health Board and Trust planning activity Impact of NPS performance on savings, staff resources and customer satisfaction Outcome of NHS Supply Chain restructure 	

WHAT WILL WE DELIVER IN 2020-21?

- ✓ Contract Savings
- ✓ Cost Improvements based on improved efficiencies achieved through re-design and standardisation of processes and systems
- ✓ Continuing support of HB/Trust and Welsh Government aims
- ✓ Agreed 5 year Procurement Strategy
- ✓ Expanded services
- ✓ Greater integration of HB/Trust priorities with those of Procurement Services
- ✓ Doing things differently i.e. with strategic partners
- ✓ Excellent relationships with our Customers adding value

The risks to achieving this could include;

- Resources to deliver
- Being able to recruit appropriately skilled staff to support HBs/Trusts requirements
- Retention of staff
- Resolution of existing constraints and issues with IT systems
- Engagement and service delivery from partner organisations such as NHS Supply Chain England

To achieve this we will need;

Resources

- Optimum staffing levels with appropriate skills
- Financial support
- Appropriate IT infrastructure and hardware
- Adequate accommodation
- Appropriate equipment

We will continue to engage with;

Customers and Stakeholders
Welsh Government
Health Boards
Public Sector Bodies
Partner Organisations
Staff
Suppliers

BEYOND 2021

Procurement Strategy for Wales, which maximises value and contributes to NHS financial sustainability

Use of innovative, e-enabling technologies and digitisation to provide greater access and streamlining of services streamline systems

Business intelligence informing the service and NHS through integrated systems and aligned objectives

Workforce capability and potential fully realised through effective processes and programmes for development

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Continue to identify savings opportunities & to influence non-pay expenditure.

Building on strengths of enhanced partnerships with HB/Trusts via regular meetings.

Continue to modernise services utilising technology.

Achieved a standardisation of processes across Procurement Services.

Improved reporting, providing data to deliver new services/ financial benefits

Improved internal, external communications with stakeholder & customers

Delivering staff training and professional qualifications.

Extending procurement influence on non-pay spend to deliver efficiencies and cost savings

Greater integration with Health Board and Trust planning activity

Further utilisation of technology & automation to realise efficiencies

Continue to expand services within and outside NHS

Partnership working with NHS England/Public/Third Sector collaborators.

Work with our customers, specialists to develop value based outcomes

Development of new approach to recruitment and retention, collaborating with local education providers

Service development driven by customer requirements

Strategic procurement closely integrated with NHS Wales' policy and strategy

Full optimisation of e-enabling technologies

Effective use of business intelligence through integrated systems aligned to objectives

Innovation informs service development and drives improvement

Further development of Business Partnering

Workforce development to include product, service, & leadership expertise

Fully implement recruitment & retention strategy

Value based procurement becomes the systematic approach to sourcing activity.

Mature partnerships with stakeholders & collaborative partners, driving innovation

Process excellence & efficiency via automation & standardisation of practices

Consistent KPI targets across HB's/Trusts in Wales.

Progressing business partnership arrangements

Supporting customers to deliver services to include transformation programmes

Workforce capability fully realised through effective processes and programmes for development

Recruitment of the skilled staff - retention of staff

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	2017-18 Target	2018-19 Target	2019-20 Target	2020-21 Target
KPI 1 – Sourcing - Savings against plan	£26m	£13m -see staffing risk		
KPI 2 – Sourcing - Contract Programme delivered on time	100%	100%	100%	100%
KPI 3 – Sourcing - Quotes & Tenders via BRAVO	100%	100%	100%	100%
KPI 4 – Sourcing - Capital Projects	100%	100%	100%	100%
KPI 5 – Sourcing - Capital discretionary	100%	100%	100%	100%
KPI 6 – Sourcing - Catalogue coverage	80%	85%	90%	90%
KPI 7 – Sourcing - Catalogue Pricing accuracy	100%	100%	100%	100%
KPI 8 – Front line Procurement - Requisition turnaround (3 days)	90%	90%	90%	90%
KPI 9 – Front line Procurement - % volume non PO invoices	80%	85%	90%	95%
KPI 10 – Stores - Efficiency first pick	95%	95%	95%	95%
KPI 11 – Stores - Delivery on time	100%	100%	100%	100%
KPI 12 – Stores – SSP & R&D	2 days	2 days	2 days	2 days
KPI 13 – Accounts Payable - PSPP (non NHS)	95%	95%	95%	95%
KPI 14 – Accounts Payable - Call handling service	95%	96%	97%	97%
KPI 15 – Accounts Payable – Call handling queries resolved within 10 working days	85%	87%	90%	95%
KPI 16 – Accounts Payable – Process new supplier requests and amendments within 2 days	99%	99%	99%	99%
KPI 17 – Accounts Payable – All invoices to be input onto Oracle within 5 working days	90%	93%	95%	100%
KPI 18 – Electronic invoice automation	80%	85%	90%	95%
KPI 19 – Quality – Staff satisfaction survey	85%	85%	90%	95%
KPI 20 – Quality – EFQM Score	>500* / 350-400 corporately	>500* / 350-400 corporately	>550* / 350-400 corporately	>600* 400-450 corporately
KPI 21 – Quality – Maintain ISO accreditation	Maintained	Maintained	Maintained	Maintained
KPI 22 – Quality – Maintain Customer Service Excellence/STS Standard	Maintained	Maintained	Maintained	Maintained

Surgical Materials Testing Laboratory

WHO ARE WE AND WHAT DO WE DO?

SMTL's core service is to provide testing and technical services regarding medical devices to the Welsh NHS. SMTL is internationally recognised as a centre of excellence for testing disposable medical devices, whose reports are accepted and respected worldwide.

SMTL is involved in standards development such as gloves, gowns & drapes, dressings, and Luer/non-Luer connectors. They have developed a number of methods which are published as British or European standards, or pharmacopoeia monographs



20 Staff

Laboratory is
UKAS accredited
to ISO 17025

Internationally
recognised as a
**centre of
excellence**

Key partner for
**value based
procurement**

Investigated 247
medical device
defect reports

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<p>Evidence Based Procurement Board meetings</p> <p>Liaison with Procurement colleagues on a weekly basis</p> <p>Liaison with Specialist Estates Services (SES) colleagues</p> <p>Representation of Welsh Government at Medicines and Healthcare Products Regulatory Authority (MHRA)</p> <p>MDR External Expert Group, Safe Anaesthetic Liaison Group (SALG)</p> <p>Chairing and co-managing the deployment of ISO small bore connectors</p> <p>Joint meetings with MHRA AIC and ABMU HB</p> <p>Interlaboratory testing and audits</p> <p>Working in partnership Health Technology Wales</p>	<p>Reliable test data to support contract decisions</p> <p>High quality test and technical reports</p> <p>Timely and appropriate incident investigations</p> <p>Expert support and technical advice</p> <p>Support for contract challenges</p> <p>Expertise on medical device regulations and standards</p> <p>R&D support to aid decision making</p> <p>Ensuring that only high quality medical consumables and devices are used in NHS Wales that support positive patient outcomes</p>	<p>Continue to provide expert advice</p> <p>Increase testing & R+D capacity for Procurement</p> <p>Expand the range of devices we can test</p> <p>Expand the types of testing we offer, such as Human Factors testing</p> <p>Continue to maintain a high performing Quality Management System</p> <p>Continue to lead on development of British, European and International standards.</p>
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<p>Investigated 247 medical device defect reports, including chasing manufacturers to check they are taking appropriate action and detection of systematic problems, some examples include;</p> <p>Vaginal Speculum testing</p> <p>Patient Temperature management</p> <p>Testing Lymphodema arm sleeves to ensure they deliver clinically appropriate pressures</p> <p>Completed Urology test programme for procurement, identifying non-compliant products (such as catheters and urine drainage bags) pH testing for contract and change of supplier to ensure continuity of safe products</p> <p>Testing the adhesiveness of Tapes and Plasters for procurement in response to reports of adverse incidents following implementation of a new All Wales contract.</p> <p>Delivered Health Technology Assessment advice for the EBPB e.g. Silver Catheters, and compression wraps.</p>	<p>Provision of high quality, reliable, and robust test data</p> <p>Provision of expert technical advice</p> <p>Develop and maintain good relationships with clinicians and other NHS users</p> <p>Good liaison with NWSSP PS and SES personnel</p> <p>Provide a nationally and internationally recognised service</p> <p>Represent NHS Wales at National and International levels</p> <p>Undertaken extensive QA assessment of reusable tonsillectomy instruments for all NHS Health Boards prior to clinical implementation</p> <p>Commissioned to undertake validation testing of Low Dose Enteral connectors for GEDSA</p> <p>Hosted meetings with Department of Health (DoH) and NHS Clinical Evaluation regarding the review of clinically effective products</p>	<p>Develop user assessment (human factors usability testing) services alongside laboratory testing</p> <p>Simplify defect investigations and reduce investigation periods</p> <p>Increase level of support to EBPB</p> <p>Revise key European and British standards such as Hosiery and Dressings standards to reflect modern practice and clinical requirements</p> <p>Develop alternative pressure measurement systems to evaluate medical devices which are not possible to be assessed using existing standard equipment and methods e.g. compression wraps.</p> <p>Potential to assist with Protein monitoring system for AW HSDU departments</p> <p>Increase capability to assess other small bore connectors to the recently published 80369 series</p>

KEY PRIORITIES 2018-21

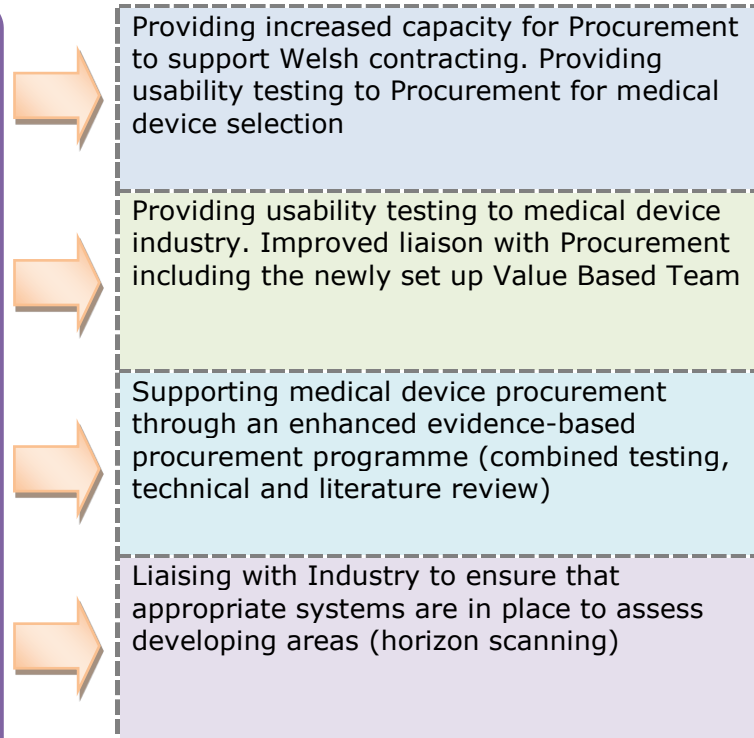
Value for Money	Our Customers
<p>Provide support to NHS Wales to enable the procurement of cost effective, clinically acceptable and standards compliant products</p> <p>Provide support to the Evidence Based Procurement Board (EBPB) to reduce variation and enable compliance with contracts</p> <p>Support allocative efficiencies by providing an evidence base to make decisions on.</p>	<p>Reduce time taken to investigate defect reports</p> <p>Increase resource to Evidence Based Procurement Board</p> <p>Pilot usability testing to assess clinical acceptability of devices</p> <p>Provide support documentation to Procurement and wider NHS Wales to improve readiness for MDR changes</p> <p>Liaison with manufacturers through standards committees</p>



Service Development	Our Staff	Excellence
<p>Move to an R Markdown test report system to reduce the risk of errors and non-conformity levels</p> <p>Develop a new defect reporting system to increase efficiency and reduce investigation time</p> <p>Develop new test methods to diversify testing to NHS Wales and Medical Device industry e.g. odour containment testing, leak-testing of connectors, administration set/syringe accuracy, compression wraps and viral barrier testing for medical gloves;</p>	<p>Maintain core-competency training compliance</p> <p>Enable role development where appropriate</p> <p>Explore training opportunities</p> <p>Developing management skills of essential staff members.</p> <p>Succession planning for appropriate roles</p>	<p>Continue to lead in Europe on revision and development of dressings standards which reflect modern wound care practices</p> <p>TC/205/1 WG14, WG15 and WG15PG1</p> <p>Continue to deploy and manage a United Kingdom Accreditation Services (UKAS) accredited quality management system (QMS) to ISO 17025</p> <p>Lead on development of new British Standard for graduated compression devices (CH/205/01/01)</p> <p>Dressings testing for DoH</p> <p>SMTL are continuing to lead on the UK implementation for ISO 80369-6, and provide advice for industry and NHS England</p>

OUR JOURNEY

In 3 Years We Will Be



Taking
Responsibility



Listening and
Learning



Innovating



Working
Together

The risks to achieving this could include;

- Loss of expertise due to retirement/resignations of key staff
- Financial uncertainty from commercial income generation and Brexit
- Lack of support from Health Boards for clinical buy in to support our work

PATH TO PRUDENT AND ONCE FOR WALES



Liaise with MHRA AIC and NHS England NRLS team to develop a single-portal for defect reporting;



Enable NHS Wales customers to have access to cost-effective, safe and standards compliant medical devices through the provision of testing, usability assessment and technical advice;



Maintain service quality and consistency through accreditation of testing services in compliance with ISO 17025 to reduce the risks and enhance confidence to users of SMTL test reports;



To ensure that service related risk assessments and safe systems of work are in place and reviewed regularly.



Ensure that standards participation efforts result in standards which are relevant to NHS Wales;



Ensure that test equipment used by SMTL staff is modern, safe to use, appropriately calibrated and maintained, to support effective, efficient and safe medical device assessment and selection;



Continue to work with EBPB to ensure evidenced based purchasing and Value for money is achieved

WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Pilot Usability Testing	To provide procurement with additional evidence on which to select devices for Welsh contracts, and to enable clinicians to have confidence in the products that are awarded as a result of the process	Through the identification of SMTL staff who can project manage usability projects and through liaison with Swansea University;	March 2019	Through recruitment of an operations manager and development of testing staff to undertake human factors testing;	Inability to recruit and/or diversion of staff time to more urgent issues (such as defect and procurement programmes)	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Completion of at least one Usability assessment project during 2017/18							
Revision of Hosiery Standard	To enable a simpler procurement process and to unify a number of disparate standards to help with Government / NICE / Drug Tariff advice	Through chairing and editing the British Standards committee	November 2018	PP & GH	Resource Availability	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Publication of Standard							
Continued customer satisfaction	to ensure SMTL customers are obtaining appropriate levels of service;	through regular customer satisfaction surveys;	March 2019	SMTL Office Staff	SMTL delivery falling below customer expectations	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Continued rating of SMTL services in the top 2 scoring sections by 95% of our customers;							

NHS Wales Procurement Contracts; <ul style="list-style-type: none">- Neuraxial Devices;- Lab Plastoc & Glassware- Theatre-wear- Lymphoedema	to support Procurement effectiveness and robustness through the selection of safe, efficient and effective medical devices for NHS Wales staff;	Through engagement with clinicians at working group meetings, test report and submission analysis, laboratory testing and engagement with Procurement and Legal colleagues at possible contract challenges;	Multiple contracts throughout 2018-19	SMTL Testing and Management staff	Inability to recruit and / or diversion of staff time to more urgent issues ; inability to procure laboratory equipment to facilitate testing;	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Successful implementation of newly contracted devices and provision of test reports on time							
Further DoH / NHS Clinical Evaluation dressing types; <ul style="list-style-type: none">- Foams- Hydrocolloids- non gelling fibres	Following on from original work SMTL have been asked to support NHS Clinical Evaluation programme in their aim to evaluate the effectiveness of medical devices	Through engagement with NHS Clinical Evaluation team and undertaking test programmes.	Multiple projects up to December 2018	SMTL Testing Staff, Management and Director	inability of SMTL to fulfil test programme requirements. This may be due to existing workload;	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	
Success will be: Production of test reports within allocated lead times							
Enhanced Interlaboratory testing programme	To provide assurances to auditors and customers in terms of proficiency	Through working with commercial inter labs, customers and competitors	March 2019	Departmental Managers	Diversion of resource and exposure to urgent work. Also potential to share inabilities to competitors	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Completion of Interlab testing programme and continued UKAS accreditation							
Completion of NRfit 80369-6 Project	to support Procurement and WG in compliance with the alert	Through implementing compliance with	March 2019	SMTL Testing and Management staff	Delayed provision of samples from Industry	Value for Money	✓
						Customers	✓
						Excellence	✓

		the standard across NHS Wales				Staff	
						Service Development	✓
Success will be: implementation of new ISO connectors across NHS Wales							
Fully operational EBPB up and running	to support Procurement and WG in purchasing of Evidenced Based procurement	Continuing with membership and delivering projects that SMTL are responsible for	March 2019	SMTL testing, R&D and management staff	Diversion of resource due to delayed recruitment	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Successful implementation of new structure to EBPB group							
UKAS Accreditation	To deliver accurate and reliable test data to SMTL customers and stakeholders	Through deployment of a UKAS accredited quality management system	March 19	All SMTL staff, as they are all a part of the quality management system	Failure to maintain quality management system Reputational damage	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: UKAS accreditation renewal and continued business from customers requiring UKAS accredited test data							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> - Recruitment into QA Vacancy - Additional IT resource - Development of managerial skills for certain staff members - additional R&D resource for EBPB 	<ul style="list-style-type: none"> - Reference connectors for ISO 80369 - End of life equipment that is core to SMTL services and therefore new equipment will need to be procured - Lab flooring and central heating system repairs or replacement - Equipment required to expand range of testing services - Appropriate capital funding to meet requirements 	<ul style="list-style-type: none"> - continued development of R Markdown and extra resource for data handling/analyst - Test method training database - Video conference facilities
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> - ISO 17025 is due for re-issue, so SMTL will require to commit QA and technical staff time to reviewing the new standard and refreshing the QMS to meet any new requirements. - Systematising uncertainty of measurement budgets 	<ul style="list-style-type: none"> - All Wales Capital Programme for equipment - working with external organisations to ensure that they can work with us for the interlab work 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
Procurement Contracts; - Gloves - Drapes - Wound Management	To support Procurement effectiveness and robustness through the selection of safe, efficient and effective medical devices for NHS Wales staff;	Through engagement with clinicians at working group meetings, test report and submission analysis, laboratory testing and engagement with Procurement and Legal colleagues	March 20	SMTL testing and management staff	Inability to recruit and/or diversion of staff time to more urgent issues ; inability to procure laboratory equipment to facilitate testing;	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Successful implementation of newly contracted devices							
EBPB support and continued refined of the processes	to support Procurement and WG in purchasing of Evidenced Based procurement	Continuing with membership and delivering projects, and collaboration with stakeholders and similar initiatives.	March 2020	SMTL testing, R&D and management staff		Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	
						Service Development	✓
Success will be: Production of advice for NHS Wales							
Continuation of the Interlaboratory testing programme	To provide assurances to auditors and customers in terms of proficiency	Through working with commercial inter labs, customers and competitors	March 2020	Departmental Managers	Diversion of resource and exposure to urgent work. Also potential to share inabilities to competitors	Value for Money	
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Completion of Interlab testing programme and continued UKAS accreditation							
Usability Testing	To provide procurement with additional	Continue to undertake testing within	March 2020	Through current allocated testing staff to undertake	inability to recruit and/or diversion of staff time to more urgent issues (such	Value for Money	✓
						Customers	✓
						Excellence	✓

	evidence on which to select devices for Welsh contracts, and to enable clinicians to have confidence in the products that are awarded as a result of the process;	procurement requirements		human factors testing; Potential recruitment dependant on demand	as defect and procurement programmes)	Staff	✓
						Service Development	✓
Success will be: Delivery of usability reports to support procurement contracts							
Continued customer satisfaction	to ensure SMTL customers are obtaining appropriate levels of service;	through regular customer satisfaction surveys;	March 2020	SMTL Office Staff	SMTL delivery falling below customer expectations	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Continued rating of SMTL services in the top 2 scoring sections by 95% of our customers;							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<input type="checkbox"/> Stable testing and QA resource levels	<input type="checkbox"/> Sufficient funding to cover pay and non-pay requirements;	<input type="checkbox"/> Maintenance and refresh of IT systems
Processes	Dependencies	
Planned succession management and talent development programme;	Continued liaison with Procurement and visibility of changes to their contract programme	

WHAT WILL WE DELIVER IN 2020-21?

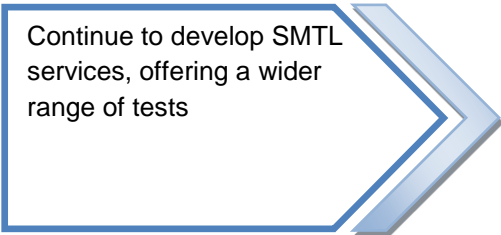
✓ Continue to support NWSSP PS in contract testing and technical support;
✓ Continue to run a UKAS accredited QMS in compliance with ISO 17025
✓ Continued equipment acquisition, maintenance, calibration and replacement ;
✓ Continued commitment to IT refresh;
✓ Continued support for EBPB;
✓ Helping to oversee implementation of MDR for WG and ProcS

The risks to achieving this could include;

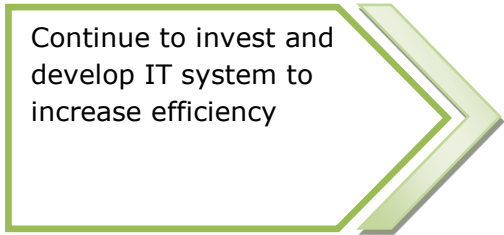
- Ensuring sufficient funding and availability of appropriate skill mix amongst staff

To achieve this we will need;	We will continue to engage with;
Resources	Customers and Stakeholders
1. Access to capital monies;	1. NWSSP Procurement Services
2. Planned succession management and talent development programme;	2. NWSSP Specialist Estates Services
3. Sufficient funding to cover pay and non-pay requirements;	3. NHS Wales LHBs and Trusts

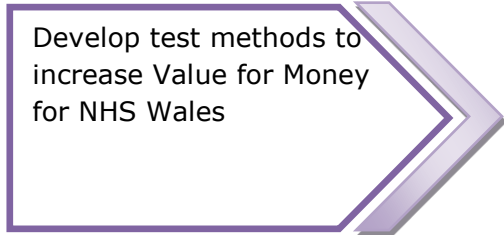
BEYOND 2021



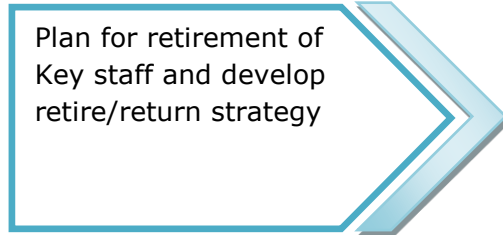
Continue to develop SMTL services, offering a wider range of tests



Continue to invest and develop IT system to increase efficiency



Develop test methods to increase Value for Money for NHS Wales



Plan for retirement of Key staff and develop retire/return strategy

KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Capital Injection for equipment refresh

New member of staff for physical testing to support procurement recruited

New member of R&D staff to support EBPB

Continued dedicated support for procurement contracts

Continued running of incident investigation reporting service for WG and procurement

Continued UKAS accreditation

Development of the new structures and processes for EBPB

Investment in new posts

Continued dedicated support for procurement contracts

Continued running of incident investigation reporting service for WG and procurement

Continued UKAS accreditation

Continued development of processes and support for EBPB

Enhanced Interlaboratory testing programme

Pilot Usability Testing

Working with Specialist Estates Services to expand the testing programme to support CSSD and HSDU's

Connector testing to ISO 80369

Increasing the breadth and capacity of testing services and development of innovative services (usability testing)

Investment in new posts linked to development of usability testing

Continued dedicated support for procurement contracts

Continued running of incident investigation reporting service for WG and procurement

Continued UKAS accreditation

Continued development of processes and support for EBPB

Enhanced Interlaboratory testing programme

Working with Specialist Estates Services to support CSSD and HSDU's

Long term strategy/succession planning

Helping to oversee implementation of MDR for WG and ProcS

Continued dedicated support for procurement contracts

Continued running of incident investigation reporting service for WG and procurement

Continued UKAS accreditation

Continued development of processes and support for EBPB

Enhanced Interlaboratory testing programme

Working with Specialist Estates Services to support CSSD and HSDU's

2017/18

2018/19

2019/20

2020/21

KEY PERFORMANCE INDICATORS

Description of Key Performance Indicator	2018-19 Target	2019-20 Target
90% of incident reports sent to manufacturer within 6 weeks of receipt of form	TBC	TBC
% delivery of audited reports on time (Commercial)	TBC	TBC
% delivery of audited reports on time (NHS)	TBC	TBC
lab marked when date was set	TBC	TBC
Annual UKAS accreditation	TBC	TBC
UKAS findings addressed on time (Annual)	TBC	TBC
Sickness & Absence %	TBC	TBC

SPECIALIST ESTATES SERVICES (SES)

To champion modern, sustainable, safe and efficient healthcare environments to meet the needs of our customers and broader stakeholder communities through the application of our professional and technical estates and facilities related knowledge and skills.

WHO ARE WE AND WHAT DO WE DO?



Delivers specialist estates and facilities services for NHS Wales and strategy and policy related advice and guidance to the Welsh Government Health and Social Services Department.

Services include: Property disposals, acquisitions, lease renewals and primary care development support. Authorising Engineer services across a range of mechanical services and also electrical. Scrutiny of construction business cases. Fire, environmental, facilities management and imaging services. Production of technical guidance applicable to the NHS Wales estate and facilities.



46 professional and technical staff
23 Chartered professionals

£2m savings on negotiated lease renewals in 2016/17


£3.9m efficiency savings delivered in 2016/17 through Designed for Life frameworks

£4m cost avoidance and reduction annually

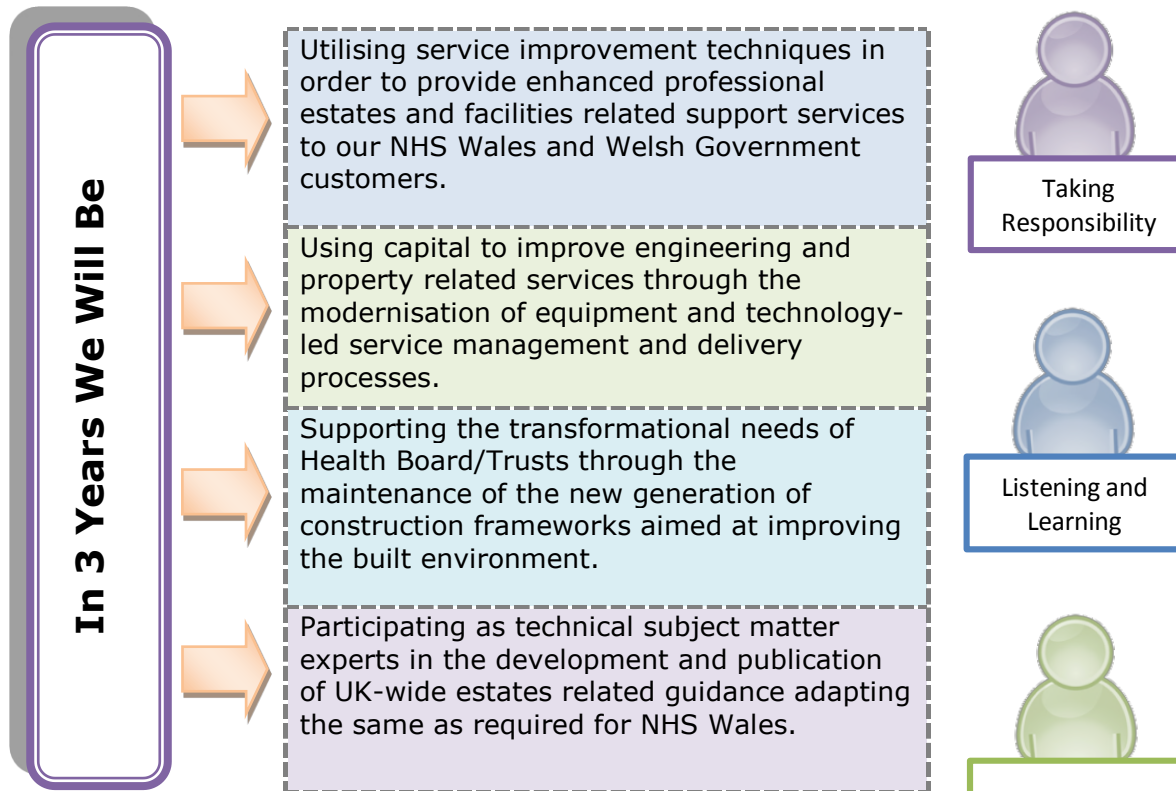
Triennial rental reassessments are completed on over **600** GP surgeries'

How have we engaged with our partners?	What do our partners want?	How will we deliver high quality services to our partners?
<ul style="list-style-type: none"> Quarterly meetings with Health Board/Trust Planning Directors. Bi-monthly meetings with the Health and Social Care Welsh Government (WG). Quarterly NHS Estates Group meetings with senior estates officers. Quarterly UK Health Departments meeting. Participated in ongoing meetings/stakeholder groups eg. Endoscopy Decontamination Forum (Wales); Welsh Government Capital Reviews with NHS Wales' Health Boards/Trusts; Healthcare Chartered Institute of Waste Management. Sought customer feedback via an annual survey. 	<ul style="list-style-type: none"> High quality independent estates and facilities advice and support. Excellent customer service from request to completion of the process. Confidence that the service received is reliable, consistent and safe. Quality accredited services to satisfy customer requirements. Service accessibility through simple and effective channels of communication. 	<ul style="list-style-type: none"> Being responsive to customers' needs by providing a range of fit for purpose services. Through embedding service improvement into the culture of the organisation and up-skilling staff. By timely and effective communication with customers through a variety of media. By responding positively to customer feedback. By constantly reviewing our quality management system (ISO9001:2015) procedures to ensure that they continue to meet customer requirements.
What are the significant benefits have we achieved for NHS Wales?	What do we do well?	Opportunities to do more
<ul style="list-style-type: none"> Facilitated the recovery of over £30m of rate rebates in the primary care sector for the 2010-17 revaluation period. Significant savings (£2m in 16/17) accrued from negotiating revised building lease terms on behalf of the NHS Wales' Health Boards/Trusts. Delivery of stronger collaboration and construction time and cost efficiencies through the creation and maintenance of the Designed for Life (DfL) procurement frameworks. This generated savings of £3.9m in 2016/17. Disposed of surplus health related property to the value of £3m in 2016/17. Deployed professional authorising engineer (AE) roles in order to secure significant safety assurance in specialist engineering areas. Created a uniformity of approach across NHS Wales to the rental reimbursement reviews of General Practice (GP) occupied properties. 	<ul style="list-style-type: none"> Meet NHS Wales' demand for independent expert advice and insight on a wide range of estate and facilities issues by providing a critical mass of experienced chartered professionals and technicians. Engage with our customers through a variety of communication channels to better understand and satisfy their requirements and inform improvement activities. Inform the management, maintenance and development of the estate through the development and issue of NHS Wales' specific technical guidance. Improve investment decision-making due to the application of professional expertise in the scrutiny of business cases. Customer satisfaction was at 95% in 2016/17. 	<ul style="list-style-type: none"> Develop the current property related service to support the investment of new capital, revenue and third party funding for Primary Care developments. Participate in high level feasibility studies of services such as Catering and Hospital Sterilizer and Decontamination Units (HSDU) provision to better understand the benefits/risks of adopting an all-Wales delivery model. Explore the development of a toolkit of possible primary care related sustainability and property solutions for Health Boards to consider eg. requests by General Practitioner (GP) practices for Health Boards to take over head lease agreements.

KEY PRIORITIES 2018-21

Value for Money	Our Customers	
<p>Through the utilisation of available professional expertise, the potential savings have been identified for 2018/19:</p> <ul style="list-style-type: none"> £1.75m associated with the effective management of property leases. £4m of efficiency savings in respect of the use of the Designed for Life (DfL) and NHS Building for Wales (BfW) construction frameworks in 2018/19. <p>In addition, the use of specialist knowledge and experience is likely to result in a capital receipt benefit of £16m from the disposal of surplus NHS Wales property</p> <p>The cost of SES providing Property Surveyor services is also reviewed annually to ensure that the hourly rate continues to be below the level of comparative providers.</p>	<p>Seek positive interactions with customers at every opportunity, informally and formally, to stimulate discussion on service delivery.</p> <p>Improve accessibility to technical guidance and other estates related information through the implementation of a new SES internet and intranet website.</p> <p>Utilise attendance at ongoing stakeholder groups to promote SES services and gather feedback for service improvement and development purposes.</p>	
Service Development	Our Staff	Excellence
<p>Capture requirements through continued engagement with customers in order to establish service improvement and development opportunities.</p> <p>Investigate savings and service improvement/development opportunities arising from legislative, policy or organisational change.</p>	<p>Continue to promote a strong briefing process involving structured and unstructured interactions between the management team and staff engendering service improvement and development activities.</p> <p>All staff have personal appraisal development review (PADR) plans which identify training and support needs. Training is one of the main tenets of the organisation and all staff are required to participate in continuing professional development (CPD) and also complete professional refresher training as required.</p>	<p>Continue to invest in the ISO9001:2015 quality accreditation and Customer Service Excellence award to drive process excellence and automation.</p> <p>Utilise the Improving Quality Together (IQT) - Silver award qualified resource within SES for service improvement activities.</p> <p>Technology pervades every service and capital is used to purchase transformational technology associated with engineering and property related services in particular.</p>

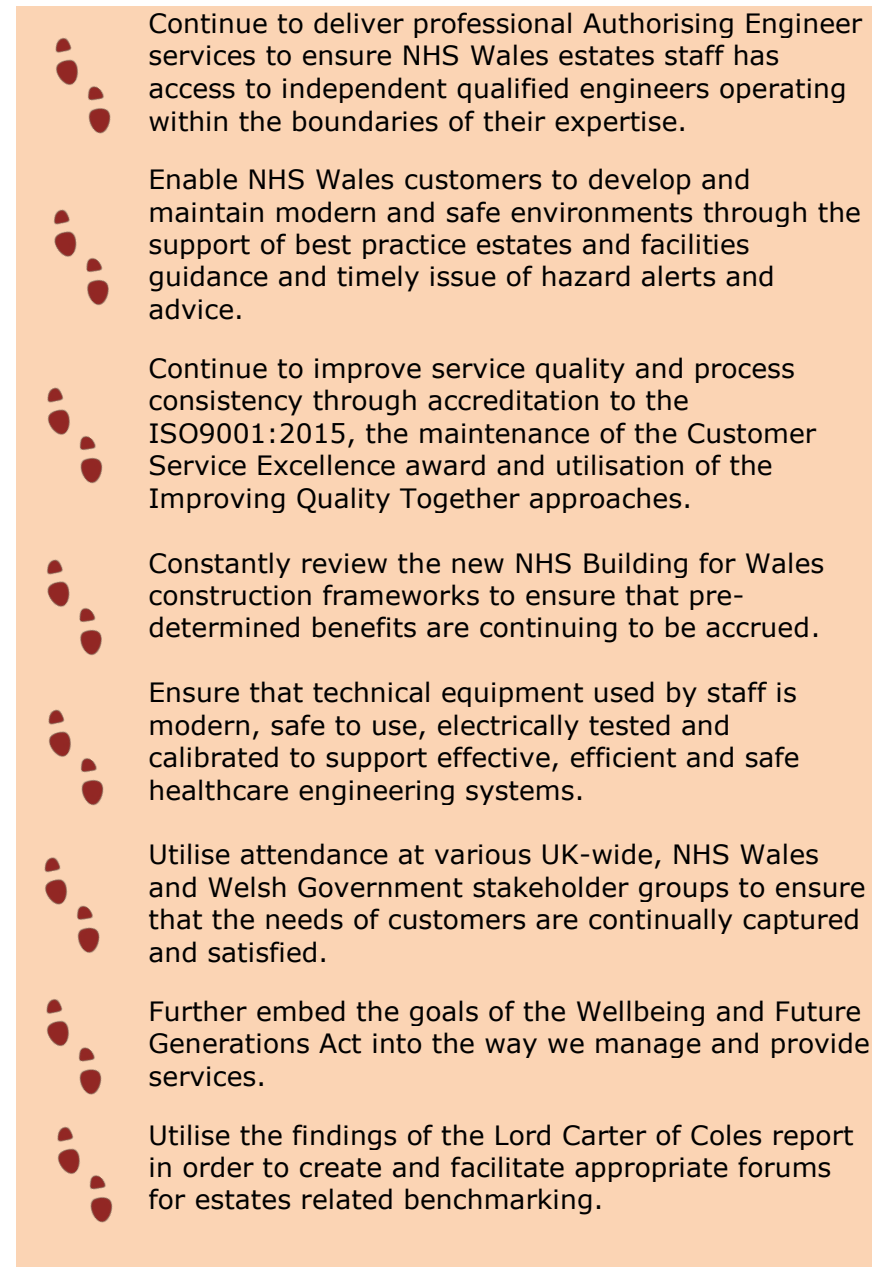
OUR JOURNEY



The risks to achieving this could include;

- Loss of expertise due to key staff leaving the organisation.
- Inability to recruit to vacant positions from the market due to the scarcity of estates professionals in some areas and the restrictions of the A4C system.
- A lack of available capital for the modernisation of equipment and IT systems.

PATH TO PRUDENT AND ONCE FOR WALES



WHAT WILL WE DELIVER IN 2018-19?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
The existing portfolio of high quality specialist estates and facilities services.	To satisfy customer requirements at the Welsh Government and NHS Wales SLAs.	Through the application of professional and technical resource.	March 2019	Head of each functional service section.	Inability to recruit to specialist positions.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Customer satisfaction in line with key performance indicators.							
Develop the current property related service to support the investment of new capital, revenue and third party funding for Primary Care developments.	To assist Health Boards in the delivery of modern, fit for purpose primary care facilities.	Re-establish resource in this area and focus on providing professional primary care property related support services to Health Boards.	April 2018	Head of Property, SES	Funding ultimately not available. Inability to generate sufficient resource from existing capacity.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Enabling the creation of a modern fit for purpose Primary Care services estate through the effective use of available funding.							
Work with Aneurin Bevan University Health Board to identify SES resources required in 2018/19 to support the development of The Grange Hospital.	To ensure that the Health Board has access to advice from a multi-disciplinary client-side support team as the scheme develops during 2018/19.	Establish the support requirements of ABHB for 2018/19 and provide resources to meet the same.	April 2018	SES Management Team	Insufficient resources available within SES.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Meeting the ongoing needs of ABHB in respect of the development of The Grange Hospital.							
Establish a scrutiny function in respect of NHS Wales' new revenue funded investment model, Mutual Investment Model (MIM). The pilot model is Velindre's new	To ensure that the MIM funding approach is subject to same level of business case scrutiny and rigour as a scheme being procured through a	Develop an approach to MIM business case scrutiny providing training to the Estates Advisors as appropriate.	July 2018	Head of Estates Development	Insufficient clarity around the new funding method preventing the creation of an adequate scrutiny process.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓

Regional Cancer Centre scheme.	framework or via traditional tendering.						
Success will be: Introduction of a MIM business case scrutiny service to ensure the use of the model represents value for money.							
Review the NHS Wales' estates and facilities benchmarking approach developed in 2017/18 implementing recommendations as appropriate.	To ensure that the approach taken is delivering the actions required to produce savings across NHS Wales.	Work with Health Boards/Trusts to improve the processes used to establish the benchmark figures.	August 2018	Head of Estates Development	Lack of buy-in from Health Boards/Trusts. Insufficient resource within SES to support the review.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Improve data accuracy in order to facilitate better decision-making.							
Contribute to the implementation of the Laundry Services Outline Business Case review.	Assist in the decision-making process to establish an affordable preferred option that achieves compliance with the current linen standards.	Through participation in the laundry review project team.	May 2018	Director, SES	Health Boards/Trusts resistance to change. Limited capital available.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: The delivery of a modern laundry solution for NHS Wales that meets current standards.							
Deliver the benefits of the new national NHS Building for Wales construction delivery frameworks in areas such as environmental performance/low carbon, community benefits etc.	To establish relationships between Health Boards/Trusts and supply chain partners in order to create an environment conducive to sustainable investment, local employment and waste reduction in processes and physical resources.	Through the requirements of the framework agreements.	March 2019	Head of Building for Wales	Limited capital available.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Meeting the NHS Building for Wales framework targets for community benefits and environmental performance.							
Complete on behalf of the Welsh Government	To establish the level of compliance with	Utilising the expertise of the	October 2018	Head of Engineering	Availability of resources.	Value for Money	✓
						Customers	✓

an audit of endoscopy related facilities/services within NHS Wales.	current endoscopy standards per Health Board/Trust.	SES decontamination team.				Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: To confirm compliance of facilities against current standards.							
Participate in the development of an NWSSP Apprenticeship Scheme in order to provide a framework for the future appointment of engineering apprentices to SES.	To respond to the shortage of engineers in the marketplace by developing in-house engineering resource for SES and Health Boards/Trusts.	Utilise the Network 75 scheme operated by University of South Wales	August 2018	Head of Engineering/Business Manager	NWSSP does not develop an organisation wide apprenticeship Scheme.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Utilising the apprenticeship levy effectively to provide opportunities for apprentices within NWSSP.							
Support the establishment of the Health Education and Improvement Wales (HEIW) organisation through the provision of project related and specific property management services.	Ensure that the property related aspects of the new organisation are professionally managed and represent value for money for the tax-payer.	Utilise existing property management resource to work in partnership with the HEIW project team.	March 2019	Head of Property, SES	Availability of appropriate office space. Inability to generate sufficient resource from existing capacity to support the project.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Achieving occupation of an appropriate building within project timescales.							
Continue to support Welsh Government and Health Boards with policy and practical risk based advice on existing hospital cladding and cladding design solutions for new developments.	To reduce the risk of fire related harm to patients, staff and visitors at NHS Wales premises.	Continue to work with Health Board estate departments and Consultant designers to reduce fire related risks.	March 2019	Head of Estates Development	Limited resource available within SES.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Continue to play a lead role in the risk management of hospital cladding including associated policy and development decision-making.							

To achieve this we will need:

Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> • The requirement for additional resource to support The Grange Hospital is currently unquantifiable. • Demand for an additional post/s to support benchmarking, general facilities management, environmental management and diagnostic imaging work is emerging. 	<ul style="list-style-type: none"> • Sufficient pay and non-pay budget required to maintain existing services. • Maintain the existing training budget to support personal appraisal and development review (PADR) and periodic professional and technical refresher training requirements. 	<ul style="list-style-type: none"> • greater use of technology particularly around mobile working and the use of e-forms and tablets/Smartphone technology on site. • to utilise the NWSSP file sharing portal for guidance document review.
Processes	Dependencies – Internal and External	
<ul style="list-style-type: none"> • SES successfully moved across to the ISO9001:2015 quality management system (QMS) standard in June 2017. This will be maintained during 2018/19 through the use of internal and external quality related audits. • The Customer Service Excellence award, first achieved in 2014, will also be subject to review in January/February 2019. 	<ul style="list-style-type: none"> • NHS Wales Informatics Service (NWIS). • All Wales Capital Programme. • Innovative funding models being developed by the Welsh Government, particularly around primary care facilities. • Support of operational expertise of NHS Wales estates and facilities managers to commit intellectual resources to support SES projects. • Department of Health (DH) funding for national healthcare publication programme. 	

WHAT WILL WE DELIVER IN 2019-20?

What	Why	How	When	Who	Risks/Limitations	Strategic Objective	
The existing portfolio of high quality specialist estates and facilities services.	To satisfy customer requirements at the Welsh Government and NHS Wales service level agreements (SLAs).	Through the application of professional and technical resource.	March 2020	By the Head of each functional service section.	Inability to recruit to specialist positions.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Customer satisfaction in line with key performance indicators.							
Continue to work with Aneurin Bevan Health Board to identify SES resources required in 2019/20 to support the ongoing development of The Grange Hospital.	To ensure that the Health Board have access to advice from a professional client-side multi-disciplinary support team as the scheme develops during 2019/20.	Establish the support requirements of ABHB for 2019/20 and provide resources to meet the same.	April 2019	SES Management Team	Insufficient resources available within SES.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Meeting the ongoing needs of ABHB in respect of the development of The Grange Hospital.							
Continue to provide advisory services to Health Boards/Trusts in order to improve performance against benchmarks.	To ensure that the approach taken is delivering the actions required to produce savings across NHS Wales.	Work with Health Boards/Trusts to set performance improvement targets.	August 2019	Head of Estates Development	Lack of buy-in from Health Boards/Trusts. Insufficient resource within SES to support the review.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: The improvement of Health Boards/Trusts against agreed benchmarks.							

In conjunction with Workforce colleagues review the effectiveness of the NWSSP Apprenticeship Scheme to ensure that the original aims are being met in relation to the delivery of engineering apprentices to SES.	To ensure that the scheme is fit for purpose and delivering the quality of apprentices required by the division.	Participate in the continued development of the NWSSP apprenticeship scheme.	March 2020	Head of Engineering/Business Manager	The scheme is not operational by 2019/20.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: Utilising the apprenticeship levy effectively to provide opportunities for apprentices within NWSSP.							
Participate in the development and implementation of the Laundry Services Full Business Case (FBC).	Assist in the decision-making process to establish an affordable preferred option that achieves compliance with the current linen standards.	Through participation in the laundry review project team.	May 2019	Director, SES	Health Boards/Trusts resistance to change. Limited capital available.	Value for Money	✓
						Customers	✓
						Excellence	✓
						Staff	✓
						Service Development	✓
Success will be: The delivery of a modern laundry solution for NHS Wales that meets current standards.							

To achieve this we will need:		
Workforce	Finance & Capital	IT
<ul style="list-style-type: none"> continue to review resources in order to ensure that Health Boards/Trusts with major capital schemes such as The Grange Hospital are adequately supported through the development process. a further engineering apprentice will be hired either through the Network 75 scheme or an NWSSP Apprentice Scheme. continue to review succession planning approaches. 	<ul style="list-style-type: none"> sufficient pay and non-pay budget required to maintain existing services and to invest in periodic professional and technical refresher training. capital investment may be required for engineering related technical equipment. If beneficial to SES's suite of services capital will be required to purchase a document management system. 	<ul style="list-style-type: none"> continue to invest in technology improvements to improve customer service. Evaluate the benefits of utilising a document management system within SES.
Processes	Dependencies	
<ul style="list-style-type: none"> The ISO9001:2015 quality management system will be maintained during 2019/20 through the use of internal and external quality related audits. The Customer Service Excellence award is subject to review in January/February 2020. 	<ul style="list-style-type: none"> NHS Wales Informatics Service All Wales Capital Programme. Innovative funding models being developed by the Welsh Government, particularly around primary care facilities. Support of operational expertise of NHS Wales estates and facilities managers to commit intellectual resources to support SES projects. Department of Health funding for national healthcare publication programme. 	

WHAT WILL WE DELIVER IN 2020-21?

- ✓ Continue to provide specialist estates and facilities services in line with agreed SLAs.
- ✓ Continue to support the development and construction of The Grange Hospital and other major capital schemes with specialist engineering resource and other related services.
- ✓ Continue service and quality improvement activities.
- ✓ Continue to train engineering apprentices.
- ✓ New projects or services generated from the estates and facilities benchmarking work.

The risks to achieving this could include;

- loss of key/senior professional staff due to retirement.
- continued erosion of pay compared to the private sector reducing the ability of the organisation to replace senior professional and technical staff to the organisation.
- ongoing budget reductions reducing the flexibility to fund projects and ongoing refresher training.

To achieve this we will need;

Resources

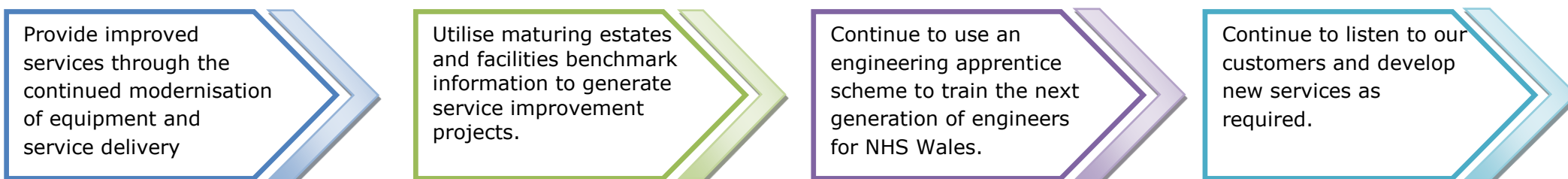
- Sufficient funding to support pay and non-pay budgets.
- Capital funding to support technical equipment and software purchases as required.
- Funding to support professional and technical refresher and development training.
- Continue to review succession-planning approaches.

We will continue to engage with;

Customers and Stakeholders

- Welsh Government.
- NHS Wales Health Boards/Trusts.
- Planning Directors.
- Estates, facilities and clinical managers at NHS Wales Health Boards/Trusts as required.
- Department of Health, NHS Scotland and NHS Northern Ireland.

BEYOND 2021



KEY MILESTONES IN OUR JOURNEY TO WORLD CLASS

Review the governance arrangements to ensure that it meets the needs of stakeholders

Review customer relationship approaches

Ongoing review and development of KPI's

Continued review of ISO9001 procedures to achieve the new ISO9001:2015 standard by November 2017.

Embed an approach to service improvement identification and implementation.

Continue the development of enabling technologies through the procurement of appropriate systems and equipment

Continue the review of the organisational structure

Review the Welsh Government Service Level Agreement (SLA) and NHS SLA format and content to ensure it continues to meet customer requirements.

Review the effectiveness and frequency of stakeholder groups attended by staff to ensure that customer relationship requirements are being adequately covered.

Continue to improve performance management information for SES management team decision-making purposes.

Utilise ISO9001:2015 to drive service consistency.

Continue to consider the use of technology to modernise current approaches and services.

Better understand how SES is currently working with the Wellbeing of Future Generations (Wales) Act

Continue to promote innovation in order to drive service improvement and development.

Continue to improve approaches and processes through the ISO9001:2015

Continue to seek customer feedback to ensure that services are meeting requirements.

Continue to invest in IT developments and technical equipment modernisation.

Ensure the effective use of business performance information.

Continue the drive to a paper light approach

Continue to use the NWSSP engineering apprentice scheme to train the next generation of engineers

Utilise maturing estates and facilities benchmark information to inform service improvement projects for Health Boards/Trusts.

Continue to promote innovation in order to drive service improvement and development.

Continue to invest in IT developments and technical equipment modernisation.

Continue the drive to a paper light approach

Review the internal capacity to support further engineering apprentices.

Continue to utilise the estates and facilities benchmark information to target more effectively cash-releasing service improvement projects.

2017/18

2018/19

2019/20


2020/21

KEY PERFORMANCE INDICATORS 2018/19

Description of Key Performance Indicator	2018-19 Target	Progress
PROFESSIONAL/TECHNICAL SERVICE RELATED INDICATORS		
Undertake independent reviews of fire safety standards and management at selected healthcare facilities within NHS Wales.	4 independent reviews completed by 31st March 2019.	
Undertake an annual validation and performance testing programme as required for sterilizers, washer disinfectors, endoscope re-processors, steam quality and particulates to the requirements and standards of the appropriate healthcare guidance.	150 tests	
Complete triennial rental reimbursement assessments on General Practitioner (GP) premises on behalf of Health Boards.	200 assessments	
Update Land and Property Portfolio (LAPP) plans in line with the programme.	115 LAPP reviews 68 LAPP surveys	
OTHER INDICATORS		
Customer Satisfaction: % of customer satisfaction based on survey information Target: 85% satisfaction rating	85%	
¹ Efficiency - % of available time spent on productive work as against non-productive (overhead) work (Target: 75% productive)	75%	
² Sickness – sickness levels below the NWSSP target of 2.0% (Target: Sickness below 2.0%)	<2.0%	
Issues and Complaints – deal with the same in line with the requirements of the Issues and Complaints Management Protocol (number of complaints) (Target: 5 or less complaints)	<5	
³ Charge comparison – compare property surveyor hourly rate to the private sector rate (Target: <Average Commercial Rate)	< ACR	

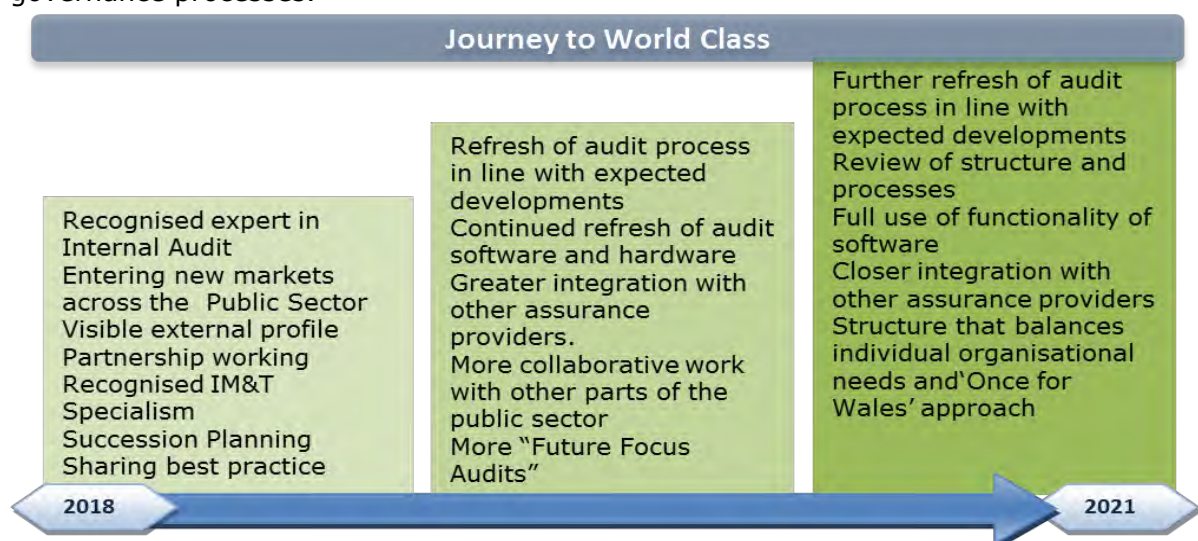
Appendix 1 – Our Services


Our services are provided through Divisions. An overview of each Division some key facts about the services it provides, and their journey to world class are given below, with more details provided in the individual Delivery Plans in *Section 2*.



Audit and Assurance Services deliver professional internal audit, assurance and consulting services to NHS Wales. We add value by helping organisations accomplish their objectives through a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, systems of internal control and governance processes.

100% in-house service
8,000 audit days
400 audit reviews
Regional and specialist teams
60 staff





Central Team e-Business Services Manages and supports the Strategy Enterprise Oracle Financial and Procurement system and associated services on behalf of NHS Wales. The teams activities include: monitoring the ERP contract and SLAs, managing change requests and financial costs, taking forward strategic programmes/projects, as well as providing operational and technical support.

£60k in house savings
10,000 users
9 staff, excluding student placements





Digital Workforce Solutions manage the Electronic Staff Record (ESR) contract and 'Hire to Retire' streamlining programme for NHS Wales. ESR is a digital solution that integrates with other workforce and finance systems providing an end to end streamlined solution to manage the employee journey from recruitment through to retirement. Through robust governance and a complex stakeholder engagement model, ESR capability is developed, promoted and deployed through an NHS Wales wide 'ESR Hire to Retire' Programme

Over **70,000** NHS Wales employees with ESR Self Service access
Over **20,000** users per month access e-learning
8 staff

Journey to World Class

IT dependencies reflected in NWIS IMTP
Deliver the ESR Hire to Retire work programme within timescales
Continued development of e-learning development schedule
Deployment of the ESR OH project deliverables
Scale up Learning@Wales enabling access to national e-learning content for public sector organisations
Mature use of talent management and succession planning in ESR

All workforce transactions undertaken through ESR
Continued enhancement of ESR in line with requirements
Transactional processes undertaken (where relevant) using robotics to release efficiencies
Continued central programme support to 'maximise 'Once for Wales' solutions and ensure unnecessary variation is avoided

Support the ESR re-procurement or the relevant NHS Wales workforce system
A culture engaged in use of e solutions for workforce transactions, learning, managing talent and succession planning, revalidation etc.
Complete and accurate workforce data and mature use of data analysis

2018

2021



Employment Services provides a range of hire to retire processing services to Health Boards and NHS Trusts across Wales. The service includes Recruitment, Payroll, Pensions, staff Expense Payments and Lease Car administration. These functions provide key influence to Health Bodies in realising their strategic workforce and patient agendas. Employment Services has established strong collaboration with their stakeholders to deliver the best service through the provision of teams with specialist knowledge, skills and experience.

78,000 staff paid monthly
6,000 staff each weekly
1.6 million pay-slips issued
13,000 posts advertised
201,118 expenses claims
8,700 DBS checks
330 staff

Journey to World Class

Sustained payroll accuracy rate of 99.8%
Trainee Medical Staff paid by single VPD
Roll-out of Duty of Care Model
GP Trainee Streamlining
Extend service delivery to HEIW
Ongoing harmonisation and development of paper-lite payroll processes and robotics
CSE and EFQM Excellence Model

Payroll service delivery accuracy rate of 99.9%
Internal Audit assessment achieve Substantial Assurance
Full review of NHS Wales Pay bill and standardisation of elements
Full roll-out services to Primary Care
Robust benchmarking demonstrating sustained reductions
Continued transformation through robotics
CSE and EFQM Excellence Model

Payroll service delivery accuracy rate of 99.9%
Impact Assessment of exiting European Union Customer Service Strategy delivering a customer focused service
Paper-lite transactional processes to support hire to retire activities
Professional, highly skilled workforce aligned to service improvement
Maximise transformation through robotics
CSE and EFQM Excellence Model

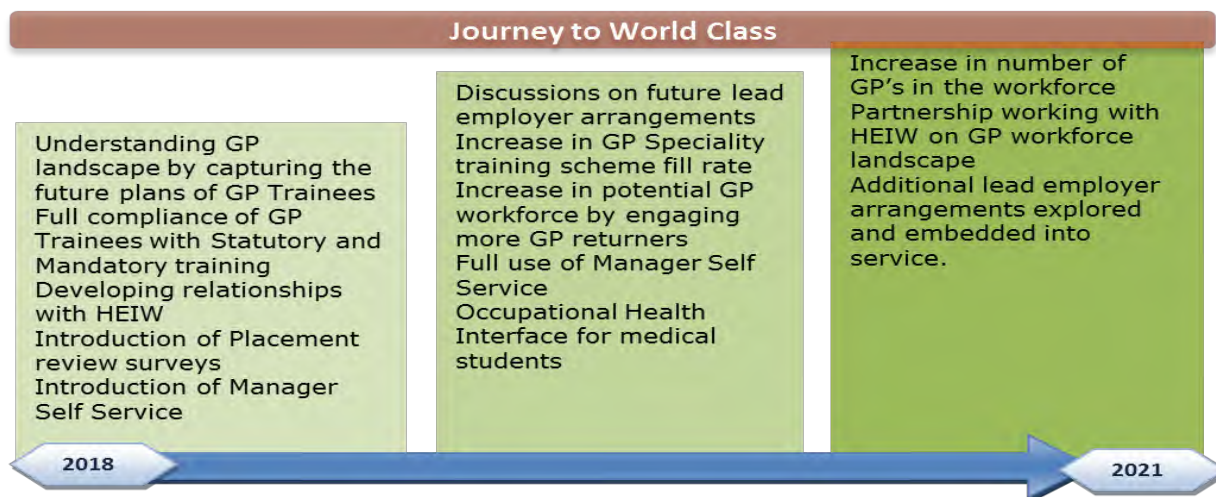
2018

2021



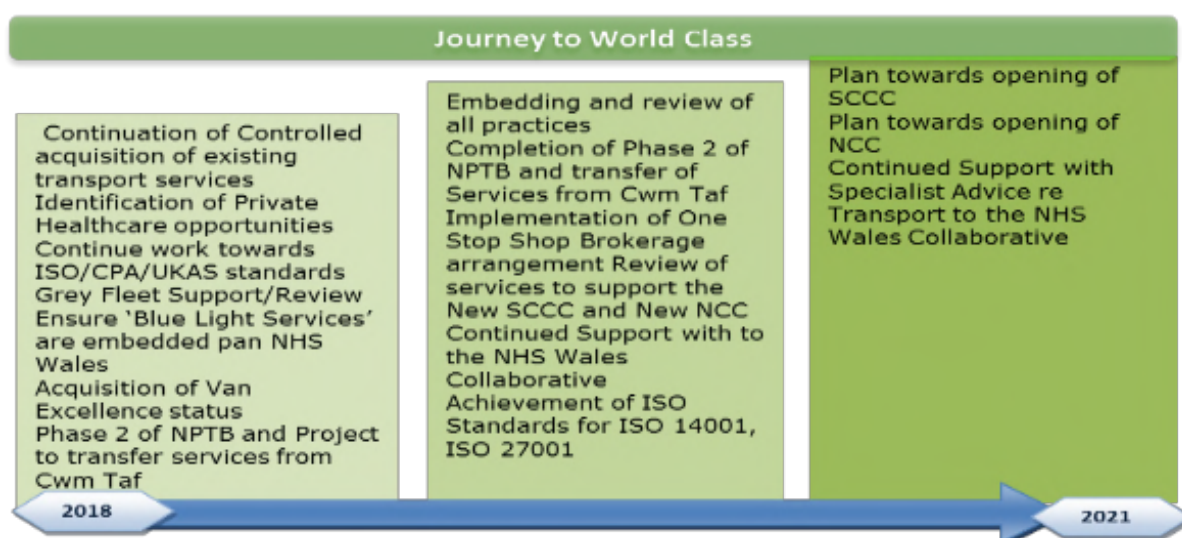
GP Specialty Registrar Trainees provides a dedicated HR resource to support the GP Trainees and their host organisations. The Medical Workforce team ensure that all matters related to the GP trainees' employment are managed and supported effectively. The team works collaboratively with all Health Boards and GP Training Practices in Wales and have a close working relationship with the Wales Deanery who continue to provide the training for Trainees.

The Lead Employer service is managed by a team of **3**
435 GP trainees employed in Wales
12 GP Schemes in Wales
156 GP Practices



Health Courier Services supports front line services across Wales, operating where required 24 hours a day, 365 days a year providing vital Clinical Logistical Support services for Primary and Unscheduled Care. We transport specimens, pathology blood / blood products, whole blood, platelets, vital medicines, CSSD, Clinical Staff, Medical Records, Linen and a wide variety of other non- patient items in routine, urgent and emergency (Blue Light) conditions.

Excess of **8m** Items of Pathology a Year
2.6m miles covered annually
120 vehicles
137 staff





Legal and Risk Services and Welsh Risk Pool

Services Act for NHS bodies in Wales, employing specialist solicitors to provide tailored, high quality, cost effective legal services and advice. We work together to provide integrated risk management advice and to identify areas of concern for improvement purposes and good practice which is shared nationally. We add value by helping organisations accomplish their

legal risk management objectives.

2,619 clinical negligence claims
596 personal injury claims
1357 legal advisory matters
100% agree WRP claims paid in 10 days"
101 staff

Journey to World Class

Progress marketing strategy for corporate legal services
 Improvement efficiency and effectiveness of financial processes / services
 Further digitise to improve efficiency
 Further invest and strengthen the team
 Implement refreshed case and document management systems

Maximise share of NHS Market
 Complete full deployment of enabling technologies
 Change culture across NHS by improving learning
 Enhanced audits of areas implementing lessons learned Focussed training programmes for all staff
 Improved communication with customers

All Health Organisations scoring > 90% in all areas
 Full deployment of enabling technologies
 Expansion of core business into Primary Care, Social Care and the Third Sector
 Innovation informs service development and drives improvement
 Maintain and further improve modernised work practices through the strategic use of ICT

2018

2021



Primary Care Services provides a wide range of services on behalf of NHS Wales for GPs, community pharmacies, dentists, opticians and appliance contractors. We manage the all-Wales Primary Care Performers Lists and provide advice

on performance and contractual issues relating to service provision. We also issue alerts and hazard warning distributions to NHS contractors, care homes, nursing homes, children homes, further educational colleges and independent hospitals.

£1.58 b of payments to NHS Wales contractors
85 m prescription forms
1.2 m ophthalmic claim forms
7,000 dental payments
310 Staff

Journey to World Class

Site rationalisation project consolidating service functions ETC – 95% Rollout achieved
 Storage & Scan on Demand continues
 Review Primary Care Informatics Services across all contractor professions
 Continued implementation of NHS Wales Primary Care Services modernisation
 Electronic Customer Relationship Management (CRM) strategy developed
 PPV integrated partnership arrangements
 Strategy developed for the increase in automation
 Continued delivery of a financially stable business model

Full rollout and deployment of ETC services across Community Pharmacies in Wales
 Extended delivery of the Store and Scan on demand
 Rollout of revised services to Primary Care Contractors Including a new registration service provision through SPINE and automated claims processing
 Improved provision of services into Cluster networks and federations
 Integrated Primary Care Informatics Services across all contractor professions
 Launch of Primary Care Ophthalmic data warehouse

Operational review on the impact of ETC services
 National Programme delivery - Store and Scan on demand Continued rollout of revised services to Primary Care Contractors
 Deployment of a registration service provision through SPINE and automated claims processing
 Rollout of the GMS and GOS payments services across Wales
 Development and launch of Cluster/GP Practice service catalogue
 Primary Care Services estate review and potential rationalisation

2018

2021



Procurement Services provides a complete Procure to Pay (P2P) customer focused professional service to NHS Wales through our Category Sourcing, Frontline Local Procurement, Supply Chain, Accounts Payable and eEnablement functions. Delivers significant cost savings for NHS Wales, and supports key healthcare service improvement and patient safety priorities. We also support the sustainable and prudent procurement agendas through clinically driven evidence based sourcing ensuring patient care, quality and safety benefits

£24.5 million purchasing savings
652,000 orders processed
2,500 All-Wales contracts
1.7m invoices processed
33 million stores items
550 staff

Journey to World Class

Extending procurement influence on non-pay spend
 Greater integration with Health Board and Trust planning activity
 Further utilisation of technology & automation
 Continue to expand services within and outside NHS
 Work with our customers, specialists to develop value based outcomes
 Development of new approach to recruitment and retention, collaborating with local education providers

Service development driven by customer requirements
 Strategic procurement closely integrated with NHS Wales' policy and strategy
 Full optimisation of e-enabling technologies
 Effective use of business intelligence through integrated systems aligned to objectives
 Further development of Business Partnering
 Fully implement recruitment & retention strategy

Value based procurement becomes the systematic approach to sourcing activity.
 Mature partnerships with stakeholders & collaborative partners, driving innovation
 Process excellence & efficiency via automation & standardisation of practices
 Consistent KPI targets across HB's/Trusts in Wales.
 Progressing business partnership arrangements
 Supporting customers to deliver services to include transformation programmes
 Recruitment of the skilled staff - retention of staff

2018

2021



SMTL core service is to provide testing and technical services regarding medical devices to the Welsh NHS. SMTL is internationally recognised as a centre of excellence for testing disposable medical devices, whose reports are accepted and respected worldwide. SMTL is involved in standards development. They have developed a number of methods which are published as British or European standards, or pharmacopoeia monographs.

UKAS accredited to **ISO17025**
 Investigated **247** medical device defect reports
20 staff

Journey to World Class

Review the Welsh Government Service Level Agreement (SLA) and NHS SLA
 Review the effectiveness and frequency of stakeholder groups
 Continue to improve performance management information
 Utilise ISO9001:2015 to drive service consistency
 Better understand working with the Wellbeing of Future Generations Act

Continue to promote innovation
 Continue to improve approaches and processes through the ISO9001:2015
 Continue to seek customer feedback
 Continue to invest in IT
 Ensure the effective use of business performance information.
 Continue to use the NWSSP engineering apprentice
 Utilise maturing estates and facilities benchmark

Continue to promote innovation
 Continue to invest in IT
 Continue the drive to a paper light approach
 Review the internal capacity to support further engineering apprentices.
 Continue to utilise the estates and facilities benchmark information to target more effectively cash-releasing service improvement projects.

2018

2021

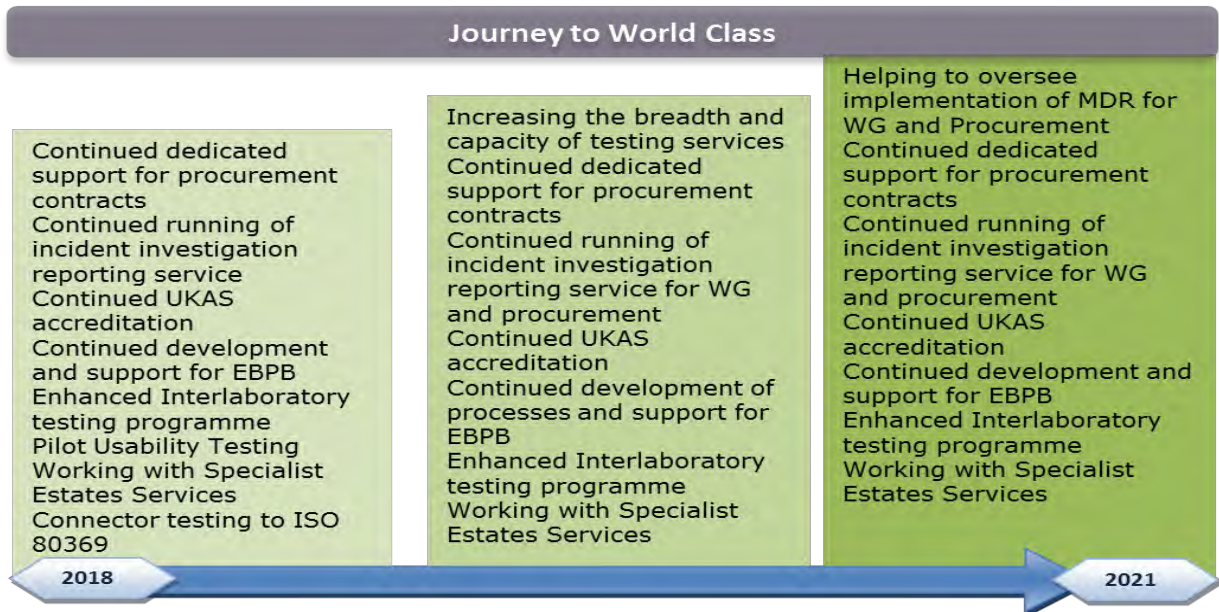


Specialist Estates Services support strategic change in the healthcare estate through advice and support to the Welsh Government and the provision of professional estates services to NHS Wales. More specifically we provide business case scrutiny, construction procurement and design advice and maintain a suite of construction and consultant frameworks. We also provide a comprehensive property management service, specialist Authorising Engineer (AE) services, engineering validation and the maintenance of estates related guidance and information.

£3.9m efficiency savings through construction procurement frameworks.

£2 million savings on negotiated lease renewals

46 staff



Appendix 2 – Our Engagement Process

We have a comprehensive engagement programme with all our stakeholders. The table below shows the detailed plan to support the engagement during the first year of this plan. Our senior management team also hold quarterly reviews with each of the Health Boards and Trusts to assess customer needs and put in place plans to continue to improve on delivery.

MONTHLY MEETINGS

Executive meetings with Velindre

Senior Management Team

Directorates Managers Briefing

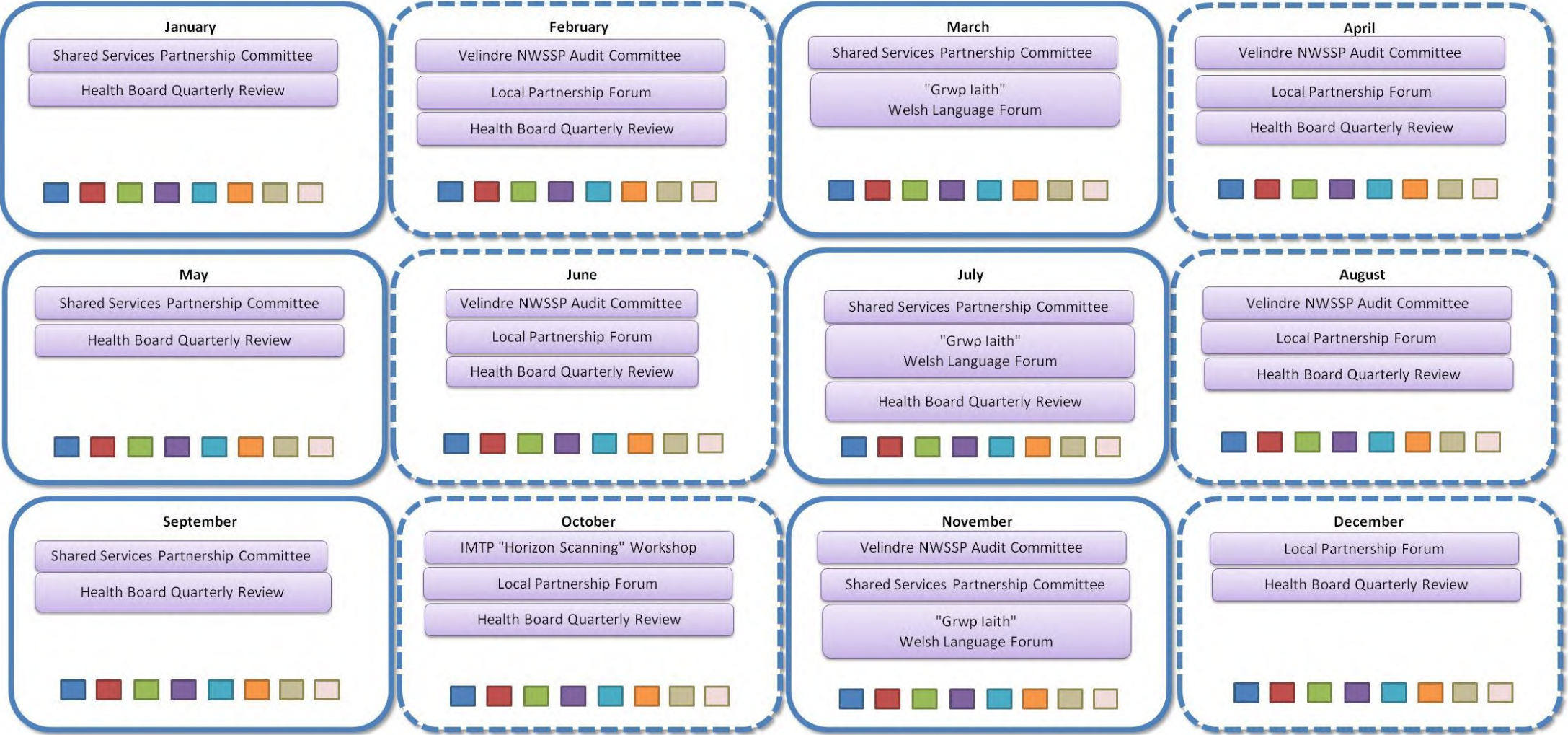
Welsh Risk Pool

Finance & Performance Meetings

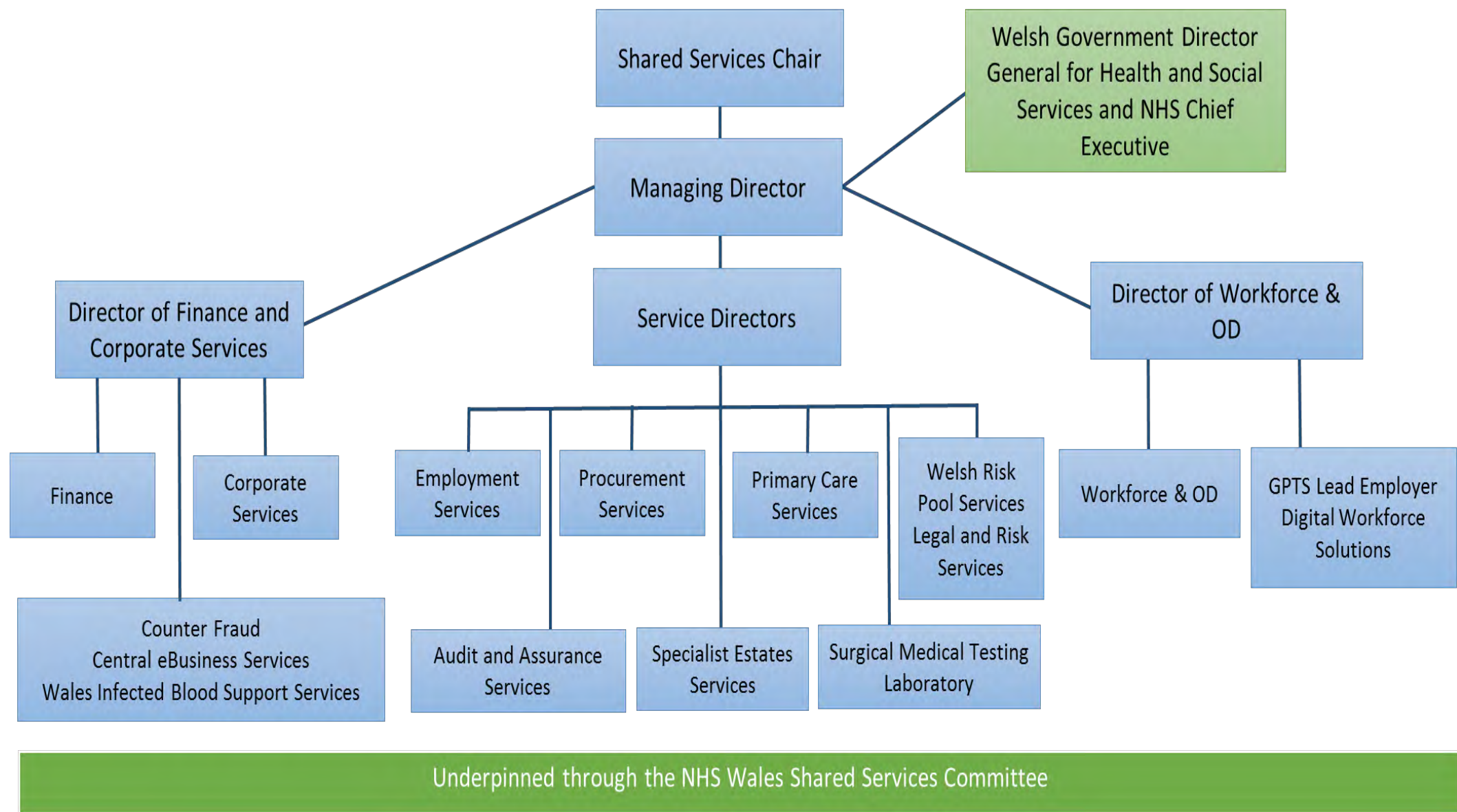
Workforce & OD Meetings

Board Secretaries Meeting

MD/Chair board attendance



Appendix 3 – Our Structure



Appendix 4 – Shared Services Partnership Committee Membership

Name	Position	Organisation	Voting
Margaret Foster	Independent Chair	NWSSP	Yes
Neil Frow	Managing Director of NWSSP	NWSSP	Yes
Steve Ham	Chief Executive –Velindre NHS Trust	Velindre NHS Trust	Yes
Huw Thomas	Director of Finance and Operations	Betsi Cadwaladar UHB	Yes
Nia Williams	Chief Executives Office	Hywel Dda UHB	Yes
Eifion Williams	Director of Finance	Powys Teaching Health Board	Yes
Joanna Davies	Director of Workforce	Cwm Taf UHB	Yes
Geraint Evans	Director of Workforce	Aneurin Bevan UHB	Yes
Melanie Westlake	Interim Board Secretary	Public Health Wales Trust	Yes
Chris Lewis	Deputy Director of Finance	Cardiff and Vale UHB	Yes
Karen Jones	Deputy Director of Finance	Abertawe Bro Morgannwg UHB	Yes
Patsy Roseblade	Acting Chief Executive	Welsh Ambulance Service Trust	Yes
Darren Dupre	Regional Manager	UNISON	No
Steve Elliott	Deputy Director of Finance	Welsh Government	No
Andy Butler	Director of Finance and Corporate Services	NWSSP	No
Hazel Robinson	Director of Workforce and OD	NWSSP	No
Robert Williams	Director of Governance	Cwm Taf UHB	No

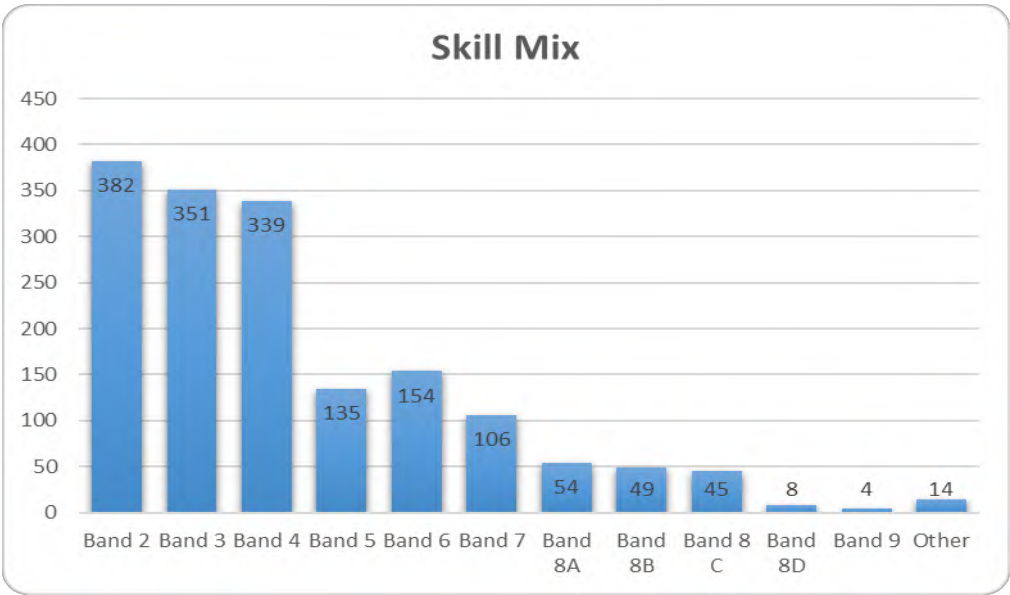
Appendix 5 – Workforce Statistics

Staff in Post

Directorate	Headcount	FTE	Turnover % (Headcount)
Audit & Assurance Section	56	52.63	8.94%
Corporate Section	41	40.01	8.04%
Counter Fraud Section	6	6.00	16.90%
Digital Workforce Solutions Section	7	7.00	12.63%
E-Business Central Team Section	10	8.44	11.65%
Employment Section	341	308.31	12.06%
Employment Services Management Service	9	8.93	11.43%
Expenses Services	22	19.51	14.75%
Payroll Services	178	160.20	7.72%
Pension Services	34	32.04	6.00%
Recruitment Services	85	76.13	25.30%
Student Awards Services	13	11.49	0.00%
Finance Section	21	20.15	21.52%
GP Trainees Section	433	385.60	N/A
Legal & Risk Section	101	92.34	7.62%
Primary Care Section	304	277.93	7.93%
Engagement & Support Services	72	69.40	13.09%
Modernisation & Technical Services	29	27.22	7.00%
PCS Management Services	4	4.00	0.00%
Transaction Services	199	177.31	6.46%
Procurement Section	650	612.58	11.95%
Accounts Payable Services	107	102.96	17.63%
Corporate Procurement Services	11	9.63	17.52%
E-Enablement Services	20	20.00	19.43%
Health Courier Service	144	126.33	6.62%
Local Procurement Services	111	103.42	18.46%
Sourcing Services	90	86.63	12.37%
Supply Chain Services	167	163.62	6.74%
Specialist Estates Section	44	42.80	11.70%
Surgical Materials Testing (SMTL) Section	18	16.52	11.54%
Welsh Employers Unit Section	4	3.80	0.00%
Workforce & OD Section	19	17.87	16.14%
Workforce Education & Development Service Section	19	18.29	5.41%
Total	2,074	1,910.28	0.11

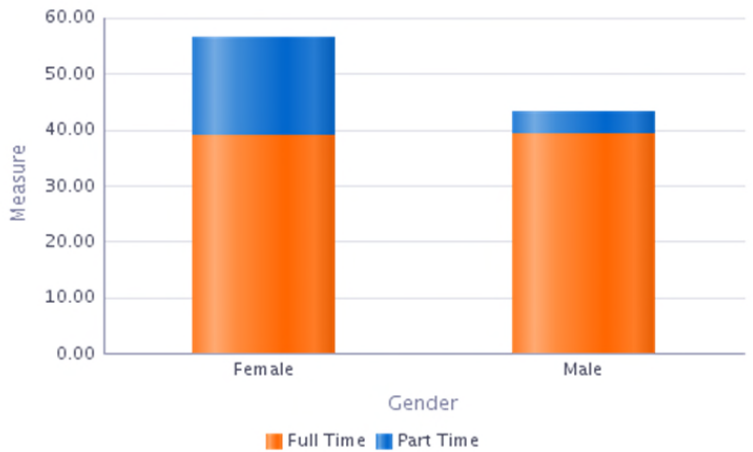
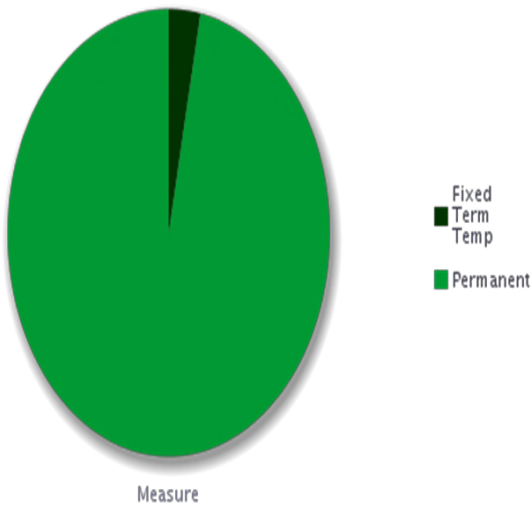
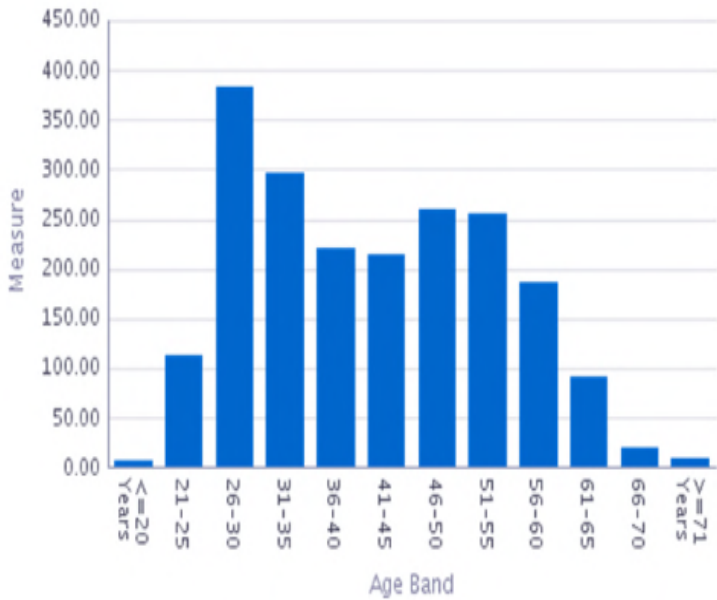
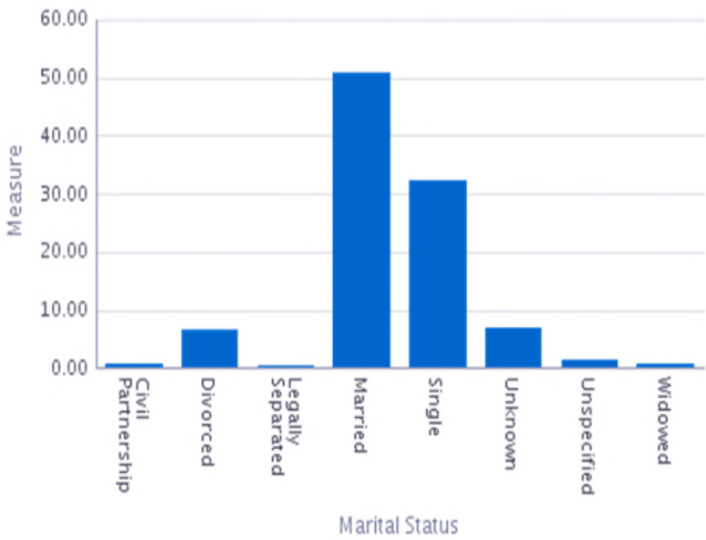
Skill Mix

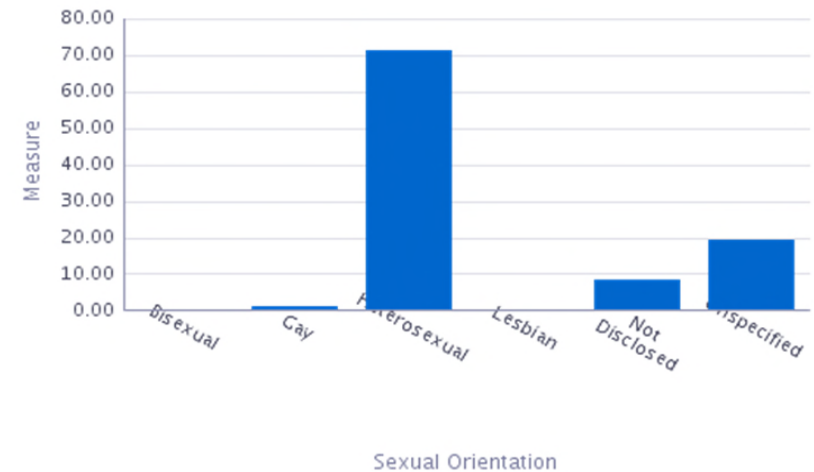
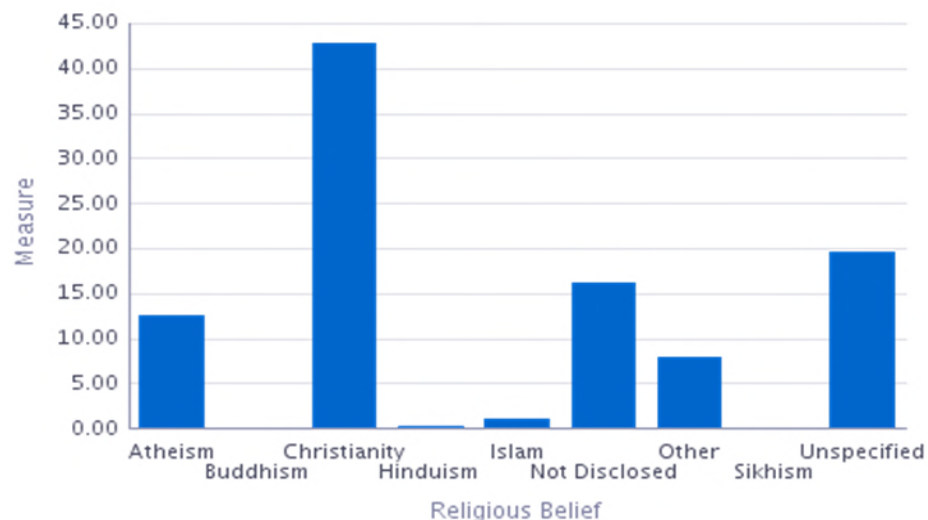
Skill mix	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8A	Band 8B	Band 8 C	Band 8D	Band 9	Other
Directorate												
Audit & Assurance Section			2	7	20	10	7	1	7	1		1
Corporate Section	7		6	6	5	8	3	2			1	3
Counter Fraud Section				1		3	1	1				
Digital Workforce Solutions Section		1		1	1		3		1			
E-Business Central Team Section		1	2	1	2	1	1	1	1			
Employment Section	31	93	137	33	28	8	6	3	1			1
Finance Section		1		2	9	2	2	2	2	1		
Legal & Risk Section		6	32	3	1	19		22	17		1	
Primary Care Section	49	137	29	36	33	12		1	2			5
Procurement Section	291	104	125	31	44	28	9	6	7	2	1	2
Specialist Estates Section		4	1	2	3	11	9	8	4	1	1	
Surgical Materials Testing (SMTL) Section	2		2	7	1	2	2	1		1		
Welsh Employers Unit Section		1					1	1				1
Workforce & OD Section	2	2	1	2	5	2	3		1			1
Workforce Education & Development Service Section		1	2	3	2		7		2	2		
Grand Total	382	351	339	135	154	106	54	49	45	8	4	14



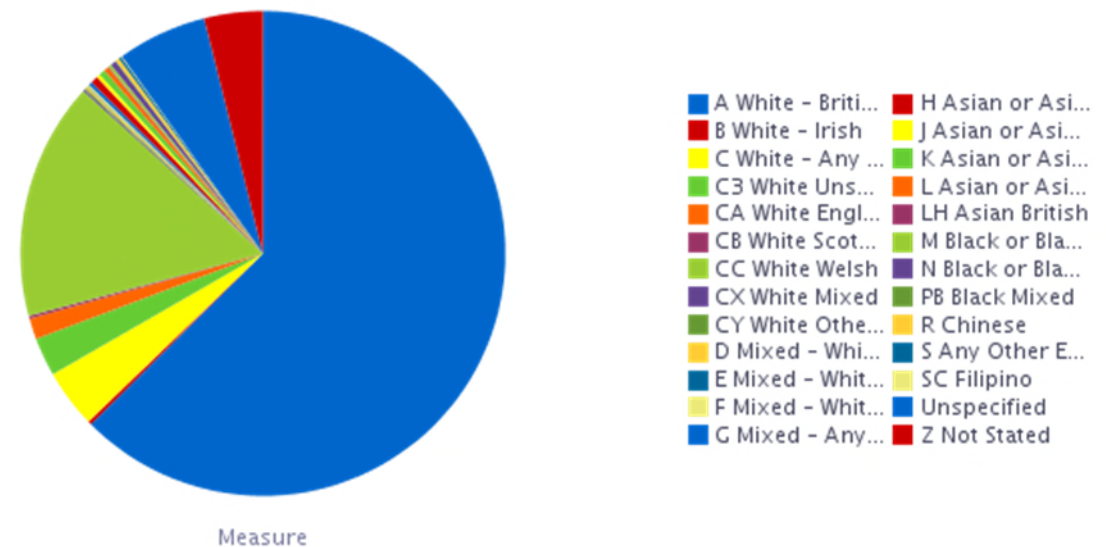
Turnover & Workforce Profile

Non Voluntary Resignations		Voluntary Resignations		Retirement	
Death in Service	2	Voluntary Resignation - Better Reward Package	7	Voluntary Early Retirement - with Actuarial Reduction	6
Dismissal - Capability	1	Voluntary Resignation - Health	2	Flexi Retirement	7
Dismissal - Conduct	1	Voluntary Resignation - Incompatible Working Relationships	3	Retirement - Ill Health	1
Employee Transfer	3	Voluntary Resignation - Lack of Opportunities	5	Retirement Age	24
End of Fixed Term Contract	2	Voluntary Resignation - Other/Not Known	30		
End of Fixed Term Contract - Completion of Training Scheme	1	Voluntary Resignation - Promotion	42		
End of Fixed Term Contract - End of Work Requirement	1	Voluntary Resignation - Relocation	7		
End of Fixed Term Contract - Other	1	Voluntary Resignation - To undertake further education or training	9		
Dismissal - Some Other Substantial Reason	0	Voluntary Resignation - Work Life Balance	17		
		Mutually Agreed Resignation - Local Scheme with Repayment	2		
Total	12		124		38





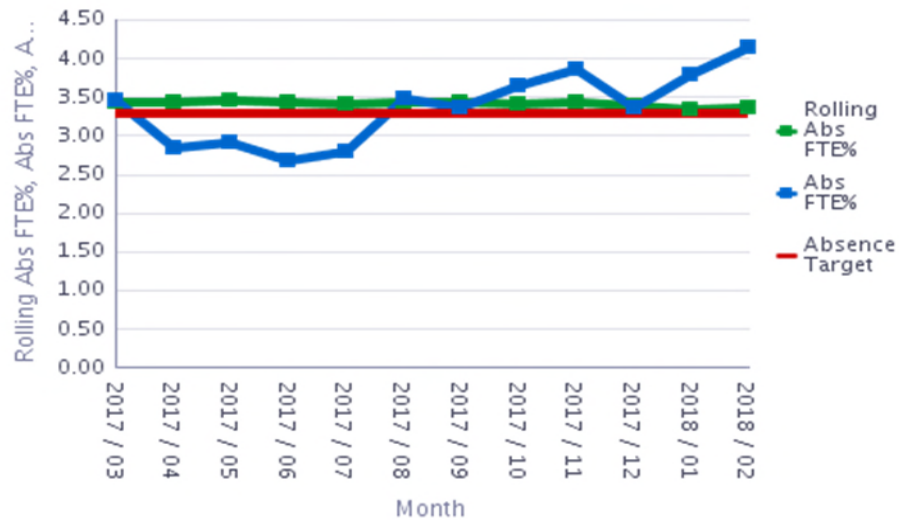
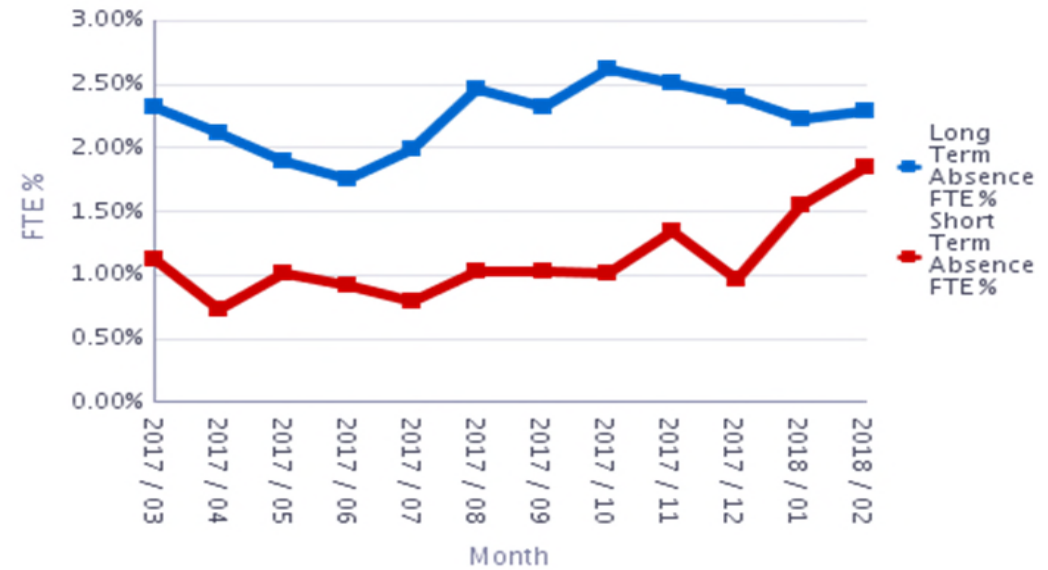
Ethnic Group	Headcount	%	FTE
A White - British	1,026	62.6	964.05
B White - Irish	4	0.2	3.40
C White - Any other White	64	3.9	60.54
C3 White Unspecified	42	2.6	37.49
CA White English	23	1.4	20.47
CB White Scottish	3	0.2	3.00
CC White Welsh	260	15.9	240.59
CX White Mixed	2	0.1	2.00
CY White Other European	2	0.1	1.40
D Mixed - White & Black	2	0.1	1.50
E Mixed - White & Black	1	0.1	1.00
F Mixed - White & Asian	2	0.1	2.00
G Mixed - Any other mixed	4	0.2	4.00
H Asian or Asian British -	8	0.5	7.51
J Asian or Asian British -	4	0.2	4.00
K Asian or Asian British -	7	0.4	6.69
L Asian or Asian British - Any	5	0.3	5.00
LH Asian British	1	0.1	1.00
M Black or Black British - Caribbean	3	0.2	2.75
N Black or Black British -	6	0.4	5.64
PB Black Mixed	1	0.1	1.00
R Chinese	4	0.2	3.73
S Any Other Ethnic Group	3	0.2	3.00
SC Filipino	1	0.1	1.00
Unspecified	98	6.0	81.98
Z Not Stated	64	3.9	58.93
Grand Total	1,640	100.0	1523.68



Sickness Absence

Absence % (FTE)	Absence Days	Abs (FTE)	Avail (FTE)
3.36%	25,457	22,904.10	682,023.19

Month	Absence % (FTE)	Abs (FTE)	Avail (FTE)
2017 / 03	3.45%	1,971.52	57,173.74
2017 / 04	2.84%	1,563.97	55,086.88
2017 / 05	2.92%	1,669.31	57,135.09
2017 / 06	2.67%	1,480.83	55,402.54
2017 / 07	2.79%	1,601.91	57,333.51
2017 / 08	3.49%	2,038.78	58,498.60
2017 / 09	3.36%	1,891.96	56,361.84
2017 / 10	3.64%	2,113.52	58,051.00
2017 / 11	3.85%	2,167.86	56,256.11
2017 / 12	3.36%	1,965.00	58,533.32
2018 / 01	3.79%	2,229.11	58,818.15
2018 / 02	4.14%	2,210.32	53,372.40



Absence Reason	Headcount	Abs Occurren	FTE Days Lost	%
S10 Anxiety/stress/depression/other psychiatric illnesses	159	185	7,193.97	31.4
S28 Injury, fracture	81	83	2,149.15	9.4
S25 Gastrointestinal problems	396	455	2,046.29	8.9
S12 Other musculoskeletal problems	81	92	1,927.11	8.4
S13 Cold, Cough, Flu - Influenza	394	447	1,710.58	7.5
S26 Genitourinary & gynaecological disorders	54	63	1,156.39	5
S11 Back Problems	61	67	829.26	3.6
S17 Benign and malignant tumours, cancers	15	18	824.41	3.6
S15 Chest & respiratory problems	61	66	809.74	3.5
S19 Heart, cardiac & circulatory problems	23	25	746.23	3.3

PADR & Core Skills Training Framework (CSTF) Compliance

Service	Assignment Count	Reviews Completed	Reviews Completed %
Audit & Assurance Section	54	32	59.26
Corporate Section	39	31	79.49
Counter Fraud Section	6	4	66.67
Digital Workforce Solutions Section	7	6	85.71
E-Business Central Team Section	8	4	50.00
Employment Section	332	273	82.23
Finance Section	20	12	60.00
Legal & Risk Section	97	84	86.60
Primary Care Section	300	282	94.00
Procurement Section	619	527	85.14
Specialist Estates Section	42	39	92.86
Surgical Materials Testing (SMTL) Section	18	16	88.89
Welsh Employers Unit Section	4	3	75.00
Workforce & OD Section	17	12	70.59
Workforce Education & Development Service Section	18	16	88.89
Grand Total	1,581	1,341	84.82

Service	Assignment Count	Required	Achieved	Compliance %
Audit & Assurance Section	56	560	536	95.71%
Corporate Section	39	390	347	88.97%
Counter Fraud Section	6	60	60	100.00%
Digital Workforce Solutions Section	7	70	70	100.00%
E-Business Central Team Section	8	80	80	100.00%
Employment Section	337	3370	3224	95.67%
Finance Section	22	220	203	92.27%
Legal & Risk Section	100	1000	962	96.20%
Primary Care Section	304	3040	2980	98.03%
Procurement Section	643	6430	6152	95.68%
Specialist Estates Section	43	430	422	98.14%
Surgical Materials Testing (SMTL) Section	18	180	180	100.00%
Welsh Employers Unit Section	4	40	37	92.50%
Workforce & OD Section	18	180	177	98.33%
Workforce Education & Development Service Section	19	190	176	92.63%
Total	1624	16240	15606	96.10%

BOARD DECISION REQUIRED FOR COMMITMENT EXCEEDING £100k

1. SCHEME TITLE

NWSSP ALDER HOUSE REFURBISHMENT & LEASE RENEWAL

2. CONTRACT DETAILS

2.1. Description of Goods / Services/ Works/Lease

The current lease term is 15 years of which NWSSP are currently 11 years in. Changes to the lease are required to ensure the building continues to be fit for purpose.

Alder House, located in St Asaph, Denbighshire, is one of four main regional hubs utilised by NWSSP.

Around 150 staff are permanently based on site, including teams from:

- Procurement,
- Accounts Payable
- Legal & Risk
- Primary Care Services

Overall, the building continues to be fit for purpose, subject to works required to address lighting, heating and fire risk issues. Work for the latter will also increase the accommodation capacity by 20% (30 staff).

2.2. *Nature of Contract*

(Please complete either 2.2.1 or 2.2.2).

2.2.1. *New/First time contract*

2.2.2. Contract Renewal/Extension

- **Description of Assessment undertaken to justify continuation of service requirement.**

Continued operation of North Wales service hub is a core part of NWSSP accommodation strategy. Assessments on the condition of the building have been assessed by the Landlord and NWSSP SES.

- **Details of any matters that may be considered as Novel or contentious**
Not Applicable

2.3. Procurement Route

Direct negotiation with Landlord as 4 years currently remain of the original 15 year term.

2.4. Timescales for implementation

Signature of the binding agreement is required and prior to the refurbishment planned to commence 1st May 2018. It is anticipated the main refurbishment works will commence from 1st Sept 2018 and take approximately 6-8 weeks to complete.

2.5. Period of Contract

New 15 year lease term commencing on 31st January 2019 subject to the works being completed. The remaining 3 years and 2 months of the existing lease would be cancelled at that date.

2.6. Maximum Expected Total Value of Contract – excluding and including VAT (if contract renewal, please provide justification of difference in value from previous contract).

Lease Year	Excl VAT	Incl VAT
1	£195,000	£234,000
2	£195,000	£234,000
3	£195,000	£234,000
4	£195,000	£234,000
5	£195,000	£234,000
6	£226,058	£271,270
7	£226,058	£271,270
8	£226,058	£271,270
9	£226,058	£271,270
10	£226,058	£271,270
11	£262,064	£314,476
12	£262,064	£314,476
13	£262,064	£314,476
14	£262,064	£314,476
15	£262,064	£314,476
Total	£3,415,611	£4,098,733

The above lease figures presented include provision for indexation of up to 3% p/a, applied on a compound basis at two 5 yearly reviews.

The baseline increase from previous years of £25,000 per annum is because the Landlord is making a capital investment to cover the works required as described above of approximately £400,000.

Commercial negotiations are ongoing, for a new lease of between 10 and 15 years, and a capital investment by the landlord of between £300-400,000, depending on the agreed scope of works. Board's approval is therefore being sought for the maximum amount possible under the current negotiations. The actual level of the commitment made when the Agreement to Lease is brought for signature may be lower.

2.7. Source of Funds

(Consult with Finance if necessary as more than 'Capital' or 'Revenue' may be required here)

Existing NWSSP revenue budget increased to support the additional investment.

3. **DIRECTOR/SPONSOR DECLARATION OF COMPLIANCE**

3.1. The lead Director, by signing this request for Board approval, is making a ***declaration that all procurement rules, Standing Orders and Standing Financial Instructions have been complied with.***

	Director of Finance	Managing Director
Signed:		
Print name:		
Job title:		
Date:		



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Partnership

AGENDA ITEM: 4.3

27th March 2018

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Draft Annual Governance Statement – March 2018

ARWEINYDD: LEAD:	Andy Butler Director of Finance & Corporate Services
AWDUR: AUTHOR:	Peter Stephenson Head of Finance & Business Development
SWYDDOG ADRODD: REPORTING OFFICER:	Andy Butler Director of Finance & Corporate Services
MANYLION CYSWLLT: CONTACT DETAILS:	Andy Butler Director of Finance & Corporate Services 01443 848552 / Andy.Butler@wales.nhs.uk

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

To provide the Partnership Committee with an update on the NHS Wales Shared Services Partnership's (NWSSP) Annual Governance Statement.

Llywodraethu/Governance

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

Ymgynghoriad/Consultation:

The purpose of this report is to receive the draft Annual Governance Statement (AGS) for the NHS Wales Shared Services Partnership (NWSSP). The Committee are requested to endorse the Annual Governance Statement 2017-2018, ahead of submission to the Senior Management Team on 29 March 2018 and the Audit Committee on 24 April 2018.

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

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

NWSSP ANNUAL GOVERNANCE STATEMENT UPDATE

March 2018

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 Shared Services Partnership Committee (SSPC). 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 2017-2018 is presented at **Appendix 1**.

2. TIMELINE FOR APPROVAL

The timeline for approving the statement is as follows:

Date	Action
27 March 2018	<u>SSPC</u> SSPC to endorse the draft statement.
29 March 2018	<u>Senior Management Team (SMT)</u> The SMT review the draft statement
24 April 2018	<u>Audit Committee</u> The Velindre NHS Trust Audit Committee for Shared Services considered the draft and agree that

	if it is consistent with the Committee's view on the NWSSP's assurance framework
26 April 2018	<u>Formal SMT</u> SMT to formally adopt the statement
17 May 2018	<u>SSPC</u> SSPC to note the AGS prior to submission to Audit committee on 5 June 2018
5 June 2018	<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 2018	Arrange Welsh language translation
21 July 2018	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.

The Annual Governance Statement is substantially completed. However, there are a small number of areas where information is awaited e.g. results of Committee effectiveness survey. These areas are shaded for reference. The Annual Governance Statement will be updated to reflect the information once available.

RECOMMENDATION

The Committee is asked to: -

- **ENDORSE** the report



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Annual Governance Statement (Draft) 2017/2018

Version	Approved
1	SSPC 27 March 2018 draft for endorsement
2	SMT 29 March 2018 draft for information
3	Velindre Integrated Governance Group 10 April 2018
4	Audit Committee 24 April 2018
5	SSPC 17 May 2018
6	Audit Committee 5 June 2018

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ANNUAL GOVERNANCE STATEMENT 2017/2018

1. SCOPE OF RESPONSIBILITY

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 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).

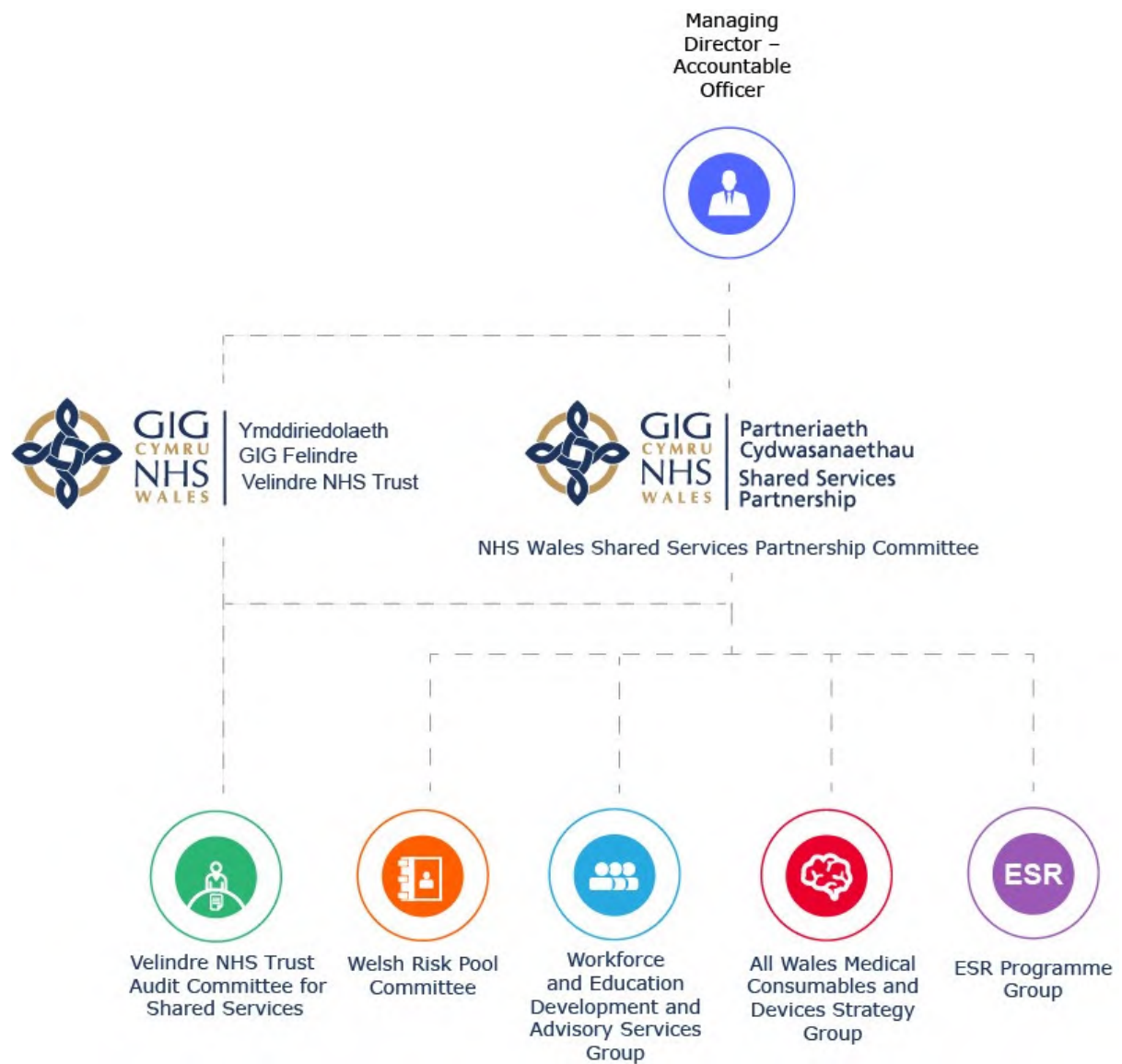
The Managing Director of Shared Services is accountable to the Shared Services Partnership Committee (Partnership Committee) in relation to those functions delegated to it. The Managing Director is also accountable to the Chief Executive of Velindre NHS Trust in respect of the hosting arrangements supporting the operation of Shared Services.

The Chief Executive of Velindre NHS 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 Velindre 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 Velindre NHS 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 Velindre NHS 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



Underpinned through the overarching Velindre 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 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 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 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 Velindre NHS Trust policies and NWSSP's corporate protocols, approved by the SMT, provide NWSSP's Governance Framework.

Health Boards and NHS Trusts in Wales 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 the Health Boards and NHS Trusts in undertaking its functions, the responsibility for the exercise of Shared Services functions is a shared responsibility of all NHS bodies in Wales.

The Partnership Committee is supported by the Director of Corporate Governance/Board Secretary of Cwm Taf University Health Board, who acts as the guardian of good governance within the Committee.

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 NHS Trust and Managing Director of NHS Wales Shared Services Partnership; and
- Accountability Agreement between the Partnership Committee and the Managing Director of NHS Wales Shared Services Partnership.

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 Velindre 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 2018 is outlined in Figure 3 below. All meetings were quorate and 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 2017/2018

Name	Position	Organisation	From – To
Margaret Foster (Chair)	<i>Independent Member</i>	<i>NHS Wales Shared Services Partnership</i>	<i>Full Year</i>
Neil Frow	<i>Managing Director of NWSSP</i>	<i>NHS Wales Shared Services Partnership</i>	<i>Full Year</i>
Paul Gilchrist	<i>Deputy Director of Finance</i>	<i>Abertawe Bro Morgannwg UHB</i>	<i>Full Year</i>
Geraint Evans	<i>Director of Workforce and OD</i>	<i>Aneurin Bevan UHB</i>	<i>Full Year</i>
Huw Thomas (Vice Chair)	<i>Director of Operational Finance</i>	<i>Betsi Cadwaladr UHB</i>	<i>Full Year</i>
Christopher Lewis	<i>Deputy Director of Finance</i>	<i>Cardiff and Vale UHB</i>	<i>Full Year</i>
Joanna Davies	<i>Director of Workforce & OD</i>	<i>Cwm Taf UHB</i>	<i>Full Year</i>
Nia Williams	<i>Executive Project Manager</i>	<i>Hywel Dda UHB</i>	<i>Full Year</i>
Eifion Williams	<i>Director of Finance</i>	<i>Powys THB</i>	<i>Full Year</i>
Melanie Westlake	<i>Head of Corporate Governance/Board Secretary</i>	<i>Public Health Wales NHS Trust</i>	<i>Full Year</i>
Steve Ham	<i>Chief Executive</i>	<i>Velindre NHS Trust</i>	<i>Full Year</i>
Chris Turley	<i>Acting 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: Director of Finance, Welsh Government, Director of Finance & Corporate Services, NWSSP, Director of Workforce & Organisational Development, Boards Secretary/Director of Governance, Cwm Taf UHB as governance support.

Figure 4 – Attendance at the Meetings of the NHS Wales Shared Services Partnership Committee during 2017/2018

Organisation	18/05/2017	07/06/2017	19/09/2017	16/11/2017	18/01/2018	27/03/2018
<i>Abertawe Bro Morgannwg UHB</i>	<i>x</i>	<i>x</i>	<i>x</i>	<i>✓*</i>	<i>x</i>	
<i>Aneurin Bevan UHB</i>	<i>x</i>	<i>✓</i>	<i>✓</i>	<i>✓</i>	<i>✓</i>	
<i>Betsi Cadwaladr UHB</i>	<i>✓</i>	<i>✓</i>	<i>x</i>	<i>x</i>	<i>✓</i>	

<i>Cardiff and Vale UHB</i>	✓	✓*	✓*	✓	✗	
<i>Cwm Taf UHB</i>	✓✓	✗	✓✓	✓✓	✓	
<i>Hywel Dda LHB</i>	✓	✓	✓*	✓	✓	
<i>Powys Teaching Health Board</i>	✗	✗	✓	✗	✗	
<i>Public Health Wales Trust</i>	✗	✓	✓	✓	✗	
<i>Welsh Ambulance Service Trust</i>	✓	✗	✓	✓	✓	
<i>Welsh Government</i>	✗	✓	✗	✓	✓	
<i>Velindre NHS Trust</i>	✗	✓	✗	✓✓	✓	

✓ Denotes the nominated member was present

✓* Denotes the nominated member was not present and that a suitable officer attended on their behalf

✗ Denotes Health Body not represented

** Denotes the Director of Corporate Governance/Board Secretary, Governance Support role deputised for the Cwm Taf UHB representative

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 and Self Assessment

During 2017/2018, the Partnership Committee approved an annual forward plan of business, including:

A "Horizon Scanning" Workshop – following on from the SMT Horizon Scanning workshop held on 13 September 2017. A specific workshop was held with the Partnership Committee which provided an opportunity for members to:

- Review performance;
 - Review NWSSP achievements over the preceding 12 months;
 - Review how NWSSP is performing against its Integrated Medium Term Plan (IMTP);
 - Consider the future macro challenges to service delivery; and
 - Consider what additional support NWSSP could provide to NHS Wales.
- A workshop to discuss the potential expansion of NWSSP services to further support NHS Wales; and
 - *Deep Dive* sessions to explore in detail individual service areas and to collectively discuss areas of success and potential weakness with a view to collectively agreeing a potential solution.

The Partnership Committee undertook a self-assessment of its effectiveness in accordance with section 8 of its standing orders, which states that the Partnership Committee must:

".....introduce a process of regular and rigorous self assessment and evaluation of its own operations and performance.."

This covers:

- the Partnership Committee members and Chair;
- the quality of reports presented; and
- the effectiveness of the Partnership Committee secretariat which is crucial to the ongoing development and maintenance of a strong governance framework within the Partnership Committee, and is a key source of advice and support for the Chair and members.

The survey was anonymous and 10 responses were received in 2017 equating to a 66% response rate, in comparison with 15 in 2016, equating to a 100% response rate in 2016.

2.3 Velindre Audit Committee for NWSSP

The primary role of the Velindre 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 2017/2018 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 2017/2018 comprised of three Independent Members of Velindre NHS Trust supported by representatives of both Internal and External Audit and Senior Officers of NWSSP and Velindre NHS Trust.

Figure 5 - Composition of the Velindre NHS Trust Audit Committee for NWSSP during 2017/18

In Attendance	April 2017	June 2017	July 2017	Nov 2017	Feb 2018	Total Out of 5
Committee Members						
Martin Veale, Chair & Independent Member	✓	✓	✓	✓	✓	5
Ray Singh, Independent Member	✓		✓	✓		3
Professor Jane Hopkinson, Independent Member	✓	✓	✓	✓	✓	5
Wales Audit Office						
Audit Team Representative	✓✓	✓	✓		✓	4
NWSSP Audit Service						
Director of Audit & Assurance	✓	✓	✓	✓	✓	5
Head of Internal Audit	✓	✓	✓	✓	✓	5
Audit Manager	✓	✓	✓	✓	✓	5
Counter Fraud Services						
Local Counter Fraud Specialist	✓	✓	✓	✓	✓	5
NWSSP						
Margaret Foster, Chair NWSSP	✓		✓	✓	✓	4
Neil Frow, Managing Director	✓	✓	✓		✓	4
Andy Butler, Director of Finance & Corporate Services	✓	✓	✓	✓	✓	5
Jacqui Maunder, Head of Corporate Services	✓	✓	✓	✓	✓	5

In Attendance	April 2017	June 2017	July 2017	Nov 2017	Feb 2018	Total Out of 5
Roxann Davies, Compliance Officer	✓	✓	✓	✓	✓	5
NWSSP Secretariat	✓	✓		✓		3
Other Staff		✓✓	✓✓	✓	✓✓	4
Velindre NHS Trust						
Steve Ham, Chief Executive		✓				1
Mark Osland, Director of Finance	✓	✓	✓		✓	4

The Audit Committee met formally on five occasions during the year with the majority of members attending regularly and all meetings were quorate. An Audit Committee "Highlight Report" and Minutes of the meeting have been reported back to the Partnership Committee.

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.

In 2017-2018 the overall responses were very positive indeed and the response rate was 100% (10 out of 10 core attendees responded). The Audit Committee members were asked to strongly agree/agree or disagree/strongly disagree with 44 positive statements made about the operation of the Audit Committee. The overwhelming number of responses to each statement was positive with respondents either agreeing or strongly agreeing to the statements made. It should be noted that a number of respondents were relatively new attendees to the Committee and were therefore unable to respond to all of the questions. The survey was issued to the Audit Committee in April 2017 to coincide with the appointment of the new Chair of Audit Committee, Martin Veale who attended his first meeting on the 11th April 2017.

2.5 Sub Groups and Advisory Groups

The Partnership Committee is supported by four advisory groups:

- **Workforce Education and Development Services Advisory Group (WEDSAG)**
 - Advisory group to the Shared Services Partnership Committee; and

- Reviews progress with Workforce Development and Education activity on behalf of NHS Wales.
- **Welsh Risk Pool Committee**
 - Reimburse losses over £25,000 incurred by Welsh NHS bodies arising out of negligence;
 - 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 2017/2018

Name	Designation
Mr Neil Frow	Managing Director
Mr Andy Butler	Director of Finance and Corporate Services
Mrs Hazel Robinson	Director of Workforce and Organisational Development
Mr Mark Roscrow	Director of Procurement Services
Mr Paul Thomas	Director of Employment Services
Mr Simon Cookson	Director of Audit and Assurance
Mrs Anne-Louise Ferguson	Director of Legal and Risk
Mr Dave Hopkins	Director of Primary Care Services
Mr Neil Davies	Director of Specialist Estates
Mr Stephen Griffiths	Director of Workforce Education and Development Services (WEDS)

3. 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 2018.

3.1 External Audit

During 2017/2018, NWSSP's external auditors were the Wales Audit Office (WAO). The Audit Committee has worked constructively with the WAO and the areas examined included:

- NWSSP Nationally Hosted NHS IT Systems Assurance Report 2016-17;
- WAO Proposed Work 2016-2017;
- Capital Expenditure Scheme Update;
- Internal Audit Visit Update;
- WAO Report of NWSSP 2016-17; and
- WAO Assurance Arrangements 2018.

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 appraised 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 each meeting 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 2017/18 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.

Reports were timely and enabled the Audit Committee to understand operational and financial risks. In addition, our internal auditors have provided valuable benchmarking information relating to best practice across NHS Wales.

3.3 Counter Fraud Specialists

During 2017/18 the following Counter Fraud activity was undertaken:

- Local Counter Fraud progress reports were presented to each Audit Committee meeting and the Head of Counter Fraud was in attendance to present the report;
- The Audit Committee were provided with an assurance that the Counter Fraud training provided to NHS bodies and the widely distributed Counter Fraud newsletters played an important role in raising awareness of potential fraud within NHS Wales
- Updates from the NHS Wales Counter Fraud Steering Group were provided by NWSSP's Director of Finance and Corporate Services, who Chairs the Group, and included updates on initiatives in place with NHS Protect in NHS England.

These initiatives enhanced the degree of counter fraud awareness amongst NWSSP. In addition the strong controls in place led to a small number of

referrals to the Counter Fraud Wales service which resulted in a number of successful prosecutions.

During 2017/18, five new investigations into possible fraudulent or corrupt activity were instigated together with the four cases that were brought forward from 2016/17. The five new cases involved alleged four false claims for costs and one false sickness absence claim.

The table below provides a summary of the investigations:

Summary of Investigations
One case where no fraud could be proved, and the case was closed based on CPS advice.
Six cases where fraud identified. Three of these remain open although two have seen successful prosecutions at the Crown Court. Three are closed, two of which saw successful prosecutions at Magistrates Courts and the third saw no further action by the CPS although the subject of the allegation was removed from their course by the relevant University.
Two cases which are still under review

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 2015-16 year end 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 2017/2018, 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 2017/2018, 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.

NWSSP is also committed to continuously reviewing its services and has made a commitment for all of its services to undergo the rigorous Wales Quality Award (WQA) Assessment, based on the European Foundation for Quality Management (EFQM) system, through the Wales Quality Centre. Following on from the initial follow up assessment in February 2016, the feedback indicated that NWSSP had matured as an organisation over the preceding 12 months and that significant progress has been made in developing IT strategies and Programme Management.

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 2018-2019 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

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.

Velindre NHS Trust has an approved strategy for risk management and NWSSP has a risk management protocol in line with our host's strategy providing a clear systematic approach to the management of risk within NWSSP.

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. 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.

During 2017/18 the risk management framework and approach was subject to a detailed review building on the recommendations of an internal audit report issued in March 2017. The report contained findings that highlighted the need to make risk management more effective and dynamic within NWSSP and two workshops were held in the spring of 2017 to share the findings with directors and senior management.

Changes have since been made to the format of the corporate and directorate risk registers to ensure that they are both consistent and that they provide a more concise picture of the current position with each risk. The recently appointed Head of Finance and Business Development, supported by the Compliance Officer, is working with Directors and their Senior Management Teams to ensure that the risks recorded within each register remains current and that there is focus on achievement of planned actions to mitigate the risk. This is reinforced through the quarterly review process of each directorate where review of the directorate risk register is a standing agenda item.

In 2017/18 assurance maps were produced for each of the directorates to provide a view on how the key operational, or business-as-usual risks were being mitigated. These were presented to the Audit Committee in November 2017 and they will be updated and reviewed by the Audit Committee annually.

NWSSP's approach to risk management 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; and
- The effectiveness of key controls is regularly assured.

5. THE RISK AND CONTROL FRAMEWORK

NWSSP's commitment to the principle that risk is managed effectively means that we will continue to work 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. As at 31 March 2018, there is one corporate risk categorised as having a "red" risk rating. This relates to issues surrounding the outsourcing of a number of primary care services in England which have an impact on NHS Wales. There are a number of options for NWSSP in managing this particular risk and these are being evaluated at present.

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 provided 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 Velindre NHS 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. Velindre NHS 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 to the Managing Director and the Corporate Governance Manager and other designated staff 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 Velindre NHS 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. These cover the data that the organisation collects and the processing of this to ensure that NWSSP only uses it for compatible purposes and it remains secure and confidential whilst in our 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 Rhyddian 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. This is to ensure that all information assets are accounted for as they are realised. This is an area that forms part of the recommendations of the General Data Protection Regulation (GDPR) that is due to be implemented by 25 May 2018 and which will be an increasing area of focus.

The IGSG discusses quarterly issues such as 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 including the implementation of GDPR.

All members of the IGSG have the opportunity during a defined consultation period to review any work that requires comment before being approved by the NWSSP Senior Management Team. The Information Governance Manager provides information in relation to any areas that require input and determines the agenda for each meeting based on their own requirements and also from those members who have items for discussion. There is also an IT or "Informatics" section on the agenda for discussion of technological issues such as Cyber Security.

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 workstreams proposing to use identifiable information in some form. This poses questions on the Who, What, Why, Where, When and How of the project to get official Information Governance sign off and ensure that the work will not breach any confidentiality of patients, service users, clients or staff and that the integrity of the data is secure.

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 Velindre NHS 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. This allows discussion of issues on an All Wales basis. The Information Governance Manager is also Chair of the Freedom of Information Community of Practice, and Chair and Author for the review of the "Your Information, Your Rights" public document in readiness for the new legislation on an All Wales basis. This document will inform patients of their rights and promotes openness and transparency within the NHS.

5.4 Counter Fraud

Counter Fraud support is incorporated within the hosting agreement with Velindre NHS 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, 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.

5.5 Internal Audit

The NWSSP hosting agreement provides in Section 14 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 Velindre NHS 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 draft opinion from this review has recently been received and states 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)

The basis for NWSSP planning has been the Business Case approved by the Minister for Health and Social Services in October 2010.

Further to the National Health Service Finance (Wales) Act 2014 becoming law in Wales from January 2014, new duties with regard to operational planning were placed upon Health Boards and Trusts. The legislative changes were effected to section 175 of the NHS Wales Act 2006 and placed a duty to produce three year Integrated Medium Term Plans.

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 IMTP is formally reviewed and amended annually and approved by the Partnership Committee in March each year prior to submission to Welsh Government. The 2018-2020 IMTP was submitted to Welsh Government on 31 March 2018.

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. A summary of the themes is outlined below:



The process for undertaking the annual self-assessments is:

- The Head of Corporate Services and Corporate Governance Manager undertake 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 Velindre NHS 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 2017/2018

Theme	Executive Lead	2017/2018 Self-Assessment Rating	2016/2017 Self-Assessment Rating
Governance, Leadership and Accountability	Senior Management Team	4	4
Staying Healthy	Director of Workforce and Organisational Development	3	3

Theme	Executive Lead	2017/2018 Self-Assessment Rating	2016/2017 Self-Assessment Rating
Safe Care	Director of Finance and Corporate Services Director of Specialist Estates	4	4
Effective Care	Senior Management Team	3	3
Dignified Care	Not applicable	Not applicable	
Timely Care	Not applicable	Not applicable	
Individual Care	Senior Management Team	3	3
Staff and Resources	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 3 as outlined below:

Figure 10 – NWSSP's Overall Self-Assessment Score Health and Care Standards 2017/2018

Assessment Level	1 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	2 We are aware of the improvements that need to be made and have prioritised them, but are not yet able to demonstrate meaningful action	3 We are developing plans and processes and can demonstrate progress with some of our key areas for improvement	4 We have well developed plans and processes can demonstrate sustainable improvement throughout the organisation / business	5 We can demonstrate sustained good practice and innovation that is shared throughout the organisations / business, and which others can learn from
Rating			✓		

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

We are committed to eliminating discrimination, valuing diversity and promoting inclusion and equality of opportunity in everything we do. Our priority is to develop a culture that values each person for the contribution they can make to our services for NHS Wales.

As a non-statutory hosted organisation under Velindre NHS Trust, we are required to adhere to Velindre NHS Trust's Equality and Diversity Policy, Strategic Equality Plan 2016-2020 and Equality Objectives, which set out the Trust's commitment and legislative requirements to promoting inclusion: <http://www.nwssp.wales.nhs.uk/governance-and-assurance-arrangements>

We work together with colleagues across NHS Wales 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.

We also benefit from the proactive work undertaken by our host organisation to strengthen compliance with equality and diversity legislation; the Trust has received the Positive About Disabled People "Double Tick" symbol which demonstrates the encouragement of applications from people who identify as having a disability. In addition, the Trust has attained "The Rainbow Mark" which is an equality mark sponsored by the Welsh Assembly Government and supported by the Welsh Local Government Association and Tai Pawb. The Mark is a signifier of good practice, commitment, and knowledge of the specific needs, issues and barriers facing those who identify as lesbian, gay, bisexual, and transgender (LGBT+) in Wales.

We have worked with the NHS Wales Centre for Equality & Human Rights (CEHR) to introduce our own process for undertaking Equality Integrated Impact Assessments (EQIIA), which we are integrating into our Project Management System software. The EQIIA will consider the needs of the protected characteristics identified under the Equality Act 2010 (including the Welsh specific duties), the Human Rights Act 1998, 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), and Welsh Language, Information Governance and Health and Safety aspects.

We have provided key managers with training on the EQIIA process and introduced an "Equality Integrated Impact Assessment Panel" to review

completed assessments to ensure that our policies, projects and events do not discriminate against vulnerable or disadvantaged people. Further training sessions to strengthen awareness are planned for 2018/19. We also ensure compliance with the engagement provisions of the "Gunning Principles" and the duty to have "due regard" laid out in the "Brown Principles" when reviewing existing policies, or assessing new policies for impact on protected characteristics.

Our Assistant Director of Workforce and Organisational Development is a member of the Equality Group within Velindre NHS Trust and any NWSSP specific issues are integrated into this process. Our Head of Corporate Services is a member of the NHS Wales Centre for Equality and Human Rights (CEHR) Business Planning Group and the NHS Wales Equality Leadership Group, together with our Compliance Officer, who also sits on the All Wales Senior Offices Group for Equality. We adhere to the CEHR "Governance and Scrutiny: A Guide for Boards" in respect of EQIIAs.

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: Ethnic Origin; Nationality; Country of Birth; Religious Belief, Sexual Orientation and Welsh language competencies.

NWSSP has a statutory and mandatory induction training programme for all new recruits which includes the NHS Wales "Treat Me Fairly" e-learning module focusing on equality and diversity. The module is a national training package and the statistical information pertinent to NWSSP completion contributes to the overall figure for NHS Wales. NWSSP provides a "Core Skills for Managers" Training Programme and the "Managing Conflict" module includes an awareness session on the Dignity at Work Policy and Procedure. A corporate induction package on equality, diversity and inclusion has been included within the 2018 programme for new starters in the organisation.

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.

6.2 Welsh Language

NWSSP is committed to ensuring that the Welsh and English languages are treated equally in the services we provide to the public and NHS partner organisations in Wales. This is in accordance with the current Velindre NHS Trust Welsh Language Scheme, Welsh Language Act 1993 and the Welsh Language Measure (Wales) 2011. In addition the Welsh Language Standards [No7.] Regulations 2018 will come into force in June 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

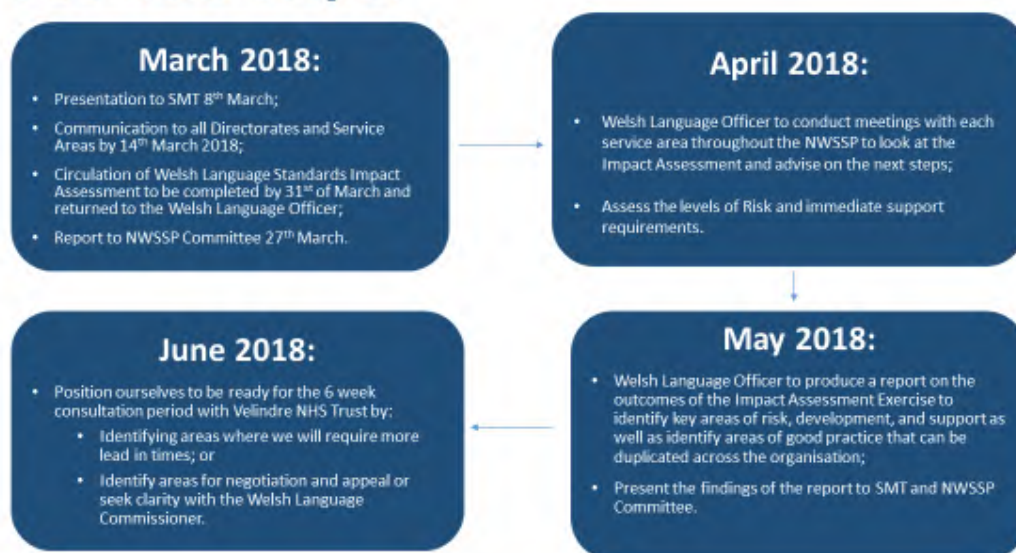
is largely undertaken by the Welsh Language Officer and a Welsh Language Translator. In March 2018 we advertised another full time Welsh Language Translator post for a fixed-term period of 12 months in the first instance.

These posts enable us to comply with our current obligations under the current Welsh Language Scheme and in the planning and preparations to meet the requirements of the Welsh Language Standards. This will increase the demand for translation services in the following areas:

- Service Delivery Standards;
- Policy Making Standards;
- Operational Standards;
- Record Keeping Standards; and
- Supplementary Standards.

The plans already in place to meet the requirements of the Welsh Language Standards are as follows:

The next steps:



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 we have invested in the development of a candidate interface on the TRAC recruitment system.

The Impact Assessment Exercise referred to above will enable NWSSP to further develop our services. The findings from the impact assessment will be compiled into a report informing the Welsh Language Strategy and Welsh Language Implementation Plan. Our achievements from the implementation plan will enable us to report on our performance against the Welsh Language Standards within our Annual Performance Report, which is bilingually to the Welsh Language Commissioner in June each year.

6.3 Handling Complaints and Concerns

NWSSP is committed to the delivery of high quality services to its customers; the NWSSP mission is 'to enable the delivery of world class Public Services in Wales through customer focus, collaboration and innovation'. In addition, one of NWSSP's corporate objectives is to 'develop customer insight and a customer focused culture'.

NWSSP's Issues and Complaints Protocol is reviewed annually. The Protocol aligns with the Velindre NHS Trust Handling Concerns Policy, the Concerns, Complaints and Redress Arrangements (Wales) Regulations 2011 and Putting Things Right Guidance. In addition the protocol was recently amended to include specific guidance on identifying if a complaint is vexatious and how to manage such complaints within NWSSP.

During 2017-18, 14 complaints were received. 12 were responded to within the 30 working day target, with two being substantively responded to at 34 and 32 working days respectively. However, in both instances correspondence was issued to the complainants detailing that we were investigating the matter and that a formal response would be provided at the earliest opportunity.

6.4 Freedom of Information Requests

The Freedom of Information Act (FOIA) 2000 gives the wider 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.

In the financial year 2017/2018, NWSSP responded to 55 requests for information by the end of February 2018:

Figure 12 – Freedom of Information Requests Apr 2017- February 2018

FOI Breakdown
55 answered within the 20 day target
0 transferred out to another NHS body
0 responded to outside of the deadline
0 withdrawn

6.5 Data Security

In 2017/2018 (to end of February 2018), 33 information governance breaches were reported within NWSSP, these included issues with misdirection of email and records management.

All breaches are recorded in the Datix risk management software, and investigated in accordance with the Information Governance and Confidentiality Breach Reporting protocols. The protocols encourage staff to report those breaches that originate outside the organisation for recording purposes. Incidents reported for information purposes that originated outside the NWSSP were 97 (to end February 2018).

From this, the Information Governance Manager writes a report including relevant recommendations and any areas for improvement to minimise the possibility of further breaches.

Any gaps identified during incident investigation provide an opportunity for changes to practice and development of new protocols. Staff are also requested to provide feedback to any recommendations made by the Information Governance Manager where action is required to further improve the service and demonstrate prevention of any further breaches.

Members of the IGSG are required to report to the Steering Group meetings on any incidents in their areas to include lessons learned and any changes that have been made since an incident was reported.

There was one Information Governance breach reported in 2017/18 that was assessed as being of a category serious enough to report to the Information Commissioner's Office (ICO) for further investigation. However, this was done as a matter of course as the mitigations in place and the circumstances of the breach were handled in such a way that the data in question was not released into the public domain and was controlled and secured to a point where there were no risks to the data subject's information. The ICO were satisfied with the processes involved and the recommendations made and did not consider it to be an issue that required enforcement action.

It is important to note that following implementation of the new Data Protection Legislation, all breaches, regardless of perceived severity, will have to be reported to the ICO within 72 hours.

6.6 ISO14001 – Sustainability and Carbon Reduction Delivery Plan

NWSSP is committed to managing its environmental impact, lowering the organisation's carbon footprint and adhering to the sustainable development principle. As part of this organisational commitment, NWSSP was successful in attaining the ISO14001:2004 Environmental Management System certification in December 2014, in accordance with the Welsh Government mandate for all NHS Wales organisations to attain the Standard. NWSSP successfully achieved re-certification to the Standard in August 2017. One minor non-conformity (which will be closed off at the next audit) and four opportunities for improvement were identified, which have since been investigated. These are detailed below:

- **Minor Non Conformity** - The Control of Contractors Policy states that a *"record of inductions is to be kept for future auditing signed and dated by the contractors upon completion."* However, the procedure, Contractor Management (ENV008), does not state the above. No records of signed contractor inductions were able to be retrieved at Cwmbran Stores, as the procedure was being used rather than the policy.

- **Opportunities for Improvement**

- Consideration to be given as to separating waste providers on the electronic system to aid retrieval (Cwmbran House);
- Consideration to investigate as to why version control on the Contract Planning Form was removed (Companies House);
- Expand on the environmental training available through e-learning; and
- Consideration to be given as to adding an environmental incident coding type onto DATIX, which is currently under the heading of "Health and Safety" (Cwmbran Stores).

- **Observations (highlighting good practice)**

- Positive comments on initiatives (Cwmbran House); and
- Excellent record keeping and retrieval of documentation (Companies House).

Carbon Footprint

As part of our commitment to reduce our contribution to climate change, a target of 3% carbon reduction year on year from a baseline of our carbon footprint, taken from 2014-2015, has been agreed and this is reflected within our Environmental Objectives.

During 2017/18, we committed to reducing our carbon reduction by implementing various environmental initiatives at our sites within the scope. It is anticipated that we achieve our target for the reporting period, having achieved a reduction of [xx]%. NWSSP's Sustainability Report for 2017/18 explores this area in further detail:

<http://www.nwssp.wales.nhs.uk/governance-and-assurance-arrangements>

6.7 Business Continuity Planning/Emergency Preparedness

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. We recognise our 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 Velindre NHS Trust we are 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.

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. At present there are local directorate plans in place for ensuring business continuity arrangements are effective for key services and buildings, and work is progressing in developing an overarching Business Continuity Plan which outlines our response to incidents and outbreaks, including the mobilisation of additional resource.

In addition, we complete the Caldicott Principles Into Practice (CPIP) annual self-assessment which assesses if organisations have current and tested business continuity plans in place for all of their critical infrastructure components and core information systems.

NWSSP are working 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.

6.8 UK Corporate Governance Code

NWSSP operates within the scope of the Velindre NHS Trust governance arrangements. Velindre NHS Trust has undertaken 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 under Velindre NHS Trust and as the Payroll function for NHS Wales, within NWSSP's remit 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.

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.

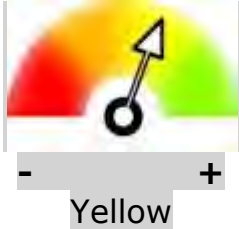
Each of the Committees have considered a range of reports relating to their areas of business during the last year, which have included a comprehensive range of internal audit and external audit reports and reports on professional standards from other regulatory bodies. The Committees have also considered 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 Velindre NHS Trust and the local 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 Head of Internal Audit opinion for 2017/2018 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
Reasonable assurance		The Committee can take reasonable assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with low to moderate impact on residual risk exposure until resolved.

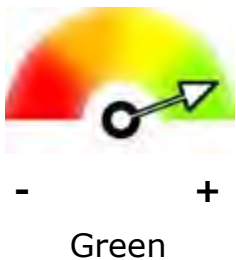
In reaching this overarching opinion the Head of Internal Audit has identified that the assurance domains relevant to NWSSP have all been assessed as providing reasonable assurance.

The rating of each assurance domain is based upon the audit work performed in that area and takes account of the relative significance of the issues identified. It should be recognised that many of the reviews were directed at high risk areas, and the overarching opinion needs to be read in that context. Of the reviews undertaken, around 45% were given a substantial assurance rating, and around 53% a reasonable assurance rating (as at 13th June 2017).

Internal Audit review of Corporate Governance

Internal Audit undertook a review of Corporate Governance in 2016/2017 to assess the control environment including management of the new Health and Care Standards Framework self-assessment process and the assurance framework including the Annual Governance Statement. This audit provides assurance to the Audit Committee of Velindre NHS Trust 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 associated with Corporate Governance 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 2016/2017.

Substantial assurance		<p>The Committee can take substantial assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with low impact on residual risk exposure.</p>
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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 Velindre NHS Trust. These procedures include the Standing Orders for the regulation of their 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), they provide the regulatory framework for the business conduct of the Trust. These arrangements are supported by detailed financial operating procedures covering the whole of Velindre and also local procedures specific to NWSSP.
- **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. The SLAs are reviewed annually to ensure 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 2017/2018 and that we are 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.

Looking forward – for the period 2018-19:

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 2018-2019.

Signed by:

Managing Director – NHS Wales Shared Services Partnership

Date: 2018

 GIG CYMRU NHS WALES	Partneriaeth Cydwasaethau Shared Services Partnership	AGENDA ITEM: 5.4 27th March 2018
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<i>The report is not Exempt</i>
Teitl yr Adroddiad/Title of Report
<p>Understanding Redress activity levels and the implications of transferring the management of redress to the Welsh Risk Pool</p>

ARWEINYDD: LEAD:	Andy Butler Director of Finance & Corporate Services
AWDUR: AUTHOR:	Sue Saunders/ Martin Riley, Head of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Martin Riley Head of Finance
MANYLION CYSWLLT: CONTACT DETAILS:	Andy Butler Director of Finance & Corporate Services 01443 848552 / Andy.Butler@wales.nhs.uk
Pwrpas yr Adroddiad: Purpose of the Report:	
To update the Committee on the potential transfer, and implications of the transfer, of the management of Redress from Welsh Government and to provide an update surrounding the latest developments in the 'Fixed Recoverable Costs Scheme' and its relationship with the redress system.	
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:	

Adduned y Pwyllgor/Committee Resolution (insert ✓):							
DERBYN/ APPROVE		ARNODI/ ENDORSE	•	TRAFOD/ DISCUSS		NODI/ NOTE	✓
Argymhelliad/ Recommendation		The Committee is asked to NOTE the report.					

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	✓
Cyfreithiol: Legal:	✓
Iechyd Poblogaeth: Population Health:	✓
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	✓
Ariannol: Financial:	✓
Risg a Aswiriant: Risk and Assurance:	✓
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Standard 1.1 Health Promotion, Protection and Improvement
Gweithlu: Workforce:	No impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open. The information is disclosable under the Freedom of Information Act 2000.

INTRODUCTION

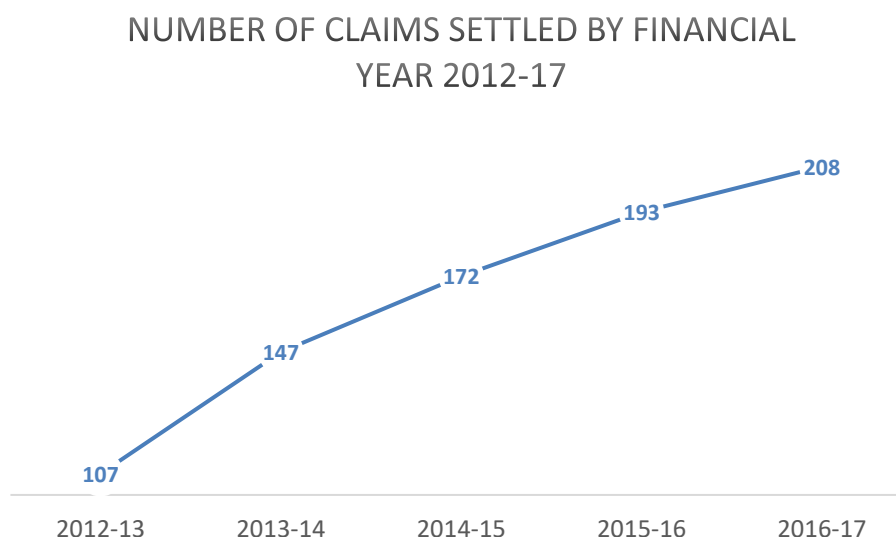
This paper builds on the principles outlined in the January 2018 Welsh Risk Pool committee paper on redress. Since that meeting data has been received from the Welsh Government and this has been analysed and is presented in this report.

The Welsh Government have indicated that they intend to transfer this function to the Welsh Risk Pool within NWSSP from April 2018. Discussions have taken place between senior staff within both organisations however, it must be noted, that no formal request has been made in writing regarding this and more detailed discussions about the funding are required.

This report sets out the historical and current activity in relation to redress, the work that NWSSP would need to undertake in relation to embedding robust systems, accountability, governance, processes and learning from events plus an analysis of the risks and benefits associated with the transfer of this function.

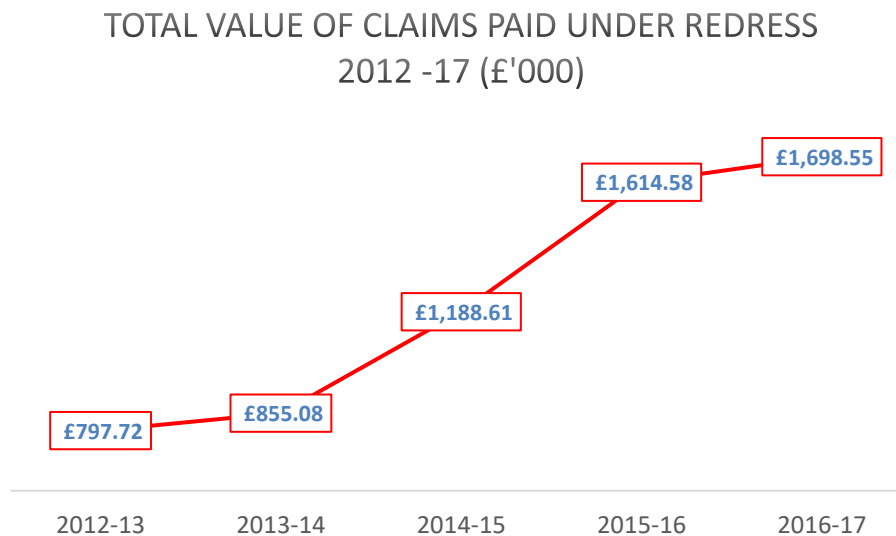
THE GROWTH OF REDRESS CASES

All figures shown below have been supplied by the Welsh Government and analysed within NWSSP. Redress commenced in 2012 and figures on the number of claims have been analysed to the end of the 2016/17 financial year. The graph below tracks the growth in the number of cases in this period.



The claims settled have almost doubled since 2012/13 from 107 to 208 in 2016/17. Growth has slowed significantly. No information about the number of claims has been available from the Welsh Government for 2017/18.

In terms of payments the graph below tracks the increase in payments over the same period.

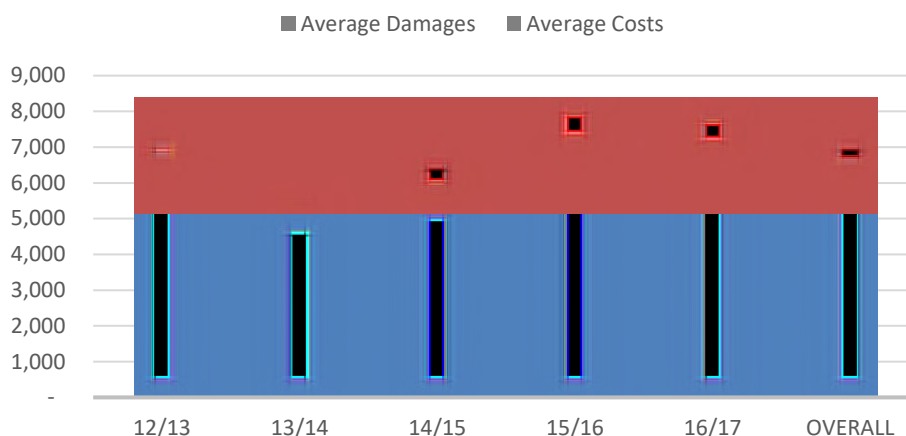


The total value of claims has increased year-on-year but as the growth in the number of claims settled under redress has slowed, the growth in annual expenditure has also slowed. The reimbursement to Health Boards was £1.7m in 2016/17.

Reimbursements up to the end of quarter 3 in 2017/18 total £1.575m. It is anticipated that total claims for 2017/18 will total approximately £2m.

The graph below shows the average value of a claim in each of the last 5 financial years, split by damages and costs.

AVERAGE PAYMENTS UNDER REDRESS BY FINANCIAL YEAR



Average damages paid over the 5 years are £6,162 and average costs per claim are £1,280.

The latest available figures, 2016/17 are £6,696, £1,471 and £8,166 for average damages, average costs and average total cost per claim respectively.

The annual budget for redress within the Welsh Government has been confirmed as £1.259m. A surplus was recorded against this budget until 2015/16. Since then, due to the increasing use of redress, costs have been higher than budget leading to a deficit position which has been managed from other Welsh Government health budget variances. In 2016/17 this budget was overspent by £440k. In 2017/18 the overspend is forecast to increase to £740k.

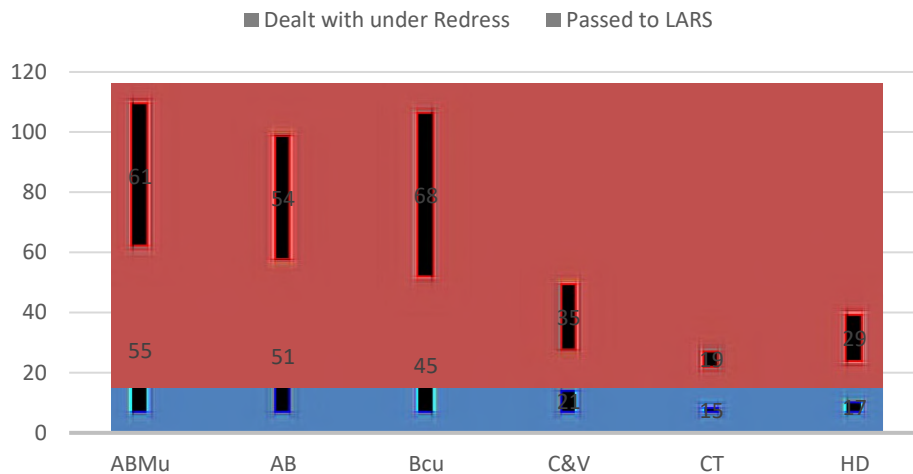
REDRESS BUDGET SURPLUS / (SHORTFALL) 2012 -17



ANALYSIS OF CLAIMS

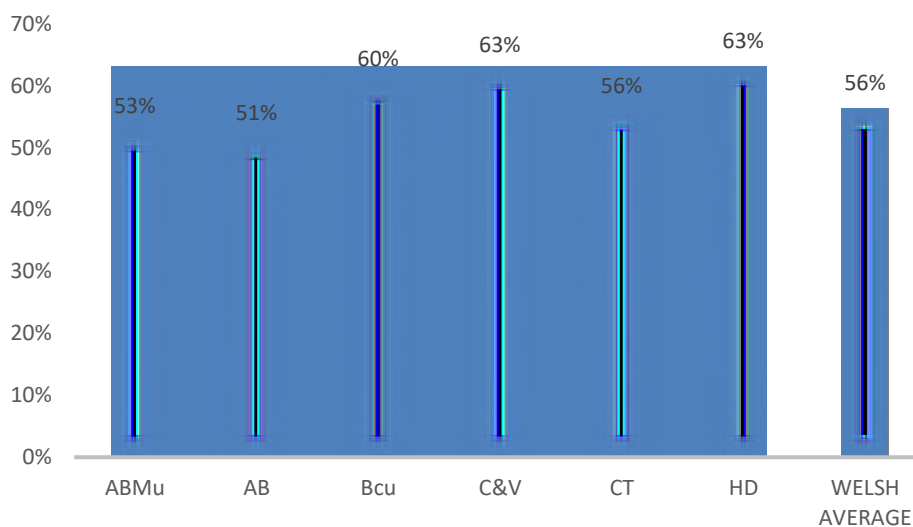
The total number of claims with damages lower than £25k in 2016/17 was 476. Of these claims, 208 were dealt with under redress (this includes the 204 from the Health Boards identified below plus another 4 from other Welsh Health Organisations).

16/17 CASES WITH DAMAGES < £25K



More cases, 268 in total, entered litigation. The graph below shows this in percentage terms.

% CASES IN 16/17 < £25K DAMAGES ENTERING LITIGATION

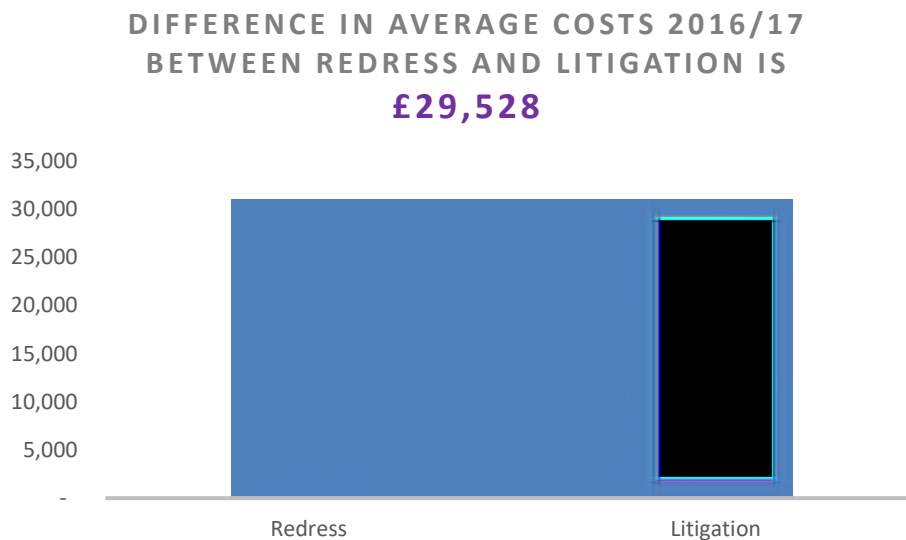


The above graph shows that 56% of all cases with a damages value under £25k were passed to LARS to litigate. The figure varies between Health Boards in a range of 51% - 63%.

44% of the cases are settled via the redress system. No Health Board settles more than 50% of their cases under £25k via redress.

The average costs paid in 2016/17 under redress was £1,471. When cases under £25k enter litigation the average costs are £30,999.

The difference in costs in 2016/17 is therefore £29,528.



With 208 cases, 44% of all cases under £25k, settled under redress across Wales the impact of this has been measured.

If the 208 cases in 2016/17 settled under redress came into LARS to litigate then the additional costs incurred would have equated to £6.15m (208 x £29,528). This therefore represents a significant saving to NHS Wales.

However, 268 cases, were passed to LARS and if all these cases were settled under redress an additional £7.9m in costs could have been avoided. However, a 100% redress settlement rate under redress is not achievable. With LARS & WRPS intervention a 60% target is realistic. This would yield an additional cost saving of £2.3m per annum in addition to the £6.15m currently being achieved equating to £8.4m in total.

Table 1 below, illustrates this.

% cases settled via redress	Current saving	additional saving	Total savings on cost per annum
Current % : 44%	6,141,845	-	6,141,845
50%	6,141,845	885,843	7,027,688
60% target	6,141,845	2,291,381	8,433,225
75%	6,141,845	4,399,687	10,541,532
100%	6,141,845	7,913,531	14,055,376

It is important to note that whilst these are real savings to the NHS in Wales the cost in the short term (1 to 3 years) will increase. This is because claims settle far quicker under redress. The effect on having fewer claims in the system will benefit the NHS in the medium term as the profiling of cases currently in the system reduce and fewer new claims are transferred to LARS.

THE EFFECT OF THE PERSONAL INJURY DISCOUNT RATE (PIDR) ON CLAIMS WITH DAMAGES BELOW £25K

Claims with damages < £25k generally have little or no elements relating to future losses. Therefore the PIDR has little impact on the level of these claims and therefore this is not sensitive to market rate changes in the PIDR.

FIXED RECOVERABLE COSTS IN CLINICAL NEGLIGENCE – NEXT STEPS ANNOUNCED

The Department of Health and Social Care has published a response to its consultation on introducing fixed recoverable costs in lower value clinical negligence claims, those worth £25,000 or less. The response sets out the next steps on the path to implementing these, including convening a Civil Justice Council working group on the subject. It is accompanied by a report by Nottingham University Business School Professor Paul Fenn, which includes his proposed fixed recoverable costs figures.

The report responds to a consultation which was open from January to May 2017 and considered issues including:

- how fixed recoverable costs (FRCs) should be implemented
- whether FRCs should be mandatory
- what the rates should be, and how they should be calculated
- how other costs, including expert fees should be dealt with
- how FRC cases should be run

The response document includes a summary of consultation responses received. As to whether FRCs should be introduced on a mandatory basis, the majority (58%) were strongly opposed. The sample was relatively small but highlights the strong feeling amongst claimant representatives.

As to the date from which FRCs should apply in any claim, there was an effective split, some favouring the date when the letter of claim is sent after any proposed implementation date, and others favouring the date of the adverse incident after any date of implementation; effectively backdating the lower costs which would be recoverable for the investigation..

The consultation also dealt with expert witness costs, most being in favour of not capping experts' fees. Equally the introduction of a single joint expert was answered with a resounding no. Interestingly, in answer to the question of whether there should be an early exchange of evidence, two thirds said yes.

Professor Fenn's report has been released with the response. This provides a summary of the more extensive data which he has now considered, together with analysis, and a table recommending an appropriate level for the FRCs.

His figures, as set out in table 2 below, are staged, include an element of damages, and are to apply to clinical negligence claims valued at £25,000, or less. Costs are reduced if there is an early admission.

Table 2;

Stage	Clinical negligence claims with value less than or equal to £25,000
Pre-issue	£3,800 + 24% of damages Reduced by 10% if there is an early admission of liability
Post-issue, pre-allocation	£6,250 + 45% of damages Reduced by 20% if there is an early admission of liability
Post allocation, pre-listing	£13,200 + 45% of damages Reduced by 20% if there is an early admission of liability
Post listing, pre-trial	£16,800 + 45% of damages Reduced by 20% if there is an early admission of liability
Trial advocacy fee	To be determined

A Civil Justice Council (CJC) working party on FRCs has been set up to take matters forward. It will be chaired by a neutral party who will be a member of the CJC, and will be made up of representatives from all sides of the debate, including claimants, defendants, general practitioners and representatives from NHS Resolution. As the new process will apply to incidents of harm occurring in the private sector and to cases brought in Wales, these areas will also need to be represented. Legal & Risk services has been in contact with the Chairman who has agreed to their attendance at all meetings.

Preliminary work has already taken place. A chair and deputy have been appointed. Terms of reference include:

- making recommendations for an improved process for clinical negligence claims worth £25,000 or less
- drawing up a FRC structure, including figures for these, and for expert reports
- having regard to how the new process and FRCs will affect patient safety issues and healthcare provider outcome reporting
- considering how expert reports should be commissioned and funded, including the feasibility of single joint experts

The CJC working party is expected to publish its recommendations by the end of September 2018, with a view to the Government considering these as quickly as possible.

The main point of contention will surround setting the rates in any fixed scheme. Professor Fenn's figures are based on his analysis of average actual base costs of a clinical negligence claim and therefore attract credibility but noted limitations. In addition to satisfying all interests, the timescale of less than six months to meet, decide and issue recommendations by September 2018 is tight. It is however an essential step for England in limiting excessive costs in low value clinical negligence claims and is likely to be pursued vigorously by Government to translate savings to front line NHS services.

INTERACTION WITH NHS WALES PUTTING THINGS RIGHT REGULATIONS PART 6: REDRESS

The PTR regulations were introduced in Wales following the passing of the very first Welsh Measure in 2008; the NHS Redress (Wales) Measure. It was intended that the regulations introduced as a result of the Measure

would replace the old NHS Complaints procedure which had been in place for many years. The old procedure did require compliance with a time frame but the complainant was not usually kept advised of the progress of the investigation and, if the complaint was upheld, even if there was confirmation that failings in treatment had caused harm, the complainant could not expect to receive an offer of compensation, nor as a rule would there be a full explanation, apology or evidence of lessons learned. For compensation he would need to seek advice from a Solicitor and begin legal proceedings in many cases.

If a complainant lost patience with the progress of the complaint investigation and sought legal advice; the intimation of a potential legal claim would stop the complain investigation altogether, thereby losing the opportunity to establish internally, what went wrong.

Whilst there have been teething troubles with the implementation and efficient investigations under PTR there have been considerable improvement recently. The feed back from solicitors who become involved on behalf of those raising concerns have far fewer complaints and recognise the system has beneficial to their clients in most cases. Those individuals who have been central to an investigation which has resulted in a finding of a qualifying liability leading to an offer of redress have generally been satisfied with the process and have not sought to take advantage of the access to free legal advice offered under Part 6 of the regulations.

The Redress element of the PTR is not mandatory; as described above there is a significant number of lower value cases which do not proceed through redress but are litigated with much higher costs consequences. If the Government presses ahead with the implementation of a mandatory fixed recoverable costs scheme it is likely to lead to a reduction of matter proceeding through Part 6 Redress of the PTR regulations but will certainly not remove the requirement for those regulations as many people who raise a concern about their own treatment or that affecting their family will still prefer the inclusive and empathic manner in which the best managed concerns are handled.

There is likely to be a significant difference between the costs awarded under the PTR and those recoverable under the mandatory scheme. It is possible that a potential claimant's solicitor will allow a concern to be investigated under the PTR regulations and, on receipt of the reg. 26 interim response move the potential claim to the mandatory scheme to claim the higher costs. The way to manage this is to encourage and support Health Boards to undertake the best possible investigations in a

timely manner to avoid the need for the concern raiser to seek legal advice.

ADDING VALUE TO REDRESS WITHIN NWSSP

It is anticipated that Part 6 Redress will continue in its current form for at least the next 2 years and is likely to remain an option beyond this date. On this basis it is deemed appropriate to incorporate it into NWSSP. However, any process introduced will need to **add value** and **be similar in nature** to the procedures currently in place for all other claims within the remit of the WRPS Committee.

Some of the financial benefits are identified earlier in the report. By incorporating some of the principles and engagement set out below the financial benefits can be increased. However, there are other benefits that arise due to trend analysis, increasing governance in this area and learning lessons from events.

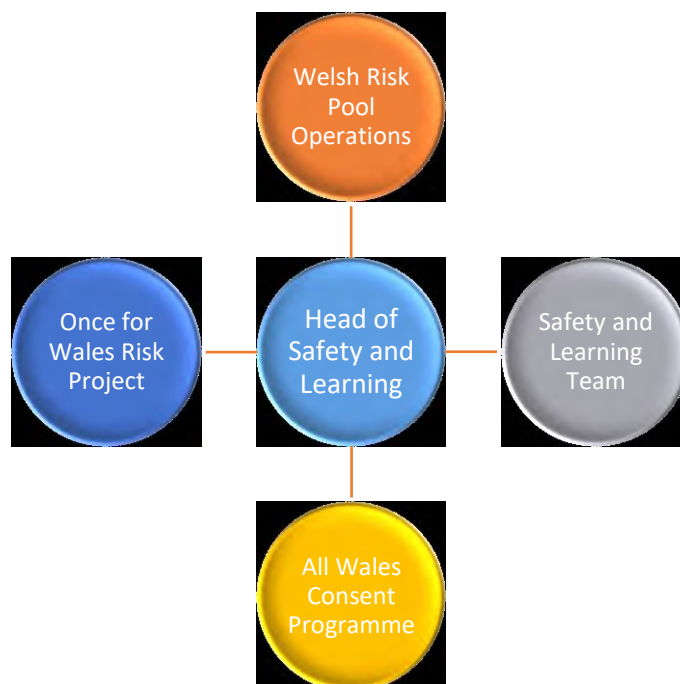
These are detailed in more detail in **table 3** below.

Duties	Link with:	Necessary because / Added value:
Health Board Trust liaison – mirror the process used for CN claims	HB / Trusts / WRPS & LARS staff	Core Business
Database management / report writing	LARS Information Officer	Informs: PtR Solicitors, Safety and Learning Advisors and Finance Team of activity
Performance / benchmarking	PtR solicitors re: trends, activity level	Claim profile monitoring, changing trends, behaviours, cost savings, impact
Marketing / raising awareness	PtR Solicitors – increasing activity levels, targeting support	Changing the balance between redress and cases <£25k damages entering litigation results in cost reduction for the NHS.
Supporting meetings	PtR solicitors re: raising awareness Safety & Learning Advisors	Understanding the business, presenting activity, figures, benchmarking

Preparation of report for WRPS Committee	The Head of Safety and Learning will need to review and sign-off	Provides additional information for WRPS Committee. Completes information re: claims in Wales. Informs decision-making. Provides WRPS Committee with the ability to reject reimbursement, defer reimbursement and seek additional assurances
Reimbursement of Claims	Authorising Officer Finance Team	Core business
Manage deferred reimbursements	Head of Safety and Learning and Safety & Learning Advisors, HBs & Trusts	Ensure the WRPS Committee recommendations are achieved on a timely basis and reported back to Committee accordingly
Increase accountability and ensure lessons are being learned	Head of Safety and Learning and Safety & Learning Advisors	Send requests and receive evidence from Trusts / HBS that the actions requested by the WRPS Committee are being delivered and met on a timely basis
Collate and share improvement strategies	WRPS Clinical Assessors / Safety & Learning Advisors	Claim profile monitoring, changing trends, behaviours, cost savings, impact
Building links between implementing lessons learned & reimbursement	Head of Safety and Learning and Safety & Learning Advisors	Compile quarterly lessons learned reports and disseminate good practice
Forecasting future activity	Finance Team	Inform the IMTP. Redress brings additional allocation and additional costs (not necessarily the same figure) to the WRPS £75m. It is vital this is tracked accurately as it will have an impact on the year-end outturn and potentially the Risk Sharing Agreement.

The table above identifies that to add the most value collaborative work between the WRPS, the Legal and Risk Solicitors and the NHS Service is necessary. Managerially the responsibility for the administration and

learning lessons would sit within the WRPS team. The team has recently expanded its remit and the structured is illustrated below.



There is little scope within the current structure to absorb any further new work.

Therefore a contribution to running costs is required to ensure that the governance arrangements, processes, communication and lessons learned can be delivered. To deliver a high quality service the following budget is required.

Table 4.

Staffing requirement		Annual Cost	
0.5 FTE Band 5	£		18,028
0.5 FTE Band 7	£		26,463
Total 1 FTE	£		44,491

TRANSFERRING TO NWSSP: FUNDING ARRANGEMENTS

The Welsh Government's baseline budget for Redress is £1.259m with no identified funding for running costs. Overspends against this budget have been managed in recent years through favourable variances on other

centrally held budgets. As more claims are settled via redress, there is an expectation that the call against the pre-PIDR affected £75m allocation (or £76.3m with the inclusion of the redress) will reduce, thus resulting in cost savings to the NHS. In terms of running costs, the management of redress forms only a small part of staff roles within Welsh Government and therefore does not warrant a transfer of resources to manage.

However, it is important to note that whilst these are real savings to the NHS in Wales the cost in the short term (1 to 3 years) will increase. This is because claims settle far quicker under redress. The effect on having fewer claims in the system will benefit the NHS in the medium term as the profiling of cases currently in the system reduces and fewer new claims are transferred to LARS, subject to the effect of FRC mandatory scheme referred to above.

This will result in a cost pressure in 2018/19 against the baseline budget likely to exceed £740k (the difference between the 17/18 budget of £1.259m and the expected level of expenditure of £2m). Based on current forecast levels it is anticipated that the Risk Sharing Agreement for claims over £25k will not be invoked. However, if only £1.259m was transferred for Redress, this places a potential additional risk on the NHS.

Whilst it is recognised that current practices within the Welsh Government do not warrant a transfer of resources to cover the running of the scheme in NWSSP, this report has identified work that will need to be undertaken to add value, learn lessons and instil the same level of scrutiny, accountability and governance for redress as for the other claims managed by the WRPS.

Without additional support redress claims would be treated differently, with less scrutiny, which will not meet our basic criteria for managing claims.

Welsh Government have therefore agreed that the risks against the traditional WRPS budget of £75m and the Redress budget are managed separately in the short term. They will be managed as two schemes within NWSSP for the next three financial years, but with the expectation that the risks are managed in total by the NHS from 2021/22 onwards.

Under this arrangement, the level of funding transferred from Welsh Government to NWSSP under this option would be £1.3m.

Any overspend against the Redress budget, including running costs of the new arrangements, would be met by any underspend against the £75m

WRPS allocation. If the £75 million WRPS allocation is fully utilised, the Welsh Government would fund the shortfall on the redress budget including running costs. The following scenario's demonstrate this;

Table 5 (£m);

	WRPS Core Allocation	Redress Allocation	Total Allocation	Actual WRPS Spend	Redress Spend	Total Spend	WG additional contribution
Scenario 1	75.0	1.3	76.3	75.0	1.3	76.3	0.0
Scenario 2	75.0	1.3	76.3	75.0	2.0	77.0	0.7
Scenario 3	75.0	1.3	76.3	74.0	1.3	75.3	0.0
Scenario 4	75.0	1.3	76.3	74.0	2.0	76.0	0.0
Scenario 5	75.0	1.3	76.3	74.5	2.0	76.5	0.2

Under scenario's 1, 3 and 4 no additional contribution would be required from the Welsh Government even though there is a £700k overspend against redress in scenario 4.

Scenario 2 would require an additional £700k contribution from the Welsh Government as there is a £700k overspend on redress and the WRP core allocation is fully utilised.

Scenario 5 would require an additional £200k contribution from the Welsh Government as there is a £700k overspend on redress and a £500k under-utilisation on the WRP core allocation to partially off-set the redress overspend.

Recurrent funding of £44k will be transferred as a contribution to running costs to ensure that all benefits set out in table 3 are delivered.

NEXT STEPS

The Committee are invited to;

- a) **note** the update on the introduction of the Fixed Recoverable Costs Scheme
- b) **note** the risk within Welsh Government around the baseline budget and current costs of redress
- c) **endorse** the funding arrangements as set out in the report

A letter will be sought from Welsh Government formally requesting the transfer of this function.

 Partneriaeth Cydwasaethau Shared Services Partnership	AGENDA ITEM: 6.1 27th March 2018
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<i>The report is not Exempt</i>
Teitl yr Adroddiad/Title of Report
Finance, Workforce and Performance Update Report

ARWEINYDD: LEAD:	Andy Butler, Director of Finance & Corporate Services & Hazel Robinson, 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 st January 2018.

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	✓
Argymhelliad/ Recommendation	<p>The Committee is asked to:</p> <ol style="list-style-type: none"> 1. Note the financial position reported to 31st January 2018. 2. Note the significant level of professional influence savings generated by NWSSP to 31st January 2018. 3. Note the performance against the High level key performance indicators to 31st January 2018. 4. Note the workforce data for the period. 5. Note the content of this update and seek further information if required. 						

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

Finance, Workforce and Performance Update Report

INTRODUCTION

This report provides an update regarding:

- Cumulative Financial Position to 31st January 2018
- High Level Performance indicators to 31st January 2018
- Workforce Information to 31st January 2018

NWSSP Financial position – Month 10

NWSSP reported a break even position at the close of Month 10.

The income and expenditure position for the month period to 31st January 2018 can be summarised as follows:

	Annual Budget £000	YTD Budget £000	YTD Expend £000	YTD under/ overspend £000
Audit & Assurance Services	2,577	2,132	2,109	-23
Procurement Services	15,672	12,812	12,559	-253
Employment Services	9,112	7,572	7,422	-150
Primary Care Services	11,342	9,473	8,835	-638
Legal & Risk Services	2,249	1,871	1,788	-83
Welsh Risk Pool Services	435	361	321	-40
WIBSS	2,174	2,174	2,174	0
Specialist Estates Services	2,989	2,363	2,080	-283
E-Business Central Team Services	41	21	21	0
Counter Fraud Services	384	320	301	-19
Non Medical Education	96,233	75,926	75,923	-3
Health Courier Services	517	402	325	-77
SMTL	576	465	465	0
Corporate Services	1,381	1,146	1,200	54
Corporate IT Support	1,136	954	943	-11
PMO	183	152	153	1
Finance	901	743	673	-70
Workforce & OD/WFIS/ESR/TEL	1,360	1,135	1,092	-43
Accommodation	2,417	2,018	1,919	-99
WEDS	881	734	739	5
Student Awards	36	36	31	-5
Salary Sacrifice	-30	-25	-29	-4
Finance Academy/Finance Graduate Scheme	364	220	216	-4
ESR Enhanced	-60	-45	-45	0
Stores	0	-252	-252	0
Distribution	-2,000	0	0	0
				-1,829

The underspends reported within Procurement Services, Primary Care Services and Specialist Estates Services are primarily down to ongoing vacancies within each of the service areas.

An additional NWSSP distribution of £1.250m has been declared for 2017/18. This increases the distribution from the planned £0.750m per our IMTP to £2.000m. Some organisations have agreed to reinvest their share of the planned distribution. The revised distribution for 2017/18 is shown in the table below:

Health Board /Trust	%	Planned Distribution per IMTP £	Agreed Reinvestment £	Additional Distribution £	Total Cash Distribution £
Aneurin Bevan	9.85	73,844		123,073	196,917
ABMU	12.43	93,251		155,418	248,669
BCU	11.98	89,815	-89,815	149,692	149,692
Cardiff and Vale	10.49	78,652		131,087	209,739
Cwm Taf	6.97	52,305		87,175	139,480
Hywel Dda	7.77	58,293	-26,586	97,155	128,862
Powys	1.95	14,598	-14,598	24,330	24,330
Velindre	1.17	8,781		14,635	23,416
WAST	1.28	9,580	-9,580	15,967	15,967
Public Health Wales	0.87	6,530	-6,530	10,883	10,883
Welsh Government	35.25	264,351	-264,351	440,585	440,585
Total	100	750,000	-411,460	1,250,000	1,588,540

NWSSP Professional Influence benefits

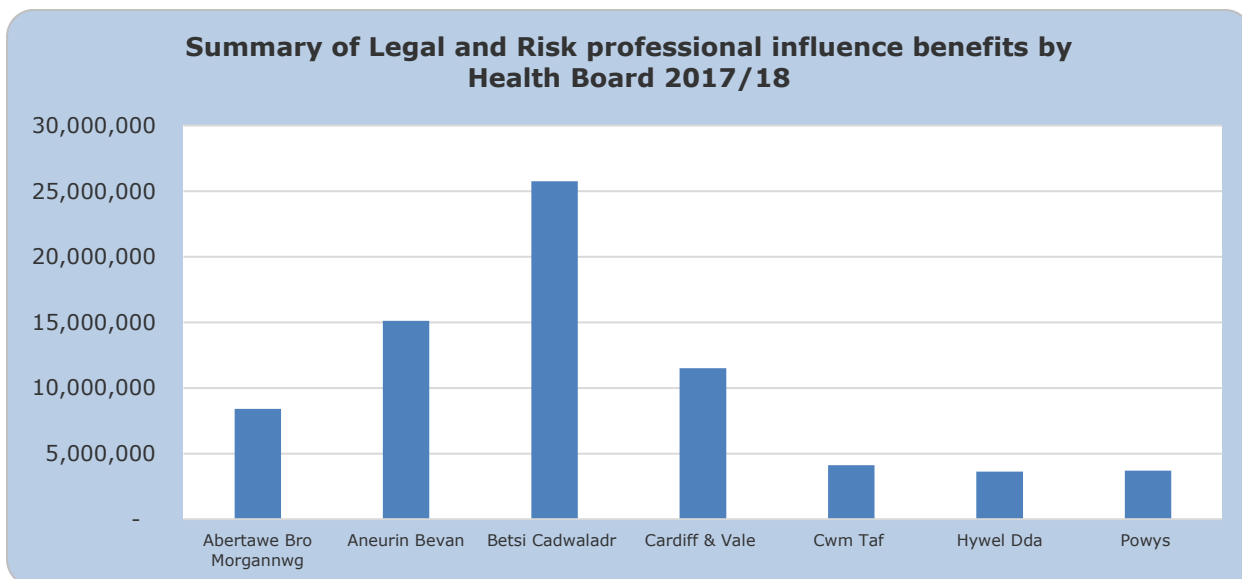
The main financial benefits accruing from NWSSP relate to professional influence benefits derived from NWSSP working in partnership with Health Boards and Trusts. These benefits relate to savings and cost avoidance within the health organisations.

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 to January 2018 are summarised as follows:

Service	YTD Benefit £m
Specialist Estates Services	5.517
Procurement Services	28.502
Legal & Risk Services	72.234
Total	106.254

The following graph analyses the benefits generated by Legal and Risk.



PERFORMANCE

Performance Reporting – to Health Boards and Trusts

NWSSP performance reports continue to be produced and distributed on a quarterly basis. The Quarter 3 reports have been produced and distributed at the beginning of February. These reports will 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 January 2018 (Unless otherwise stated) along with comparison to the previous 3 periods.

High Level - KPIs Jan 2018 (unless stated otherwise)	Target	Position at 31-Jul	Position at 30-Sept	Position at 30-Nov	Position at 31-Jan
Internal Indicators					
Corporate					
Financial Position – Forecast Outturn	Break even	Break even	Break even	Break even	Break even
Capital financial position	Within CRL	On target	On target	On target	On target
Planned Distribution	£0.750m 17/18	£0.75m	£1.5m	£1.8m	£2.0m
NHS Debts in excess of 17 weeks – Value	<£25k	£15k	£5k	£0k	£0k
NWSSP PSPP % (Cumulative)	95%	98%	98%	99%	98%
Variable Pay – Overtime	£300k	£229k	£283k	£376k	£437k
Workforce					
Staff Sickness – rolling 12 months	3.3%	3.42%	3.43%	3.42%	3.36%
PADR Compliance	>85%	86.13%	83.34%	86.36%	86.95%
Statutory and Mandatory Training	>85%	93.21%	94.19%	95.79%	96.47%
Agency % to date	<0.8%	1.56%	1.52%	1.46%	1.36%
External Indicators					
Professional Influence					
Professional Influence Savings	£50m	£60m	£82m	£90m	£107m
Procurement Services					
Procurement savings *Current Year	£20.154m 17/18	*£23.191m	*£23.478m	*£25.942m	*£28.502m
All Wales PSPP	95%	95%	95%	Reported Quarterly	95%
Employment Services					
Payroll accuracy rate inc Value Added	99%	99.78%	99.81%	99.78%	99.83%
<u>Organisation KPIs Recruitment</u>					
Time to Approve Vacancies	10 days	12 days	14 days	13 days	10 days
Time to Shortlist by Managers	3 Days	8.1 days	7.4 days	6.8 days	7.2 days
Time to notify Recruitment of Interview Outcome	2 Days	5.1 days	3.4 days	4.1 days	4.1 days
<u>NWSSP KPIs Recruitment</u>					

High Level - KPIs Jan 2018 (unless stated otherwise)	Target	Position at 31-Jul	Position at 30-Sept	Position at 30-Nov	Position at 31-Jan
Time to Place Adverts	2 days	1.7 days	1.8 days	1.0 days	1.1 days
Time to Send Applications to Manager	2 days	1.0 days	1.0 days	1.0 days	0.9 days
Time to send Conditional Offer Letter	5 days	3.5 days	3.6 days	3.6 days	3.3 days
Primary Care Services					
Payments made accurately and to timescale	100%	100%	100%	100%	100%
Prescription - keying Accuracy rates (Nov)	99%	99.72%	99.77%	99.79%	99.26%
Internal audit					
Audits reported % of planned audits	64%	21%	26%	41%	57%
Report turnaround LHB / Trust management response to Draft report	80%	81%	66%	63%	60%
Report turnaround draft response to final reporting	80%	98%	99%	99%	99%
Legal and risk					
Timeliness of advice acknowledgement - within 24 hours	90%	99%	99%	98%	99%
Timeliness of advice response – within 3 days or agreed timescale	90%	100%	98%	98%	98%
Welsh Risk Pool					
Acknowledgement of receipt of claim	100%	100%	100%	100%	100%
Valid claims received within deadline processed in time for next WRP committee	100%	100%	100%	100%	100%
Claims agreed paid within 10 days	100%	100%	100%	91%	93%
Non-medical Education & Training					
% of Contracts Agreed in principle	100%	100%	100%	100%	100%
University Returns (Intake, Exit and Monthly Monitoring) received within timeframe	95%	83%	83%	100%	100%
Contract, Performance and Operational meetings booked/undertaken timely	95%	100%	100%	100%	100%

The above table shows the current positive position across Wales. However, it is recognised that within the position there are specific areas of concern or additional explanation.

Agency/Overtime – Detail regarding agency expenditure is reported monthly for consideration at NWSSP Senior Management Team. The high level of Agency and Overtime expenditure is primarily due to staff sickness, vacancies and targeted agency usage to provide support to the Procurement function. NWSSP have successfully implemented an admin and clerical and Estates and Ancillary bank. The initial focus of this was to reduce demand for agency usage within Accounts Payable, but it is now rolled out across a number of Services.

WORKFORCE INFORMATION

NWSSP Staff in Post

The table below outlines the directly employed contracted full time equivalent (FTE) and headcount figures for NWSSP as at 31st January 2018:

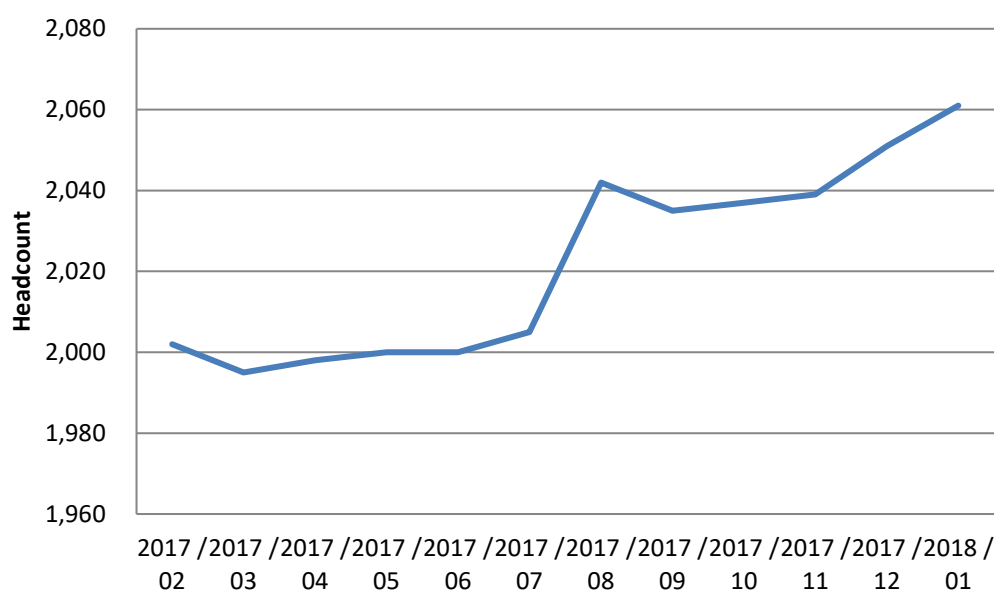
Directorate	Headcount Dec 2017	Headcount Jan 2018	FTE Dec 2017	FTE Jan 2018	FTE Change +/-	FTE Change +/- %
Audit & Assurance Section	54	55	51.03	51.63	0.60	1.18%
Corporate Section	39	39	38.17	38.17	0.00	0.00%
Counter Fraud Section	6	6	6.00	6.00	0.00	0.00%
Digital Workforce Solutions Section	8	8	8.00	8.00	0.00	0.00%
E-Business Central Team Section	8	8	6.91	6.91	0.00	0.00%
Employment Section	339	341	307.18	308.54	1.36	0.44%
Finance Section	19	21	18.15	20.15	2.00	11.02%
GP Trainees Section	430	428	381.50	380.20	-1.30	-0.34%
Legal & Risk Section	98	100	89.18	91.34	2.15	2.41%
Primary Care Section	303	303	277.14	277.30	0.16	0.06%
Procurement Section	644	649	606.30	610.85	4.55	0.75%
Specialist Estates Section	43	43	41.60	42.00	0.40	0.96%
Surgical Materials Testing (SMTL) Section	19	19	16.95	16.95	0.00	0.00%

Directorate	Headcount Dec 2017	Headcount Jan 2018	FTE Dec 2017	FTE Jan 2018	FTE Change +/-	FTE Change +/- %
Welsh Employers Unit Section	4	4	3.80	3.80	0.00	0.00%
Workforce & OD Section	19	18	17.67	16.87	-0.80	-4.53%
Workforce Education & Development Service Section	18	19	17.29	18.29	1.00	5.78%
Grand Total	2,051.00	2,061.00	1,886.87	1,897.00	10.12	0.54%

The change of headcount and FTE is attributable to starters, leavers and changes of assignments from bank to substantive employees.

NWSSP Overall Headcount Trajectory

The graph below shows the 12 month trend in NWSSP's overall headcount for the period February 2017 to January 2018:



The significant increase in headcount in August 2017 is attributable to the appointment of GP Trainees to NWSSP under the single lead employer scheme.

Staff Turnover

The table below shows the starters and leavers in NWSSP from February 2017 to January 2018. GP Trainees and Bank workers are excluded from this information:

	2017 / 02	2017 / 03	2017 / 04	2017 / 05	2017 / 06	2017 / 07	2017 / 08	2017 / 09	2017 / 10	2017 / 11	2017 / 12	2018 / 01
Starters Headcount	12	7	20	20	15	24	14	14	12	15	11	11
Leavers Headcount	10	20	8	16	19	9	25	20	14	6	14	25

The turnover rate for NWSSP from 1st February 2017 to 31st January 2018 is 10.68% compared to 10.81 % 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 turn-over by service area is provided in the table 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 be understood within the context of the overall headcount.

Directorate	Starters Headcount	Starters FTE	Leavers Headcount	Leavers FTE	LTR Headcount %
Audit & Assurance Section	3	2.60	5	4.60	8.96
Corporate Section	5	4.00	3	2.36	8.16
Counter Fraud Section	1	1.00	1	0.45	16.90
Digital Workforce Solutions Section	0		1	1.00	12.37
E-Business Central Team Section	0		1	1.00	11.76
Employment Section	39	35.45	41	37.25	12.05
Employment Services Management	1	1.00	1	1.00	11.43
Expenses Services	3	3.00	3	2.59	15.06
Lease Cars Services	0		0		0.00
Payroll Services	14	13.43	13	11.51	7.15
Pension Services	3	2.43	3	2.80	9.05
Recruitment Services	18	15.60	21	19.36	25.23
Student Awards Services	0		0		0.00
Finance Section	5	4.85	4	4.00	21.82
Legal & Risk Section	22	21.40	9	9.00	9.96
Primary Care Section	21	20.20	23	21.14	7.59
Engagement & Support Services	15	14.20	8	6.60	11.69
Modernisation & Technical Services	1	1.00	2	2.00	7.00
PCS Management Services	0		0		0.00
Transaction Services	5	5.00	13	12.54	6.44
Procurement Section	91	83.42	73	67.27	11.53
Accounts Payable Services	12	11.60	18	17.40	16.71
Corporate Procurement Services	2	2.00	2	2.00	17.39

Directorate	Starters Headcount	Starters FTE	Leavers Headcount	Leavers FTE	LTR Headcount %
E-Enablement Services	5	5.00	5	5.00	24.49
Health Courier Service	22	17.69	8	6.30	5.95
Local Procurement Services	22	19.85	18	15.83	16.72
Sourcing Services	12	12.43	10	9.20	11.29
Supply Chain Services	16	14.85	12	11.53	7.37
Specialist Estates Section	3	3.00	5	5.00	11.67
Surgical Materials Testing (SMTL)	2	2.00	1	1.00	5.83
Welsh Employers Unit Section	0		0		0.00
Workforce & OD Section	2	1.43	3	2.91	16.14
WEDS	1	1.00	1	0.81	5.41
Total	193	180.35	171	157.79	10.68

A summarised analysis of the reasons why staff have left is provided below for the period 1st February 2017 to 31st January 2018:

Non Voluntary Resignations		Voluntary Resignations		Retirement	
Death in Service	2	Voluntary Resignation - Better Reward Package	6	Voluntary Early Retirement - with Actuarial Reduction	4
Dismissal - Capability	2	Voluntary Resignation - Health	2	Flexi Retirement	7
Dismissal - Conduct	1	Voluntary Resignation - Incompatible Working Relationships	3	Retirement - Ill Health	1
Employee Transfer	2	Voluntary Resignation - Lack of Opportunities	7	Retirement Age	25
End of Fixed Term Contract	3	Voluntary Resignation - Other/Not Known	27		
End of Fixed Term Contract - Completion of Training Scheme	1	Voluntary Resignation - Promotion	43		
End of Fixed Term Contract - End of Work Requirement	2	Voluntary Resignation - Relocation	7		
End of Fixed Term Contract - Other	1	Voluntary Resignation - To undertake further education or training	9		
Dismissal - Some Other Substantial Reason	0	Voluntary Resignation - Work Life Balance	14		
		Mutually Agreed Resignation - Local Scheme with Repayment	2		
Total	14		120		37

Of 171 staff that left the organisation during this period 120 staff terminated as a result of a voluntary resignation, equivalent to 70.18% of all terminations.

Sickness Absence

The table below shows the average sickness absence rate for NWSSP for 12 months from 1st February 2017 to 31st January 2018 was 3.36%.

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 January 2018 was 3.93% which is a 0.31% increase on the December position.

Absence % (FTE)	Absence Days	Abs (FTE)	Avail (FTE)
3.36%	25,396	22,871.33	680,095.38
Month	Absence % (FTE)	Abs (FTE)	Avail (FTE)
2017 / 02	4.06%	2,103.06	51,742.90
2017 / 03	3.45%	1,971.52	57,173.74
2017 / 04	2.84%	1,563.97	55,086.88
2017 / 05	2.92%	1,669.31	57,135.09
2017 / 06	2.67%	1,480.83	55,402.54
2017 / 07	2.79%	1,601.91	57,333.51
2017 / 08	3.49%	2,037.18	58,454.10
2017 / 09	3.35%	1,886.46	56,316.84
2017 / 10	3.62%	2,100.32	58,004.50
2017 / 11	3.80%	2,133.36	56,211.11
2017 / 12	3.45%	2,016.90	58,486.82
2018 / 01	3.93%	2,306.51	58,747.35

RECOMMENDATIONS

The Shared Service Partnership Committee is requested to note:

- The financial position reported to 31st January 2018
- The significant level of professional influence savings generated by NWSSP to 31st January 2018.
- The performance against the high level key performance indicators.
- The workforce data for the period.



GIG
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Partneriaeth
Cydwasaethau
Shared Services
Partnership

AGENDA ITEM: 6.2

27th March 2018

The report is not Exempt

Teitl yr Adroddiad/Title of Report

Welsh Risk Pool Services – Financial Update – Month 10

ARWEINYDD:

LEAD:

Andy Butler

Director of Finance & Corporate Services

AWDUR:

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Pwrpas yr Adroddiad:

Purpose of the Report:

The purpose of this report is to confirm the financial position and performance as at M10 and to highlight professional savings made by L&Rs services.

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:

Adduned y Pwyllgor/Committee Resolution (insert ✓):

**DERBYN/
APPROVE**

**ARNODI/
ENDORSE**

**TRAFOD/
DISCUSS**

**NODI/
NOTE**

✓

Argymhelliad/ Recommendation	The Committee is asked to NOTE the report.
---	---

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	✓
Cyfreithiol: Legal:	✓
Iechyd Poblogaeth: Population Health:	✓
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	✓
Ariannol: Financial:	✓
Risg a Aswariant: Risk and Assurance:	✓
Safonau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link: http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf Standard 1.1 Health Promotion, Protection and Improvement
Gweithlu: Workforce:	No impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	Open. The information is disclosable under the Freedom of Information Act 2000.

1.0 INTRODUCTION

The purpose of this report is to provide an update on year to date expenditure and to highlight any significant risks to the outturn forecast.

2.0 FUNDING ARRANGEMENTS

The WRPS receives two funding streams:

Departmental Expenditure Limit (DEL) to meet in year costs associated with settled claims. The allocation for 2017/2018 has been confirmed as £75m. Expenditure above £75m will be recouped as follows:-

- From Health Boards and Trusts using a risk sharing agreement approved by the NWSSP Committee for core claim growth
- Via HM Treasury for the Personal Injury Discount Rate (PIDR) impact.

Annually Managed Expenditure (AME) to meet the cost of accounting for the long term liabilities of claims. This budget is based on estimates provided directly to the Welsh Government by the WRPS.

3.0 DEPARTMENTAL EXPENDITURE LIMIT

The WRPS utilises DEL resource through the following expenditure headings:

- Reimbursements to members
- Movement on the WRPS Claims Creditor
- Payments in respect of a WRPS managed claim (i.e. former Health Authority claims)
- Payments in respect of claims settled using Periodical Payment Order

3.1 Resource utilised as at Month 10

As at the end of Month 10 a total of £73.00 million has been utilised by the WRPS and a detailed breakdown is provided below with the 2016/17 comparative at Month 10. The higher value in 2017/18 represents a 50% increase in utilised resource compared to the same

period in 2016/17 and can be mostly attributed to the higher cost of settlement as a result of the change to the PIDR applied to future losses.

Expenditure heading	Expenditure as at Month 10 1718 £m	Expenditure as at Month 10 1617 £m
Claims reimbursed to members & WRP Managed Expenditure	69.602	48.459
Periodical Payments made to date	10.991	9.687
Movement on claims creditor	(7.593)	(9.489)
Year to date expenditure	73.000	48.657

A further £12M of Health Board reimbursements is pending committee approval and is expected to be paid in March. An element of this will relate to the yearend creditor and will have no impact on the DEL utilised in year.

The movement on the claims creditor represents a decrease of £7.593M since the yearend balance of £57.040M to £49.447M and a breakdown of the creditor per Health Board is provided below:-

Analysis of claims creditor as at 31st January 2018	£'000's
ABMu	7,608
Aneurin Bevan	9,488
BCU	6,500
Cardiff & Vale	10,689
Cwm Taf	7,753
Hywel Dda	5,418
Powys	0
Velindre	234
PHW	529
WAST	1,228
Total	49,447

The decrease in creditor relates to the timing of the March committee rather than a true decrease – the £63M reported for the January committee included a 2 month accumulation of creditor since

previous committee reimbursements, where as the above relates to just one month's accumulation.

3.2 Full Year Forecast 2017/18

The detailed case by case review of cases with cashflows expected this year above £200K has been updated to the end of January and a summary is set out below.

	Forecast at M10
	£M's
DEL POSITION as at 31/01/18	73.000
1. High Value (over £200k) - individual claim analysis	
a. Probable cases > £200K (net of yearend creditor)	0.220
b. Certain Cases > £200K (net of yearend creditor)	27.600
2. Lower Value (under £200k) - "blanket" assumptions	
a. Probable Cases < £200K - assume 40% of net cashflow (net of yearend creditor)	0.520
b. Certain Cases < £200K - assume 40% of net cashflow (net of yearend creditor)	2.924
3. Personal Injury Claims (estimate)	0.500
4. PPO Expenditure – M11 - M12 (actual - based on existing "knowns")	0.317
Total - DEL forecast 1718	105.081

The £105M forecast does not follow the spend trend for the first ten months of 2017/18 as a number of high value cases are reaching settlement in the final two months of the year.

At this point, the forecast is a fairly robust projection and includes analysis of high value cases known to be just settled or about to be settled as well as a number of large interim payments which are in the process of being paid.

Extensive analysis has been undertaken to determine how much of the excess over the £75M allocation relates to the PIDR impact within the forecast.

WRPS officers have met with Welsh Government colleagues to share and agree the methodology used in the exercise. The outcome confirms the excess relates entirely to the effect of the change to the Personal Injury Discount Rate.

Therefore, the Risk Sharing Agreement will not be invoked for 2017/18 and the additional £30M has been secured from Welsh Government to finance the cost.

A new discount rate is expected in 2018 and this is affecting both defence and client solicitor behaviour and plans. This is currently being analysed for all cases with a cashflow in excess of £100k prior to August 2018 on a case-by-case basis.

A 3 year DEL forecast has also been completed and early indications show a possible invocation of the Risk Sharing Agreement in future years:-

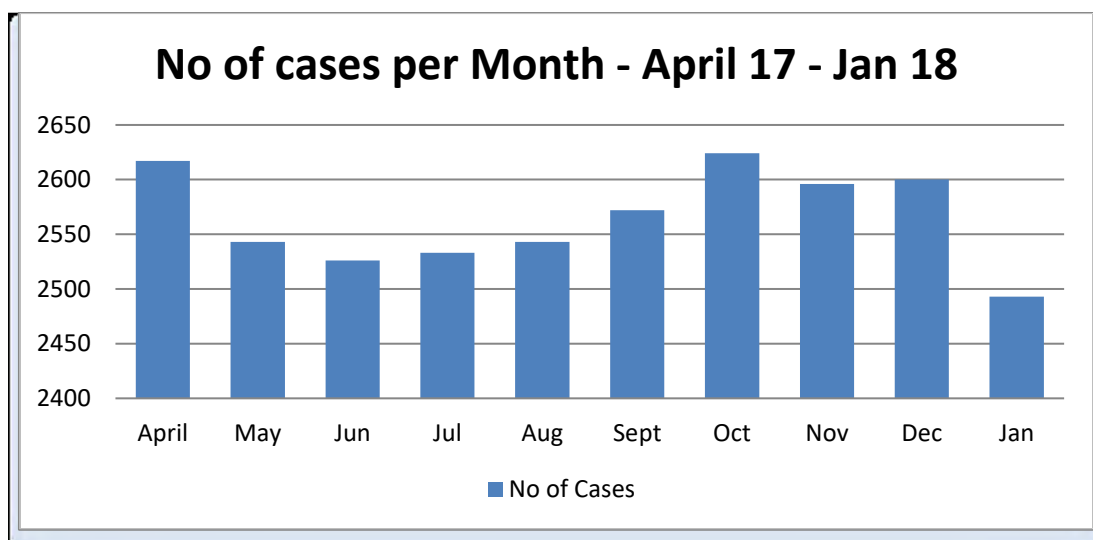
	2018/19	2019/20	2020/21
3 Year Forecast	105.63	120.77	143.81
Before PIDR impact	75.00	84.46	100.57
Element Relating to PIDR impact	30.63	36.32	43.24
Core Claims Growth Subject to Risk Sharing Agreement	0.00	9.46	25.57

The above table indicates the Risk Sharing Agreement is not expected to be invoked for 18/19 at this stage but could impact 2019/20 and 2020/21.

However, these are very early forecasts with broad assumptions used to arrive at the forecast numbers. At this point, the table should be viewed as a general reflection of future activity rather than a defined outcome expected in future years.

3.3 Clinical Negligence - Analysis of ongoing claims

The graph below shows a reduction in the number of cases since December. The number of total open cases has reduced from 2,600 in December to 2,493 in January.



The reduction relates to an exercise to remove a cohort of cases from the database, rather than a genuine decrease in caseload.

A number of remote and possible cases have been identified as 'Medical Disclosures Only'. These are cases where medical records have been requested by potential claimants and a case file opened by the solicitor, but the file remains dormant for at least 9 months and a future liability is not expected to arise.

This exercise is ongoing with a total of 397 cases within this category to be removed from the database.

The adjustment has no effect on WRPS provisions or future years' forecast DEL/cash requirements, but will impact contingent liabilities.

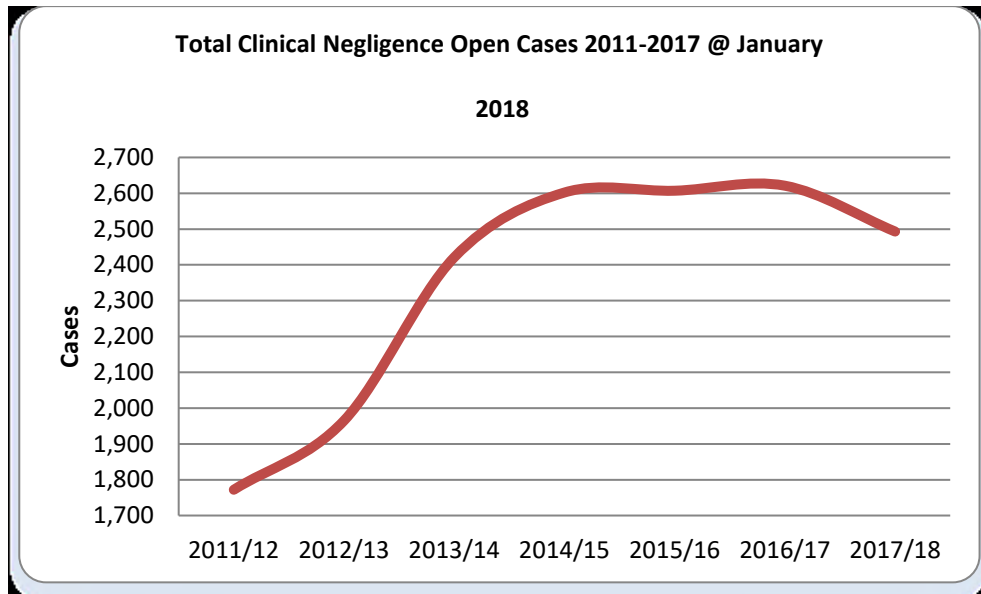
Initial estimates indicate a reduction of approximately £30M compared to the £896M contingent liability reported at the end of 2016/17.

The revision aligns with the NHS Resolution in England's treatment of these types of cases.

The significance of the change to accounting treatment is currently under discussion with the Welsh Audit Office, Welsh Government and with WRPS sub – tag group colleagues.

The graph below shows the number of cases had remained consistently high year on year from 2014/15 but has started to reduce in 2017/18 mainly due to the exercise above.

The graph below shows the movement in the number of cases over the last 7 years.



A high level analysis of claims by probability and gross value shows the scale of the financial challenge faced by NHS Wales.

Assessment of Probability	Number of claims	Estimated Value £'M
Unspecified	63	0.16
Remote	46	34.84
Possible	1,568	912.55
Probable	140	129.40
Certain	536	550.21
Finalised	140	0
Total	2,493	1,627.16

It should be noted 56% of the total number of cases have a 'possible' status compared to 63% in December – the lower % being a direct result of the medical disclosure exercise mentioned above.

Further to the table above, the analysis below shows the distribution of cases across a range of values.

No of Cases

Probability of Loss	<£100K	<£1M	<£5M	<£15M	>£15M	TOTAL
Unspecified	62	1	0	0	0	63
Remote	32	10	0	4	0	46
Possible	1,111	329	57	64	7	1,568
Probable	69	49	14	8	0	140
Certain	306	154	35	34	7	536
Finalised	140	0	0	0	0	140
Total	1,720	543	106	110	14	2,493

Note the 7 'Certain' cases with WRPS liabilities over £15M each.

The table also demonstrates that 69% of the number of open claims have a WRPS liability of less than £100K per case.

3.4 Open matters assessed as Probable or Certain

Currently, there are 676 open clinical negligence claims which have been assessed as probable or certain, with an estimated WRPS liability of £680M. This compares to 681 cases at the same point in 2016/17 with a cumulative estimated liability of £448M.

Of the probable and certain cases, there are 98 matters over £1M with an estimated total net liability of £599M. This compares to 73 matters in 2016/17 with an estimated total net liability of £361M

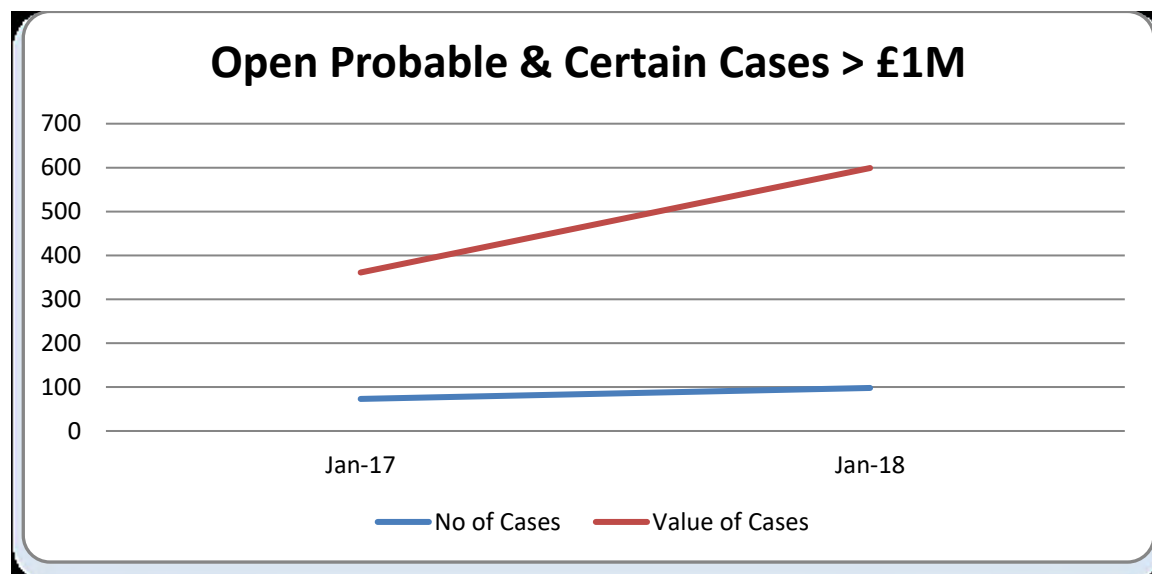
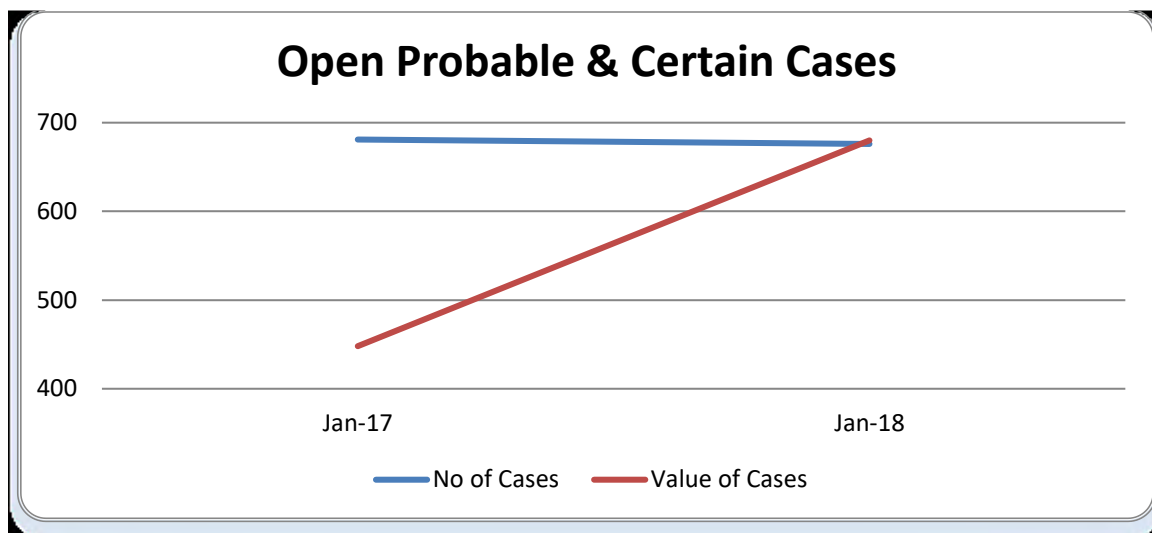
Of the 98 >£1M probable and certain cases, 13 have expected 2017/18 cashflows >£1M for this year of £29M and this compares to 3 cases at this point last year with expected cashflows of £4.6M.

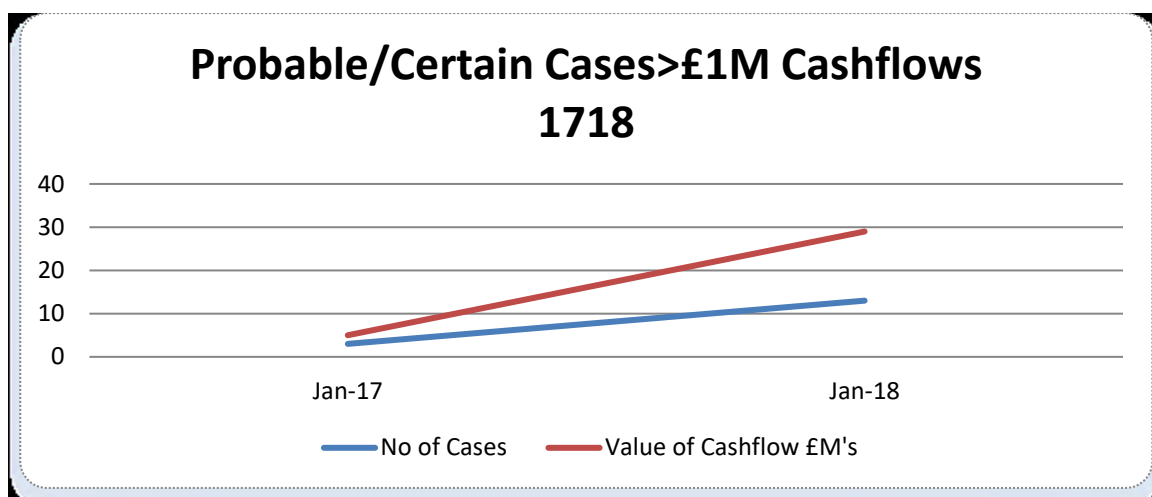
The above demonstrates the significant impact of the change to the PIDR in 2017/18 and is displayed in tabular and graphical form below.

Open Probable/Certain Cases		
	No of Cases	£'M-WRPS Liability
January 2018	676	680
January 2017	681	448

Open Probable/Certain Cases >£1M		
	No of Cases	£'M-WRPS Liability
January 2018	98	599
January 2017	73	361

Open Probable/Certain Cases >£1M 1718 Cashflows on Database		
	No of Cases	£'M-1718 Cashflow
January 2018	13	29
January 2017	3	5





4.0 ANNUALLY MANAGED EXPENDITURE (AME)

Following receipt of the Month 10 AME returns from the Health Boards and Trusts, future liabilities for probable & certain cases has risen from £546M at the beginning of the year to £693M as at 31st January 2018.

The PPO provision has increased from £320M at the beginning of the year to £359M after the addition of four new cases in year.

The value also includes the application of the revised post employment and general provisions discount rates in early December as well as RPI and ASHE uplifts due for this year for all existing cases.

Of the £39M increase, £17M relates to the change in discount rates for the PPO provision and is mainly due to the long term rate increasing from - 0.8% to -1.56%.

The current provision as below:-

	31/01/2018 £M	31/03/2017 £M	Move ment
Clinical Negligence	681.205	534.826	146.379
Personal Injury	4.523	4.959	(0.436)
Defence legal fees and administrative expenses	7.105	6.486	0.619

PPO/Structured Settlements	358.796	320.589	38.207
Total Provision	1,051.629	866.860	184.769

The increase can be mostly attributed to the PIDR change. There were 687 probable and certain cases as at 31st March 2017 compared to 676 at 31st January 2018. So although the number of cases has increased slightly, the net quantum per case has increased significantly reflecting the PIDR change from 2.5% to -0.75%.

The increase in provision since the start of the year is expected to reduce slightly by the end of the financial year following forecast settlements of a number of large value claims. These will be funded by in year DEL resource.

The forecast for the AME movement in provisions for the year is expected to be an approximate £160M increase.

Appendix 1 below details the number of opened and closed cases by Health Board for 2017/18 with a comparative for 2016/17.

A breakdown per Health Board for open claims including remote contingent and contingent liabilities is provided in Appendix 2

5.0 Professional Impact of Legal & Risk Services

During the first ten months of 17/18, Legal and Risk Services reported professional influence savings of £72m, compared to £74m at this point last year and compared to £87m for 16/17. The table below provides an overview of the professional influence savings recorded to date for 17/18 and reflects significant achievements in reducing the final settlements from that of the claimant's initial estimate

Savings	£'m
Claims below £100K	4.0
Claims above £100k	64.4
Savings in relation to costs	1.8
Repudiated Claims	1.7
Miscellaneous Savings	0.26
TOTAL	72.2

6.0 WRPS Finance Activity

WRPS Finance activity for the final two months of the year will include the following:-

- Ongoing preparation with Welsh Audit Office for the completion of the 1718 Financial Statements
- The bi-annual WRPS TAG sub-group with NHS Wales representatives takes place on 27th February. Welsh Audit Office and Welsh Government colleagues will attend and the agenda includes the following:-
 - Year end preparation
 - 3 Year DEL forecast
 - Contingent Liabilities – accounting treatment
 - Updated Risk Sharing Agreement 2018/19
 - Legal & Risk Invoicing
 - Annual Review Overview
 - Life Cycle of a Claim
- The updated risk sharing agreement has been calculated and will be published following the WRPS TAG sub-group meeting on the 27th February. (Elements are updated annually to ensure relevancy)

7.0 CONCLUSION

NHS Wales is experiencing significant financial challenges arising from negligence claims. The claims settled and ongoing claims are reviewed on a monthly basis with variations and movements noted and investigated.

Extensive, detailed monitoring of the L&Rs claims database to inform forecasts is on-going together with dialogue between Welsh Government and WRPS to manage the forecast increase in liabilities resulting from the change to the PIDR.

Appendix 1 – Analysis of caseload and activity for clinical negligence matters by Health Board at Month 10 with 1617 comparative

2017/18	ABMU	BCU	AB	C Taf	HD	C&V	Powys	WAST	Velindre	PHW	Grand Total
Opening Month 1	535	576	460	403	286	294	19	24	10	14	2621
Closing M10	546	549	402	333	301	299	13	27	9	14	2493
Movement	11	-27	-58	-70	15	5	-6	3	-1	0	-128

Total opened 2017/2018	168	165	148	83	103	83	2	9	1	2	764
Total closed 2017/2018	-157	-192	-206	-153	-88	-78	-8	-6	-2	-2	-892

2016/17	ABMU	BCU	AB	C Taf	HD	C&V	Powys	WAST	Velindre	PHW	Grand Total
Opening Month 1	561	539	457	427	289	268	20	16	16	14	2607
Closing Month 10	535	576	460	403	286	294	19	24	10	14	2621
Movement	-26	37	3	-24	-3	26	-1	8	-6	0	14

Total opened 2016/2017	171	218	163	106	114	132	4	11	2	2	923
Total closed 2016/2017	-197	-181	-160	-130	-117	-106	-5	-3	-8	-2	-909

Appendix 2 - Total provisions 2017/18

	Provision 16/17 £'000	Provision 17/18 M10 £'000	Contingent Liability 16/17 £'000	Total Liability 17/18 £'000
BCU	89,322	79,284	174,477	253,761
C&V	135,270	189,033	85,972	275,005
Hywel Dda	38,486	37,187	41,477	78,664
AB	57,915	90,032	236,935	326,967
ABMU	113,567	161,241	116,891	278,132
Cwm Taf	66,575	65,239	209,146	274,385
Powys	24,280	43,268	20,013	63,281
WAST	4,017	9,939	7,798	17,737
Velindre	385	370	1,770	2,140
PHW	3,239	4,025	1,237	5,262
Discount	13,215	13,215		13,215
Total	546,271	692,833	895,716	1,588,549

PPO Provision	320,589	358,796	0	358,796
Total Provision M10 1718	866,860	1,051,629	895,716	1,947,345



GIG
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Shared Services
Partnership

AGENDA ITEM: 6.3

27th March 2018

The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Corporate Risk Update – March 2018

ARWEINYDD: LEAD:	Andy Butler Director of Finance & Corporate Services
AWDUR: AUTHOR:	Roxann Davies Compliance Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Andy Butler Director of Finance & Corporate Services
MANYLION CYSWLLT: CONTACT DETAILS:	Andy Butler Director of Finance & Corporate Services 01443 848552 / Andy.Butler@wales.nhs.uk

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

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

Llywodraethu/Governance

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

Ymgynghoriad/Consultation:

The Senior Management Team (SMT) reviews the Corporate Risk Register on a monthly basis.

Individual Directorates hold their own Risk Registers, which are reviewed at local directorate and quarterly review meetings.

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

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

NWSSP CORPORATE RISK REGISTER UPDATE

March 2018

1. INTRODUCTION

The Corporate Register is presented at **Appendix 1** for information. Following discussion at the February Audit Committee, the Register is now split 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).

2. RISKS FOR ACTION

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

Current Risk Rating	March 2018
Red Risk	1
Amber Risk	9
Yellow Risk	0
Green Risk	0
Total	10

2.1 Red-rated risks:

Risk 1 - Demise of the Exeter Software System ***Current Risk Score: Red 20***

The NWSSP met with NWIS and PHW in January 2018 and it was agreed that a revised contract would need to be put in place with NHS Digital for second line support on a time and materials basis. The current SLA expires at the end of March 2018 but an interim SLA has been agreed to cover the period until the end of October 2018. There are a number of dependencies on cross border patient data exchanges. NHS Wales will work with NHS Digital to ensure that such transactions are managed during any transformation that

takes place in England, bearing in mind the timescales in Wales to replace the NHAIS Payments systems.

In terms of the future NHS Wales payments solutions there are three options to consider for GMS, those being:

- NHS Wales redevelop the GMS Payments systems in-house;
- Contract with CAPITA to develop the highlighted gap between the NHSE systems (framework contract exists) and Welsh Requirements; *and*
- To further engage with Northern Ireland as they have a GMS payments solution fully independent of NHAIS albeit they use the NHAIS demographic services supplied by NHS Digital.

The Northern Ireland option is currently the preferred approach and PCS senior management are visiting the contacts there at the end of April to confirm details to allow a business case to be submitted in May to Welsh Government.

On the GOS services we agreed to move forward with the work already progressing in NHS Wales under PCS but to keep a watching brief on the CAPITA services being developed.

2.2 New Risks

Two new risks have recently been added to the Corporate Risk Register. The detail on each is as follows:

Risk 8 - Delay with 3rd Generation Frameworks - Current Risk Score: Amber

There has been a delay in tendering the 3rd Generation Construction and Consultancy Framework which covers all proposed contracts in excess of £4m. The framework was originally scheduled to be let in October 2017 and the delay was caused by a number of required amendments to the contract from Welsh Government. Specialist Estate Services are currently in consultation with the various contractors who submitted bids for the October deadline to confirm whether or not they are happy to accept the amendments to the contract terms. If they all accept the revised terms, it is anticipated that the framework can be let in April 2018, and the risk will be removed from the Register. However, if they refuse to accept the amendments, there could be further delays for any major construction contracts.

Risk 9 – Transfer of Responsibility/Staff from ABMU to Cwm Taf UHB Current Risk Score: Amber

The impact of this risk is still over 12 months away and therefore much of the detail in terms of required actions still needs to be worked up. However

this relates to the responsibility for services in the Bridgend area being transferred from ABMU to Cwm Taf in April 2019, which will have a significant impact for NWSSP staff in a number of areas.

3. RISKS FOR MONITORING

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

Current Risk Rating	March 2018
Red Risk	0
Amber Risk	1
Yellow Risk	3
Green Risk	0
Total	4

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 Partnership Committee is asked to:

- **NOTE** the Corporate Risk Register as at March 2018.

Corporate Risk Register												
Ref	Risk Summary	Inherent Risk			Existing Controls & Mitigations	Current Risk			Further Action Required	Progress	Trend since last review	Target & Date
		Likelihood	Impact	Total Score		Likelihood	Impact	Total Score				
Risks for Action												
1	Risks associated with the demise of the Exeter system coming to an end in 2015, with no replacement system designed for NHS Wales. The contract in NHS England has been outsourced to Capita.	4	5	20	Establishment of NHS Wales Steering Group. High level option appraisal undertaken.	4	5	20	Mapping exercise to be completed with Capita and PCS subject matter experts to identify gaps between NHSE and NHSW.	Met with NWIS and PHW on 12/01/18 - interim SLA agreed with NHS Digital for 2nd line support to end Oct 2018. Regarding GMS, there are 3 potential options: 1. NHS Wales redevelop the GMS payments system; 2. Contract with CAPITA; 3. To engage with Northern Ireland. Norther Ireland is preferred option and visit to confirm details scheduled for end of Apr 18. GOS Service Agreement to move forward with work already underway in NHSW under PCS, but keep a watching brief on the CAPITA services being developed.	➔	31-Dec-18
	Escalated Directorate Risk									Risk Lead: Director of Primary Care Services		
2	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.	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 Updating and refreshing current adverts on NHS Jobs.	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.	➔	31-Mar-18
	Strategic Objective - Staff Escalated Directorate Risk									Risk Lead: Director of Workforce and OD		
3	NWSSP is unable to adequately demonstrate the value it is bringing to NHS Wales due to insufficiently developed reporting systems.	4	4	16	Quarterly Performance Reports to Health Boards & Trusts Performance Reporting to SSPC & SMT SSPC Assurance reports Periodic Directorate Meetings with LHBs & Trusts Quarterly meetings with LHB and Trust Exec Teams Regular updates to Peer Groups (DOF's, DWODS, Board Secretaries) Customer Satisfaction Surveys	3	4	12	1. Introduce consistent approach in reporting and meetings for all directorates and all LHBs & Trusts (AB) 2. Review and refine KPI reporting across all Directorates - 31 Dec 2017 (AB) 3. Implement the Qlikview electronic performance reporting system - 31 March 2019 (Jane Tyler) 4. Develop sophisticated benchmarking data with other providers - 31 March 2018 (AB) 5. Introduce and maintain a Benefits Log - 31 Mar 2018 (AB) 6. Work proactively to support NHS Wales in delivering the actions outlined within the NHS Wales Chief Executives National Improvement Programme (NIP)	1. Completed 2. Ongoing 6. Paper taken to All Wales Finance Directors meeting in 09/2017. All actions are on track to be delivered by the due date.	➔	31-Mar-18
	Strategic Objective - Value For Money									Risk Lead: Director of Finance & Corporate Services		
4	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.	4	4	16	IMTP Horizon scanning days with SMT and SSPC to develop services Established new Programme Management Office (PMO)	3	3	9	1. Develop IT Strategy and identify required resource and capital funding, include within IMTP - 31 Dec 17. (AB) 2. Further investment in PMO (AB) 3. Implementation of project management software (AB) 4. Invest in Robotic Process Automation (AB)	1. IT Strategy approved by SMT. 2. Head of PMO recently appointed. 3. Procurement pilot project completed - currently being rolled out in NWSSP 4. RPA pilot in progress	➔	31-Mar-18
	Strategic Objective - Service Development									Risk Lead: Director of Finance & Corporate Services		
5	Risks arising from changes introduced by the Welsh Government to the NHS Bursary Scheme whereby students now have to commit to work in Wales for the two years following completion of their course in order to receive the full package of benefits.	4	4	16	Governance Group with four workstreams established to meet all aspects of this announcement.	3	3	9	Further work required to develop the repayment mechanism. (PT)	The new scheme has been successfully implemented, however, further work required to develop the repayment mechanism.	➔	31-Mar-18
	Strategic Objective - Service Development									Risk Lead: Director of Finance and Corporate Services & Director of WEDS		
6	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.	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) 2. NHS Wales Leadership Programme - identify key staff with potential for future development and encourage them to undertake the leadership programme - 31 Mar 2018 (HR) 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 - 31 Mar 2018 (HR)	Recent appointments of senior staff have helped to address this risk.	➔	31-Mar-18
	Strategic Objective - Staff									Risk Lead: Director of Workforce and OD		
7	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.	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 Development of draft IT strategy	2	4	8	1. Finalise IT Strategy for NWSSP, to include an IT replacement strategy - complete 2. Consolidate Desktop support from one strategic partner - currently a mix of arrangements (NWIS & BCU) - 31 Mar 2018 (AB) 3.Finalise Cyber Security Action plan - complete 4. Develop an overarching Business Continuity plan for NWSSP incorporating operational, IT and building requirements and test the plan annually - 31 Mar 18 (AB)	All actions on track and a consultant from the Wales Quality Centre is currently working with NWSSP to enhance BCP arrangements. 1. Completed 2. Ongoing 3. Completed 4. Ongoing	➔	31-Mar-18
	Strategic Objective - Excellence									Risk Lead: Director of Finance & Corporate Services		
8	Delays to the development and procurement of the 3rd Generation Construction and Consultant Frameworks due to Welsh Government amendments impact on the ability to tender schemes >£4m.	5	4	20	Able to use alternative frameworks.	2	4	8	1. Agree WG amendments with contractors. 2. Agree revised process with Strategic Framework Board and Cabinet Secretary. 3. Complete tender process for new framework by 1 April 2018.	1. Contractors have been contacted and provided with details of amendments.	☀	31-Mar-18
	Escalated Directorate Risk									Risk Lead: Director, Specialist Estate Services.		
9	The transfer of responsibilities and staff for Bridgend from ABMU to CTUHB wef April 2019 will have significant implications for NWSSP processes and workloads.									Boundary update meeting to be hekd on 5 April 2018.	☀	
	Strategic Objective - Customers									Risk Lead: Director of Finance and Corporate Services		
10	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.	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	4	8	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 - 31 Mar 2018 (AB)	Overall Welsh Language compliance is 96.45% as at 07/2017). Appointment of Welsh Translator Delay with the publication of Welsh Language Standards - these are now expected to be introduced in Summer 2018. Welsh Language Strategy due to be taken to SMT 03/2018.	➔	31-Aug-18
	Strategic Objective - Staff									Risk Lead: Director of Finance and Corporate Services		

Risks for Monitoring												
1	<p>1. The Learning@Wales server provided and supported by NWIS requires enhancements to ensure user capacity is aligned with forecasted usage and is fully supported and managed to ensure provision of service does not degrade further.</p> <p>Further enhancements are required to reporting capability as this is affecting the service provided and reputation of NWSSP.</p> <p>2. The ESR e-learning server is currently provided by NWSSP, via a server located in Manchester. This server has little resilience and requires hosting within NWIS DMZ with a fully supported service management wrap.</p> <p>Over 70% of learning undertaken in NHSW at 07/2017 was via e-learning. There would be a significant impact on the compliance of the workforce if the server failed.</p>	4	4	16	<p>Additional support provided from NWIS to schedule reports out of hours to minimise impact on server disruption.</p> <p>Significant cleansing and formatting of reports by DWS Team before they are forwarded to organisations to enable them to manage compliance.</p> <p>NWSSP IT function have enabled a temporary solution via the Manchester server.</p>	3	4	12	<p>1. Escalation with NWIS for resolution.</p> <p>2. Provision of fully supported server, hosted in NWIS, DMZ required.</p>	<p>Part 1 of Reporting Capability Solution done and receipt from, and application of, code by NWIS should be complete within next few weeks.</p> <p>Meeting scheduled for 26/01/2018 to scope final reporting solution and process.</p> <p>Understood that NWIS have undertaken initial review of Manchester ESR server resilience and identified no issues but agreed further scoping - TBC.</p>	↓	31-Jan-18
Escalated Directorate Risk												
2	<p>Reputational impact due to issues within the Accounts Payable (AP) team that have resulted in the delay in payment to suppliers in a number of Health Boards and Trusts leading to failure to achieve their Public Sector Payment Policy (PSP) targets.</p>	4	4	16	<p>Review of performance at regular meetings with LHBs and Trusts</p> <p>SMT review high level progress reports on regular basis</p> <p>Restructure of AP team to improve performance</p> <p>Action plan in place to address issues - has been subject to independent review</p> <p>Finance Academy has established P2P as a national project under the developing excellence initiative.</p> <p>Accounts payable helpdesk introduced</p>	3	4	6	<p>1. Complete implementation of action plan (RW)</p> <p>2. Internal Audit to complete follow up review (SC)</p> <p>3. The All Wales P2P group to provide regular updates on progress to the SMT (AB)</p> <p>4. Appoint P2P Project Manager (AB)</p>	<p>1. Completed</p> <p>2. Completed</p> <p>3. Regular updates to Finance Directors and Committee</p> <p>4. Completed</p> <p>Actions taken to date have resulted in improvement in PSPP performance not now considered a problem.</p>	↓	31-Jan-18
Escalated Directorate Risk												
3	<p>Failure to ensure compliance with Information Governance requirements leading to a serious breach which damages the reputation of NWSSP</p>	4	3	12	<p>Information Governance Steering Group</p> <p>Information Governance Manager</p> <p>Caldicott Guardian</p> <p>Senior Information Risk Owner (SIRO)</p> <p>Training programme for staff</p> <p>CPIP Annual Self-Assessment and Report</p> <p>Information Asset Owners in each Directorate</p> <p>ICO Audits</p> <p>Information Governance Risk Register</p> <p>Health and Care Standards</p>	2	3	6	<p>1. Information Governance Work Plan to be formally approved (AB)</p> <p>2. Review lessons learned from IG breaches (AB)</p>	<p>1. Completed - IG Work Plan approved by IG Steering Group.</p> <p>2. Ongoing - Standard agenda item on IG Steering Group; presentations delivered by each directorate, in turn.</p> <p>NWSSP achieved a score of 96% in the latest Caldicott Principles into Practice assessment.</p>	↓	31-Jan-18
Strategic Objective - Service Development												
4	<p>The forecasting of the Risk Pool spend is complex. Any inaccuracies could have a major impact on NHS Wales' ability to achieve financial balance and could adversely impact the reputation of NWSSP.</p> <p>The change in the discount rate in February 2017 has increased the complexity of the calculations.</p>	4	4	16	<p>Appointment of a dedicated Risk Pool Accountant</p> <p>Introduction of Business Partnering Arrangements</p> <p>On-going development of robust forecasting arrangements</p> <p>Regular reporting to SSPC and Directors of Finance</p>	2	3	6	<p>1. Closer working with Health Boards, Welsh Government and Solicitors required to maintain a current and accurate view of the level of risk.</p> <p>2. Development of a forecasting model to map the financial impact of the discount rate change over the next 3 years.</p>	<p>Both actions completed. NWSSP have developed a forecasting system which incorporates all the latest information about cases over £250k available from the Solicitors. This has been agreed with Welsh Government.</p> <p>A dialogue system is in place and forecasting is always on the LARS monthly Senior Team meeting, chaired by the Director and attended by Martin Riley and Legal & Risk Services' Senior Solicitors/Team Leaders.</p> <p>Finance Directors were updated on the latest position in 01/2018. Additional funding has now been provided by HM Treasury.</p>	↓	31-Mar-18
Escalated Directorate Risk												
Risk Lead: Director of Finance & Corporate Services												

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

✳	New Risk
↑	Escalated Risk
↓	Downgraded Risk
➡	No Trend Change

 GIG Cymru NHS Wales Partneriaeth Cydwasaethau Shared Services Partnership	AGENDA ITEM: 7.1 27th March 2018
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The report is not Exempt

Teitl yr Adroddiad/Title of Report

NWSSP Audit Committee Highlight Report – 6th February 2018

ARWEINYDD: LEAD:	Andy Butler, Director of Finance & Corporate Services
AWDUR: AUTHOR:	Roxann Davies, Compliance Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Andy Butler, Director of Finance & Corporate Services
MANYLION CYSWLLT: CONTACT DETAILS:	Andy Butler, Director of Finance & Corporate Services 01443 848552 / Andy.Butler@wales.nhs.uk

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

The purpose of this paper is to provide the SSPC with details of the key issues considered by the Velindre NHS Trust Audit Committee for NHS Wales Shared Services Partnership at its meeting on the 6th February 2018.

Llywodraethu/Governance

Amcanion: Objectives:	Each of the 5 key Corporate Objectives
Tystiolaeth: Supporting evidence:	Individual reports submitted to Audit Committee

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 <ul style="list-style-type: none"> The Committee is asked to NOTE the report 					

Crynodeb Dadansoddiad Effaith: Summary Impact Analysis:	
Cydraddoldeb ac amrywiaeth: Equality and diversity:	No direct impact
Cyfreithiol: Legal:	No direct impact
Iechyd Poblogaeth: Population Health:	No direct impact
Ansawdd, Diogelwch a Profiad y Claf: Quality, Safety & Patient Experience:	No direct impact
Ariannol: Financial:	No direct impact
Risg a Aswiriant: Risk and Assurance:	This report provides assurance to the committee that NWSSP has robust risk management processes in place.
Safonnau Iechyd a Gofal: Health & Care Standards:	Access to the Standards can be obtained from the following link; http://gov.wales/docs/dhss/publications/150402/standardsen.pdf
Gweithlu: Workforce:	No direct impact
Deddf Rhyddid Gwybodaeth/ Freedom of Information	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.

HIGHLIGHT REPORT FROM THE VELINDRE NHS TRUST AUDIT COMMITTEE FOR NWSSP

1. CEFNDIR/BACKGROUND

The Velindre NHS Trust Audit Committee for NHS Wales Shared Services Partnership (the "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 the 6th February 2018 are outlined in the table below:

ALERT/ ESCALATE	No matters to alert/escalate.
ADVISE	<p>Wales Audit Office (WAO) Position Statement and Assurance Arrangements</p> <p>WAO are on track to deliver the work plan and presented a report detailing the work that would be undertaken as part of their cycle of business for 2018.</p>
ASSURE	<p>Internal Audit Progress</p> <p>Internal Audit highlighted a number of amendments to the remainder of the Internal Audit Plan, due to changes in the risk profile. The Committee approved the amendments.</p> <p>The Committee received 2 internal audit reports and 1 advisory report:</p> <ul style="list-style-type: none"> • Information Governance: GDPR Internal Audit Report • WfIS ESR Occupational Health Bi-Directional Interface (Immunisations) Internal Audit Report • Advisory Report on ABMU Carbon Reduction Commitment (CRC) Payment Review <p>Both internal audit reports received Substantial Assurance ratings and the key findings and recommendations raised for all reports were highlighted.</p>

ASSURE	<p>Internal Audit Report on Lessons Learnt from WAO Public Interest Report</p> <p>Procurement Services presented an update as to the lessons learned from the internal audit review of the action taken by Procurement services in light of the Wales Audit Office Public Interest report in Cardiff & Vale LHB. The key changes implemented in order to address the points raised, were as follows:</p> <ul style="list-style-type: none"> • Action is being taken to improve documentation and controls of agreed actions; • Procedures have been strengthened and training provided to all relevant staff; • Monthly meetings are taking place with the team and the message reinforced to staff that they must not be afraid to challenge senior staff and to refer the matter to their line manager if they are unsure; and • A further review was undertaken of all other similar consultancy contracts. <p>Members of the Committee discussed at length the need for all staff to be confident in challenging senior staff in Health Boards and Trusts , should they be asked to act outside of defined procedures.</p>
ASSURE	<p>Tracking of Audit Recommendations</p> <p>The Committee received an update as to the progress made and it was noted that 100% of reports had achieved either substantial or reasonable levels of assurance, with all high priority recommendations raised implemented.</p> <p>It was advised that Internal Audit would conduct a review of the audit tracking process, which would provide assurance to the Committee that recommendations have been implemented which satisfactorily mitigate the identified risk.</p> <p>Three recommendations were presented with revised deadlines for approval by the Committee. The Committee approved the extended deadlines but reiterated that revisions to deadlines should be treated as the exception rather than the rule.</p>
ASSURE	<p>Corporate Risk Register</p> <p>The Committee noted the 2 current red risks relating to the Exeter software system and retirement and retention within the Procurement Services division.</p> <p>It was highlighted that a number of risks where the target date was scheduled for January 2018 had achieved their target score, as intended and it was agreed that these be relocated to a “Risks for Monitoring” section of the Corporate Risk Register.</p> <p>It was confirmed that Corporate Services are in the process of reviewing the Risk Management Protocol and the Chair requested that a paper be brought to a future meeting, in relation to Risk Development in the NWSSP.</p>

INFORM	<p>Information Commissioner's Office (ICO) Training Audit 2017 Summary</p> <p>The ICO conducted a follow-up audit in October 2017 and identified a small number of recommendations. There had been significant improvement since the previous audit undertaken in 2015 and an Action Plan is being developed to address the latest recommendations.</p>
INFORM	<p>Annual Review of the Shared Services Partnership Committee (SSPC) Standing Orders</p> <p>The updated Standing Orders were presented to the Committee for assurance and endorsement. It was confirmed that the Standing Orders are reviewed annually and the SSPC had approved the revisions during November 2017. The Committee endorsed the revised Standing Orders.</p>

2. ARGYMHELLIAD/RECOMMENDATION

The Committee are asked to:

- **NOTE** the Highlight Report