

Cyfarfod Bwrdd Iechyd a Gofal Digidol Cymru - Cyhoeddus

Thu 25 May 2023, 10:00 - 14:15

Zoom

Agenda

10:00 - 10:05
5 min

1. MATERION RHAGARWEINIOL

1.1. Croeso a Chyflwyniadau

I'w Nodi Cadeirydd

1.2. Ymddiheuriadau am Absenoldeb

I'w Nodi Cadeirydd

1.3. Datganiad o Fuddiannau

I'w Nodi Cadeirydd

10:05 - 10:10
5 min

2. AGENDA GYDSYNIO

2.1. Cofnodion heb eu cadarnhau o Gyfarfod y Bwrdd a gynhaliwyd ar 30 Mai 2023

I'w Cymeradwyo Cadeirydd

2.1 DHCW SHA Board Meeting Minutes 20230303 V1-en-cy-C.pdf (18 pages)

2.1.1. Materion yn Codi

2.2. Cofnodion Cryno Preifat sydd heb eu cadarnhau o gyfarfod y Bwrdd a gynhaliwyd ar 30 Mai 2023

I'w Cymeradwyo Cadeirydd

2.2 DHCW SHA PRIVATE Board Meeting Minutes 20230330 V1-en-cy-C.pdf (5 pages)

2.2.1. Materion yn Codi

2.3. Cofnodion Cryno Preifat sydd heb eu cadarnhau o gyfarfod Bwrdd Eithriadol a gynhaliwyd ar 20 Ebrill 2023

I'w Cymeradwyo Cadeirydd

2.3 DHCW CAV PRIVATE ABRIDGED Extraorindary Board Meeting Minutes 20230420 Final Draft-en-cy-C.pdf (5 pages)

2.4. Cofnodion Cryno Preifat sydd heb eu cadarnhau o gyfarfod Bwrdd Eithriadol a gynhaliwyd ar 20 Ebrill 2023

I'w Cymeradwyo Cadeirydd

2.4 DHCW PRIVATE ABRIDGED Extraordinary Board Meeting Minutes 20230420 Final Draft.pdf (3 pages)

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2.4.1. Materion yn Codi

2.5. Cofnodion Gweithredu

I'w Nodi *Cadeirydd*

2.6. Blaengynllun Gwaith

I'w Nodi *Ysgrifennydd y Bwrdd*

- 📄 2.6 Forward Workplan Report.pdf (4 pages)
- 📄 2.6i SHA Board Forward Workplan 2023-24.pdf (1 pages)

10:10 - 10:40 3. PRIF AGENDA

30 min

3.1. Cyflwyniad Gwrando a Dysgu a Rennir – Cynhwysiant Digidol

I'w Draffod *Cyfarwyddwr Meddygol Gweithredol*

- 📄 3.1 Shared Listening & Learning_Medical Examiners Service.pdf (3 pages)
- 📄 3.1i TEM - CG - Shared Listening and Learning Medical Examiner Service.pdf (9 pages)

10:40 - 10:50 4. I'W ADOLYGU

10 min

4.1. Adroddiad y Cadeirydd a'r Is-Gadeirydd

I'w Nodi *Cadeirydd*

- 📄 4.1 Chair and Vice Chair Report May 23v1.pdf (6 pages)

4.2. Adroddiad y Prif Swyddog Gweithredol

I'w Nodi *Prif Swyddog Gweithredol*

- 📄 4.2 CEO Report May 23 V1.pdf (6 pages)

10:50 - 11:55 5. EITEMAU STRATEGOL

65 min

5.1. Adroddiad Caffael Strategol

I'w Cymeradwyo *Cyfarwyddwr Gweithredol Strategaeth*

- 📄 5.1 REP - SHA Board Strategic Procurement Report May 2023.pdf (11 pages)
- 📄 5.1i App1i DHCW Commitment of Expenditure Over Chief Executive Limit; P812 Ext Resources V1.0 (1) - Copy.pdf (9 pages)
- 📄 5.1ii App1ii DHCW Commitment of Expenditure Over Chief Executive Limit; P308.02 SIT D0.2.pdf (7 pages)
- 📄 5.1iii App1iii DHCW Commitment of Expenditure Over Chief Executive Limit; P531 DQS.pdf (7 pages)
- 📄 5.1iv App1iv DHCW Commitment of Expenditure Over Chief Executive Limit; P835 TTP Telephony D0.1.pdf (7 pages)

5.2. Diweddariad ar y Cynllun Ymgysylltu â Rhanddeiliaid

I'w Nodi *Cyfarwyddwr Gweithredol Strategaeth*

- 📄 5.2 SHA Stakeholder Engagement Plan Upate - May 2023. docx.pdf (13 pages)

5.3. Diweddariad ar yr Adolygiad Gweithlu Strategol

I'w Nodi *Cyfarwyddwr y Gweithlu a Datblygu Sefydliadol*

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- 5.3. SHA WFPBOARD PAPER SJ TAYLOR FINAL HT F17052023 (004).pdf (6 pages)
- 5.3i final WFP ANALYSIS 1922SJT.pdf (11 pages)

5.4. Trosglwyddo'r Rhaglen Digiddeiddio Gofal Llygaid

I'w Cymeradwyo Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.

- 5.4 SHA Report - National EyeCare Digitisation Programme - Final.pdf (6 pages)

Egwyl

11:55 - 13:55
120 min

6. LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1. Adroddiad ar y Gofrestr Risg Gorfforaethol gan gynnwys Adolygiad Blynyddol o Barodrwydd i Dderbyn Risg a Goddefiant Risg

I'w Cymeradwyo Ysgrifennydd y Bwrdd

- 6.1 Risk Management Report.pdf (8 pages)
- 6.1ii Appendix B DHCW Corporate Risk Register.pdf (13 pages)

6.2. Adroddiad Fframwaith Sicrwydd y Bwrdd

I'w Cymeradwyo Ysgrifennydd y Bwrdd

- 6.2 Board Assurance Framework Report.pdf (5 pages)
- 6.2i Appendix A REP-BAF Dashboard Master Copy Reviewed 2023.pdf (10 pages)

6.3. Adroddiad Perfformiad Sefydliadol Integredig

I'w Drafiad Cyfarwyddwr Gweithredol Strategaeth

- 6.3 REP-DHCW IOPR Cover Sheet Mar-Apr 2023 FINAL.pdf (6 pages)
- 6.3i REP-DHCW SHA Board Report 2304-APRIL2023.pdf (41 pages)

6.4. Adroddiad Cyllid

I'w Nodi Cyfarwyddwr Gweithredol Cyllid

Llythyr gan Swyddog Atebol y Cynllun Tymor Canolig Integredig

- 6.4 TEM-DHCW - Finance Report - April 23 Final F-03.pdf (8 pages)
- 6.4i Appendix A - DHCW Accountable Officer letter IMTP Intent 2023 February.pdf (6 pages)
- 6.4ii Appendix B - Judith Paget Response to DHCW Accountable Officer Letter.pdf (2 pages)
- 6.4iii PRES-DHCW SHA Board Finance Briefing Report April 2022 Final F-03.pdf (13 pages)

6.5. Adroddiad Crynhoi Cynnydd Pwyllgor Archwilio a Sicrwydd

I'w Nodi Cadeirydd y Pwyllgor

- 6.5 A&A Highlight report 25052023.pdf (5 pages)

6.6. Adroddiad Ar y Prif Bwyntiau y Pwyllgor Llywodraethu a Diogelwch Digidol

I'w Nodi Cadeirydd y Pwyllgor

- 6.6 DG&S Chair's Report for Board 11 May 2023.pdf (4 pages)

6.7. Adroddiad Crynhoi Cynnydd Rhwydwaith Digidol Aelodau Annibynnol

I'w Nodi Cadeirydd Rhwydwaith

- 6.7 IM Digital Network Highlight report.pdf (4 pages)

6.8. Adroddiad ar Brif Bwyntiau'r Fforwm Partneriaeth Lleol

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13:55 - 14:10

15 min

7. MATERION I GLOI

7.1. Unrhyw Faterion Brys Eraill

I'w Draford

Cadeirydd

7.2. Dyddiad y Cyfarfod Nesaf

I'w Nodi

Cadeirydd

Dydd Iau 27 Gorffennaf 2023

Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal Digidol Cymru a gynhaliwyd ddydd Iau 30 Mawrth 2023 fel cyfarfod rhithwir a ddarlliedwyd yn fyw drwy Zoom.



10:30 i 14:50



30 Mawrth 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	Dirprwy Brif Weithredwr / Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru
Alistair Klaas Neill	AKN	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru

Marian Wyn Jones	MWJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
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Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Nathan Couch	NC	Arweinydd Archwilio Perfformiad	Archwilio Cymru
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Darren Griffiths (ar gyfer eitem 5.1 yn unig)	DG	Rheolwr Archwilio	Archwilio Cymru
Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.	Iechyd a Gofal Digidol Cymru
Nerys Hurford	NH	Cyfieithydd	Gwasanaethau Cyfieithu Nerys Hurford
Sarah-Jane Taylor	SJT	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru
Laura Tolley	LT	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Ni chafwyd unrhyw ymddiheuriadau am absenoldeb.		

Acronymau			
DHCW	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	DPIF	Cronfa Buddsoddi Blaenoriaethau Digidol
POD	Pobl a Datblygu Sefydliadol	IMTP	Cynllun Tymor Canolig Integredig
IOPR	Adroddiad Perfformiad Sefydliadol Integredig	PCGC	Partneriaeth Cydwasaethau GIG Cymru
BIPBC	Bwrdd Iechyd Prifysgol Betsi Cadwaladr	TGCh	Gwybodaeth, Cyfathrebu, Technoleg

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	Cam gweithredu
MATERION RHAGARWEINIOL			
1.1	<p>Croeso ac Ymddiheuriadau</p> <p>Croesawodd y Cadeirydd bawb yn ddwyieithog i gyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru (DHCW).</p> <p>Cadarnhaodd y Cadeirydd fod y cyfarfod yn cael ei ddarlledu'n fyw drwy Zoom. Yn ogystal, byddai'r recordiad ar gael drwy wefan Iechyd a Gofal Digidol Cymru ar gyfer unrhyw un nad oedd yn gallu cael mynediad i'r cyfarfod yn fyw. Roedd platfform Zoom yn cael ei ddefnyddio er mwyn caniatáu i aelodau fod yn weladwy trwy gydol y cyfarfod ac i gyfieithu ar y pryd ddigwydd, gan ganiatáu i aelodau gymryd rhan yn y cyfarfod yn Gymraeg neu Saesneg.</p> <p>Darparodd y Cadeirydd hysbysiadau cadw tŷ ynghylch agweddau technegol ffrydio byw'r cyfarfod, y seibiannau arfaethedig, a'r defnydd o'r agenda caniatâd ar gyfer eitemau 2.1 i 2.14.</p> <p>Dywedodd y Cadeirydd fod y Bwrdd newydd ddod â chyfarfod preifat byr i ben a gynhaliwyd yn breifat oherwydd sensitifrwydd masnachol ynghylch y Rhaglen LINC, ni wnaethpwyd unrhyw benderfyniadau yn ystod y cyfarfod preifat hwn.</p>	Nodwyd	Dim i'w nodi
1.2	<p>Ymddiheuriadau am Absenoldeb</p> <p>Ni chafwyd unrhyw ymddiheuriadau am absenoldeb</p>	Nodwyd	Dim i'w nodi
1.3	<p>Datganiadau o Fuddiannau</p> <p>Nid oedd unrhyw ddatganiadau o fuddiannau.</p>	Nodwyd	Dim i'w nodi
AGENDA CYDSYNIO — I'W CHYMERADWYO A'I NODI			
2.1	<p>Cofnodion y Cyfarfod a Gynhaliwyd 26 Ionawr 2023 sydd heb eu Cadarnhau</p> <p>Penderfynodd y Bwrdd:</p> <p>GYMERADWYO cofnodion cyfarfod y Bwrdd a gynhaliwyd ar 26 Ionawr 2023, yn amodol ar un mân ddiwygiad y gofynnwyd amdano.</p>	Cymeradwywyd	Dim i'w nodi
2.2	<p>Cofnodion Cryno Preifat Heb eu Cadarnhau o Gyfarfod Bwrdd 26 Ionawr 2023</p> <p>Penderfynodd y Bwrdd:</p> <p>GYMERADWYO cofnodion cryno preifat sydd heb eu cadarnhau o gyfarfod bwrdd 26 Ionawr 2023.</p>	Cymeradwywyd	Dim i'w nodi

2.3	Log Gweithredu Penderfynodd y Bwrdd: NODI'R Cofnodion Gweithredu.	Nodwyd	Dim i'w nodi
2.4	Blaengynllun Gwaith Penderfynodd y Bwrdd: NODI cynnwys y Blaengynllun.	Nodwyd	Dim i'w nodi
2.5	Cylch Busnes y Bwrdd 2023-24 Penderfynodd y Bwrdd: GYMERADWYO Cylch Busnes y Bwrdd 2023-24.	Cymeradw ywyd	Dim i'w nodi
2.6	Adroddiadau Blynyddol y Pwyllgor a'r Grŵp Ymgynghorol Penderfynodd y Bwrdd: GYMERADWYO adroddiadau Blynyddol y Pwyllgor a'r Grŵp Ymgynghorol	Cymeradw ywyd	Dim i'w nodi
2.7	Hunanasesiad Effeithiolrwydd y Bwrdd a'r Pwyllgor Penderfynodd y Bwrdd: NODI Hunanasesiad Effeithiolrwydd y Bwrdd a'r Pwyllgor	Nodwyd	Dim i'w nodi
2.8	Adolygiad Blynyddol o Reolau Sefydlog a'r Adroddiad Cydymffurfiaeth Penderfynodd y Bwrdd: GYMERADWYO Adolygiad Blynyddol o Reolau Sefydlog a'r Adroddiad Cydymffurfiaeth.	Cymeradw ywyd	Dim i'w nodi
2.9	Adolygiad o'r Fframwaith Sicrwydd Llywodraethu Penderfynodd y Bwrdd: GYMERADWYO Adolygiad o'r Fframwaith Sicrwydd Llywodraethu	Cymeradw ywyd	Dim i'w nodi
2.10	Asesiad Blynyddol y Safonau Iechyd a Gofal Penderfynodd y Bwrdd: GYMERADWYO Asesiad Blynyddol y Safonau Iechyd a Gofal	Cymeradw ywyd	Dim i'w nodi
2.11	Adroddiad Blynyddol Cynllunio at Argyfyngau Penderfynodd y Bwrdd: GYMERADWYO 'r Adroddiad Blynyddol Cynllunio Argyfwng.	Cymeradw ywyd	Dim i'w nodi
2.12	Adroddiad Polisi Penderfynodd y Bwrdd:	Cymeradw ywyd	Dim i'w nodi

	GYMERADWYO'r Adroddiad Polisi.		
2.13	Deddf Llesiant Cenedlaethau'r Dyfodol Penderfynodd y Bwrdd: NODI diweddariad Deddf Llesiant Cenedlaethau'r Dyfodol.	Nodwyd	Dim i'w nodi
2.14	Adroddiad Blynyddol Bwlch Cyflog rhwng y Rhywiau Penderfynodd y Bwrdd: GYMERADWYO Adroddiad Blynyddol y Bwlch Cyflog rhwng y Rhywiau.	Cymeradwy wyd	Dim i'w nodi

PRIF AGENDA

RHAN 3 - I'W HADOLYGU

3.1	Adroddiad y Cadeirydd Amlinellodd y Cadeirydd yr uchafbwyntiau canlynol o'r adroddiad: <ul style="list-style-type: none"> Trefniadau Llywodraethu Rhaglen Dywedodd y Cadeirydd wrth y Bwrdd y byddai adroddiad terfynol yr Adolygiad Annibynnol ynghylch Trefniadau Llywodraethu Rhaglenni'n cael ei rannu'n fuan a byddai'r eitem hon yn cael ei chynnwys ar yr agenda yng nghyfarfod Bwrdd yr Awdurdod Iechyd Arbennig ym mis Mai. Diwrnod Cwrdd i Ffwrdd y Gweinidog Dywedodd y Cadeirydd ei fod wedi mynychu diwrnod cwrdd i ffwrdd gyda'r Gweinidog dros Iechyd a Gofal Cymdeithasol a Chadeiryddion eraill GIG Cymru ar 16 Mawrth 2023 a thrafododd rôl Iechyd a Gofal Digidol Cymru, themâu digidol a blaenoriaethau ariannu. Dywedodd y Cadeirydd hefyd y bu trafodaethau hefyd ynghylch yr heriau a wynebwr ar draws GIG Cymru gan gynnwys amlygu'r heriau ariannol sylweddol a'r bygythiad parhaus o seiberddiogelwch. Rhannodd y Cadeirydd fod yna farn gyffredin am ryngweithredu Unwaith i Gymru a chydabyddiaeth y gellir cyflawni trawsnewid sylweddol trwy ddigidol tra'n cydnabod yr adnoddau sydd eu hangen i wneud hyn. <p>Gofynnodd y Cadeirydd am gymeradwyaeth gan y Bwrdd ar gyfer Camau Gweithredu'r Cadeiryddion a gymerwyd ers cyfarfod diwethaf y Bwrdd a oedd ar gyfer Contract Cymru Gyfan Partneriaeth Cydwasnaethau GIG Cymru ar gyfer Newidiadau i Contract Cyfleustodau.</p> <p>Dywedodd y Cadeirydd hefyd y byddai adroddiadau yn y dyfodol yn cynnwys uchafbwyntiau gan yr Is-Gadeirydd.</p>	Derbyniwyd a Chymeradwy wyd	Dim i'w nodi
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Tolley, Laura
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Dy

	<p>Penderfynodd y Bwrdd:</p> <p>DDERBYN cynnwys adroddiad y Cadeirydd a CHYMERADWYO Cam Gweithredu'r Cadeirydd.</p>		
3.2	<p>Adroddiad y Prif Swyddog Gweithredol</p> <p>Darparodd Helen Thomas (HT), Prif Swyddog Gweithredol yr uchafbwyntiau canlynol o'r adroddiad:</p> <ul style="list-style-type: none"> • Rhaglen Ddigidol Gofal Llygaid - dywedodd HT fod sgysiau parhaus wedi'u cynnal ag arweinwyr polisi Llywodraeth Cymru a Bwrdd Iechyd Prifysgol Caerdydd a'r Fro a chynigiwyd y byddai'r rhaglen yn trosglwyddo i Iechyd a Gofal Digidol Cymru ar 1 Mehefin 2024. Byddai cynllun pontio rhaglen yn cael ei roi ar waith, a byddai diweddariad yn cael ei gyflwyno i gyfarfod Bwrdd y Bwrdd Iechyd Arbennig ym mis Mai 2023. • Cyfarfod Tîm Rheoli'r Prif Weithredwyr a Gweithdy Strategol Teleiechyd, Digwyddiad TEC Cymru – esboniodd HT ar y ddau achlysur y bu trafodaethau cynhyrchol ynghylch rhith-wardiau gyda Tec Cymru yn bwrw ymlaen â'r gwaith hwn. • Pwyllgor Cydraddoldeb a Chyfiawnder Cymdeithasol. Dywedodd HT wrth y Bwrdd fod Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth, Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol a Darren Lloyd, Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion wedi mynychu ymchwiliad undydd Pwyllgor Cydraddoldeb a Chyfiawnder Cymdeithasol y Senedd ar gyfiawnder data a'r defnydd o ddata personol yn GIG Cymru ar 27 Mawrth 2023 lle cafwyd trafodaeth dda am sut mae data'n cael ei ddefnyddio ar hyn o bryd, effaith y symudiad cyflym tuag at dechnoleg ddigidol yn GIG Cymru, cadw data personol yn ddiogel a chynlluniau ar gyfer y dyfodol ar gyfer defnyddio data cleifion i wella'r ddarpariaeth ac ansawdd gwasanaethau gofal iechyd. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD cynnwys adroddiad y Prif Weithredwr.</p>	Derbyniwyd a Thrafodwyd	Dim i'w nodi
RHAN 4 – EITEMAU STRATEGOL			
<div> <div>Tolley Laura</div> <div>18/05/2023 15:38:11</div> </div>	<p>Cynllun Tymor Canolig Integredig 2023-26</p> <p>Cyflwynodd Ifan Evans (IE), Cyfarwyddwr Gweithredol Strategaeth yr adroddiad a chadarnhaodd fod Cynllun Tymor Canolig Integredig 2023-26 yn cael ei gyflwyno i'w gymeradwyo cyn ei</p>	Cymeradwyd	Dim i'w nodi

gyflwyno i Lywodraeth Cymru. Dywedodd IE ei bod yn bleser cyflwyno'r adroddiad i'r Bwrdd ei gymeradwyo ac eglurodd y canlynol:

- Cynhaliwyd nifer o weithdai dros y misoedd diwethaf lle cyfrannodd dros 100 o bobl, gan gynnwys staff, aelodau'r Bwrdd a rhanddeiliaid at ddatblygu'r Cynllun Tymor Canolig Integredig;
- Sicrhodd y gweithdai a'r ymgysylltu fod pawb yn cymryd perchnogaeth o'r cynllun;
- Roedd y Cynllun Tymor Canolig Integredig yn sylweddol fyrrach na'r blynyddoedd blaenorol;
- Pwyslais y Cynllun Tymor Canolig Integredig oedd gwaith newid, gwaith trawsnewid a'r gwaith ychwanegol y mae Iechyd a Gofal Digidol Cymru yn ei wneud a phrif raglenni Iechyd a Gofal Digidol Cymru;
- Roedd gwasanaethau busnes fel arfer yn greiddiol i Iechyd a Gofal Digidol Cymru fel sefydliad, roedd y rhain wedi'u cynnwys yn y cynllun ond nid oeddent mor amlwg â meysydd eraill, roedd hyn yn fwriadol gan fod pwyslais yn cael ei roi ar gyflawniadau allweddol a oedd yn bwysig i Iechyd a Gofal Digidol Cymru;
- Roedd ymgysylltu strategol yn heriol iawn ar draws y GIG a gofal cymdeithasol yn gyffredinol;
- Roedd yr arena ddigidol yn newid yn gyflym a dyna pam roedd Iechyd a Gofal Digidol Cymru yn glir ynghylch yr hyn y mae'n ei wneud i helpu ei randdeiliaid i ddeall rôl Iechyd a Gofal Digidol Cymru;
- Roedd Iechyd a Gofal Digidol Cymru yn agored ac yn dryloyw iawn o ran heriau o fewn y Cynllun Tymor Canolig Integredig;
- Byddai'r Cynllun Tymor Canolig Integredig yn cael ei gyflwyno i Lywodraeth Cymru i'w gymeradwyo ar 31 Mawrth 2023.

Dywedodd Ruth Glazzard (RG), Is-Gadeirydd fod llawer yn y Cynllun Tymor Canolig Integredig i Iechyd a Gofal Digidol Cymru ei gyflawni. Er y cydnabyddir y byddai'n heriol cyflawni, byddai angen i'r Bwrdd herio'r ddarpariaeth yn barhaus dros y misoedd nesaf.

Penderfynodd y Bwrdd:

GYMERADWYO'r Cynllun Tymor Canolig Integredig 2023-26

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4.2	<p>Adroddiad Cyllid</p> <p>Cyflwynodd Claire Osmundsen-Little (COL), Cyfarwyddwr Gweithredol Cyllid yr adroddiad perfformiad ariannol hyd at Chwefror 28ain. Amlygwyd y canlynol:</p> <ul style="list-style-type: none"> • Roedd Iechyd a Gofal Digidol Cymru yn rhagweld cyflawni'r holl dargedau ar gyfer diwedd y flwyddyn; • Cytunwyd ar ddyfarniad cyflog gan Lywodraeth Cymru a gweithredwyd arno ym mis Mawrth; • Rhannwyd trosolwg o'r gyfradd rhedeg refeniw; • Amlygwyd perfformiad Refeniw Craidd gyda pheth pwysau yn y Cyfarwyddiaethau Clinigol, Cyllid a Busnes a Sicrwydd a TGCh; • Roedd targed arbedion i'w gyflawni a rhannwyd trosolwg o'r targedau arbedion a ragamcanwyd; • Roedd gwariant COVID-19 ar £8.7m hyd yma, a rhannwyd hyn yn Profi, Olrhain, Diogelu a Brechlynnau. Rhagwelwyd y byddai £9.1m yn cael ei wario; • Roedd Iechyd a Gofal Digidol Cymru wedi cofnodi gwariant refeniw o £24.5m yn erbyn cynlluniau Y Gronfa Buddsoddi mewn Blaenoriaethau Digidol hyd yma, gyda chynllun i wario £31.4m erbyn diwedd y flwyddyn; • Cofnododd Iechyd a Gofal Digidol Cymru £6.2 o wariant cyfalaf hyd yn hyn, gyda £1.2m i'w wario o hyd, roedd disgwyl i hyn gael ei gyflawni; • Rhannwyd amserlen drafft y Cyfrifon Archwilio; • Byddai Safon Archwilio ISA315 newydd yn cael ei defnyddio i gefnogi'r adolygiad o'r cyfrifon; • Roedd pwysau cost sylweddol ar y GIG, byddai codiadau dyraniadau yn 1.5% ar gyfer 2023/24, 0.75% ar gyfer 2024/5 a 2% ar gyfer 2025/26; • Rhannwyd pwysau anochel a buddsoddiadau angenrheidiol; • Roedd y sefyllfa bresennol yn rhagweld targed adennill net o £1.9m yn 2023/24 cyn rhoi unrhyw gamau lliniaru ychwanegol ar waith; • Amlygwyd risgiau a chyfleoedd fel, Chwyddiant Digidol, Cynnydd mewn Costau Ynni Cytundebol ac Adennill TAW gan Microsoft; • Byddai Iechyd a Gofal Digidol Cymru yn symud canolfan ddata yn 2023-24 a byddai hyn yn cael ei gwmpasu gan Y Gronfa Buddsoddi mewn Blaenoriaethau Digidol a chyllid 	Derbyniwyd a Thrafodwyd	Dim i'w nodi
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	<p>Cyfalaf;</p> <ul style="list-style-type: none"> Roedd Llywodraeth Cymru wedi cytuno i ariannu costau cyfalaf a refeniw y Cynllun Cydnerthedd Seiber ar gyfer 2023-24. Nid oedd cyllid yn rheolaidd, ond roedd hwn yn gam cadarnhaol ymlaen. <p>Yn dilyn y cyflwyniad, gwnaed y sylwadau isod:</p> <ul style="list-style-type: none"> Roedd chwyddiant digidol yn aml-gymhleth; Roedd chwyddiant cyflog yn cael ei gadw'n ganolog a byddai'n cael ei gwmpasu gan Lywodraeth Cymru; Nid oedd Iechyd a Gofal Digidol Cymru yn cyflwyno cynllun Cynllun Tymor Canolig Integredig cytbwys eleni oherwydd pwysau ariannol; Ni dderbyniwyd cadarnhad llawn o Gytundebau Lefel Gwasanaeth gan Fyrddau Iechyd a oedd yn risg; Roedd Iechyd a Gofal Digidol Cymru wedi cymryd camau i gyflawni cynllun arbedion yn 2023-24, felly, roedd y tîm yn weddol hyderus y byddai arbedion yn cael eu cyflawni ar gyfer 2023-24, fodd bynnag byddai angen cynllun arbedion strategol ar gyfer y blynyddoedd i ddod. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD yr Adroddiad Cyllid.</p>		
4.3	<p>Cynllun Cydraddoldeb Strategol</p> <p>Rhannodd Sarah-Jane Taylor (SJT), Cyfarwyddwr Pobl a Datblygu Sefydliadol y Cynllun Cydraddoldeb Strategol. Amlygodd y canlynol:</p> <ul style="list-style-type: none"> Hwn oedd y Cynllun Cydraddoldeb Strategol cyntaf ar gyfer Iechyd a Gofal Digidol Cymru; Amlinellodd y SEP ymrwymiad Iechyd a Gofal Digidol Cymru i fod yn Gyflogwr o Ddewis cynhwysol; Byddai angen i Iechyd a Gofal Digidol Cymru adolygu a diwygio ei holl amcanion cydraddoldeb o leiaf unwaith bob pedair blynedd. Roedd Marilyn-Bryan Jones, Aelod Annibynnol ac Aelod Annibynnol Hyrwyddwr Bwrdd dros gydraddoldeb wedi bod yn rhan o ddatblygu'r cynllun; Roedd y cynllun wedi bod allan ar gyfer ymgynghoriad ers nifer o wythnosau, a chymerwyd yr holl sylwadau ac adborth a dderbyniwyd i ystyriaeth a'u hymgorffori yn y cynllun; 	Cymeradw ywyd	Dim i'w nodi

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	<ul style="list-style-type: none"> Roedd yr ymrwymïadau allweddol a gynhwyswyd yn y cynllun yn cynnwys: <ul style="list-style-type: none"> Denu a Chadw Gwrth-hiliaeth Gwrth-fwlio Cyfleoedd i Ddatblygu <p>Croesawodd y Bwrdd y cynllun ac eglurodd y byddai'r ffocws nawr ar sut i ddod â'r cynllun yn fyw. Cadarnhaodd SJT fod y cynllun wedi'i drafod yn agored yn y Diwrnod Uwch Arweinyddiaeth diwethaf i sicrhau bod Iechyd a Gofal Digidol Cymru yn cofleidio'r disgwyliadau a nodir yn y cynllun.</p> <p>Penderfynodd y Bwrdd:</p> <p>GYMERADWYO'r Cynllun Cydraddoldeb Strategol.</p>		
4.4	<p>Dull Cynnyrch</p> <p>Cyflwynodd Sam Lloyd (SL), Cyfarwyddwr Gweithredol Gweithrediadau y diweddariad ar y dull rheoli cynnyrch. Amlygodd:</p> <ul style="list-style-type: none"> Yrwyr Strategol Iechyd a Gofal Digidol Cymru <ul style="list-style-type: none"> Cefnogi'r weledigaeth Cefnogi 5 cenhadaeth Canolbwyntio adnoddau Lleihau amser i werthfawrogi Mwy o ffocws ar brofiad cwsmeriaid Darparu gwerth gorau am arian Mae'r manteision yn cynnwys: <ul style="list-style-type: none"> Cysondeb Cyllid cynaliadwy Atebolrwydd Ymgysylltu â defnyddwyr Datblygu sgiliau Cyflwyno integredig Gwelliant parhaus Prawf yn y dyfodol Byddai cynnyrch yn effeithio ar draws y sefydliad; Mae'r cynnyrch yn dibynnu ar DevOps gan gynnwys adeiladu, codio, cynllunio profion ac ati; 	Derbyniwyd a Thrafodwyd	Dim i'w nodi

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	<ul style="list-style-type: none"> • Byddai asesiad aeddfedrwydd yn cael ei gynnal a chynllun gweithredu i fynd i'r afael â hyn yn cael ei ddatblygu; • Mae cael llwyfan cynnyrch ystyrion yn dibynnu ar bensaerniaeth dda ar waith; • Rhannwyd enghraifft o'r Model Gweithredu Cynnyrch; • Rhannwyd camau nesaf lefel uchel; • Roedd ffocws ar set sgiliau yn cael ei gyflawni, roedd hyn yn cael ei ystyried ar y cyd â Gartner; <p>Gwnaed y sylwadau canlynol:</p> <ul style="list-style-type: none"> • Roedd cysylltiad agos rhwng dull cynnyrch ac amcanion strategol y sefydliad; • Byddai Iechyd a Gofal Digidol Cymru yn parhau i redeg prosiectau, rhaglenni a phortffolios ochr yn ochr â dull cynnyrch; • Roedd y dull cynnyrch o weithio ar waith ar draws diwydiannau, felly roedd pwyntiau dysgu y gallai Iechyd a Gofal Digidol Cymru eu cymryd gan wahanol sefydliadau; • Byddai mesur gwerth yn y lleoliad gofal iechyd yn allweddol i fodel ariannu cynaliadwy; • Roedd angen cydweithio ar draws y sefydliad; • Os bydd y cynnyrch yn llwyddiannus, byddai'n trawsnewid y sefydliad. <p>Penderfynodd y Bwrdd: DDERBYN A THRAFOD y Dull Cynnyrch.</p>		
4.5	<p>Achos Cyfiawnhad Busnes Yr Adnodd Data Cenedlaethol</p> <p>Cyflwynodd IE gynbig buddsoddi digidol Cam 3 yr Adnodd Data Cenedlaethol. Amlygodd y canlynol:</p> <ul style="list-style-type: none"> • Roedd mis Mawrth 2023 yn nodi diwedd achos busnes cam 2. Mae achos cam 3 yn nodi'r cyfiawnhad a'r cyllid sydd eu hangen ar gyfer Ebrill 2023-Mawrth 2025; • Roedd Iechyd a Gofal Digidol Cymru yn brif sefydliad cyflawni ar gyfer y rhaglen Adnodd Data Cenedlaethol, gan arwain ar gyflwyno'r cydrannau cenedlaethol; • Roedd mwyafrif staff yr Adnodd Data Cenedlaethol yn cael eu cyflogi gan Iechyd a Gofal Digidol Cymru; • Rhagwelwyd newidiadau i'r cynllun cyflawni fel rhan o broses craffu/cymeradwyo Llywodraeth Cymru, yn ogystal â phwysau cyllidebol y Gronfa Fuddsoddi 	Nodwyd	Dim i'w nodi

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	<p>Blaenoriaethau Digidol;</p> <ul style="list-style-type: none"> Byddai'r buddion a gynhwyswyd yn yr Achos Cyfiawnhad Busnes yn eiddo i wahanol bartneriaid rhanddeiliaid, gan gynnwys byrddau iechyd, o fewn y Rhaglen Adnoddau Data Genedlaethol. <p>Penderfynodd y Bwrdd:</p> <p>NODI Achos Cyfiawnhad Busnes yr Adnodd Data Cenedlaethol</p>		
	Egwyl Cinio - 35 munud		

RHAN 5 – LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

5.1	<p>Asesiad Strwythuredig Archwilio Cymru 2022 ac Adroddiad Archwilio Blynnyddol</p> <p>Cyflwynodd Darren Griffiths o Archwilio Cymru Asesiad Strwythuredig Archwilio Cymru 2022. Amlygwyd y pwyntiau canlynol:</p> <ul style="list-style-type: none"> Yn gyffredinol, canfu adroddiad Archwilio Cymru fod Iechyd a Gofal Digidol Cymru yn gwreiddio trefniadau llywodraethu da a nawr bod yn rhaid iddo geisio datblygu ymhellach ei rôl fel partner digidol y gellir ymddiried ynddo i fanteisio ar gyfleoedd gwasanaeth digidol ledled Cymru. Cafodd Iechyd a Gofal Digidol Cymru ei arwain yn dda ac mae wedi gwneud cynnydd cadarnhaol o ran sefydlu a gwreiddio trefniadau priodol i gefnogi llywodraethu da; Mae gan Iechyd a Gofal Digidol Cymru ddulliau cynllunio effeithiol, ond roedd angen gwaith pellach i ddatblygu ei strategaeth tymor hwy; Byddai angen cynnwys cerrig milltir a thargedau mewn cynlluniau i alluogi monitro cynnydd yn effeithiol. <p>Gwnaed y sylwadau canlynol:</p> <p>Hwn oedd yr Asesiad Strwythuredig cyntaf ar gyfer y sefydliad ac roedd yn esblygiad o'r Adolygiad Llywodraethu Sylfaenol a gynhaliwyd yn 2021;</p> <p>Wrth i Iechyd a Gofal Digidol Cymru symud tuag at ddarpariaeth hyblyg, ystywyd byddai'n anodd gosod amserlenni cadarn o fewn yr holl gynlluniau a strategaethau, fodd bynnag nodwyd y byddai cerrig milltir yn cael eu cynnwys, gan gydnabod rhywfaint o hyblygrwydd ynddynt, a byddai hyn yn sicrhau bod Bwrdd yr Awdurdod Iechyd Arbennig a'i Bwyllgorau yn ennill sicrwydd bod cynlluniau'n cael eu cyflawni;</p> <p>Trafodwyd yr Asesiad Strwythuredig yn y Pwyllgor Archwilio a Sicrwydd ym mis Chwefror 2023, roedd yn adroddiad cadarnhaol iawn ac yn adlewyrchu aeddfedrwydd cynyddol Iechyd a Gofal</p>	Rhoddwyd sicrwydd	Dim i'w nodi
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	<p>Digidol Cymru fel sefydliad;</p> <p>Byddai'r Pwyllgor Archwilio a Sicrwydd yn monitro'r argymhellion o'r adroddiad yn agos i sicrhau eu bod yn cael eu cyflawni, yn ogystal â hynny, byddai cyfleoedd dysgu yn cael eu datblygu.</p> <p>Rhannwyd Adroddiad Blynnyddol Archwilio Cymru 2022 ar gyfer Iechyd a Gofal Digidol Cymru ac amlygwyd y canlynol:</p> <ul style="list-style-type: none"> • Roedd cyfrifon Iechyd a Gofal Digidol Cymru wedi'u paratoi'n briodol ac yn berthnasol gywir a chyhoeddwyd barn archwilio ddiamod arnynt. Ni nododd gwaith Archwilio Cymru unrhyw wendidau perthnasol yn rheolaethau mewnol Iechyd a Gofal Digidol Cymru; • Gwnaethpwyd un argymhelliad a byddai camau gweithredu i fynd i'r afael â hyn yn cael eu hadolygu fel rhan o waith cyfrifon 2022-23; • Cyflawnodd Iechyd a Gofal Digidol Cymru ei ddyletswydd ariannol i adennill costau yn erbyn ei Derfyn Adnoddau Refeniw a Chyfalaf ar gyfer y flwyddyn a ddaeth i ben 31 Mawrth 2022; • Mae gwaith archwilio perfformiad wedi arwain yr Archwilydd Cyffredinol i'r casgliad bod Iechyd a Gofal Digidol Cymru yn gwneud cynnydd cadarnhaol o ran gwreiddio trefniadau llywodraethu da a bod yn rhaid iddo bellach geisio datblygu ei rôl fel partner digidol y gellir ymddiried ynddo ymhellach i fanteisio ar gyfleoedd gwasanaethau digidol ledled Cymru. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN A THRAFOD Asesiad Strwythuredig Archwilio Cymru 2022 ac Adroddiad Archwilio Blynnyddol 2022 ar gyfer SICRWYDD.</p>		
5.2	<p>Adolygiad Bwrdd Iechyd Prifysgol Betsi Cadwaladr o Effeithiolrwydd y Bwrdd – Asesiad Iechyd a Gofal Digidol Cymru</p> <p>Dywedodd y Cadeirydd, er sicrwydd, yn dilyn cyhoeddi adroddiad Archwilio Cymru o Fwrdd Iechyd Prifysgol Betsi Cadwaladr, gofynnodd am asesiad gan Iechyd a Gofal Digidol Cymru yn erbyn themâu ac argymhellion yr adroddiad.</p> <p>Cyflwynodd Chris Darling (CD), Ysgrifennydd y Bwrdd yr adroddiad a dywedodd fod adroddiad Bwrdd Iechyd Prifysgol Betsi Cadwaladr wedi edrych ar y tîm Gweithredol a'r Bwrdd a sut roedd yn gweithredu. Dywedodd CD mai dim ond yn ddiweddar y penodwyd tîm Gweithredol Iechyd a Gofal Digidol Cymru yn llawn a bod hyn wedi cymryd bron i ddwy flynedd i fod yn dîm a oedd wedi'i recriwtio'n llawn. Roedd hon yn sefyllfa debyg i Aelodau Annibynnol oherwydd oedi yn y broses</p>	Rhoddwyd sicrwydd	Dim i'w nodi

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	<p>recriwtio.</p> <p>Darparodd adroddiad Bwrdd Iechyd Prifysgol Betsi Cadwaladr nodyn atgoffa defnyddiol ar bwysigrwydd gwaith datblygu sefydliadol y Bwrdd. Wrth i Fwrdd a Thîm Gweithredol Iechyd a Gofal Digidol Cymru gael eu sefydlu'n llawn, comisiynodd Iechyd a Gofal Digidol Cymru Deloitte fel partner i ddylunio rhaglen Datblygu Sefydliadol Bwrdd bwrpasol ar gyfer Iechyd a Gofal Digidol Cymru. Dechreuodd y gwaith hwn ym mis Hydref 2022 a ffocws mawr yn y rhaglen oedd her, cydlyniant ac ymddiriedaeth y Bwrdd.</p> <p>Roedd y Bwrdd yn cydnabod yr angen i brofi a sicrhau eu hunain yn barhaus yn y maes hwn.</p> <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD Adolygiad Bwrdd Iechyd Prifysgol Betsi Cadwaladr o Effeithiolrwydd y Bwrdd – Asesiad Iechyd a Gofal Digidol Cymru ar gyfer SICRWYDD.</p>		
5.3	<p>Adroddiad Perfformiad Sefydliadol Integredig</p> <p>Cyflwynodd IE yr adroddiad sefydliadol integredig hyd at ddiwedd Chwefror 2023. Gwnaed y sylwadau canlynol:</p> <ul style="list-style-type: none"> • Cyflwynwyd Cynllun Tymor Canolig Integredig y Bwrdd bob deufis mewn ôl-ddyledion; • Roedd yr adroddiad yn canolbwyntio ar gynllunio, fodd bynnag, dros y misoedd nesaf byddai ffocws ar adrodd ar berfformiad; • Amlygwyd y cynllun interim ar dudalen, gan nodi y byddai'r Cynllun Busnes Blyneddol yn cael ei rannu gyda'r Bwrdd ym mis Mai a fyddai'n cynnwys yr holl lefel o fanylion ynghylch rhaglenni Iechyd a Gofal Digidol Cymru; • Roedd y cynllun ar y dudalen yn nodi uchelgais Iechyd a Gofal Digidol Cymru ar gyfer y flwyddyn, nid oedd yn cynnwys holl gynlluniau'r sefydliad, roedd yn canolbwyntio ar y cynlluniau sydd bwysicaf i Iechyd a Gofal Digidol Cymru a'r hyn a flaenoriaethwyd. <p>Penderfynodd y Bwrdd:</p> <p>DDERBYN a THRAFOD yr Adroddiad Perfformiad Sefydliadol Integredig</p>	Derbyniwyd a Thrafodwyd	Dim i'w nodi
5.4	<p>Adroddiad y Gofrestr Risgiau Corfforaethol</p> <p>Cyflwynodd CD ddiweddariad i'r Adroddiad y Gofrestr Risg Corfforaethol. Tynnodd CD sylw at Adroddiad Risg Byd-eang Ffôrwm Economaidd y Byd a dywedodd fod themâu sy'n</p>	Derbyniwyd a Thrafodwyd	Dim i'w nodi

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berthnasol i Iechyd a Gofal Digidol Cymru wedi'u trafod yn y sesiwn Datblygu Bwrdd ddiwethaf. Amlygwyd y pwyntiau canlynol:

- Roedd 31 o risgiau ar y gofrestr risg gorfforaethol, a manylwyd ar 20 ohonynt yn yr adroddiad;
- Dosbarthwyd 11 o risgiau fel rhai preifat, ac mae 10 ohonynt yn cael eu trafod ym mhob Pwyllgor Llywodraethu a Diogelwch Digidol a byddai 1 yn cael ei thrafod yn y Pwyllgor Archwilio a Sicrwydd;
- Ers cyfarfod diwethaf y Bwrdd, ychwanegwyd 15 risg:
 - DHCW0302 Cynnydd Incwm Cytundeb Lefel Gwasanaeth CANISC Felindre
 - DHCW0303 Cyllid Rheoli Gwybodaeth a Thechnoleg Gofal Sylfaenol
 - DHCW0304 Cynnydd Incwm Cytundeb Lefel Gwasanaeth GIG Cymru
 - DHCW0305 Cyllid Craidd Llywodraeth Cymru
 - DHCW0306 Gwasanaeth Newid – Olyniaeth
 - DHCW0307 Gwasanaeth Newid - Datblygiad ymatebol
 - DHCW0308 Cyllid cynaliadwy ar gyfer NIAS
 - DHCW0311 Pwysau Cost Digidol – Newidiadau i'r Model Pris Cyflenwr
 - DHCW0312 Pwysau Cost Digidol – Risg Amrywiad Cyfradd Gyfnewid
 - DHCW0313 Pwysau Cost Digidol – Newidiadau i Fodelau Gwasanaeth
 - DHCW0314 Pwysau Cost Digidol – Risg Cadwyn Gyflenwi
- Ers cyfarfod diwethaf y Bwrdd, dilëwyd 7 risg:
 - DHCW0228 Parthau Nam
 - DHCW0289 Chwyddiant Digidol
 - DHCW0302 Incwm Cytundeb Lefel Gwasanaeth Felindre Canisc
 - DHCW0303 Cyllid Rheoli Gwybodaeth a Thechnoleg Gofal Sylfaenol
 - DHCW0305 Cyllid Craidd Llywodraeth Cymru

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	<ul style="list-style-type: none"> Ers cyfarfod diwethaf y Bwrdd bu 2 risg gyda newid yn y sgôr: DHCW0299 Capasiti Cyflenwyr i gefnogi EPS – Mae hyn wedi cynyddu o 12 i 20 – IE oedd perchennog y risg a dywedodd fod hon yn gadwyn gyflenwi dechnegol gymhleth, fodd bynnag roedd gwaith lliniaru yn cael ei wneud; DHCW0259 Swyddi Gwag - Mae llawer o waith wedi'i wneud yn y maes hwn ac mae hyn wedi'i leihau o 15 i 12. <p>Y risgiau a sgoriodd uchaf gan Iechyd a Gofal Digidol Cymru oedd:</p> <ul style="list-style-type: none"> DHCW0299 – Capasiti cyflenwyr i gefnogi gweithgareddau parodrwydd y Gwasanaeth Presgripsiwn Electronig; DHCW0298 – Oedi gyda Gweithredu LINC (WLIMS 2; a) DHCW0304 - Cynnydd mewn Incwm Cytundeb Lefel Gwasanaeth GIG Cymru <p>Dywedodd CD fod sefyllfa risg y sefydliad ar hyn o bryd yn cael ei dominyddu gan risgiau seiber a chyllid, ond rhagwelwyd y byddai nifer o risgiau'n cael eu lliniaru cyn cyfarfod nesaf Bwrdd yr Awdurdod Iechyd Arbennig ym mis Mai 2023.</p> <p>Ychwanegodd IE fod gwaith yn cael ei wneud i gael risgiau rhaglen a phrosiect ar gofrestr risg y sefydliad. Sgoriwyd y risgiau hyn gan y rhaglen / prosiect ond rhoddwyd sicrwydd i'r Bwrdd bod Iechyd a Gofal Digidol Cymru hefyd yn rheoli'r risgiau hyn yn weithredol.</p> <p>Penderfynodd y Bwrdd: DDERBYN a THRAFOD y Gofrestr Risg Gorfforaethol</p>		
5.5	<p>Adroddiad ar Brif Bwyntiau'r Pwyllgor Taliadau a Thelerau Gwasanaeth</p> <p>Rhoddodd y Cadeirydd ddiweddariad byr o ddau gyfarfod y Pwyllgor Taliadau a Thelerau Gwasanaeth a gynhaliwyd ar 19 Ionawr a 2 Mawrth 2023. Dywedodd y Cadeirydd fod y Pwyllgor yn adolygu ei ofynion adrodd blynyddol, yn cael ei ddiweddarau ar berfformiad ac amcanion y tîm gweithredol yn ogystal â chymeradwyo cytundeb setlo.</p> <p>Penderfynodd y Bwrdd: NODI Adroddiad ar Brif Bwyntiau'r Pwyllgor Taliadau a Thelerau Gwasanaeth</p>	Nodwyd	Dim i'w nodi

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5.6	<p>Adroddiad ar Brif Bwyntiau'r Fforwm Partneriaeth Lleol</p> <p>Rhoddodd Andrew Fletcher (AF), Aelod Cyswllt o'r Bwrdd ddiweddariad o gyfarfod y Grŵp Ymgynghorol a dywedodd wrth y Bwrdd fod Gweithio Hybrid a'r Cynllun Ystadau yn cael eu monitro'n ofalus gan y Fforwm Partneriaeth Lleol.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI'r Adroddiad ar Brif Bwyntiau'r Fforwm Partneriaeth Lleol</p>	Nodwyd	Dim i'w nodi
5.7	<p>Adroddiad ar Brif Bwyntiau'r Pwyllgor Llywodraethu a Diogelwch Digidol</p> <p>Rhoddodd Rowan Gardner, Aelod Annibynnol a Chadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol ddiweddariad i gyfarfod y Pwyllgor Llywodraethu a Diogelwch Digidol a gynhaliwyd ym mis Chwefror a gwnaeth sylwadau ar yr agwedd agored at y cyfarfod a oedd yn gadarnhaol iawn.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI Adroddiad ar Brif Bwyntiau'r Pwyllgor Llywodraethu a Diogelwch Digidol</p>	Nodwyd	Dim i'w nodi
5.8	<p>Adroddiad ar Brif Bwyntiau'r Pwyllgor Archwilio a Sicrwydd</p> <p>Cyflwynodd Marian Wyn Jones (MWJ), Aelod Annibynnol adroddiad ar y cyfarfod Archwilio a Sicrwydd a gynhaliwyd ym mis Chwefror. Dywedodd MWJ wrth y Bwrdd fod y Pwyllgor wedi derbyn yr Adroddiadau Archwilio canlynol, a bod pob un ohonynt wedi derbyn 'Sicrwydd Rhesymol' a oedd yn galonogol:</p> <ul style="list-style-type: none"> - Cynaliadwyedd Ariannol - Gwreiddio'r Strategaeth Ymgysylltu â Rhanddeiliaid - Rheoli Perfformiad - Gwasanaethau Newid <p>Mynegodd MWJ hefyd ei gwerthfawrogiad o ymrwymiad y Dirprwy Brif Weithredwr / Cyfarwyddwr Gweithredol y tîm Llywodraethu Ariannol a Chorfforaethol.</p> <p>Codwyd ymholiad ynghylch sut mae'r sefydliad yn lledaenu gwybodaeth a diweddariadau o gyfarfodydd Bwrdd a Phwyllgorau i staff. Eglurwyd bod nifer o offer cyfathrebu yn cael eu defnyddio i gynnwys Briffio Staff gyda'r Prif Swyddog Gweithredol, Cylchlythyrau Mewnol, Mewnwelediadau Bwrdd, Fideos Cryno Bwrdd a TenTalks.</p> <p>Penderfynodd y Bwrdd:</p> <p>NODI Adroddiad ar Brif Bwyntiau'r Pwyllgor Archwilio a Sicrwydd</p>	Nodwyd	Dim i'w nodi

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RHAN 6 - MATERION I GLOI

6.1	Unrhyw Faterion Brys Eraill Ni chodwyd unrhyw fusnes brys arall.	Trafodwyd	Dim i'w nodi
6.2	Dyddiad ac Amser y Cyfarfod Nesaf <ul style="list-style-type: none">Dydd Iau 25 Mai 2023 Daeth y cyfarfod i ben am 14:50	Nodwyd	Dim i'w nodi

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Cyfarfod Bwrdd Awdurdod Iechyd Arbennig Iechyd a Gofal

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru (DHCW) a gynhaliwyd ddydd Iau 30 Mawrth 2023 yn rhithwir trwy MS Teams.



09:30 – 10:15



30 Mawrth 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Marilyn Bryan-Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	Dirprwy Brif Weithredwr / Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru
Alistair Klaas Neill	AKN	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru

Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru
Marian Wyn Jones	MWJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru

Yn bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.	Iechyd a Gofal Digidol Cymru
Alison Maguire	AM	Cyfarwyddwr Rhaglen (ar gyfer eitem 3.1 yn unig)	Iechyd a Gofal Digidol Cymru
Michelle Sell	MS	Cyfarwyddwr Cynllunio a Pherfformiad / Prif Swyddog Masnachol (ar gyfer eitem 3.1 yn unig)	Iechyd a Gofal Digidol Cymru
Sarah-Jane Taylor	SJT	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru
Laura Tolley	LT	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Ni chafwyd unrhyw ymddiheuriadau am absenoldeb.		

Acronymau			
DHCW	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	LINC	Rhwydwaith Gwybodaeth Labordy Cymru
RISP	Caffael System Gwybodaeth Radioleg		

Rhif yr Eite	Manylion yr Eitem	Canlyniad	Cam gweithredu
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MATERION RHAGARWEINIOL			
1.1	Croeso ac Ymddiheuriadau Croesawodd y Cadeirydd bawb i gyfarfod Bwrdd preifat yr Awdurdod Iechyd Arbennig a chadarnhaodd fod y cyfarfod hwn er gwybodaeth yn unig i dderbyn diweddariad ar y rhaglen LINC yn benodol ac nad oedd unrhyw benderfyniadau ffurfiol yn cael eu gwneud.	Nodwyd	Dim i'w nodi
1.2	Ymddiheuriadau am Absenoldeb Ni chafwyd unrhyw ymddiheuriadau am absenoldeb	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiannau Nid oedd unrhyw ddatganiadau o fuddiannau.	Nodwyd	Dim i'w nodi
1.4	Materion yn Codi Ni nodwyd unrhyw eitemau ar yr agenda cydsynio gan aelodau'r Bwrdd ar gyfer eu symud i'r brif agenda.	Trafodwyd	Dim i'w nodi
AGENDA CYDSYNIO — I'W CHYMERADWYO A'I NODI			
2.1	Cofnodion y cyfarfod Bwrdd Preifat a gynhaliwyd ar 26 Ionawr 2023 sydd eto i'w cadarnhau Penderfynodd y Bwrdd: GYMERADWYO cofnodion cyfarfod y Bwrdd Preifat a gynhaliwyd ar 26 Medi 2022, yn amodol ar un mân ddiwygiad.	Cymeradwywyd	Dim i'w nodi
2.2	Cofnod Gweithredu Penderfynodd y Bwrdd: NODI nad oedd unrhyw gamau gweithredu.	Nodwyd	Dim i'w nodi
PRIF AGENDA			
RHAN 3 – I'W DRAFOD			
3.1	Diweddariad Rhaglen LINC		
	Rhoddodd Helen Thomas, Prif Swyddog Gweithredol drosolwg o'r Rhaglen LINC bresennol a'r heriau. Dywedodd Michelle Sell, Cyfarwyddwr Cynllunio a Pherfformiad a Phrif Swyddog Masnachol: <ul style="list-style-type: none"> Roedd y Cyfreithwyr a Bargyfreithwyr, Blake Morgan, wedi'u cyfarwyddo ar y cyd â Bwrdd Iechyd Prifysgol Caerdydd a'r Fro; Mae mater allweddol yn y contract yn nodi y bydd y gwasanaeth yn barod i fynd yn fyw ym mis Ebrill 2023 ym Mwrdd Iechyd Prifysgol Caerdydd a'r Fro, fodd bynnag mae'n 	Nodwyd	Dim i'w nodi

	<p>annhebygol y bydd y dyddiad mynd yn fyw hwn yn cael ei gwrdd;</p> <ul style="list-style-type: none"> Ers i berchnogaeth o'r rhaglen drosglwyddo o Grŵp Cydweithredol y GIG i DHCW, mae DHCW wedi gofyn am gynllun diwygiedig i sicrhau bod y cyflenwr yn cyflawni; Adolygwyd y cynllun diwygiedig gan randdeiliaid a'i rannu â bwrdd y rhaglen, fodd bynnag ni dderbyniwyd y cynllun gan fwrdd y rhaglen, oherwydd nifer o resymau gan gynnwys yr amserlenni diwygiedig; Dywedwyd wrth y cyflenwr nad oedd y cynllun hwn wedi'i dderbyn gan amlinellu'r rhesymau pam. Cynigwyd cyfle i adolygu a chyflwyno cynllun arall, pan ddaw'r cynllun hwn i law bydd yn cael ei adolygu gan randdeiliaid a bwrdd y rhaglen; Os na dderbynnir y cynllun diwygiedig, gall y cyflenwr wrthwynebu'r penderfyniad hwn a byddai hyn yn cael ei uwchgyfeirio at Helen Thomas, Prif Swyddog Gweithredol a chyfryngu allanol; Roedd 'rhesymoldeb' wedi'i brofi gyda'r Bargyfreithiwr; Ni allai'r cyflenwr ddadlau yn erbyn y penderfyniad ac os felly, byddai 'seibiant' ar y contract ac ar 13 Ebrill gall DHCW a Caerdydd a'r Fro wneud y penderfyniad i derfynu'r contract, os na chyrhaeddir y garreg filltir allweddol ar y dyddiad hwn; Pe bai DHCW wedi cyflwyno hysbysiad terfynu, gall y cyflenwr ddadlau yn erbyn hyn; Gallai'r cyflenwr fynd â DHCW i'r llys am derfyniad anghyfreithlon; Pwysau amser oedd yr her sylweddol ar hyn o bryd; Roedd opsiwn posibl i ymestyn contract etifeddol gydag Intersystem ac iddynt gymryd y cynnyrch newydd ymlaen, fodd bynnag, er mwyn cyflawni hyn, byddai angen i DHCW gymeradwyo hyn yng nghyfarfod Bwrdd yr SHA ym mis Gorffennaf; Byddai angen negodi ar y cyd ag Intersystem os torrir y contract presennol; Rhannwyd amserlen lefel uchel ac opsiynau i'w hystyried. <p>Gwnaed y sylwadau canlynol:</p> <ul style="list-style-type: none"> Ni fyddai DHCW yn gallu cynnal sgysiau ag Intersystem pe bai'r cyflenwr presennol yn dadlau yn erbyn derfynu'r contract a oedd yn risg; Mae DHCW ar hyn o bryd yn paratoi ar gyfer ymgyfreitha rhag ofn i hyn ddigwydd; 		
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	<ul style="list-style-type: none"> • Roedd costau ychwanegol ac adnoddau ar gyfer cynlluniau wrth gefn yn cael eu trafod gyda Phrif Weithredwyr y GIG. Byddai costau ychwanegol yn cael eu rhannu ar draws y GIG. O ran adnoddau, roedd tîm wedi'i sefydlu o fewn DHCW. • Pe bai'r contract yn cael ei derfynu, gallai DHCW geisio adennill costau gan y cyflenwr; • Mae DHCW ar hyn o bryd yn llunio achos ar gyfer cytundeb setlo fel opsiwn; • Roedd risg o beidio â chael gwasanaeth biocemegol ar draws GIG Cymru pe na bai contract gyda'r cyflenwr presennol, fodd bynnag byddai cyflenwr newydd yn gweithio'n agos gyda DHCW i sicrhau bod gwasanaethau'n parhau i redeg fel blaenoriaeth. <p>Penderfynodd y Bwrdd: NODI Diweddariad Rhaglen LINC</p>		
RHAN 4 - MATERION I GLOI			
4.1	Unrhyw faterion brys eraill Ni chodwyd unrhyw fater brys arall.	Trafodwyd	
4.2	Dyddiad ac Amser y Cyfarfod Nesaf I'w gadarnhau	Nodwyd	Dim i'w nodi

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**Crynodeb o'r Cofnodion heb eu cadarnhau o Gyfarfod Bwrdd
Eithriadol PREIFAT DHCW a Bwrdd Iechyd Prifysgol Caerdydd a'r
Fro**

Cofnodion cyfarfod Bwrdd Awdurdod Iechyd Arbennig (SHA) Iechyd a Gofal Digidol Cymru
(DHCW) a Bwrdd Iechyd Prifysgol Caerdydd a'r Fro a gynhaliwyd ddydd Iau 20 Ebrill 2023
yn rhithwir trwy MS Teams



09:00 – 09:45



20 Ebrill 2023

Aelodau'n Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Simon Jones	SJ	Cadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	Iechyd a Gofal Digidol Cymru
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru
Andrew Fletcher	AF	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Iechyd a Gofal Digidol Cymru
Rowan Gardner	RoG	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru
Claire Osmundsen-Little	COL	Dirprwy Brif Weithredwr / Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru
Alistair Klaas Neill	AKN	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
David Selway	DS	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Helen Thomas	HT	Prif Swyddog Gweithredol	Iechyd a Gofal Digidol Cymru

1Cyfarfod Bwrdd ar y Cyd DHCW a Chaerdydd a'r Fro

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Charles Janczewski	CJ	Cadeirydd y Bwrdd	Caerdydd a'r Fro
Paul Bostock	PB	Prif Swyddog Gweithredol	Caerdydd a'r Fro
Emma Cooke	EC	Ar ran Fiona Jenkins *JQ i gadarnhau teitl	Caerdydd a'r Fro
Susan Elsmore	SE	Aelod Annibynnol	Caerdydd a'r Fro
Abigail Harris	AH	Cyfarwyddwr Gweithredol Cynllunio Strategol	Caerdydd a'r Fro
Akmal Hanuk	AHa	Aelod Annibynnol	Caerdydd a'r Fro
David Edwards	DE	Aelod Annibynnol	Caerdydd a'r Fro
Rachel Gidman	RG	Cyfarwyddwr Gweithredol Pobl a Diwylliant	Caerdydd a'r Fro
Michael Imperato	MI	Aelod Annibynnol	Caerdydd a'r Fro
Meriel Jenney	MJ	Cyfarwyddwr Meddygol Gweithredol	Caerdydd a'r Fro
Mike Jones	MJo	Aelod Cyswllt o'r Bwrdd – Undeb Llafur	Caerdydd a'r Fro
Fiona Kinghorn	FK	Cyfarwyddwr Gweithredol Iechyd Cyhoeddus	Caerdydd a'r Fro
Sara Moseley	SM	Aelod Annibynnol	Caerdydd a'r Fro
Catherine Phillips	CP	Cyfarwyddwr Gweithredol Cyllid	Caerdydd a'r Fro
Ceri Phillips	CPh	Is-gadeirydd y Bwrdd	Caerdydd a'r Fro
Suzanne Rankin	SR	Prif Swyddog Gweithredol	Caerdydd a'r Fro
Jason Roberts	JR	Cyfarwyddwr Nyrsio Gweithredol	Caerdydd a'r Fro
David Thomas	DT	Cyfarwyddwr Gwybodaeth Ddigidol ac Iechyd	Caerdydd a'r Fro
Rhian Thomas	RT	Aelod Annibynnol	Caerdydd a'r Fro
John Union	JU	Aelod Annibynnol	Caerdydd a'r Fro

Yn Bresennol	Llythrennau Cyntaf	Teitl	Sefydliad
Joanne Brandon	JB	Cyfarwyddwr Cyfathrebu ac Ymgysylltu	Caerdydd a'r Fro
Chris Darling	CD	Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru

Sam Hall	SH	Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl.	Iechyd a Gofal Digidol Cymru
Harriett Kings	HK	Pennaeth Cyfathrebu Cynorthwyol	Iechyd a Gofal Digidol Cymru
Alison Maguire	AM	Cyfarwyddwr Rhaglen	Iechyd a Gofal Digidol Cymru
James Quance	JQ	Ysgrifennydd y Bwrdd	Caerdydd a'r Fro
Michelle Sell	MS	Cyfarwyddwr Cynllunio a Pherfformiad / Prif Swyddog Masnachol	Iechyd a Gofal Digidol Cymru
Sarah-Jane Taylor	SJT	Cyfarwyddwr Pobl a Datblygu Sefydliadol	Iechyd a Gofal Digidol Cymru
Matt Temby	MT	Rheolwr Gyfarwyddwr Gofal wedi'i Gynllunio	Caerdydd a'r Fro
Laura Tolley	LT	Rheolwr Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru

Ymddiheuriadau	Teitl	Sefydliad
Fiona Jenkins	Cyfarwyddwr Gweithredol Therapïau	Caerdydd a'r Fro
Marian Wyn Jones	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Marilyn Bryan Jones	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru
Sara Moseley	Aelod Annibynnol	Caerdydd a'r Fro

Acronymau			
DHCW	Iechyd a Gofal Digidol Cymru	SHA	Awdurdod Iechyd Arbennig
CEO	Prif Swyddog Gweithredol	LINC	Rhwydwaith Gwybodaeth Labordy Cymru
Caerdydd a'r Fro	Bwrdd Iechyd Prifysgol Caerdydd a'r Fro	LIMS	System Rheoli Gwybodaeth Labordy

Rhif yr Eitem	Manylion yr Eitem	Canlyniad	Cam gweithredu
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MATERION RHAGARWEINIOL

1.1	<p>Croeso ac Ymddiheuriadau</p> <p>Croesawodd Cadeirydd DHCW bawb i Gyd-gyfarfod Bwrdd Eithriadol Preifat Iechyd a Gofal Digidol Cymru a Bwrdd Iechyd Prifysgol Caerdydd a'r Fro.</p> <p>Cadarnhaodd Cadeirydd DHCW fod y cyfarfod yn cael ei gynnal i gael diweddariad ar y Rhaglen LINC er mwyn helpu i lywio penderfyniadau Byrddau unigol. Roedd y cyfarfod yn cael ei gynnal yn breifat oherwydd sensitifrwydd masnachol.</p> <p>Cadarnhaodd Cadeirydd DHCW fod y dull o gynnal cyfarfod Bwrdd ar y cyd wedi'i gytuno ganddo ef, Charles Janczewski, Cadeirydd Caerdydd a'r Fro, Suzanne Rankin, Prif Swyddog Gweithredol Caerdydd a'r Fro a Helen Thomas, Prif Swyddog Gweithredol DHCW i sicrhau bod y ddau Fwrdd yn cael yr un diweddariad ac yn gallu clywed cwestiynau a godwyd gan bob aelod o'r Bwrdd. Yn ogystal, ar ddiwedd y sesiwn ar y cyd, byddai'r Byrddau priodol yn mynd i'w cyfarfodydd Bwrdd preifat eu hunain i wneud penderfyniad ffurfiol ar sut y dymunant symud ymlaen.</p>	Nodwyd	Dim i'w nodi
1.2	<p>Ymddiheuriadau am Absenoldeb</p> <p>Nodwyd ymddiheuriadau am absenoldeb gan:</p> <ul style="list-style-type: none"> Fiona Jenkins, Cyfarwyddwr Gweithredol Therapiau, Caerdydd a'r Fro Marian Wyn Jones, Aelod Annibynnol, DHCW Marilyn Bryan Jones, Aelod Annibynnol, DHCW Sara Moseley, Aelod Annibynnol, Caerdydd a'r Fro 	Nodwyd	Dim i'w nodi
1.3	<p>Datganiadau o Fuddiannau</p> <p>Nid oedd unrhyw ddatganiadau o fuddiannau.</p>	Nodwyd	Dim i'w nodi

PRIF AGENDA

RHAN 2 – I'W DRAFOD

2.1	Diweddariad Rhaglen LINC		
<p>Tolley, Laura 18/05/2023 15:38</p>	<p>Rhoddodd Helen Thomas, Prif Swyddog Gweithredol, DHCW (HT) drosolwg o'r Rhaglen LINC bresennol a'r heriau. Cadarnhaodd Suzanne Rankin, Prif Swyddog Gweithredol, Caerdydd a'r Fro (SR) fod Bwrdd Caerdydd a'r Fro wedi cael ei friffio a'i fod yn ymwybodol o'r statws presennol. Eglurodd SR fod angen gweithredol dybryd am system LIMS gadarn a dibynadwy i ddisodli'r hen system bresennol a oedd i fod i ddod i ben ym mis</p>	Nodwyd	

	<p>Mehefin 2025 ac ni allai’r Bwrdd Iechyd weithio heb system LIMS, felly roedd risg sylweddol yr oedd angen ei lliniaru.</p> <p>Rhoddodd Michelle Sell, Cyfarwyddwr Cynllunio a Pherfformiad a Phrif Swyddog Masnachol (MS) drosolwg cynhwysfawr o sefyllfa bresennol y Rhaglen LINC a'r opsiynau i'w hystyried.</p> <p>Nodwyd y berthynas waith gadarnhaol iawn rhwng BIP Caerdydd a'r Fro a DHCW.</p> <p>Mynegodd Byrddau DHCW a Caerdydd a'r Fro ddiolch diffuant i bawb fu'n ymwneud â'r gwaith hyd yma.</p> <p>Penderfynodd y Bwrdd:</p> <p>DRAFOD Diweddariad Rhaglen LINC.</p>		
RHAN 3 - MATERION I GLOI			
3.1	Daeth Cadeirydd DHCW â'r cyfarfod i ben	Nodwyd	

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DHCW SHA PRIVATE ABRIDGED Extraordinary Board Meeting – Unconfirmed minutes

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 20 April 2023 as a virtual meeting via MS Teams



10:00 – 10:30



20 April 2023

Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Ruth Glazzard	RG	Vice Chair of the Board	DHCW
Ifan Evans	IE	Executive Director of Strategy	DHCW
Andrew Fletcher	AF	Associate Board Member – Trade Union	DHCW
Rowan Gardner	RoG	Independent Member	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive / Executive Director of Finance	DHCW
Alistair Klaas Neill	AKN	Independent Member	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Board Secretary	DHCW
Sam Hall	SH	Director of Primary, Community and Mental Health Digital Services	DHCW
Alison Maguire	AM	Programme Director	DHCW
Michelle Sell	MS	Director of Planning and Performance / Chief Commercial Officer	DHCW

Sarah-Jane Taylor	SJT	Director of People & Organisational Development	DHCW
Laura Tolley	LT	Corporate Governance Manager (Secretariat)	DHCW

Apologies	Title	Organisation
Marian Wyn Jones	Independent Member	DHCW
Marilyn Bryan-Jones	Independent Member	DHCW

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	LINC	Laboratory Information Network Cymru
RISP	Radiology Information System Procurement	CAV	Cardiff & Vale University Health Board

Item No	Item Detail	Outcome	Action
PRELIMINARY MATTERS			
1.1	Welcome and Apologies <p>The Chair welcomed everyone to the Digital Health and Care Wales Extraordinary Private Board Meeting.</p> <p>The Chair confirmed the meeting was being held following a joint private Board meeting with Cardiff and Vale University Health Board to discuss the LINC Programme and consider decisions around a potential contract termination.</p> <p>The Chair confirmed meeting the was being held in private due to commercial sensitivities. However, any decisions made would be reported to the next public Board meeting in May 2025.</p>	Noted	None to note
1.2	Apologies for Absence <p>Apologies for absence were noted from:</p> <ul style="list-style-type: none"> • Marilyn Bryan-Jones, Independent Member • Marian Wyn Jones, Independent Member 	Noted	None to note
1.3	Declarations of Interest <p>There were no declarations of interest.</p>	Noted	None to note

MAIN AGENDA

PART 2 – FOR DISCUSSION

2.1	LINC Programme Update		
	<p>The Chair asked if all Board members had received adequate information and had sufficient time to review the information to allow for a decision to be made. All Board members confirmed they had received adequate information in sufficient time to allow for a decision to be made.</p> <p>Helen Thomas, Chief Executive Officer (HT) confirmed this was highly unusual position for the organisation to be in and expressed sincere thanks to Michelle Sell, Alison Maguire and the wider team for the collaborative work undertaken to date in a very challenging environment. HT added that the current position had received unanimous All-Wales support from operational teams to board level which was a testament to how the complex issues had been managed in a collaborative and transparent way since the Programme had transferred to DHCW, from the NHS Wales Collaborative on 1 January 2023.</p> <p>Michelle Sell, Director of Planning and Performance / Chief Commercial Officer advised due to the significant risks an urgent decision needed to be made.</p> <p>The Chair advised although Marian Wyn Jones, Independent Member was unable to attend the meeting, she had confirmed in writing she was in support of the recommendation outlined in the report.</p> <p>The Board resolved to:</p> <p>APPROVE the decision to terminate the contract with Citadel Health and to invoke the contingency plan.</p>	Noted	None to note

PART 3 - CLOSING MATTERS

3.1	The DHCW Chair closed the meeting	Noted	
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Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES

FORWARD WORKPLAN REPORT

Agenda Item	2.6
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Laura Tolley, Head of Corporate Governance
Presented By	Chris Darling, Board Secretary

Purpose of the Report	For Noting
Recommendation	The Board is being asked to: NOTE the contents of the report.

Tolley, Laura
18/05/2023 15:38:47

Tŷ GLAN-YR-AFON 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD

Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Development of the new Digital Organisation
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: N/A	

[Workforce EQIA page](#)

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there is no specific research and innovation implications relating to the activity outlined within this report

ACRONYMS			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
RISP	Radiology Informatics System Procurement		

2 SITUATION/BACKGROUND

- 2.1 The Board have a [Cycle of Board Business](#) that is reviewed on an annual basis. Additionally, there is a forward workplan which is used to identify any additional timely items for inclusion to ensure the Board are reviewing and receiving all relevant matters in a timely fashion.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The following items have been added to the Forward Workplan and are due to be presented at the meeting on 25 May 2023:

- Strategic Workforce Planning Update
- Transfer of Eyecare Digitisation Programme
- IMTP Accountable Officer Letter – Annual Financial Plan 2023/24
- Stakeholder Engagement Plan Update
- RISP Programme Full Business Case*
- Cyber Implementation of the 3-year plan*

**Items taken in private session*

- 3.2 In addition, the following item has been added to the Forward Workplan and is scheduled to be presented to the July 2023 meeting:

- Foundational Economy

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 Several activities are underway to address the requirement to horizon scan both internally and across the system to inform the forward workplan for the Board.

4.2 The updated Workplan can be found as 2.6i Appendix A.

5 RECOMMENDATION

5.1 The Board is being asked to **NOTE** the contents of the report.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
SHA Board	March 2023	APPROVED - Cycle of Business 2023-24
Chris Darling, Board Secretary	May 2023	APPROVED

Tolley, Laura
18/05/2023 15:38:47

SHA Board Forward Workplan 2023-24



Standing Items	Lead	Type	Detail							
Welcome and Introductions	Chair	Preliminary Matters								
Declarations of Interest	Chair	Preliminary Matters								
Minutes	Board Secretary	Consent								
Action log	Board Secretary	Consent								
Forward Work Plan	Board Secretary	Consent								
Shared Listening and Learning	Executive Medical Director	Main								
Chair & Vice Chair Report	Board Secretary	Main								
Chief Executive Report	Chief Executive Officer	Main								
Integrated Organisational Performance Report including Annual Plan Progress Updates	Executive Director of Strategy	Main								
Committee & Advisory Group Highlight Reports	Board Secretary	Main								
Corporate Risk Register Report	Board Secretary	Main								
Strategic Procurement Report	Executive Director of Strategy	Main								
Finance Report	Executive Director of Finance									
					*Extraordinary					
Additional Items	Executive Lead	Type	Route in & detail	25-May-23	13-Jul-23	27-Jul-23	28-Sep-23	30-Nov-23	26-Jan-24	28-Mar-24
SHA Board Cycle of Business	Board Secretary	Consent	Cycle of Business							✓
Annual Review of Standing Orders	Board Secretary	Main	Cycle of Business							✓
Standing Orders Approval	Board Secretary	Main	Cycle of Business							✓
Board & Committee Self-Effectiveness	Board Secretary	Consent	Cycle of Business							✓
Committee & Advisory Groups Annual Reports	Board Secretary	Consent	Cycle of Business							✓
End of Year Reporting Approach	Board Secretary	Consent	Cycle of Business						✓	
Annual Report	Board Secretary	Main	Cycle of Business			✓				
Accountability Report	Board Secretary	Main	Cycle of Business		✓	✓				
Board Champion Annual Report	Board Secretary	Consent	Cycle of Business						✓	
Senior Information Risk Owner Annual Report	Executive Director of Operations	Main	Cycle of Business			✓				
Shared Listening & Learning Annual Review	Executive Medical Director	Main	Cycle of Business			✓				
Welsh Government Decarbonisation Return	Executive Director of Finance	Consent	Cycle of Business			✓				
Corporate Risk Trending Analysis	Board Secretary	Main	Cycle of Business					✓		
Annual Review of Risk Appetite and Risk Tolerance	Board Secretary	Main	Cycle of Business	✓						
Board Assurance Framework Report	Board Secretary	Main	Cycle of Business	✓				✓		
Adoption of Corporate Policies	Board Secretary	Consent	Cycle of Business. As Required							
Cyber Implementation of the 3-Year Plan	Executive Director of Operations	Main	Cycle of Business - PRIVATE	✓				✓		
People and Organisational Development Strategy Action Plan Update	Director of People & Organisational Development	Main	Cycle of Business				✓			
Gender Pay Gap Annual Report	Director of People & Organisational Development	Consent	Cycle of Business						✓	✓
Integrated Medium Term Plan – Approval	Executive Director of Strategy	Main	Cycle of Business						✓	✓
Half Year Performance Against Plan	Executive Director of Strategy	Main	Cycle of Business					✓		
Emergency Planning Annual Report	Executive Director of Strategy	Consent	Cycle of Business							✓
Performance Management Framework	Executive Director of Strategy	Main	Cycle of Business							✓
Stakeholder Engagement Plan Update	Executive Director of Strategy	Main	Cycle of Business	✓						
Communications Strategy	Board Secretary	Main	Cycle of Business				✓			
Information Governance Strategy	Executive Medical Director	Main	Cycle of Business				✓			
DHCW Long Term Strategy	Executive Director of Strategy	Main	Cycle of Business					✓		
Product Strategy	Executive Director of Operations	Main	Cycle of Business			✓				
Primary Care Strategy	Director of Primary, Community and Mental Health Digital Services	Main	Cycle of Business				✓			
Annual Statutory Accounts	Executive Director of Finance	Main	Cycle of Business		✓	✓				
Strategic Workforce Planning Update	Director of People & Organisational Development	Main	Previous Board Action	✓						
RISP Programme FBC	Executive Director of Strategy	Main	Commercial Services - PRIVATE	✓						
Foundational Economy	Board Secretary	Consent	Board Secretary			✓				
Eye Care Digitisation Programme Transfer	Director of Primary, Community and Mental Health Digital Services	Main	Board Secretary	✓						
IMTP Accountable Officer Letter – Annual Financial Plan 2023/24	Executive Director of Finance	Main	Board Secretary	✓						

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES

SHARED LISTENING AND LEARNING

PRESENTATION – MEDICAL EXAMINER SERVICE

Agenda Item	3.1
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Dr Jason Shannon Lead Medical Examiner for Wales NHS Wales Shared Services Partnership
Presented By	Dr Jason Shannon Lead Medical Examiner for Wales NHS Wales Shared Services Partnership

Purpose of the Report	For Discussion/Review
Recommendation	
The Board is being asked to: DISCUSS the Shared Listening and Learning Presentation	

Tolley, Laura
18/05/2023 15:38:47

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Expanding the content, availability and functionality of the Digital Health and Care Record
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CORPORATE RISK (ref if appropriate)	N/A
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 20000
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Timely Care
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: N/A	

IMPACT ASSESSMENT	
<u>QUALITY AND SAFETY</u> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<u>LEGAL</u> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<u>FINANCIAL</u> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<u>WORKFORCE</u> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<u>SOCIO ECONOMIC</u> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<u>RESEARCH AND INNOVATION</u> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
MES	Medical Examiner Service	EHR	Electronic Health Record
PII	Personal Identifiable Information	NWSSP	NHS Wales Shared Services Partnership

2 SITUATION/BACKGROUND

- 2.1 The Medical Examiner Service is hosted by NWSSP and provides an independent scrutiny of all deaths that are not investigated by the coroner. Scrutiny is undertaken by a Medical Examiner, who is an experienced doctor with additional training in death certification and the review of documented circumstances of death. They ensure that an accurate cause of death is recorded, identify any concerns surrounding the death itself which can then be further investigated if required, and take the views of the bereaved into consideration.
- 2.2 Although the legal responsibility for providing Medical Examiners rests with individual NHS bodies, it is important to the credibility of the Service that they are able to provide an independent scrutiny of death, whether those deaths occur in an acute hospital setting or outside.
- 2.3 Further information on the service is available [Medical Examiner Service - NHS Wales Shared Services Partnership](#)

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The presentation will include an outline of how the service was set up, the benefits it delivers, and the digital dependencies supported by DHCW.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 Ongoing operational support and completeness of the content of the Electronic Health Record.

5 RECOMMENDATION

- 5.1 The Board is being asked to **DISCUSS** the Shared Listening and Learning Presentation

6. APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Rhidian Hurle	17/5/23	Approved

The Welsh Medical Examiner Service

DHCW Board Presentation:

15th May 2023

Prex Laura
18/05/2023 15:38:47

Dr Jason Shannon

Lead Medical Examiner for Wales



**GIG
CYMRU
NHS
WALES**

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales



Medical Examiner service
provides a much needed
voice for the bereaved at the
most difficult time in their
lives when a loved-one dies

Tolley, Laura
18/05/2023 15:38:47



Sect 22. (i). In the case of the death of any person who has been attended during his last illness by a registered medical practitioner, that practitioner shall sign a certificate in the prescribed form **stating to the best of his knowledge and belief** the cause of death (MCCD)

Department of Health & Social Care

Introduction of Medical Examiners and Reforms to Death Certification in England and Wales:
Government response to consultation

Proposal for **non-statutory roll out** of the medical examiner system in England and Wales
Health Boards / Welsh Govt choose **NWSSP** to host a whole of Wales service

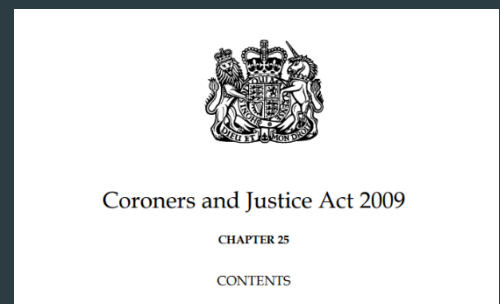
2000



2003

Dame Janet Smith recommends **oversight of death certification by medical examiners**

2009 (2012)



Subsections 19-21. Statutory provision for medical examiners is set out but lays dormant

2013



275. It is of considerable importance that **independent** medical examiners are **independent** of the organisation whose patients' deaths are being scrutinised.

2016-19

Every death deserves to be looked at

- To provide **reassurance** to the families of the deceased, the care providers and the Boards of NHS organisations that any particular death is not a cause for concern in terms of quality of care provided.
- To identify areas for **improvement** in health care in the hospital environment and inform the appropriate individuals who can deliver the necessary changes.
- Wales National Framework for Mortality Review



Wales response to the Francis Report

The Chief Medical Officer has mandated all acute hospitals to set up a consistent, standardised system for reviewing all in-hospital deaths to detect potential harm.

Our aim is to have a consistent process, with reporting and learning on findings shared in a transparent way.

legislation.gov.uk

Home Browse Legislation New Legislation Coronavirus Legislation

Title: Year: Number:

The Notification of Deaths Regulations 2019

UK Statutory Instruments ► 2019 No. 1112 ► Whole Instrument

DISCOVER PATHOLOGY NEWS NHS NATIONAL MEDICAL EXAMINER ANNOUNCED TO SUPPORT BEREAVED FAMILIES AND IMPROVE PATIENT SAFETY

5 MARCH 2019

Dr Alan Fletcher, a consultant in Emergency Medicine, has been appointed as the National Medical Examiner for the NHS.

2019

Legal requirements for **doctors to notify a coroner** are introduced.
Funding of roll out using Cremation Form 5 fees
Lead ME and MEO for Wales appointed

Health Update

Statement made on 27 April 2023

Statement UIN HCWS750

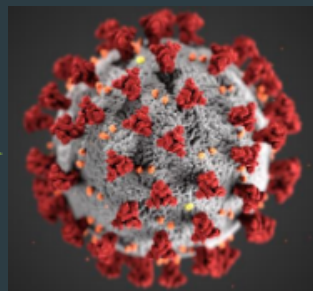
Statement made by **Maria Collins**
Parliamentary Under Secretary of State (Minister for Women) and
Parliamentary Under Secretary of State (Minister for Mental Health and
Women's Health Strategy)
Conservative

Statement from
Department of Health and
Social Care

Statement

Relevant provisions of the Coroners and Justice Act 2009 & Health and Care Act 2022 will be commenced by **autumn 2023** with full statutory system (including secondary legislation April 2024)

2020



Disruption to non-statutory roll out
Delayed appointment of medical examiners and officers
NWSSP develops and hosts framework for death certification during the Covid pandemic

legislation.gov.uk

Home Browse Legislation New Legislation Coronavirus Legislation

Title: Year: Number:

Coronavirus Act 2020

UK Public General Acts ► 2020 c. 7 ► Whole Act without Schedules

EASEMENTS:

Cremation Form 5 ceases
Any doctor can complete MCCD (28 days)
Electronic transmission of MCCD to Reg Office
Remote registration by the Informant
Medical Examiner Services roll-out continues after first wave

March 2022

Easements ended:
Cremation Form 5 NOT re-introduced
Attending doctor (last illness) must complete MCCD (seen within **28 days of, or after death**)
Electronic transmission of MCCD to Reg Office
In person registration by the Informant

UK Parliament

Parliamentary Bills

UK Parliament > Business > Legislation > Parliamentary Bills > Health

Health and Care Act 2022

Government Bill



Region	Approx Total Deaths scrutinised per Year
North Wales (BCUHB)	7,000
Mid & West Wales (HCUHB/SBUHB)	7,500
South Wales Central (PTHB/CTMUHB)	6,000
South Wales East (C&VUHB/ABUHB)	9,000
Total	29,500

- Medical Examiners work on an all Wales basis
- MEOs continue to be locally based at Hub sites



- Capture
- Evaluate
- Strategy
- Implement
- Assess

COVID-19 Resources

Add a new mortality review
Copy
My reports
Design a report
New search
Saved queries
Help

M.E. System

Statutes	Pinned queries
<ul style="list-style-type: none"> Awaiting MEO Review: 38 Records 0 Overdue Awaiting ME Scrutiny: 23 Records 0 Overdue Awaiting discussion with QAP: 65 Records 0 Overdue Awaiting Coroner outcome: 26 Records 7 Overdue Awaiting discussion with bereaved: 28 Records 4 Overdue Closed: 12123 Records 	<ul style="list-style-type: none"> All Cases: 12592 Records My Closed Cases - ME: 2 Records My open cases - ME: 0 Records My open cases - MEO: 0 Records TEST - All open cases - Team: Mid Wales: 37 Records

Partneriaeth Cydwasaethau Shared Services Partnership

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Governance e-Manual All Wales Laundry Service Review Once for Wales Concerns Management System Planning Programme for Learning PROM

Home > Our Services > Medical Examiner Service

Medical Examiner Service

Medical Examiner Service

- About Medical Examiner Service
- For Professionals
- Contact Medical Examiner Service

The Welsh Medical Examiner Service

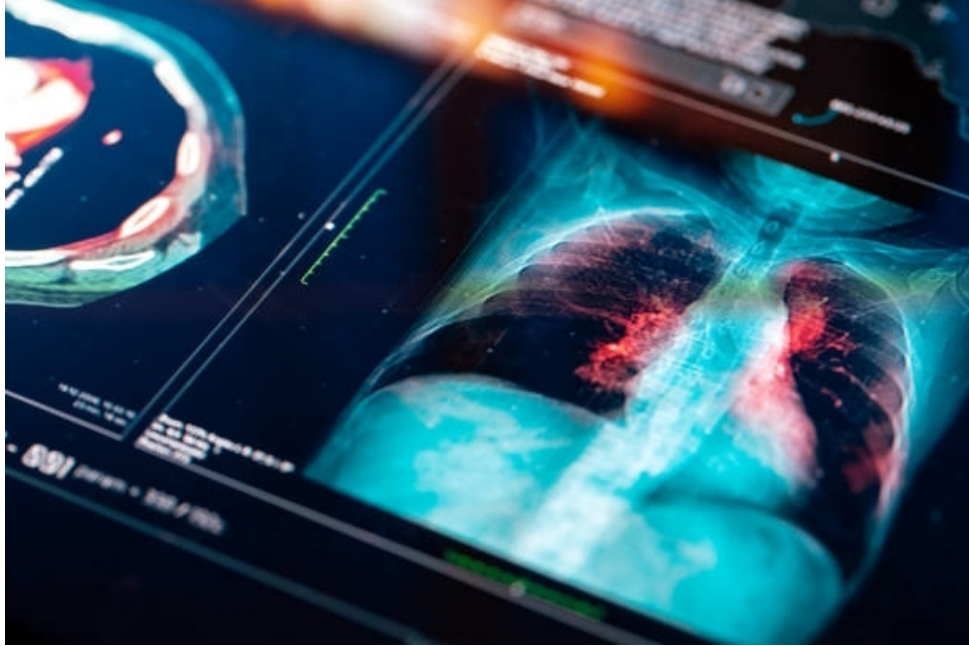
- ▶ Single digital service across Wales
- ▶ Separately contracted medical examiner and officer staff
- ▶ Maximum independence
- ▶ Full time Medical Examiner Officers (MEO's)
- ▶ Wide range of backgrounds for ME's and MEO's
- ▶ Most acute care setting deaths already covered
- ▶ Some community deaths now covered

The Medical Examiner Service - Three functions, questions and methods

1. Accurate and reliable death certification (compliance with the 1953 Act)
2. Appropriate referral to a coroner (compliance with Notification Regs 2019)
3. Concerns and problems in care for further consideration by relevant care providers (integration with mortality review, QI processes)
4. What did the person die from?
5. Does it meet the requirements to notify a coroner?
6. Are there any concerns about the care provided (records, attending doctor, bereaved)

1. Review relevant clinical records (scanned, WCP, Primary Care)
2. Interaction with attending (certifying) doctor
3. Interaction with the bereaved

- ▶ It is not
 - ▶ An inspectorate
 - ▶ An investigation service
 - ▶ A counselling service for the bereaved
 - ▶ An advice service for how to complete and MCCD / Cremation form
- ▶ Scrutinise, detect and pass on



CHALLENGES

Secondary Care Records Access (scanned, WCP etc)

Primary Care (Data Sharing Agreement, Access Agreement)

Team working across Wales in the remote environment

Access to certifying doctors

Access to bereaved families

Tolley, Laura
18/05/2023 15:38:47



What have we learned?

- [Death Certification](#)
- [Coroner Referral](#)
- [Care Provision](#)
- [Our Service](#)

Tolley, Laura
18/05/2023 15:38:47

Diolch yn fawr /
Thank you



DIGITAL HEALTH AND CARE WALES CHAIR & VICE CHAIR REPORT

Agenda Item	4.1
-------------	-----

Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Chris Darling, Board Secretary
Presented By	Simon Jones, Chair and Ruth Glazzard, Vice Chair

Purpose of the Report	For Discussion/Review
Recommendation	The Board is being asked to: RECEIVE and DISCUSS the report.

Tolley, Laura
18/05/2023 15:38:47

Tŷ GLAN-YR-AFON 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD

Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1. IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: N/A	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
RESEARCH AND INNOVATION	No, there are no specific research and innovation implications

IMPLICATION/IMPACT	relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
LINC	Laboratory Information Network Cymru	RISP	Radiology Informatics System Procurement
HEIW	Health Education and Improvement Wales	IMTP	Integrated Medium Term Plan
DG&S	Digital Governance and Safety	BCU	Betsi Cadwaladr University Health Board
IM	Independent Member	FBC	Full Business Case
CDPS	Centre for Digital Public Services	SRO	Senior Responsible Owner

2 SITUATION/BACKGROUND

At each Public Board meeting, the Chair and Vice Chair present a report on key issues to be brought to the attention of the Board. This report provides an update on key areas and activities since the last Public Board meeting.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Digital Programme Governance Independent Review

I updated in my March report to the Board that Mr Steve Combe, Independent Governance Advisor, had issued a final draft report to DHCW and Welsh Government on arrangements relating to major digital programmes hosted by DHCW and how accountability and reporting lines relate to DHCW and Welsh Government and other stakeholders. I am pleased to update that since our last Board meeting the report was finalised by Mr Combe and has been formally issued to DHCW and Welsh Government. I have since shared a copy of the report with the Minister for Health and Social Care as well as the SROs of the major DHCW hosted programmes. I have recently received a letter back from the Minister asking for a meeting to discuss the findings of the report which I am in the process of arranging. I will keep the Board updated on these discussions including governance implications for DHCW and the Board.

3.2 Joint DHCW and Cardiff and Vale UHB Board meeting 20 April 2023

I chaired a joint Board Briefing between DHCW and Cardiff and Vale UHB on the 20 April involving all Board members from both organisations. This joint Board approach was agreed between myself, Charles Janczewski, Cardiff and Vale UHB Chair, Helen Thomas and Suzanne

Rankin, Cardiff and Vale UHB Chief Executive to ensure both Boards could receive the same update as well as questions and answers raised from all Board members on the LINC Programme to help inform individual Board discussions.

3.3 DHCW Board Meeting – LINC Programme 20 April 2023

Following the Joint Board Briefing with Cardiff and Vale UHB, the DHCW Board met in private session to consider the LINC Programme and how the Board wish to proceed. As the minutes included in the papers for this Public Board meeting indicate the Board approved the decision to terminate the contract with Citadel Health and to progress contingency options.

3.4 Board Development Day 27 April 2023

Since the last Public Board meeting, we have held one Board Development Day, this took place on the 27 April. The session included a review of the Independent Report into Programme Governance arrangements for DHCW hosted programmes, followed by an engaging session on our approach to stakeholder engagement, we also received a briefing on the RISP FBC. Finally, the day concluded with the afternoon session facilitated by Deloitte on Good Governance as part of the ongoing Board Development programme.

3.5 Board Briefing 4 May and 11 May

In addition to the Board Development session two Board Briefings have taken place since the last Public Board meeting. The first of these took place on the 4 May when we were joined by the Associate Director of Finance, Head of Financial Services & Reporting and led by the Executive Director of Finance who provided the Board with a full run through of the draft accounts for 2022/23.

The second Board Briefing session took place on the 11 May and was a cyber security training session for Board members, which was an action taken forward from the Digital Governance and Safety Committee self-effectiveness survey feedback. The session was very well received, and I am grateful to the Cyber Security team for putting on such an informative session for all Board members.

3.6 Cyber Security Awareness Raising Webinar

Following discussion with the DG&S Committee Chair I have been working with DHCW colleagues and Welsh Government Policy Leads to plan an NHS Wales wide awareness raising webinar on cyber security. This session is planned for the 3 July and is aimed at all NHS Wales Board members and will provide an opportunity to learn from recent cyber-attacks and understand what Board members need to consider based on the ever increasing global and national cyber threat.

3.7 Meeting with Audit Wales 6 April 2023

I had my routine catch up meeting with the Engagement Director for Audit Wales, and was pleased to hear Audit Wales plan to include digital as a deep dive area to be examined as part of the Structured Assessment process for 2023. This will help ensure a system wide assessment digital in NHS Wales, and will complement the Digital Maturity work being taken forward by the Directors of Digital Peer Group, and further help DHCW and the wider system consider what a sustainable funding model for digital in NHS Wales looks like.

3.8 All Wales IM Digital Network 18 April 2023

I was delighted to attend and observe the IM Digital Network meeting held on the 18 April 2023; this was specifically to consider the agenda item on the evaluation of the network after 12 months of operating. I will be taking a report to the All-Wales Chair Peer Group on the 6 June 2023 to consider the outcome of the evaluation which was very positive in terms of impact to date and plans for the network moving forward.

3.9 Independent Member Objectives Review and Chief Executive Objectives

I have recently concluded the process of reviewing Independent Member objectives for 2022/23, as well as set objectives for 2023/24. I am grateful for the thinking, reflections and feedback from Independent Members and their engagement in the process.

In addition to this I have met with Helen Thomas to undertake her Chief Executive objectives for 2023/24 and reflect and assess her performance against her 2022/23 objectives.

3.10 Chair Ministerial End of Year Review 2022/23

Since the last Public Board meeting, I have received a letter from the Minister for Health and Social Care asking me to complete my 2022/23 end of year objectives review and assessment. I was pleased to submit my assessment back to the Minister on the 4 May and look forward to discussing my assessment with the Minister at our review meeting planned for July 2023.

3.11 Meeting with Llais Chief Executive Officer 9 May 2023

Following the formal establishment of Llais (Citizens Voice Body) I joined Helen Thomas for a stakeholder engagement introductory meeting with Alyson Thomas the Llais Chief Executive. We discussed how we can work collaboratively and will be planning Board to Board engagement in the near future.

3.12 Joint Chair and Board Secretary Peer Group Meeting with Audit Wales 15 May 2023

On the 15 May Vice Chair, Ruth Glazzard joined other Health Board Chairs and Board Secretaries to consider learning and feedback from Audit Wales following the publication of the Audit Wales Report into BCU Health Board Review of Board Effectiveness.

3.13 Chair Peer Group 25 April 2023

I attended the All-Wales Chair Peer Group meeting on the 25 April, a number of topical discussions took place including consideration of the financial position of NHS Wales and the challenges facing the system. Helen Thomas also joined the session to provide an update on the LINC Programme.

3.14 Bevan Foundation Publication

In my last update report, I advised that DHCW had partnered with the Bevan Foundation to bring together thinking, current work and ambition in a special edition of their quarterly magazine, which reaches an audience across government and the wider civic society in Wales. The publication also showcases some of the work DHCW are doing to transform health and care services in Wales. I am pleased to say the special edition, [Digital Healthcare Transformation in Wales](#), has now been finalised and published.

Tolley, Laura
18/05/2023 15:38:47

3.15 Vice Chair Peer Group

DSPP Programme Staff, Matt Cornish, Co-Programme Director and Joanna Dundon, National Clinical Informatics Lead – Public attended the All-Wales Vice Chair Peer Group on the 10 May and provided a very helpful update on the NHS Wales App, which is now in public beta. A helpful discussion took place around the functionality of the App and how Vice Chairs and NHS bodies could support the development of the App particularly in relation to General Practice take up.

3.16 Vice Chair Meeting with CDPS Chair

The DHCW Vice Chair recently met with the CDPS Chair. This introductory discussion covered opportunities for joint working between DHCW and CDPS as well as drawing on Ruth's experience being a CDPS interim Board member.

3.17 Welsh NHS Confederation Members session with the Future Generations Commissioner

The DHCW Vice Chair attended the recent meeting arranged for NHS leaders to meet with the Future Generations Commissioner, Derek Walker, who is new into post. The Commissioner discussed his key priorities and future work programme. This session was particularly useful as DHCW prepare to formally fall within the legislation of the Wellbeing of Future Generations Act from the 1 April 2024.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The outcome of the Independent Programme Governance Review has implications and considerations for the DHCW Board.

5 RECOMMENDATION

- 5.1 SHA Board is being asked to **RECEIVE** and **DISCUSS** the report.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Chair	May 2023	Approved

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES CHIEF EXECUTIVE OFFICER REPORT

Agenda Item	4.2
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Helen Thomas, Chief Executive Officer
Prepared By	Chris Darling, Board Secretary
Presented By	Helen Thomas, Chief Executive Officer

Purpose of the Report	For Discussion/Review
Recommendation	The Board is being asked to: RECEIVE and DISCUSS the report.

Tolley, Laura
18/05/2023 15:38:47

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1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 27001
If more than one standard applies, please list below: BS 10008:2014	

HEALTH CARE STANDARD	Governance, leadership and accountability
If more than one standard applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: N/A	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.

RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	DSPP	Digital Services for the Public and Patients
DPIF	Digital Priorities Investment Fund	RISP	Radiology Informatics System Procurement
TTP	Test Trace Protect	EPS	Electronic Prescribing Service
SLA	Service Level Agreement	NECSU	

2 SITUATION/BACKGROUND

- 2.1 This Chief Executive Officer report prepared and presented for the Board has been informed by updates provided by members of the Executive team and highlights a number of areas of focus for the Chief Executive.
- 2.2 The purpose of this report is to keep the Board up to date with key issues affecting the organisation, Digital Health and Care Wales (DHCW), since the last meeting.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Sad Passing of a Senior Solution Architect

It is with deep sadness I advise of the sudden death of Marcin Haberski, Senior Solution Architect, on 18 April 2023. Marcin was a hugely valued member of our Architecture team. Marcin was passionate about the work DHCW do to improve health & care in Wales, most recently supporting the TTP programme and Homes for Ukraine. Marcin will be greatly missed, and I would like to offer my deepest condolences to Marcin's family, friends, and colleagues at this sad time.

3.2 Welsh Government Digital Health and Care Strategy

The DHCW Executive Team were grateful to have the opportunity to review and feedback into Welsh Government's refreshed draft Digital Health and Care Strategy in April and we welcome the opportunity to feed into the workplans resulting from the implementation of this strategy in due course, once the strategy has been finalised.

3.3 Service Level Agreement for the provision of National Health and Justice Services to DHCW

The DHCW Management Board recently approved a new 2-year agreement with the NHS North National Health and Justice Information Services (HJIS) Service Desk second line support service to the DHCW Primary Care Service Desk. The second line support service has been used to help DHCW manage TPP SystemOne calls across the Wales Health and Justice Residential Estate at the following six (6) sites:

- HMP Cardiff
- HMP Swansea
- HMP Usk
- HMP Prescoed
- HMP Berwyn
- HMP/YOI Parc

The SLA is underpinned by the overarching TPP SystemOne agreement. NECSU have been designated by The Phoenix Partnership to provide the required second line support service.

3.4 Accountable Office Letter

The Board will be aware I wrote an Accountable Officer Letter to the NHS Wales Chief Executive / Director General for Health and Social Services ahead of submitting the DHCW IMTP 2023/26 to Welsh Government. A response was received to this letter and subsequently DHCW Executives have met with Welsh Government Policy leads to discuss the requirement to submit a balanced one year annual plan. More information on this can be seen in the update on Financial Update – Annual Plan 2023/24 agenda item.

3.5 Executive Away Days 18 and 19 April 2023

I was pleased to be joined my members of the executive team for two away days on the 18 and 19 April. This is the first away days held since the full executive team have been in post and it was great to spend time together exploring some key areas for DHCW.

We made the most of our time together, having excellent discussions and agreeing a number of actions in relation to a number of topics including: executive team development, learning from major incidents, stakeholder engagement, governance arrangements, talent management, strategy development and organisational structure.

3.6 LINC Programme Update

I have spent a lot of time over the past few months working closely with DHCW colleagues, in particular the DHCW Chief Commercial Officer and Diagnostics Programme Director, and wider NHS Partners to ensure partners across NHS Wales have been kept up to date with the latest position with regard to the LINC Programme.

3.7 Digital Cellular Pathology

Feedback was received on the 4 May that the Welsh Government Digital Scrutiny Panel supported the Digital Cellular Pathology proposal which has been led by the NHS Wales Collaborative (now part of the NHS Executive). The proposal will now go to the Ministerial for approval of funding for the programme. Discussions are ongoing to consider and agree where this programme is managed from going forward, to include DHCW. I will keep Board members updated on these discussions and any implications for DHCW.

3.8 Directors of Digital Peer Group Meeting (4 April 2023 and 2 May 2023)

There have been two Directors of Digital meetings since the last Board meeting. At the April meeting we were joined by Matt Cornish, DSPP Programme Director who shared an update on progress with the NHS Wales App. We also discussed Cyber Resilience across NHS Wales and Finance, with an update from Welsh Government on the DPIF review. In May Directors of Digital were provided with information on the RISP Full Business Case, Eye Care Digitisation Programme, Healthy Days at Home Wales, the All-Wales Infrastructure Programme priorities, and TEC Cymru shared an update on Virtual Wards.

3.9 Chief Executives Management Team Meeting

The NHS Wales Chief Executives Management Team meeting was held on the 18 April 2023 where we discussed Social Care, the financial position across NHS Wales in particular a framework for financial stability, as well as the NHS Wales Executive which formally came into effect on the 1 April 2023 and the governance arrangements associated with the NHS Wales Executive.

3.10 NHS Wales Leadership Board

The NHS Wales Leadership Board met on the 18 April 2023 where we received updates on financial and operational performance, an update on the Six Goals Programme, a focus on Welsh Language, in addition to hearing about the ongoing work within the Maternity and Neonatal Safety Support Programme.

3.11 Staff Conference 2023

We held our second DHCW staff conference on the 25 and 26 April, which was followed by our staff awards ceremony on the evening of 27 April 2023. The conference was held over two days, with over 750 DHCW staff tuning in on both days which is fantastic engagement. The first day included an opening keynote from the Chief Executive for NHS Wales and Director General for the Health and Social Services, Judith Paget. Over the course of the two days several presentations, discussions and workshops took place involving DHCW staff as well as colleagues from external and partner organisations. I'd like to thank all those who presented, tuned in, and engaged with the sessions with particular thanks to the Communications team and other staff involved in delivering the staff conference.

3.12 DHCW Staff Awards 2023

The DHCW Staff Awards ceremony took place on the evening of the 27 April. The DHCW Staff Recognition Awards is to ensure we all feel valued for the work we do and recognises the contributions staff make through their hard work, dedication, and achievements. It was fantastic to know over 170 nominations for awards were made in the run up to ceremony and I was delighted to spend time with all those who attended the evening, and a particular well done to all those nominated and to the award winners.

3.13 Meeting with John Quinn, Interim Chief Information Officer NHS England

On 2 May 2023 I had my regular catch up with John Quinn, Interim Chief Information Officer NHS England where we discussed how we could support and learn from each other and the specific support we need for the EPS and DSPP Programme.

3.14 Welsh Ambulance NHS Trust Strategic Engagement Session

The DHCW Executive Team held a Strategic Session with Welsh Ambulance Services NHS Trust (WAST) Executive Team on 3 May 2023. The session was an excellent example of the partnership working taking place across both organisations. It was great to hear about the Connected Care Cymru Programme WAST are taking forward and the role DHCW can play in supporting this work, which aims to achieve care closer to home at scale. We are looking forward to continuing to work closely together with our NHS Partners over the coming months.

3.15 Chief Executives Time Out

It was great to have an in-person away day with the Chief Executives on the 15 May 2023, we collectively discussed learning and reflections, challenges and opportunities particularly in the current financial context.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The future of the Digital Cellular Pathology proposal will be discussed further before any decision is made on where this sits within NHS Wales.

5 RECOMMENDATION

- 5.1 The Board are being asked to **RECEIVE** and **DISCUSS** the report.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Helen Thomas, Chief Executive Officer	May 2023	Approved

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES STRATEGIC PROCUREMENT REPORT

Agenda Item	5.1
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Matthew Perrott, Deputy Head of Commercial Services
Presented By	Michelle Sell, Director of Planning & Performance / Chief Commercial Officer

Purpose of the Report	For Approval
Recommendation	The Board is being asked to: APPROVE the Contract Awards as detailed in Appendix 1.

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1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 9001
If more than one standard applies, please list below:	

HEALTH CARE STANDARD	Safe Care
If more than one standard applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Not applicable.	

[Workforce EQIA page](#)

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below To the extent set out in the Terms and Conditions of each contract included in this report
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below To the extent as set out in the payment profile attributable to each agreement. Expenditure against the agreement will be managed in accordance with the contract management process.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there is no specific research and innovation implications relating to the activity outlined within this report

Acronyms		GIG CYMRU NHS WALES Iechyd a Gofal Digidol Cymru Digital Health and Care Wales
CRM	Customer Relationship Management system	
DHCW	Digital Health and Care Wales	
DQS	Data Quality System	
ESB	Enterprise Service Bus	
GMS	General Medical Services	
GP	General Medical Practitioner	
MEAT	Most Economically Advantageous Tender	
NPS	National Procurement Service, part of Welsh Government	
PCR2015	Public Contract Regulations 2015	
PHW	Public Health Wales NHS Trust	
SFI	Standing Financial Instructions	
SHA	Special Health Authority	
SIT	System Integration Tool	
SLA	Service Level Agreement	
SO	Standing Orders	
TTP	Test, Trace and Protect	
TPP	The Phoenix Partnership (a registered company in the UK)	
UAT	User Acceptance Testing	
VAT	Value Added Tax	
WG	Welsh Government	

2. SITUATION/BACKGROUND

- 2.1 The Commercial Services Team, within the Engagement and Digital Transformation Services Directorate, in Digital Health and Care Wales (“DHCW”) manage a range of contracts supporting both National services and the internal requirements of the organisation itself. The procurement of these contracts is also led by the Team, which includes several, specialist, procurement staff from the NHS Wales Shared Services Procurement Service.
- 2.2 In accordance with the scheme of delegation in DHCW’s Standing Financial Instructions, Contracts to be awarded with a total contract value which exceeds £750,000 (excl. VAT) will be presented for the Board’s approval. In addition, the Board will also be required to approve any contracts which are to be extended either outside their initial term and/or in excess of the executed contract value.

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3. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Appendix 1 sets out four (4) Contract Award Approvals for the consideration of the Board.

3.2 An overview of the contractual activity requiring approval is provided below:

- (i) Framework Agreement to secure specialist External Workforce Resources, to be utilised by DHCW only;
- (ii) Agreement for the provision of a System Integration Tool ('Fiorano') Enterprise Licence and associated support;
- (iii) Agreement for the provision of a Primary Care Data Quality System ("DQS") for data quality and reporting requirements for national and local initiatives;
- (iv) Licencing Agreement for the purchase and supply of a Microsoft Dynamics 365 Integrated Telephony Provision to be used within the Test, Trace and Protect Customer Relationship Management system("CRM").

(i) P812 External Workforce Resources Framework Agreement

Contractors: Lot 1 - Trustmarque Solutions & TPX Impact Ltd

Lot 2 - Kainos and TPX Impact Ltd

Lot 3 - Trustmarque Solutions & TPX Impact Ltd

Term: 1 June 2023 to 31 May 2027 with no option to extend the Agreement

Value: Maximum value - £10,000,000.00 (excluding VAT) subject to individual "call offs"

Approval Requested: Contract Award

Context/Background

The agreement for which approval is being sought is for the provision of a new multi-lot, multi- vendor Framework Agreement to be used by DHCW to source specialist external resources. The term of the agreement is four (4) years with no extension options being available. The Framework is made up of 3 lots for the following areas:

- Lot 1 – Planning and Delivery
- Lot 2 – Specialist Application Development
- Lot 3 – Specialist Infrastructure Delivery

The Framework Agreement will have an allotted value of £10,000,000 ex VAT. For clarity this is the total value of all 'Call Off' contracts that may be entered into by DHCW. It does not constitute a guarantee of payment or commitment to buy services from the suppliers.

The purpose of this Framework Agreement is to allow DHCW to 'Call Off' requirements to support the

organisation in meeting the required level of capacity and capability to deliver the organisation's Business Plan and IMTP. Each requirement will be "called off" via a package of work and sourced via a mini competition or direct award process. For the direct award process a formal case will need to be made by the contract owner setting out the rationale for pursuing this approach.

With regards to the rates under this procurement, all rates submitted are in accordance with existing market day rates for comparable resources. This procurement was undertaken via an Open Procurement Procedure in accordance with Regulation 27 of the Public Contracts Regulations 2015 ("PCR2015") utilising the NHS Wales Standard Terms and Conditions for Provision of Services v3 May 2018. Some of the key standard terms include:

- Robust indemnity and warranty terms
- Time and Delivery Conditions
- Rejection criteria for products
- Protection of Data and Intellectual Property
- Customer remedies for Default

This procurement has been undertaken following the recommendation in the External Workforce Sourcing Strategy which was previously approved by the Management Board. The Strategy envisaged that DHCW would put in place a multi-lot multi-vendor Framework Agreement to source external workforce resources from the marketplace given that previous procurement approaches via existing government frameworks had proved fragmented.

The proposed award addresses the recommendations of the External Workforce Sourcing Strategy to establish distinct partnerships with a small number of suppliers via a multi-LOT approach covering some of the business needs of the organisation to:

- enable the sourcing of individuals who will lead or join existing DHCW teams
- procure resources to develop specific outputs e.g., a software application or a business case via specific work-packages

However, it is recognised that the requirements as set out in the procurement process were not sufficiently attractive to new Small and Medium Enterprises in Wales (there were no bids received from this sector). So, this is clearly an area of focus for the future which will be addressed via a separate supplier campaign focusing on other areas of work requiring specialist expertise of Welsh SMEs. We will now be considering further activities to broaden potential supply routes to supplement those areas currently not fully addressed by this agreement.

(ii) P308.02 (ii) System Integration Tool (Fiorano) Enterprise Licence and associated support

Contractor: Softcat PLC

Term: 18 June 2023 to 17 June 2026 with option to extend by up to a further two (2) years in increments of not less than twelve (12) months.

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Value: £5,027,424.20

Approval Requested: Contract Award

Context/Background

The agreement for which approval is being sought relates to the renewal of the System Integration Tool – Fiorano – which supports the messaging between most of the systems used and managed by DHCW. The solution is a critical component of the day to day running of applications and message transfers, it is paramount that this solution is stable, resilient, and reliable.

DHCW currently operates version 10.3 of the Fiorano solution. When renewal of support for this version of the Solution was instigated in December 2022 DHCW were unable to source support unless it upgraded to a more recent version, version 14.

It is imperative to the ability of DHCW to deliver national solutions that the Enterprise Service Bus (“EBS”) – the Middleware that connects the solutions and allows data to be shared – is renewed, to ensure operational continuity.

The procurement has been undertaken via the NPS All Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) - NPS-ICT-0094 – 19 on an interim basis. This will not only guarantee continuity of the current service but provides time for a full and thorough review of the strategic requirement. DHCW will appropriately define the requirement and procure a replacement, longer term contract to meet the ongoing needs of the organisation for the next decade. It is envisaged that the procurement for the longer-term requirement will commence via a competitive procurement process in the latter end of 2023.

(iii) P531 Data Quality System for General Medical Practices / Primary Care

Contractor: Informatica

Term: Two (2) years with the option to extend for a further three (3) years in increments of not less than twelve (12) Months

Value: £6,000,000.00 excluding VAT

Approval Requested: Contract Award

Context/Background

The board are requested to approve the Award of this Agreement to Informatica for the provision of a Data Quality, Auditing and Reporting solution. This solution is used by all of the three hundred and eighty-five (385) General Medical Practices (“GP” Practices) across NHS Wales that contract with seven (7) Local Health Boards to provide General Medical Services to approximately 3.2 million patients.

The current contract for the existing DQS is due to expire on 30th June 2024. In order to ensure the continuity of service provision, NHS Wales therefore has a requirement for a single Contractor to be appointed to implement a new DQS with its associated products and services.

The General Medical Services ('GMS') Data Quality System Governance Group, which reports directly to the General Medical Services Data Programme Board, has the responsibility for delivering the new DQS and guiding its development and use throughout the contract. The GMS DQS Governance Group is chaired by the General Practitioners Committee (Wales) (GPC Wales) to ensure that the DQS supports the General Medical Services agenda and that the interests of GPs are appropriately safeguarded.

Specifically, the DQS is used by each GP Practice in Wales to provision a software utility (supported by comprehensive user guide documentation) that can extract, analyse, and present patient information that is derived from the data held within their clinical information system, currently EMIS Web and Vision 360.

This procurement was undertaken via an Open Procurement Procedure in accordance with Regulation 27 of the Public Contracts Regulations 2015 ("PCR2015") utilising the NHS Wales Standard Terms and Conditions for Provision of Services v3 May 2018. Some of the key standard terms include:

- Robust indemnity and warranty terms
- Time and Delivery Conditions
- Rejection criteria for products
- Protection of Data and Intellectual Property
- Customer remedies for Default

(iv) P835 Microsoft Dynamics Integrated Telephony Provision

Contractor: Phoenix Software Ltd

Term: One (1) year with an option to extend by a further two (2) years in increments of not less than twelve (12) months

Value: £5,549,940.40 ex VAT

Approval Requested: Contract Award

Context/Background

In response to the Covid-19 global pandemic, on 1st May 2020 Public Health Wales NHS Trust ("PHW") and Welsh Government ("WG") instructed Digital Health and Care Wales formerly known as "NHS Wales Informatics Service" ("NWIS") to procure a commercial Customer Relationship Management ("CRM") Software Solution to deliver a Welsh Contact Tracing System. NWIS were required to make all efforts to have the Contact Tracing System available to users by 8th June 2020.

Following a rapid market engagement exercise to identify and appraise the ability of CRM systems a decision to procure a CRM solution from Microsoft was made. The licencing for Microsoft Dynamics 365 to deliver the CRM solution had been procured via an existing Enterprise Agreement, held by the Authority, and transacted via an All-Wales Licence Reseller agreement with Trustmarque. For the avoidance of doubt, these licencing requirements are NOT considered as part of this briefing.

In order to leverage the CRM solution, and to allow Welsh citizens to interact securely with NHS Wales and Local Authority Agents that deliver the Contact Tracing Services, an integrated telephony solution was also purchased from Solgari Limited ("Solgari").

The Authority has been requested by Welsh Government to provide continuity of the provision of the CRM and its integrated Telephony system for the period of June 2023-June 2024. This continuity provision is to ensure that should there be a need to re-instate the Test, Trace & Protect system, active Users are able to commence immediately.

This provision is intended to provide a compliant route to market in the unlikely event that this response is required again.

The Authority wishes to renew its current licence provision of the Solgari products to maintain the availability of the Test, Trace & Protect service. A total of three hundred (300) Users are to be provisioned for in the first year of the agreement but the Authority intends to ensure that a provision to scale up the service to three thousand (3,000) Users is maintained over the full term of the Agreement if the need arises to reinstate the Test, Trace & Protect service to the levels seen in 2020/21 in response to the Covid-19 pandemic.

For each of the annual extension options the Authority shall only commit to a purchase of one (1) User per annum.

The procurement has been undertaken via the NPS All Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) - NPS-ICT-0094 – 19.

4. KEY RISKS/MATTERS FOR ESCALATION TO BOARD

4.1 Appendix 1 includes four (4) Contract Award Approvals relating to:

- (i) P812 External Workforce Resources Framework Agreement;
- (ii) P308.02 System Integration Tool;
- (iii) P531 Data Quality System;
- (iv) P835 Microsoft Dynamics 365 Integrated Telephony Provision.

P812 External Workforce Resources Framework Agreement in respect of which:

- a. The procurement has been undertaken in accordance with the requirements of Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Director of Planning & Performance / Chief Commercial Officer.
- b. The Agreement is to be entered into under the NHS Wales Standard Terms and Conditions for the Provision of Services v3 May 2018 and includes clauses for:
 - i. Performance Measurement
 - ii. Delay
 - iii. Indemnity and Liability
 - iv. Variation; and
 - v. Termination
- c. The DHCW Strategic Resources Group, comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and

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the award outcome, as assured by Director of People & OD.

- d. Funding of the Framework Agreement is not immediately required as it does not constitute a commitment to buy any services but offers the opportunity to those suppliers awarded onto it, to bid for DHCW business subject to a mini competition process. DHCW shall be required to confirm funding for each Call Off agreement being entered into subject to its own governance processes.
- e. The award recommendation is based on each supplier having an overall score of 75% and above for the qualitative and commercial evaluation.
- f. DHCW's intention to enter into this Framework Agreement has been notified to Welsh Government, in accordance with Standing Orders.
- g. Commercial Services have undertaken a benchmarking exercise to ensure that the commercial offerings submitted by the suppliers are aligned to their competitor's current day rates. The outcome resulted in confirmation that the day rates were consistent with existing market rates.
- h. To ensure value for money is delivered under the Framework Agreement, DHCW will be competing requirements via a mini competition process across each lot. Each work package will be priced in accordance with the supplier's SFIA rate card under the Agreement.
- i. Direct Award is permitted under the Framework Agreement on the basis that a strong rationale is provided as to why DHCW intends to award a contract directly to a single supplier.
- j. To ensure the Framework Agreement is managed appropriately, regular contract review meetings with suppliers will be undertaken. This is to:
 - i. Ensure suppliers are meeting the objectives and delivering appropriately
 - ii. Share DHCW future direction/best practice
 - iii. Optimise the partnership arrangements

The resources required to support the delivery of these Services from a DHCW perspective will be included within the Annual Business Plan.

P308.02 System Integration Tool in respect of which

- a. The procurement has been undertaken in accordance with the requirements of Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Director of Planning & Performance / Chief Commercial Officer; and
- b. DHCW's evaluation team comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome, as assured by the Executive Director of Operations.
- c. Funding for the agreement comes directly from established budgets within Digital Health and Care Wales as assured by the Executive Director of Finance.
- d. DHCW's intention to enter into this Agreement has not been notified to Welsh Government on the basis that it is not required to do so where an existing Framework has been utilised for the

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Call Off and that Framework has been approved/established by Welsh Government.

P531 Data Quality System in respect of which

- The procurement has been undertaken in accordance with the requirements of Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Director of Planning & Performance / Chief Commercial Officer; and
- DHCW's evaluation team comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome, as assured by the Executive Director of Operations.
- Funding for the agreement comes directly from established budgets within Digital Health and Care Wales as assured by the Executive Director of Finance.
- DHCW's intention to enter into this Agreement has been notified to Welsh Government in accordance with Standing Orders.

P835 Microsoft Dynamics Integrated Telephony Solution in respect of which:

- The procurement has been undertaken in accordance with the requirements of Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Director of Planning & Performance / Chief Commercial Officer; and
- DHCW's evaluation team comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome, as assured by the Executive Director of Operations.
- Funding for the agreement comes directly from established budgets within Digital Health and Care Wales as assured by the Executive Director of Finance.
- DHCW's intention to enter into this Agreement has not been notified to Welsh Government on the basis that it is not required to do so where an existing Framework has been utilised for the Call Off and that Framework has been approved/established by Welsh Government.

5. RECOMMENDATION

- 5.1 The Board is being asked to: APPROVE the Contract Awards as detailed in Appendix 1

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
PERSON/COMMITTEE/GROUP	DATE	OUTCOME
Michelle Sell – Director of Planning & Performance / Chief Commercial Officer	2 May 2023	Approved
Ifan Evans – Executive Director of Strategy	4 May 2023	Approved
Claire Osmundsen-Little – Executive Director of Finance	12 May 2023	Approved
Helen Thomas – Chief Executive Officer	12 May 2023	Approved

APPENDIX 1: Key Procurement Documents for Approval

- i. P812 External Workforce Resources Framework Agreement
- ii. P308.02 System Integration Tool
- iii. P531 Data Quality System
- iv. P835 Microsoft Dynamics 365 Integrated Telephony Provision

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COMMITMENT OF EXPENDITURE EXCEEDING CHIEF EXECUTIVE'S LIMIT / BUSINESS JUSTIFICATION

Scheme Title	External Workforce Resources Framework Agreement
Contract Term	01 st June 2023 to 31 st May 2027 (no option to extend)
Total Contract Value	£10,000,000.00 ex VAT
Suppliers	Lot 1 – TPXimpact and Trustmarque Solutions Lot 2 – Kainos and TPXimpact Lot 3 – TPXimpact and Trustmarque Solutions
Terms and Conditions	NHS Wales Standard Terms and Conditions for Provision of Services v3 May 2018
Contract Awarded for Use by	Digital Health and Care Wales ("DHCW")
Date Prepared	23 rd February 2023
Prepared By	Allison Roblin, Strategic Procurement and Contracts Manager
Scheme Sponsor	Sarah-Jane Taylor, Director of People and OD.

All proposals must be consistent with the strategic and operational plans of Digital Health and Care Wales ("DHCW").

1. DESCRIPTION OF GOODS / SERVICES / WORKS

The NHS in Wales is investing significantly in its development of Digital solutions to support the effective delivery of Health and Social care in Wales. As a consequence, DHCW is developing a blended approach to increasing its technical capacity by engaging via an ambitious recruitment campaign. One approach to secure additional technical resources to meet DHCW's business plan deliverables and programme of work is via the establishment of a DHCW specific Framework Agreement (see scope below). This will be utilised to call off requirements and develop strategic partnership relationships with a small number of suppliers.

- Requirements would be called off for body shopping where the services of one or more individuals will be required for a finite period of time to augment existing resources and improve capacity for and/or contribute to or provide a specific deliverable. The Supplier will provide appropriately skilled resources to work alongside customer teams, under the direction of the Authority's management
- Output based assignments, where the Supplier completes a package of work based on a requirements or design specification according to a defined scope and within an agreed timescale, working independently with an appropriately structured team, managed by the Supplier.

To support the delivery of the above, a competitive procurement was undertaken to establish a contractual multi-Lot, multi-vendor Framework Agreement to support its requirements over a contract term of four (4) years. Appointment of at least one (1) and at most four (4) suppliers for each Lot. Suppliers were required to

demonstrate that they could provide the capacity and capability to meet the demands required within the timescales set by the Authority.

The Lots are set out below:

- Lot 1 – Planning and Delivery
- Lot 2 – Special Application Development
- Lot 3 – Special Infrastructure Delivery
- Lot 4 – Networking Design and Management
- Lot 5 – End User Computing

¹No single work package on any Lot can exceed £500K in value. The total value of the Framework is £10M and the expenditure is not constrained within a Lot except within the maximum values stated.

The competitive procurement which was evaluated by a multi-disciplinary team of DHCW's Subject Matter Experts resulted in the following award recommendation being made:

Lot 1 – TPXimpact and Trustmarque Solutions

Lot 2 – Kainos and TPXimpact

Lot 3 – TPXimpact and Trustmarque Solutions²

1.1 Nature of contract:

Please indicate with a (x) in the relevant box

First
time



Contract
Extension



Contract
Renewal



1.2 Period of contract including extension options:

Expected Start Date of Contract 01st June 2023

Expected End Date of Contract 31st May 2027

**Contract Extension Options
(E.g., maximum term in months)** None

2. STRATEGIC FIT

¹ Lot 4 - was not awarded as the supplier did not score well in the following areas:

- Key competencies
- Approach to working with the Authority
- Example Scenario
- Security Design and Implementation (Supplier did not answer the question and therefore scored 0)

Lot 5 - no bids were received

² Further details in relation to the procurement process is included in the Procurement Selection Report

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2.1 VISION AND STRATEGIC MISSIONS

This scheme should relate to at least one of the SHA's four strategic goals. Please mark with a (x) in the box the relevant pillars for this scheme.

Vision: To provide world leading digital services, empowering people to live healthier lives

OUR PURPOSE.... To transform health and care for everyone in Wales

Mission 1: Becoming the trusted strategic partner and a high performing, inclusive, ambitious organisation.... SUPPORTING OUR WORKFORCE AND STAKEHOLDERS	<input checked="" type="checkbox"/>
Mission 2: Driving value and innovation.... FOR BETTER OUTCOMES AND VALUE BASED CARE	<input checked="" type="checkbox"/>
Mission 3: Expanding the content, availability and functionality of the digital health and care record.... SO THAT CARE AND TREATMENT QUALITY IS IMPROVED	<input checked="" type="checkbox"/>
Mission 4: Delivering high quality technology, data products and services.... TO SUPPORT EFFICIENCIES AND IMPROVEMENTS IN CARE PROCESSES	<input checked="" type="checkbox"/>
Mission 5: Enabling Digital Transformation.... SUPPORTING JOINED UP CONSISTENT CARE	<input checked="" type="checkbox"/>

2.2 INTEGRATED MEDIUM-TERM PLAN

Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	<input type="checkbox"/>	<input checked="" type="checkbox"/>

This requirement has been presented owing to the need to secure external resources to support DHCW to resolve issues with resourcing capacity and capability which are required to meet the organisation's Business Plan and to utilise any special funds that are provided throughout a financial year.

2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

This scheme should relate to at least one of the SHA's wellbeing objectives. Please mark with a (x) in the box the relevant objectives for this scheme.

Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	<input type="checkbox"/>
Improve the health and well-being of families across Wales by striving to care for the needs of the whole person.	<input type="checkbox"/>
Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation, and new models of delivery.	<input checked="" type="checkbox"/>

Deliver bold solutions to the environmental challenges posed by our activities.	<input checked="" type="checkbox"/>
Bring communities and generations together through involvement in the planning and delivery of our services.	<input type="checkbox"/>
Demonstrate respect for the diverse cultural heritage of modern Wales.	<input type="checkbox"/>
Strengthen the international reputation of the SHA as a centre of excellence for teaching, research and technical innovations whilst also making a lasting contribution to global well-being.	<input type="checkbox"/>

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

Please mark with a (x) in the box the relevant principles for this scheme.

Click [here](#) for more information

Prevention	<input type="checkbox"/>	Long Term	<input checked="" type="checkbox"/>	Integration	<input checked="" type="checkbox"/>	Collaboration	<input checked="" type="checkbox"/>	Involvement	<input type="checkbox"/>
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Within the Agreement DHCW have ensured that 15% of the weightings for the award decision made by DHCW is allocated to Social Value including the Foundational Economy in Wales and sustainability.

3. PROCUREMENT ROUTE

3.1 How is the contract being procured? Please mark with a (x) as relevant.

Competition Three (3) Quotes Formal Tender Exercise Mini Competition Find a Tender <small>(replaces OJEU, Public Contract Regulations 2015 still apply)</small>	<input type="checkbox"/> <input checked="" type="checkbox"/>	Single source Single Quotation Action Single Tender Action Direct call off Framework All Wales contract	<input type="checkbox"/> <input type="checkbox"/>
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3.2 Please outline the procurement procedure.

In order to secure appropriate suppliers for this procurement, an Open Procurement Procedure was conducted in accordance with Regulation 27 of the Public Contract Regulations 2015 and the SHA's Standing Financial Instructions ("SFI's"). A Contract Notice ("Notice") was placed on the Sell2Wales Portal and Find a Tender Service reference: 2022/S 000-036393 on 22 December 2022 and an Invitation to Tender ("ITT") was made available to all economic operators in the marketplace.

The overarching Framework Agreement is underpinned by the NHS Standard Terms and Conditions for Provision of Services, May 2018. Included within the Framework Agreement is a "Call Off Agreement" which will be used by DHCW when entering into agreements with successful suppliers. The Call Off Agreements drafted by DHCW Commercial Services, Inform Solutions and Blake Morgan LLP are adaptations of the Model Form IT contracts produced by Crown Commercial Services (formerly Office of Government Commerce, part of the UK Cabinet Office).

3.3 What has been the approximate timeline for procurement?

The procurement timetable, as published within the ITT is detailed below:

Activity	Date
Publication of the 'Invitation to Tender'	22 December 2022
Clarification period ends	17 January 2023
Tender Closing date	26 January 2023
Stage 1 Selection Evaluation and sign off	27 January 2023 – 7 February 2023
Stage 2 Award Evaluation	9 February 2023 – 13 February 2023
Evaluation, Selection Award Report endorsed by Evaluation Panel	20 February 2023 – 24 February 2023
Contract Award Notification issued to NWSSP and Welsh Government	1 March 2023
Standstill Period commences (10 days)	1 March 2023
DHCW Board Paper submitted	7 March 2023
Standstill period concludes (Midnight)	13 March 2023
DHCW Board	30 March 2023
Award Framework Agreement	6 April 2023 ³

Formal award of the Framework Agreement is anticipated immediately after DHCW Board Approval is received. Each Agreement will take the form of the Terms and Conditions of Contract as tendered, the Specification and the successful supplier's Proposals, and any other relevant documentation. Documentation incorporating the foregoing will be signed by the successful supplier and DHCW.

A work-package will be scoped out for each subsequent piece of work to ensure that financial, contractual and delivery risk is appropriately managed, and any lessons learned from the previous work-package are built into the next piece of work. A Purchase Order will be placed following approval of each work-package.

³ Please note that the dates in the table above no longer stand given that there were clarification issues required to enable the Authority to finalise the recommendations. Therefore the revised dates are as follows: Contract Award by the end of May 2023 and Contract Term commences from 01st June 2023.

4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1 Outline benefits of preferred option

The following benefits are anticipated:

1. Support DHCW to meet the identified operational and technical resources required
2. Flexibility to secure resources that are suitably qualified and have the required experience to meet the needs of the service
3. Reduce the time taken for DHCW to add new resources to the workforce
4. Support the development and delivery of Cloud Services, including migration of applications and services from on premise environments (where required)
5. Increase the ability for DHCW to deliver its overall goals and objectives
6. Support the upskilling of DHCW teams through knowledge transfer to ensure that resulting products and services can be maintained by DHCW teams throughout their operational life and beyond the end of the contract agreement
7. Support DHCW's ICT Directorate in providing critical IT infrastructure services
8. Support new programmes introduced over the lifetime of the Contract
9. Ensure that DHCW is delivering products and services that are "best in class" which will improve patient care and drive business efficiencies

5. RISKS & MITIGATION

5.1 Please state risks of not proceeding with the scheme

Should this Framework Agreement not be awarded resourcing constraints will continue within the organisation which will impact the delivery of the DHCW Business Plan and IMTP.

5.2 Please state any mitigation to reduce the risk if the scheme is not approved

A number of smaller consultancy procurements would need to be undertaken.

People and Organisational Development would need to run further recruitment drives to try to secure external resources.

6. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £10,000,000.00	Including VAT £12,000,000.00
The nature of spend	Capital <input type="checkbox"/>	Revenue <input checked="" type="checkbox"/>

How is the scheme to be funded? Please mark with a (x) as relevant.

Existing budgets ☒
 Additional Welsh Government funding ☐
 Other ☐

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3 (exc. VAT)	Years 4 (exc. VAT)	Total (exc. VAT)	Total (inc. VAT)
<p>Framework Agreement does not commit DHCW to any expenditure and will have a nominal Value of £1.00 per Supplier. Only following a Call Off / Mini Competition / Direct Award by DHCW will commitments to expenditure be made.</p> <p>Potential expenditure under this framework will depend upon a number of factors including budget availability, the success of the relationship and services provided to meet the organisation's business plan and any special initiatives.</p> <p>A single work package on any Lot cannot exceed £500K ex VAT in value. It is therefore estimated that the total value of the framework (across all lots) will be up to £10m ex VAT over the four (4) year period.</p>						

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7. DECLARATION OF COMPLIANCE

7.1 Procurement Approval

The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.

Head of Commercial Services:

Julie Francis

Signature:

15/05/2023

X Julie Francis

Julie Francis
Head of Commercial Services
Signed by: Julie Francis (JU000244)

7.2 Director Approval

The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.

Director of People and OD:

Sarah-Jane Taylor

Signature:

Executive Director of Finance Approval

The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.

Lead Director Name:

Claire Osmundsen-Little

Signature:

X

Claire Osmundsen-Little
Executive Director of Finance & Business Assurance

8. APPROVALS AND ASSURANCE RECEIVED

List and include date of approvals and assurance received in support of this scheme.

	Date of Meeting	Outcome
Commercial Resource Group	24/02/2023	Approved
Strategic Resources Group	28/02/2023	Approved
Welsh Government Notification	03/05/2023	PENDING
SHA Board	25/05/2023	PENDING

9. CONFIRMATION OF DHCW BOARD APPROVAL

Where approval by the Board is granted, signature by the Chair of the Board of this document is required as the formal record of such approval and is to be witnessed by at least one (1) Independent Member.

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26th January 2023.

Chair of DHCW Board:

Simon Jones

Signature:

X

Simon Jones
Chair of DHCW Board

Independent Member:

Signature:

X

Independent Member

Chief Executive Officer:

Helen Thomas

Signature:

X

Helen Thomas
Chief Executive Officer

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COMMITMENT OF EXPENDITURE EXCEEDING CHIEF EXECUTIVE'S LIMIT / BUSINESS JUSTIFICATION

Scheme Title	System Integration Tool Maintenance and Support (Fiorano)
Contract Term	3 years with the option to extend for 2 x 12 months
Total Contract Value	£5,858,449.20ex VAT
Suppliers	Softcat Plc
Terms and Conditions	NPS Terms and Conditions of the All-Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) - NPS-ICT-0094 – 19.
Contract Awarded for Use by	Digital Health and Care Wales ("DHCW")
Date Prepared	24 th April 2023
Prepared By	Allison Roblin, Strategic Procurement and Contracts Manager
Scheme Sponsor	Sam Lloyd, Executive Director of Operations

All proposals must be consistent with the strategic and operational plans of Digital Health and Care Wales ("DHCW").

1. DESCRIPTION OF GOODS / SERVICES / WORKS

In 2014, NHS Wales Informatics Service ("NWIS"), the predecessor organisation to Digital Health and Care Wales ("DHCW") established an Enterprise Service Bus ("ESB") 'middleware' service using a Fiorano software solution. This solution supports messaging between several systems within DHCW which provides integration of applications and processes using a standards-based Service Orientated Architecture ("SOA"). As a critical component of the day to day running of applications and message transfers, it is paramount that this solution is stable, resilient, and reliable. The current contract which is due to expire in June 2023 consists of a perpetual license, associated services, maintenance, and support. There is an ongoing requirement to retain this service in accordance with operational continuity to support the delivery of national clinical services to the patients and citizens of Wales.

To ensure continuity of service, DHCW are procuring an Enterprise License Agreement ("ELA") which will provide unlimited provisioning of the System Integration Tool across all current and future deployed instances in Production, Development, system Integration Testing ("SIT") and User Acceptance Testing ("UAT") for a period of three (3) years with an option to extend for a further period of up to two (2) years in increments of not less than twelve (12) months each.

1.1 Nature of contract: Please indicate with a (x) in the relevant box	First time	<input type="checkbox"/>	Contract Extension	<input type="checkbox"/>	Contract Renewal	<input checked="" type="checkbox"/>
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1.2 Period of contract including extension options:	
Expected Start Date of Contract	19 th June 2023
Expected End Date of Contract	18 th June 2026
Contract Extension Options (E.g., maximum term in months)	Option to extend for 2 x 12 months to 18 th June 2028

2. STRATEGIC FIT

2.1 VISION AND OUR STRATEGIC PILLARS	
This scheme should relate to at least one of the SHA's four strategic goals. Please mark with a (x) in the box the relevant pillars for this scheme.	
Vision: Delivering information and technology for better care. We will deliver to the people of Wales first-class digital health and care services which will enable more effective, efficient, safer decision-making by providing access to content-rich, person-focused health and care data and information.	
Goal 1: Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers	<input checked="" type="checkbox"/>
Goal 2: Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services	<input checked="" type="checkbox"/>
Goal 3: Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points	<input checked="" type="checkbox"/>
Goal 4: Enable users to derive value from data collected from national and local systems through Big Data Analysis	<input type="checkbox"/>

2.2 INTEGRATED MEDIUM-TERM PLAN		
Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain the reason for this in the space provided.		

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2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

This scheme should relate to at least one of the SHA's wellbeing objectives. Please mark with a (x) in the box the relevant objectives for this scheme.

Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	<input type="checkbox"/>
Improve the health and well-being of families across Wales by striving to care for the needs of the whole person.	<input type="checkbox"/>
Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation, and new models of delivery.	<input checked="" type="checkbox"/>
Deliver bold solutions to the environmental challenges posed by our activities.	<input checked="" type="checkbox"/>
Bring communities and generations together through involvement in the planning and delivery of our services.	<input type="checkbox"/>
Demonstrate respect for the diverse cultural heritage of modern Wales.	<input type="checkbox"/>
Strengthen the international reputation of the SHA as a centre of excellence for teaching, research and technical innovations whilst also making a lasting contribution to global well-being.	<input type="checkbox"/>

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

Please mark with a (x) in the box the relevant principles for this scheme.

Click [here](#) for more information

Prevention	<input type="checkbox"/>	Long Term	<input checked="" type="checkbox"/>	Integration	<input checked="" type="checkbox"/>	Collaboration	<input checked="" type="checkbox"/>	Involvement	<input type="checkbox"/>
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Within the Agreement DHCW have ensured that 10% of weightings for Award decision made by DHCW is allocated to Social Value including the Foundational Economy in Wales and sustainability.

3. PROCUREMENT ROUTE

3.1 How is the contract being procured? Please mark with a (x) as relevant.

Competition		Single source	
Three (3) Quotes	<input type="checkbox"/>	Single Quotation Action	<input type="checkbox"/>
Formal Tender Exercise	<input type="checkbox"/>	Single Tender Action	<input type="checkbox"/>
Mini Competition	<input checked="" type="checkbox"/>	Direct call off Framework	<input type="checkbox"/>
Find a Tender	<input type="checkbox"/>	All Wales contract	<input type="checkbox"/>
<small>(replaces OJEU, Public Contract Regulations 2015 still apply)</small>			

3.2 Please outline the procurement procedure.

The procurement has been conducted via National Procurement Service All Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) – NPS-ICT-0094 – 19. A mini competition has been undertaken, inviting all 5 suppliers

on Lot 3 of the above Framework Agreement the opportunity to submit responses.

3.3 What has been the approximate timeline for procurement?

The procurement timetable, as published within the ITT is detailed below:

Activity	Date
Tender documents completed and issued via Bravo.	31/03/2023
End date for supplier clarifications	06/04/2023
Tender Response Received date (15:00)	18/04/2023
Evaluation	19 – 21/04/2023
Notification of Intention to Award	28/04/2023
DHCW Board Paper submitted	05/05/2023
DHCW Board Approval	25/05/2023
Contract Award	02/06/2023

Formal award of contract is anticipated immediately after DHCW Board Approval is received. The contract will take the form of the NPS Terms and Conditions of Contract as tendered, the Specification and the successful supplier's proposal, and any other relevant documentation. Documentation incorporating the foregoing will be signed by the successful supplier and DHCW.

Under the contract, DHCW can call off additional resources. The resource requirements will be called off via a work-package based approach. Each work package will be scoped out for each subsequent piece of work to ensure that financial, contractual and delivery risk is appropriately managed.

4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1 Outline benefits of preferred option

The following benefits are anticipated:

1. Continuity of service which supports messaging between several national clinical systems.
2. Support DHCW to meet the identified operational and technical objectives required
3. Ability to draw down additional resources that are suitably qualified and have the required experience to meet the needs of the service
4. Ability to support messaging for new solutions introduced over the lifetime of the Contract
5. Ensure that DHCW is delivering products and services that are "best in class" which will improve patient care and drive business efficiencies

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5. RISKS & MITIGATION

5.1 Please state risks of not proceeding with the scheme	5.2 Please state any mitigation to reduce the risk if the scheme is not approved
<p>Should this contract not be awarded, the current Fiorano Solution V10.4 will become end of life and unsupported from 30th June 2023.</p> <p>The Solution is a critical component of the day to day running of supporting messaging between several national clinical systems. Failure to award this contract will severely impact the operational continuity and support in the delivery of national clinical services to the patients and citizens of Wales.</p>	<p>There are no options available as Support for the current version of the Fiorano Solution is not available without an active upgrade to the latest version of the Software.</p> <p>The Software will not function without a live support agreement registered to the licence key.</p>

6. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £5,858,449.20	Including VAT £7,030,139.04
The nature of spend	Capital <input type="checkbox"/>	Revenue <input checked="" type="checkbox"/>

How is the scheme to be funded? Please mark with a (x) as relevant.		
Existing budgets	<input checked="" type="checkbox"/>	
Additional Welsh Government funding	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3 (exc. VAT)	Years 4&5 (exc. VAT)	Total (exc. VAT)	Total (inc. VAT)
Fiorano ELA incl. Premier Plus Support	£1,163,435	£1,108,033	£1,052,632	£2,034,349.20	£5,358,449.20	£6,430,439.04

<p>The ability to call off additional resources under the contract cannot exceed £100K ex VAT in value per annum.</p> <p>It is therefore estimated that the total value of the contract (5 years) will be £5,858,449.20ex VAT.</p>
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7. DECLARATION OF COMPLIANCE

7.1 Procurement Approval

The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.

Head of Commercial Services:

Julie Francis

Signature:

X

Julie Francis
Head of Commercial Services

7.2 Director Approval

The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.

Executive Director of Operations:

Sam Lloyd

Signature:

X

Sam Lloyd
Executive Director of Operations

Executive Director of Finance Approval

The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.

Executive Director of Finance:

Claire Osmundsen-Little

Signature:

X

Claire Osmundsen-Little
Executive Director of Finance & Business Assura...

8. APPROVALS AND ASSURANCE RECEIVED

List and include date of approvals and assurance received in support of this scheme.

	Date of Meeting	Outcome
Evaluation Team	25/04/2023	Endorsed
Welsh Government Notification	Not Required under NPS Framework	Not Required under NPS Framework
SHA Board	25/05/2023	To be granted by this document

9. CONFIRMATION OF DHCW BOARD APPROVAL

Where approval by the Board is granted, signature by the Chair of the Board of this document is required as the formal record of such approval and is to be witnessed by at least one (1) Independent Member.

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26th January 2023.

Chair of DHCW Board:

Simon Jones

Signature:

X

Simon Jones
Chair of DHCW Board

Independent Member:

Signature:

X

Independent Member

Chief Executive Officer:

Helen Thomas

Signature:

X

Helen Thomas
Chief Executive Officer

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COMMITMENT OF EXPENDITURE EXCEEDING CHIEF EXECUTIVE'S LIMIT / BUSINESS JUSTIFICATION

Scheme Title	Data Quality System – P531
Contract Term	Two (2) years with the option to extend by up to a further three (3) years in increments of not less than twelve (12) months
Total Contract Value	£6,000,000.00 ex VAT
Suppliers	Informatica
Terms and Conditions	NHS Standard Terms and Conditions for the Supply of IT Services
Contract Awarded for Use by	Digital Health and Care Wales (“DHCW”)
Date Prepared	26 th April 2023
Prepared By	Matthew Perrott, Deputy Head of Commercial Services
Scheme Sponsor	Sam Hall, Director of Primary Care

All proposals must be consistent with the strategic and operational plans of Digital Health and Care Wales (“DHCW”).

1. DESCRIPTION OF GOODS / SERVICES / WORKS

NHS Wales currently has a Data Quality System which supports the auditing, reporting, and associated data quality requirements of the three hundred and eighty-seven (385) individual General Medical Practices in Wales that contract with seven (7) Local Health Boards to provide General Medical Services (“GMS”) to approximately 3.2 million patients. This system was procured on their behalf and is managed by Digital Health and Care Wales (“DHCW”) under the overall strategic direction of the GMS Digital Programme Board.

The current contractual arrangement under which this service is provided expires on 30th June 2024; a new agreement is therefore required. The core funding for this requirement is provided by General Practitioners Committee (“GPC”) Wales. Further requirements exceeding those specified by GPC Wales will be funded separately by those who wish to use the service and will be subject to the change control process under the Agreement or use of itemised Services within the Services Catalogue.

The overall scope of this new Agreement is to:

- Provide General Medical Practices with an appropriate Data Quality System that can be developed/enhanced during the lifetime of the contract to meet evolving needs and demands.
- Ensure that the provision of the Data Quality System is underpinned by an ongoing maintenance, support and training and consultancy service.

- iii. Enable modules to be deployed to support General Medical Practices in delivering, monitoring and reporting on General Medical Services (“GMS”) activities.
- iv. Enable modules to be deployed to support General Medical Practices in delivering, monitoring and reporting on national and local initiatives where applicable.
- v. Support NHS Wales Organisations and Bodies in delivering their objectives collaboratively with General Medical Practices and providing management information as appropriate.
- vi. Deliver an appropriate agreement which will enable the development and implementation of patient level (identifiable or anonymised or pseudonymised) data extractions for external Organisations, Programmes, Projects requiring data from participating General Medical Practices.

1.1 Nature of contract:

Please indicate with a (x) in the relevant box

First
time

☐

Contract
Extension

☐

Contract
Renewal

☒

1.2 Period of contract including extension options:

Expected Start Date of Contract 2 June 2023

Expected End Date of Contract 1 June 2025

**Contract Extension Options
(E.g., maximum term in months)** Option to extend for 3 x 12 months to 1 June 2028

2. STRATEGIC FIT

2.1 VISION AND OUR STRATEGIC PILLARS

This scheme should relate to at least one of the SHA’s four strategic goals. Please mark with a (x) in the box the relevant pillars for this scheme.

Vision: Delivering information and technology for better care. We will deliver to the people of Wales first-class digital health and care services which will enable more effective, efficient, safer decision-making by providing access to content-rich, person-focused health and care data and information.

Goal 1: Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers

☒

Goal 2: Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services

☒

Goal 3: Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points

☒

Goal 4: Enable users to derive value from data collected from national and local systems through Big Data Analysis

☒

Tolley, Laura
18/05/2023 15:38:47

2.2 INTEGRATED MEDIUM-TERM PLAN

Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain the reason for this in the space provided.		

2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

This scheme should relate to at least one of the SHA's wellbeing objectives. Please mark with a (x) in the box the relevant objectives for this scheme.

Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	<input type="checkbox"/>
Improve the health and well-being of families across Wales by striving to care for the needs of the whole person.	<input checked="" type="checkbox"/>
Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation, and new models of delivery.	<input type="checkbox"/>
Deliver bold solutions to the environmental challenges posed by our activities.	<input type="checkbox"/>
Bring communities and generations together through involvement in the planning and delivery of our services.	<input checked="" type="checkbox"/>
Demonstrate respect for the diverse cultural heritage of modern Wales.	<input checked="" type="checkbox"/>
Strengthen the international reputation of the SHA as a centre of excellence for teaching, research and technical innovations whilst also making a lasting contribution to global well-being.	<input checked="" type="checkbox"/>

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

Please mark with a (x) in the box the relevant principles for this scheme.

Click [here](#) for more information

Prevention	<input type="checkbox"/>	Long Term	<input checked="" type="checkbox"/>	Integration	<input checked="" type="checkbox"/>	Collaboration	<input checked="" type="checkbox"/>	Involvement	<input type="checkbox"/>
Within the Agreement DHCW have ensured that 10% of weightings for Award decision made by DHCW is allocated to Social Value including the Foundational Economy in Wales and sustainability.									

Tolley, Laura
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3. PROCUREMENT ROUTE

3.1 How is the contract being procured? Please mark with a (x) as relevant.

Competition		Single source	
Three (3) Quotes	<input type="checkbox"/>	Single Quotation Action	<input type="checkbox"/>
Formal Tender Exercise	<input type="checkbox"/>	Single Tender Action	<input type="checkbox"/>
Mini Competition	<input type="checkbox"/>	Direct call off Framework	<input type="checkbox"/>
Find a Tender (replaces OJEU, Public Contract Regulations 2015 still apply)	<input checked="" type="checkbox"/>	All Wales contract	<input type="checkbox"/>

3.2 Please outline the procurement procedure.

The procurement/Invitation to Tender (“ITT”) was issued by Digital Health and Care Wales (“DHCW”) (the “**Awarding Authority**”), in connection with the Open Procedure, as set out in Regulation 27 of the Public Contract Regulations 2015 (“PCR2015”), for the procurement of an All-Wales Data Quality System (“DQS”) for General Medical Practices

3.3 What has been the approximate timeline for procurement?

The procurement timetable, as published within the ITT is detailed below:

Activity	Date
Publish PCR15 Contract Notice, SPD and ITT documents	6 th February 2023
Deadline for submission of clarifications	12 Noon - 2 nd March 2023
Tender Closing date	12 Noon - 9 th March 2023
Stage 1 - Selection Criteria (SPD Responses)	13 th March 2023
Stage 2 – Award Criteria (ITT Written Responses)	15 th to 17 th March 2023
Virtual Supplier Demonstrations (Top 3 Bidders) including virtual site reference visits (EMIS, Vision & central solution)	5 th and 6 th April 2023
Evaluation, Selection and Award Report drafted and endorsed by Evaluation Panel, Commercial Services Executive Officers.	17 th to 24 th April 2023
Contract Award Notification issued to NWSSP and Welsh Government	27 th April 2023
DHCW Board Paper submitted	2 nd May 2023
Standstill Period commences (10 working days)	3 rd May 2023
Standstill period concludes (Midnight)	15 th May 2023
Contract Award Notification received from WG	19 th May 2023
DHCW Board Approval	25 th May 2023
Contract Award and Commencement of Implementation Phase	June 2023

Tolley, Laura
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4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1 Outline benefits of preferred option

The following benefits are anticipated:

1. Continuity of service which supports the Welsh Government covid response plan.
2. Agility to scale up service in hours should the demand require it.
3. Medium term agreement that ensures ongoing facility at a minimal cost to NHS Wales and Welsh Government.

5. RISKS & MITIGATION

5.1 Please state risks of not proceeding with the scheme

Should this contract not be awarded it will not be possible to audit or report on the data gathered/used by the 385 GP Practices in NHS Wales.

5.2 Please state any mitigation to reduce the risk if the scheme is not approved

No mitigation is possible.

6. Financial Analysis

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £6,000,000.00	Including VAT £7,200,000.00
The nature of spend	Capital <input type="checkbox"/>	Revenue <input checked="" type="checkbox"/>

How is the scheme to be funded? Please mark with a (x) as relevant.

Existing budgets ☒
 Additional Welsh Government funding ☐
 Other ☐

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3-5 (exc. VAT)	Total (exc. VAT)	Total (inc. VAT)
Revenue – Licence, Support & Training	£489,200	£489,200	£1,540,980	£2,519,380	£3,023,256
Revenue – Data Extract, submission monitoring & Management Daily-Annually <i>Optional Expenditure if required</i>	£696,124	£696,124	£2,088,372	£3,480,620	£4,176,744
TOTAL	£1,185,324	£1,185,324	£3,629,352	£6,000,000	£7,200,000

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7. DECLARATION OF COMPLIANCE

7.1 Procurement Approval

The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.

Head of Commercial Services:

Julie Francis

Signature:

X

Julie Francis
Head of Commercial Services

7.2 Director Approval

The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.

Directory of Primary Care:

Sam Hall

Signature:

X

Sam Hall
Director of Primary Care

Executive Director of Finance Approval

The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.

Executive Director of Finance:

Claire Osmundsen-Little

Signature:

X

Claire Osmundsen-Little
Executive Director of Finance & Business Assura...

8. APPROVALS AND ASSURANCE RECEIVED

List and include date of approvals and assurance received in support of this scheme.

	Date of Meeting	Outcome
Evaluation Team	30/04/2023	Endorsed
Welsh Government Notification	Issued to WG 26/04/2023	Outstanding
SHA Board	25/05/2023	To be granted by this document

9. CONFIRMATION OF DHCW BOARD APPROVAL

Where approval by the Board is granted, signature by the Chair of the Board of this document is required as the formal record of such approval and is to be witnessed by at least one (1) Independent Member.

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26th January 2023.

Chair of DHCW Board:

Simon Jones

Signature:

X

Simon Jones
Chair of DHCW Board

Independent Member:

Signature:

X

Independent Member

Chief Executive Officer:

Helen Thomas

Signature:

X

Helen Thomas
Chief Executive Officer

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COMMITMENT OF EXPENDITURE EXCEEDING CHIEF EXECUTIVE'S LIMIT / BUSINESS JUSTIFICATION

Scheme Title	Microsoft Dynamics Integrated Telephony Software for Test, Trace and Protect – P835
Contract Term	Three (3) years with the option to extend by up to a further two (2) years in increments of not less than twelve (12) months
Total Contract Value	£5,549,940.40 ex VAT
Suppliers	Phoenix Software Ltd
Terms and Conditions	NPS Terms and Conditions of the All-Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) - NPS-ICT-0094 – 19.
Contract Awarded for Use by	Digital Health and Care Wales (“DHCW”)
Date Prepared	25 th April 2023
Prepared By	Matthew Perrott, Deputy Head of Commercial Services
Scheme Sponsor	Sam Hall, Director of Primary Care

All proposals must be consistent with the strategic and operational plans of Digital Health and Care Wales (“DHCW”).

1. DESCRIPTION OF GOODS / SERVICES / WORKS

In response to the Covid-19 global pandemic, on 1st May 2020 Public Health Wales NHS Trust (“PHW”) and Welsh Government (“WG”) instructed Digital Health and Care Wales formerly known as “NHS Wales Informatics Service” (“NWIS”) to procure a commercial Customer Relationship Management (“CRM”) Software Solution to deliver a Welsh Contact Tracing System. NWIS were required to make all efforts to have the Contact Tracing System available to users by 8th June 2020.

Following a rapid market engagement exercise to identify and appraise the ability of CRM systems a decision to procure a CRM solution from Microsoft was made. For the avoidance of doubt, these licensing requirements were **NOT** considered as part of this procurement.

In order to leverage the CRM solution, and to allow Welsh citizens to interact securely with NHS Wales and Local Authority Agents that deliver the Contact Tracing Services, an integrated telephony solution was also purchased from Solgari Limited (“Solgari”).

The Authority has been requested by Welsh Government to provide continuity of the current service provision of the CRM and its integrated Telephony Solution for the period of June 2023-June 2024. This continuity

provision is to ensure that should there be a need to re-instate the Test, Trace & Protect system, active Users are able to commence immediately.

A strategic requirement for this new agreement was to ensure that should there be a need to re-instate the Test, Trace and Protect Service to that of its peak in December 2020 then the Agreement shall have provisions within it to accommodate licencing for up to three-thousand (3000) Users making an average number of Calls of: 34,482 UK Landline Calls (122,570 minutes); and 291,319 UK Mobile Calls (1,244,340 minutes), per month.

The agreement shall commit DHCW to three hundred (300) Users in year 1, and one (1) User in each of the extension periods. Calls will be charged in accordance with the total number of minutes duration in each calendar month. Where no Calls are made, no charges shall be due.

1.1 Nature of contract:

Please indicate with a (x) in the relevant box

First
time

☐

Contract
Extension

☐

Contract
Renewal

☒

1.2 Period of contract including extension options:

Expected Start Date of Contract 2 June 2023

Expected End Date of Contract 1 June 2024

**Contract Extension Options
(E.g., maximum term in months)** Option to extend for 2 x 12 months to 1 June 2026

2. STRATEGIC FIT

2.1 VISION AND OUR STRATEGIC PILLARS

This scheme should relate to at least one of the SHA's four strategic goals. Please mark with a (x) in the box the relevant pillars for this scheme.

Vision: Delivering information and technology for better care. We will deliver to the people of Wales first-class digital health and care services which will enable more effective, efficient, safer decision-making by providing access to content-rich, person-focused health and care data and information.

Goal 1: Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers

☒

Goal 2: Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services

☒

Goal 3: Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points

☒

Goal 4: Enable users to derive value from data collected from national and local systems through Big Data Analysis

☒

2.2 INTEGRATED MEDIUM-TERM PLAN

Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain the reason for this in the space provided.		

2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

This scheme should relate to at least one of the SHA's wellbeing objectives. Please mark with a (x) in the box the relevant objectives for this scheme.

Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	<input checked="" type="checkbox"/>
Improve the health and well-being of families across Wales by striving to care for the needs of the whole person.	<input checked="" type="checkbox"/>
Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation, and new models of delivery.	<input checked="" type="checkbox"/>
Deliver bold solutions to the environmental challenges posed by our activities.	<input checked="" type="checkbox"/>
Bring communities and generations together through involvement in the planning and delivery of our services.	<input checked="" type="checkbox"/>
Demonstrate respect for the diverse cultural heritage of modern Wales.	<input checked="" type="checkbox"/>
Strengthen the international reputation of the SHA as a centre of excellence for teaching, research and technical innovations whilst also making a lasting contribution to global well-being.	<input checked="" type="checkbox"/>

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

Please mark with a (x) in the box the relevant principles for this scheme.

Click [here](#) for more information

Prevention	<input type="checkbox"/>	Long Term	<input checked="" type="checkbox"/>	Integration	<input checked="" type="checkbox"/>	Collaboration	<input checked="" type="checkbox"/>	Involvement	<input type="checkbox"/>
Within the Agreement DHCW have ensured that 10% of weightings for Award decision made by DHCW is allocated to Social Value including the Foundational Economy in Wales and sustainability.									

Tolley, Laura
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3. PROCUREMENT ROUTE

3.1 How is the contract being procured? Please mark with a (x) as relevant.

Competition		Single source	
Three (3) Quotes	<input type="checkbox"/>	Single Quotation Action	<input type="checkbox"/>
Formal Tender Exercise	<input type="checkbox"/>	Single Tender Action	<input type="checkbox"/>
Mini Competition	<input checked="" type="checkbox"/>	Direct call off Framework	<input type="checkbox"/>
Find a Tender (replaces OJEU, Public Contract Regulations 2015 still apply)	<input type="checkbox"/>	All Wales contract	<input type="checkbox"/>

3.2 Please outline the procurement procedure.

The procurement has been conducted via National Procurement Service All Wales Framework Agreement for Supply of IT Products and Services (ii) Lot 3: Licensing and Subscriptions IT Products and Services (ii) - NPS-ICT-0094 – 19. A mini competition has been undertaken, inviting all 5 suppliers on Lot 3 of the above Framework Agreement the opportunity to submit responses.

3.3 What has been the approximate timeline for procurement?

The procurement timetable, as published within the ITT is detailed below:

Activity	Date
Tender documents completed and issued via Bravo.	6 th April 2023
Tender Response Received date (15:00)	24 th April 2023
Evaluation	25 th April 2023
Notification of Intention to Award	2 nd May 2023
DHCW Board Paper submitted	5 th May 2023
DHCW Board Approval	25 th May 2023
Contract Award	2 nd June 2023

Formal award of contract is anticipated immediately after DHCW Board Approval is received. The contract will take the form of the NPS Terms and Conditions of Contract as tendered, the Specification and the successful supplier's proposal, and any other relevant documentation. Documentation incorporating the foregoing will be signed by the successful supplier and DHCW.

4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1 Outline benefits of preferred option

The following benefits are anticipated:

1. Continuity of service which supports the Welsh Government Covid Response Plan.
2. Agility to scale up service in hours should the demand require it.
3. Medium term agreement that ensures ongoing facility at a minimal cost to NHS Wales and Welsh Government.

5. RISKS & MITIGATION

5.1 Please state risks of not proceeding with the scheme	5.2 Please state any mitigation to reduce the risk if the scheme is not approved
Should this contract not be awarded then the Test, Trace and Protect Service cannot function. Given the size, scale and scope of this requirement and the unpredictability of the need to utilise the services, should a response to a national pandemic be required, DHCW will not be able to support this.	No mitigation is possible.

4. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £5,549,940.40	Including VAT £6,659,928.48
The nature of spend	Capital <input type="checkbox"/>	Revenue <input checked="" type="checkbox"/>

How is the scheme to be funded? Please mark with a (x) as relevant.		
Existing budgets	<input type="checkbox"/>	
Additional Welsh Government funding	<input checked="" type="checkbox"/>	
Other	<input type="checkbox"/>	

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3 (exc. VAT)	Total (exc. VAT)	Total (inc. VAT)
Revenue – Licence, Support & Calls <i>Committed Expenditure</i>	£176,700	£27,499	£27,499	£231,698	£278,037
Revenue – Licence, Support & Calls <i>Optional Expenditure</i>	£1,672,947	£1,822,647	£1,822,647	£5,318,242	£6,381,890
TOTAL	£1,849,647	£1,850,146	£1,850,146	£5,549,940	£6,659,928

Tolley, Laura
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7. DECLARATION OF COMPLIANCE

7.1 Procurement Approval

The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.

Head of Commercial Services:

Julie Francis

Signature:

X

Julie Francis
Head of Commercial Services

7.2 Director Approval

The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.

Directory of Primary Care:

Sam Hall

Signature:

X

Sam Hall
Director of Primary Care

Executive Director of Finance Approval

The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.

Executive Director of Finance:

Claire Osmundsen-Little

Signature:

X

Claire Osmundsen-Little
Executive Director of Finance & Business Assura...

8. APPROVALS AND ASSURANCE RECEIVED

List and include date of approvals and assurance received in support of this scheme.

	Date of Meeting	Outcome
Evaluation Team	25/04/2023	Endorsed
Welsh Government Notification	Not Required under NPS Framework	Not Required under NPS Framework
SHA Board	25/05/2023	To be granted by this document

9. CONFIRMATION OF DHCW BOARD APPROVAL

Where approval by the Board is granted, signature by the Chair of the Board of this document is required as the formal record of such approval and is to be witnessed by at least one (1) Independent Member.

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26th January 2023.

Chair of DHCW Board:

Simon Jones

Signature:

X

Simon Jones
Chair of DHCW Board

Independent Member:

Signature:

X

Independent Member

Chief Executive Officer:

Helen Thomas

Signature:

X

Helen Thomas
Chief Executive Officer

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DIGITAL HEALTH AND CARE WALES

STAKEHOLDER ENGAGEMENT PLAN UPDATE

Agenda Item	5.2
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Nadine Payne, Head of Engagement
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	For Noting
Recommendation	The Board is asked to NOTE the Stakeholder Engagement Plan Update.

Tolley, Laura
18/05/2023 15:38:47

Tŷ GLAN-YR-AFON 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD

Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Development of the new Digital Organisation
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 20000
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	N/A
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Digital Inclusion Charter pledges DHCW to ensure Digital Inclusion principles are embedded in our day-to-day activities.	

IMPACT ASSESSMENT	
<u>QUALITY AND SAFETY</u> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<u>LEGAL</u> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<u>FINANCIAL</u> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<u>WORKFORCE</u> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<u>SOCIO ECONOMIC</u> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.

RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
PaPAG	Public and Patient Advisory Group		

2 SITUATION/BACKGROUND

- 2.1 In order to be a trusted strategic partner and fulfil our ambitions to lead delivery of national digital systems for better health and social care for the people of Wales, we need to work collectively and engage with a range of stakeholders.
- 2.2 An engagement strategy was developed with the support of an external organisation, the Consultation Institute, and approved by DHCW Board in September 2021. The focus of our strategic engagement activities is on our external stakeholders with an overall aim to achieve a higher level of collaboration creating opportunities to both influence and be influenced.
- 2.3 A subsequent engagement action plan was created in January 2022 and following the appointment to the Head of Engagement and an engagement update in November 2022, the Management Board requested a review of the work and a streamlined action plan to be developed.
- 2.4 This paper provides an overview of the refined engagement action plan which has; reviewed DHCW current engagement activity and the existing capacity and capability to deliver; sought initial input of stakeholders including DHCW staff and Board Members, prioritised and focused efforts; introduced appropriate performance measurements; and suggested a suitable governance structure.
- 2.5 The refined action plan and suggested governance and reporting structure also address the recommendations from the internal audit report which include:
 - Plan milestones and timelines to be established and reported to the Board
 - Periodic Board review processes to be established
 - Gaps and omissions in the Plan's detailed actions to be rectified
 - Performance Framework to be developed and implemented

Tolley, Laura
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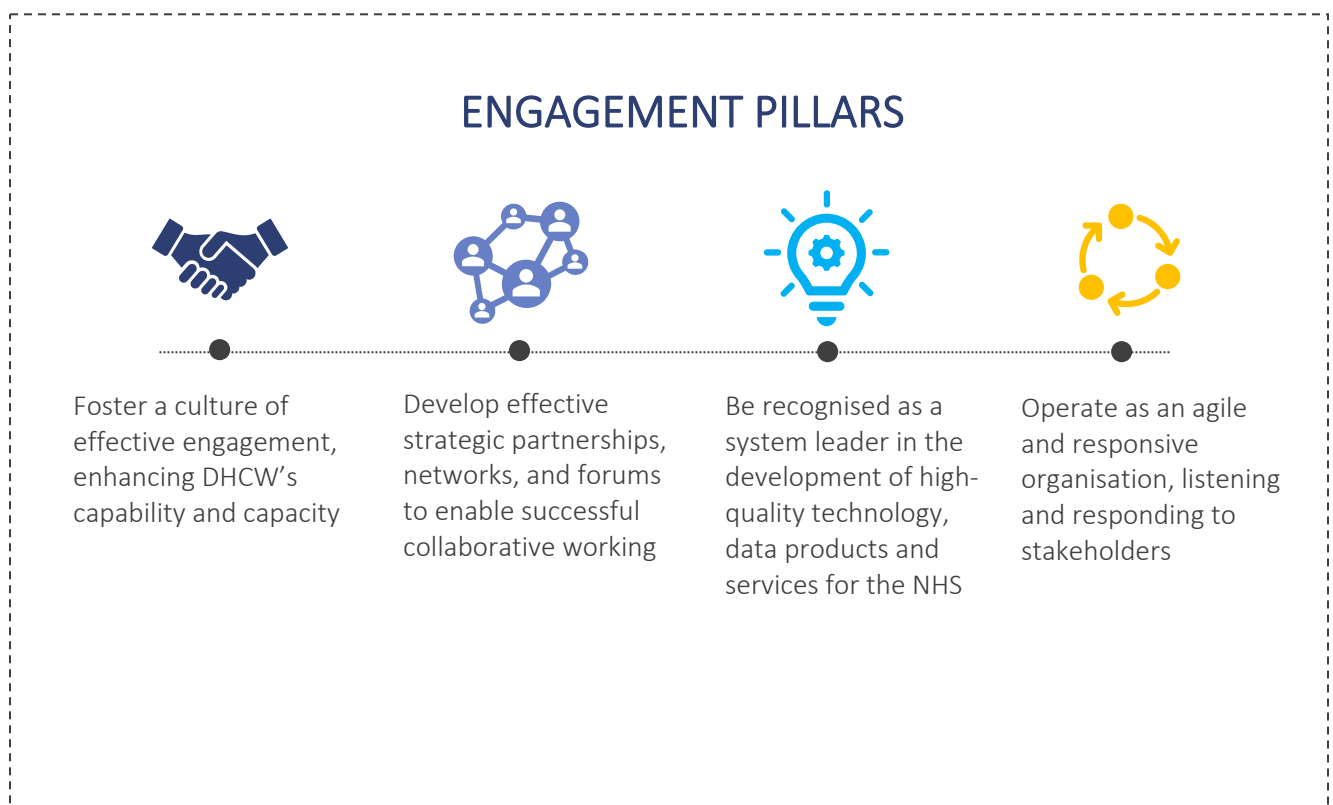
3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Review of Current Activities and Plan

Everyone plays a role in engagement and activity takes place across DHCW, including through DHCW board members, directors, departments, major strategic programmes, and projects, with relationships varying from embedded to burgeoning, and for differing purposes. Individuals and teams are often working independently from one another, with assets and intelligence not always utilised in the most effective way, and confusion and frustration arising for stakeholders.

- 3.2 As DHCW continues to grow and we develop more national programmes and initiatives, with increased staff mobility, having a sound structure underpinning our engagement activities becomes even more important. **Fostering relationships of trust and learning are essential.** There is great potential to develop a more coordinated strategic engagement approach, providing a more informed experience for both DHCW staff and stakeholders and realising more value from our collective efforts.

Following review, including an initial mapping of activities and resource across DHCW, and discussions with stakeholders, the refined plan focuses around four interlinked ‘Engagement Pillars’ that provide the necessary infrastructure and platform for DHCW to achieve its objectives. The pillars contextualise our engagement strategy, provide the focus for our efforts and help communicate our ambitions to our stakeholders.



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3.3 Prioritisation and focus – our engagement pillars

The table below outlines the four engagement pillars of focus and the status, challenges and opportunities identified for DHCW and how we can address these.

Through our collaborative approach, DHCW will look to partner with local and national organisations to support the development and delivery of the digital systems for health and care in Wales, including supporting the value case for digital and looking at digital inclusion.

Pillar 1: Foster a culture of effective engagement, enhancing DHCW's capability and capacity	
What we need to do <ul style="list-style-type: none"> • Support coordinated approach to stakeholder engagement across programmes and departments • Create a consistent engagement experience for our stakeholders • Enable and support our staff to engage effectively • Share best practice and learning 	How we will achieve this <ul style="list-style-type: none"> • Create a DHCW professional network for engagement and communications staff • Make visible and align engagement activities and plans across DHCW • Develop an engagement toolkit • Develop internal platform to share engagement activities and intelligence across DHCW • Develop success criteria and consolidated reporting to measure performance and inform activity
Pillar 2: Develop effective strategic partnerships, networks, and forums to enable successful collaborative working	
What we need to do <ul style="list-style-type: none"> • Support strategic engagement and structured working with key delivery partners • Create clear ownership and coordinated management of relationships • Raise awareness and engage with opportunities to influence • Support new digital health lead and policy development at WG • Understand and respond to changing political landscape at UK level 	How we will achieve this <ul style="list-style-type: none"> • Identify and develop a core set of strategic partnerships, agreeing joint plans and programmes of work • Introduce engagement lead approach • Work with partners to support digital inclusion and secure Digital Inclusion Charter Accreditation. • Map and highlight opportunities to influence and DHCW interaction • Establish regular meetings with WG CDO Office and support development of new strategy • Identify and nurture effective relationships with other relevant political and funding organisations

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Pillar 3: Be recognised as a system leader in the development of high-quality technology, data products and services for the NHS

What we need to do

- Raise awareness of purpose and work of DHCW in Wales, UK and beyond
- Demonstrate our value as a trusted strategic partner
- Contribute to thought leadership series
- Support value case for digital

How we will achieve this

- Refine and publish our engagement strategy
- Support development of comms plan that highlights engagement activities and our coproduction approach
- Highlight and engage on opportunities where we can lead in adding value for our stakeholders and define our value proposition through key messaging.
- Deliver a thought leadership series with partners
- Enable and promote 'communities of practice'
- Identify and engage with global best practice and compare and measure progress, reputation and success

Pillar 4: Operate as an agile and responsive organisation, listening and responding to stakeholders

What we need to do

- Introduce regular feedback mechanisms for delivery and other partners
- Consolidate data and Intelligence on engagement to inform actions and decision making
- Increase our understanding of our stakeholders and their views of DHCW
- Ensure coordinated and timely feedback for stakeholders

How we will achieve this

- Undertake retrospectives with partners and an annual feedback mechanism with stakeholders to increase understanding and inform future focus
- Support undertaking of digital maturity assessment around system usability
- Scope potential for DHCW National Stakeholder Open Forum.
- Embed public voice across DHCW - Map existing public and patient engagement activity and promote PaPAG as mechanism for engagement across DHCW

3.4 Streamlined Action Plan

To achieve our objectives, and aligned to the engagement pillars, the original fifty-two actions have been reviewed, rationalised, and amended to twenty-three with eighteen for commencement within the next 12-month period. This streamlined plan still represents a significant piece of work. It looks to address the current structures and activities within DHCW and importantly it supports the development of the underpinning processes, resources and tools in which we can realise the value from both our current and future engagement efforts. Many of these actions are essential to provide the platform and building blocks from which to develop our stakeholder engagement.

As we move forward, with enhanced capability, capacity and understanding of our stakeholders, we will be able to further build on this work. The full action plan is included in appendix 1.

3.5 Measuring Success

To measure the success of our engagement activities our action plan includes deliverables and timelines against each action. The refined action plan includes the development of an engagement dashboard and several activities to better capture and respond to stakeholder feedback. Our six-monthly reports to board will include capturing of both outputs and impacts.

3.6 Governance

A six-monthly engagement report will be provided to the Management Board to update on the activities, review progress against milestones and discuss and approve any adjustments or amendments to the plan. The regular review will ensure the engagement activities remain aligned to DHCW overall ambitions and reflect any developments or emerging opportunities.

All major programmes will be encouraged to develop engagement plans for approval by their Boards and sharing and alignment across DHCW.

3.7 Resource

To support delivery of the action plan, an initial two Engagement Managers and an Engagement Officer will be funded from within the Directorate. The engagement team will support our strategic engagement with partners including NHS Wales partners, Welsh Government and others, and develop the structure and platform to enable coordinated working across DHCW, including in major programmes and departments. The refined action plan identifies opportunities to engage existing resource and expertise. For example, with partnerships, a standard structure and process will be adopted with visibility across the organisation but 'account management' will be dispersed across DHCW as appropriate.

It is anticipated the newly formed engagement team will work closely with commercial services team, supporting pre-market engagement and consider wider opportunities regarding commercial partners. Further consideration will be needed to develop resource around supporting significant investments and decisions.

Close working with the central communications team is essential to provide the necessary communications support. Joint planning is underway with the newly appointed Assistant Director of Communications who is fully supportive of the refined engagement action plan.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 If the refined action plan is not approved there is a risk that the engagement objectives will not be achieved.
- 4.2 The successful delivery of the action plan is dependent on building additional resource in the central engagement team and the embedding of effective and coordinated engagement across DHCW. The

establishment of the Professional Network for Engagement and Communications to consolidate and align existing resource, alongside other activities to support this, are underway.

5 RECOMMENDATION

5.1 The Board is asked to **NOTE** the Stakeholder Engagement Plan Update.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Director of Planning and Performance/Chief Commercial Officer	7th March 2023	Agreed
Executive Director of Strategy	7 th March 2023	Approved
Management Board	16 th March 2023	Approved

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Appendix 1: Stakeholder Engagement Refined Action Plan 2023-25

No	Action	Measure of success	Lead(s)	Stakeholders	Start Date	End Date
1. Foster a culture of effective engagement, enhancing DHCW's capability and capacity						
1	Establish a DHCW Professional Network for Engagement and Communications	Creation of professional network for DHCW engagement and comms staff with regular meetings agreed	Head of Engagement & Assistant Director of Communications	Internal platform development / all stakeholders	Apr-23	Sep-23
2	Scope and develop an engagement toolkit	Development of an engagement toolkit with materials and resources to support DHCW staff to engage effectively	Head of Engagement/ Professional Network for Engagement and Comms	Internal platform development / all stakeholders	Oct-23	Oct-24
3	Build dedicated capacity in strategic engagement	Recruited initial engagement team staff to deliver refined action plan	Head of Engagement	Internal platform development / all stakeholders	Mar-23	Oct-23
4	Coordinate and make visible engagement strategies and activities across programmes and departments	Creation of accessible central platform with engagement action plans and activities from across DHCW shared	Head of Engagement/ Professional Network for Engagement and Comms	Internal platform development / all stakeholders	Oct-23	Jun-24
5	Set up 'Tractivity' as pilot tool to share engagement intelligence across DHCW	Functioning 'Tractivity' platform to record and share stakeholder information and activity	Public Engagement Lead	Internal platform development / all stakeholders	Apr-23	Aug-23

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Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

6	Establish T&F group to scope CRM system and review Tractvity	Established T&F Group with representation from across DHCW to scope requirements for system for managing stakeholder engagement	Head of Engagement	Internal platform development / all stakeholders	Apr-24	Dec-25
7	Develop success criteria and reporting to measure performance and inform activity	Defined measures of success for engagement actions and agreed reporting structure for engagement activity with DHCW Management Board	Head of Engagement	Internal platform development / all stakeholders	Jan-23	Jun-23
2. Develop effective strategic partnerships, networks, and forums to enable successful collaborative working						
8	Identify and develop a core set of strategic partnerships, agreeing joint plans and programmes of work	List of agreed priority stakeholders with joint plans and programmes of work in place	Head of Engagement and DHCW Management Board	All partners (inc. NHS partners, national bodies, strategic programmes, commercial organisations, universities, and community partners)	Jan-23	Mar-24
9	Introduce an engagement lead approach to better manage stakeholder relationships	Identified and appointed engagement leads for different partners and stakeholder groups to better support collaborative working and communicated this to the external partners and colleagues within DHCW.	Head of Engagement & DHCW engagement leads	All stakeholders	Jul-23	Dec-24
10	Map and highlight opportunities to influence and develop appropriate DHCW engagement	Creation of one accessible list across DHCW of relevant boards and forums and DHCW representation	Head of Engagement / Professional Network for Engagement and Comms	All stakeholders	Oct-23	Mar-24

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11	Establish relationship with WG CDO Office	Initiated engagement with the new WG CDO Health, with regular meetings established with team across different levels	Head of Engagement, Chief Executive Officer and Director of Finance	Welsh Government	Apr-23	Sep-23
12	Achieve Digital Inclusion Charter accreditation and deliver action plan to embed the six pledges	Achieved Digital Inclusion Charter accreditation and delivered action plan to embed the six pledges working with our partners	Organisational Development, Culture and Engagement Lead, Head of Engagement & Public Engagement Lead	Cwmpas, Digital Communities Wales, Welsh Government, NHS partners	Apr-23	Mar-24
3. Be recognised as a system leader in the development of high-quality technology, data products and services for the NHS						
13	Support delivery of communications strategy that highlights our purpose, collaborative approach and outcomes	Developed a 12-month comms plan to support our engagement objectives	Head of Engagement & Assistant Director of Communications	All stakeholders	Jul-23	Mar-24
14	Create value proposition to define our 'offer' for our stakeholders including key messaging	Created suite of materials that make our 'offer' clear for stakeholders, highlighting areas where we can work together and where we add value	Head of Engagement & Assistant Director of Communications	All stakeholders	Oct-23	Oct-24
15	Enable and support communities of practice	List of communities of practice run by DHCW to share with DHCW staff and stakeholders	Head of Engagement / Professional Network for Engagement and Comms	All stakeholders	Apr-24	Sep-24
16	Support delivery of thought leadership series working with other partners	Agreed partnership with LSHW to deliver series of thought leadership sessions in 2023-24.	Head of Engagement, Executive Director of Strategy	LSHW, Academia, Welsh and UK Government, NHS Wales partners and commercial partners	Jul-23	Mar-24

17	Publicise refined engagement strategy, highlighting our ambitions and how we will achieve these	Published our refined engagement strategy, highlighting our ambitions and how we will achieve these	Head of Engagement	All stakeholders	Apr-23	Sep-23
18	Identify and engage with global best practice/exemplar orgs, compare and measure progress, reputation and success	Identified a list of global exemplars and mapped our engagement with healthcare ecosystems outside Wales	Head of Engagement, Executive Director of Strategy	LSHW, Academia, Welsh and UK Government, NHS Wales partners and commercial partners	Jul-24	Dec-24
4. Operate as an agile and responsive organisation, listening and responding to stakeholders						
19	Scope potential for DHCW National Stakeholder Open Forum	Review and provide recommendations for DHCW Management Board on suitability of establishment of National Stakeholder Open Forum	Head of Engagement	All stakeholders	Apr-24	Oct-24
20	Undertake retrospectives on partnerships	Undertaken retrospectives on partnerships, with results collated and shared with DHCW colleagues to inform future working	Head of Engagement, allocated account leads on partnerships	DHCW partners including Health Boards and trusts, and national representative bodies	Dec-23	Jun-24
21	Support undertaking of digital maturity assessment across NHS Wales	Completed an assessment of digital maturity with clinical users of NHS Wales against KLAS framework	Executive Director of Strategy, Head of Planning, Business Change Lead, Head of Engagement	NHS Wales Health Boards and Velindre	Jan-23	Jun-23
22	Scope and undertake an annual feedback mechanism	Scoped and undertaken an annual survey of stakeholders and semi structured interviews with results collated and shared with DHCW colleagues to inform future actions and feedback mechanisms to stakeholders established.	Head of Engagement	All stakeholders	Jul-23	Dec-23

23	Map existing public and patient engagement activity and develop a roadmap including promotion of PaPAG as mechanism for engagement across DHCW	Roadmap for public and patient engagement, including promotion of engagement lead and PaPAG as mechanism for engagement across DHCW	Public Engagement Lead	Public and Patients	Apr-23	Mar-24
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Author: Nadine Payne
Approver: Ifan Evans

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DIGITAL HEALTH AND CARE WALES

STRATEGIC WORKFORCE PLANNING UPDATE

Agenda Item	5.3
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Sarah-Jane Taylor, Director of People and Organisational Development
Prepared By	Sarah-Jane Taylor, Director of People and Organisational Development, Joanne Jamieson Senior Business Partner (People)
Presented By	Sarah-Jane Taylor, Director of People and Organisational Development

Purpose of the Report	For Noting
Recommendation	The SHA Board is being asked to NOTE the content of the report.

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IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A More Equal Wales
If more than one standard applies, please list below: All standards listed under the Well-Being of Future Generations Act applies	

DHCW QUALITY STANDARDS	BS 76005
If more than one standard applies, please list below:	

HEALTH CARE STANDARD	Staff & Resources
If more than one standard applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Not Applicable	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Ensuring we have the right number of employees and skill mix within the workforce for now and in the future to meet the organisation's IMTP and other strategic commitments.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Enabling us to meet the budgeted establishment and invest in the right skills to deliver on plan the organisation's commitments. Potential increase in Training & Development Budget to meet the essential skills training and development requirement requested by Directorate Heads for 23-24
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Analysis of Workforce Planning and Development and working closely with Directorates on the workforce priorities

SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below
	Attracting talent from Wales and wider ensuring we support the Wellbeing & Future Generations Act by providing excellent employment opportunities and career development.
RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below
	Workforce planning will allow us to horizon scan and ensure we have the skills to meet DHCW strategic objectives and plans.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
P&OD	People and Organisational Development	DDaT WIDI	Digital, Data and Technology Framework Wales Institute of Digital Information

2. SITUATION/BACKGROUND

- 2.1 Strategic Workforce Planning is the process of identifying skills areas within the workforce and forecasting future workforce needs and aligning them with DHCW's strategic objectives to better understand gaps and establish priorities in the short, medium, and longer term. This involves joint work between the specialist People and Organisational Development team working closely with Directorate Heads. Activities include, reviewing current and forecasted workforce requirements and gaps, identifying training needs and skills gaps, and developing detailed plans to address those gaps with the aim of supporting DHCW to have the right people with the skills necessary to deliver the IMTP commitments and support DHCW in being world class.
- 2.2 One of the key benefits of robust Strategic Workforce Planning is that it allows organisations to proactively address potential workforce and skills shortages before any deficit is felt. By forecasting future workforce needs, DHCW can anticipate and plan mitigation actions to address identified skill shortages and prevent disruption to delivery of DHCW's commitments.
- 2.3 Strategic Workforce Planning is essential to aid in identifying and developing the competency, capability of the workforce. By investing in the right development this creates a highly skilled and productive workforce equipped to meet the ever-changing needs of the NHS in Wales; enabling DHCW to be a trusted strategic partner (Mission 5 IMTP) and aid in attracting and retaining new talent to support the organisation capably in the future operating on the digital world stage.
- 2.4 By working closely with the Welsh education sector and with specific regard to the WIDI partnership we can influence and share knowledge of what skills the digital industry will need in the future. This supports the conversion from education to the workplace and having marketable degrees and careers for the new pipeline of graduate talent into the organisation. From the socio-economic perspective this supports Welsh students seeking a career in digital.
- 2.5 The Strategic Workforce Planning Pack was provided by the People and Organisational Business Partners to all the Directorate Heads and Deputy Directors in February 2023

following the formal presentation of requirement and launch by the Director of People and Organisational to the Strategic Resourcing Group earlier in the month. Completion and return organisational wide was achieved in April 2023.

The analysis from this exercise is attached in the **Appendix 1**.

3. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 In summary, the initial findings of the strategic workforce planning indicate:

- **Age Analysis**

The current age profile within the Digital, Data and Technology Framework (DDaT) roles shows that 78% are between the ages of 20 - 50. This indicates a healthy distribution for DHCW.

- **Geographical Analysis**

The geographical analysis undertaken indicates that 60% of employees who work for DHCW are located within the Cardiff area. Overall, 91% of employees live in South Wales and 6% North Wales and boundaries and the rest dispersed across England, Scotland, and Northern Ireland.

- **Recruitment Analysis** – forecast recruitment for 23-24 (DDaT+ categories)

The top three categories within the analysis findings are:

- **IT Operations** – IT Service Managers, Service Desk Managers, Service Transition Managers, End User Computing Engineer, Infrastructure Operations Engineer, Applications Operations Engineer etc
- **Product and Delivery** – Product Managers, Business Analysis, Programme Delivery Manager, Delivery Managers and Service Owner
- **Technical** – Data Architect, Dev Ops Engineer, Infrastructure Engineer, Software Developer and Technical Architect

These are sub-categorised into recruitment activity required for each quarter of 23-24.

- **Skills Gap Analysis**

The findings which were all signed off by Directorate Heads for their teams indicated that 46% of the training requested is for essential skills acquisition. The remainder is desirable. The essential skills training top three is:

- **Software development**
- **ITIL service management**
- **Leadership and management**

In terms of ability to access essential training, upon further analysis this can be achieved in part with the various training provisions available already and time needs to be allocated during the year for members of the workforce to be able to undertake the training modules and development activities. However, it should be noted that to achieve all the essential training determined by the Directorate Heads over the next year further financial investment may be required. A review by Heads and an exploration of access to wider

training through partners will be undertaken and an aggregate summary recommending priorities which support growth areas and future fit will be reviewed and signed off at Executive level.

4. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 Without embedded, robust organisational workforce planning an organisation cannot effectively plan, resource, and prioritise recruitment activity and development provision effectively. This will result in workforce and skills gaps that will likely impact on DHCW delivering its IMTP and future strategic goals. Therefore, the workforce planning round earlier this year was a vital first step in understanding the workforce we have better and what future roles and skills are going to be needed organisationally into the future. It was evident as part of this year's exercise that skills in workforce planning organisationally need to be part of the development commitments. This will enable more detailed understanding and planning organisationally, especially to support longer term planning across the professions.

There will be close working and a significant investment of time and support factored into the work programme of the Senior People and OD team in order to drive this forward. This will be led by the Director of People and Organisational Development and is integrated into the Strategic Resourcing Group programme of works for 23-24 in which the Directorate Heads and Deputy Directors are members.

5. RECOMMENDATIONS

- 5.1 Although DHCW has a healthy age profile, a consideration of further work on single point of failure roles (relating to specific individuals' knowledge) and critical roles (organisational skills-roles) will be undertaken in June 2023 with the succession planning work aligned to future digital needs in the coming years. An example of an area of growth is within the Product Approach, therefore priority in terms of recruitment, training, and development will feature heavily this year. The Talent Management strategy programme of work commitments will be supportive in this area.
- 5.2 There needs to be consideration of different attraction methods and contracting arrangements in order to support bringing in talent from a wider geography across Wales and the UK. Providing job opportunities across Wales will align to the socio-economic duty within the Wellbeing and Future Generations Act, 2015 and DHCW's Strategic Equality Plan and it is hoped will attract more Welsh speaking employees and support a more diverse and skilled workforce that are geographically dispersed across a wider geography as the hybrid working approach will support this, especially considering only 6% of the organisation are from North Wales. Close working with the education sector (universities, colleges, and schools) and local communities will be programmed into the 23-24 commitments.
- 5.3 As part of the DHCW Strategic Resourcing Group an organisational programme committed to investing in education leavers at all ages (school leavers, interns, apprenticeship schemes and graduates), is required for 23-24 within an agreed funding model. Placements and work with the education sector will be led by the People and OD team supported by Digital Leads and

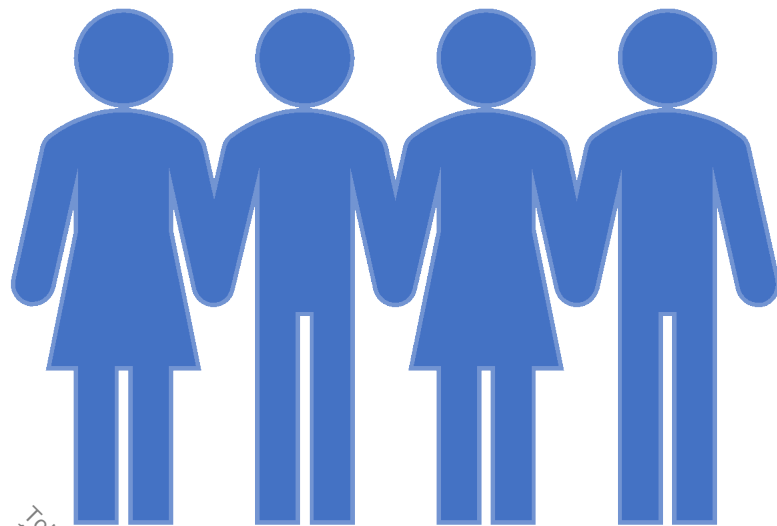
Directorate Heads.

- 5.4 Development of all the (DDaT+ career pathways) is being taken forward this year, which will align with the DHCW People and Organisational Development Strategy commitments, and the recommendations made in the Digital Workforce Review paper in 2022. This will strengthen our Employee Value Proposition (EVP) by providing clear career development opportunities and career pathways. The importance, particularly for Bands 5 to 7 from where the organisation has the highest “leavers” with the reason for leaving as “career progression”. A key component of the talent work programme this year will support these pay bands and it is hoped reduce turnover and support the DHCW’s retention strategy.
- 5.5 In addition to the digital skills required to implement the Product approach, further focus will be required to consider future skills development in e.g., Robotics, AI and roles of an AI Engineer, Data Scientist with specialisation in Natural Language Processing and what impact this may have on the roles of Data Analysts and Test Analysts. Quarterly stock check workforce planning will take place throughout the year 23-24, focusing on in-year position to plan, detailed recruitment and training plans and future focus of skills requirements within professions. There will be a focus of these plans at Directorate meetings each month, at the Strategic Resourcing Group (reported up to Executives meeting), Directorate Reviews and WIDI meetings.
- 5.6 There is to be consideration of a new Welsh Heads of Profession network operating across the (DDaT+ framework), made up by existing digital professionals working across the NHS in Wales who will support the long-term skills and resourcing forecast in each profession. This will be a feature of the work which will be taken forward this year nationally to implement the recommendations of the Workforce Review paper 2022. The inaugural meeting to be chaired by the DHCW Director of People and OD is scheduled for 23rd May 2023. A paper is being prepared for the Digital Directors Group to consider the establishment and value of a national Welsh Digital Heads of Profession network.
- 5.7 The SHA Board is being asked to **NOTE** the content of the report.

6. APPROVAL / SCRUTINY ROUTE

APPROVAL / SCRUTINY ROUTE - Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Executive Directors Meeting	10 th May 2023	Approved
Management Board	12 th May 2023	Approved
Strategic Resourcing Group	23 rd May 2023	To be held – future meeting as of date of issue of Board paper

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Workforce Planning Findings April 2023

What information did we request

Re-affirm who works within the
Directorate/Programmes – base data check

Re-affirm the recruitment status and
requirement within the agreed establishment

DDaT+ classification of roles

What's the skills gap – training needs both
essential and desirable for the year

Resource requirements – in year and beyond

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Current staff in post headcount as at 1st April 2023

	Fixed Term Temp	Permanent	Secondments	Contractors	Total
Application Development and Support	14	322	1	4	341
Clinical	15	112	6	0	133
Strategy and Engagement	49	169	4	9	231
People and OD	9	26	0	0	35
Executive	0	7	1	0	8
Board and Governance	7	23	0	0	30
Finance and Business Assurance	5	73	0	1	79
Primary Care Community and Mental Health	5	59	0	0	64
ICT	3	230	0	9	242
Total	107	1021	12	23	1163

The staff in post headcount is based on Directorate budget only.

*Definition of secondment is that a secondment agreement is in place with an external employer.

** Does not include contractors through call off contracts

Who we are – A snapshot of the shape of our Workforce

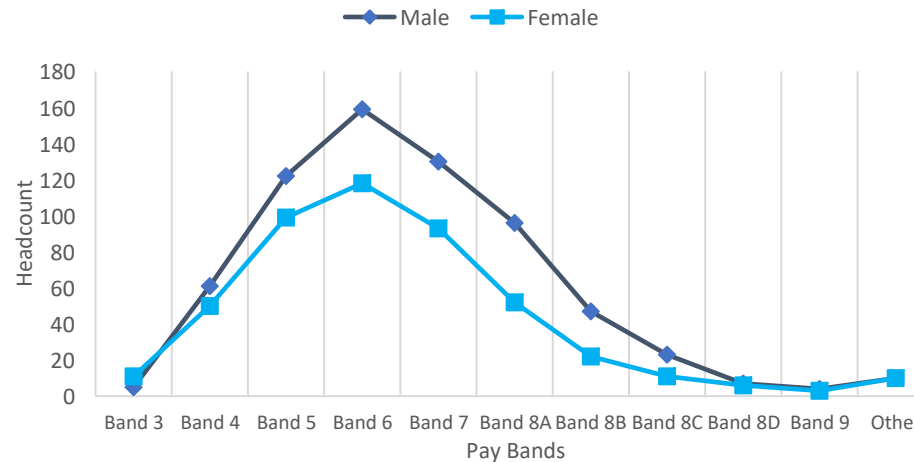
NUMBER OF DIRECTLY EMPLOYED STAFF

The gender split for DHCW is 42% female and 58% male as at March 2023. This is a really positive indicator in the Digital profession in Wales as a recent ONS report noted that 31% of UK tech jobs are held by women

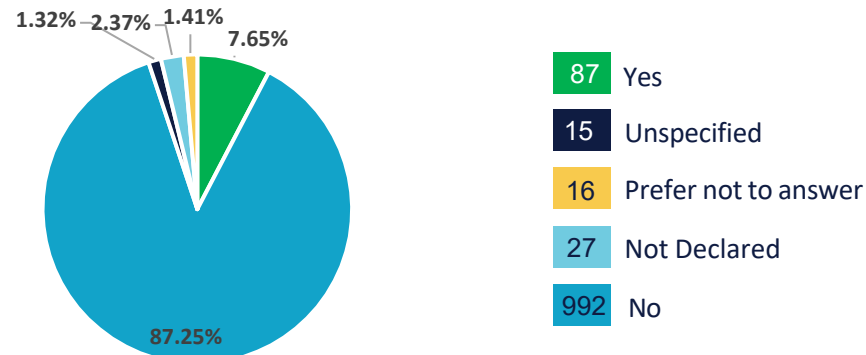
BLACK, ASIAN & MINORITY ETHNIC COMMUNITY – 8.95% OF DHCW WORKFORCE

PAY BAND BY MALE AND FEMALE

PAY BAND BY MALE AND FEMALE



DISABILITY



4 GENERATIONS

8.78% BABY BOOMERS
(aged between 57 – 75)

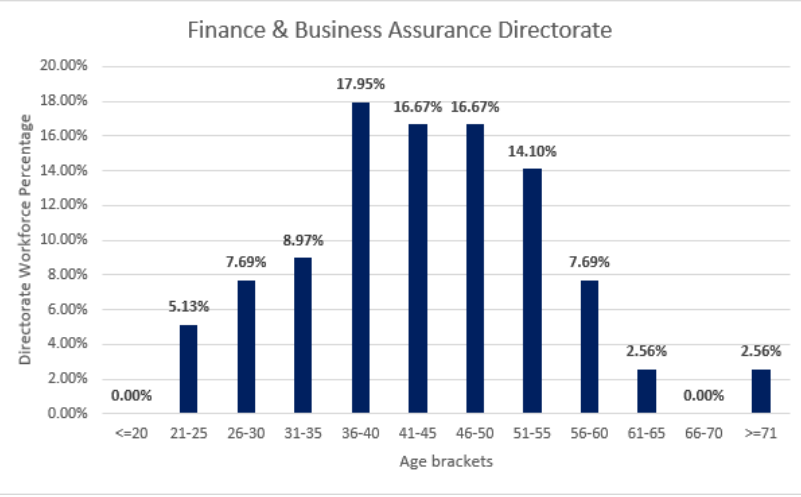
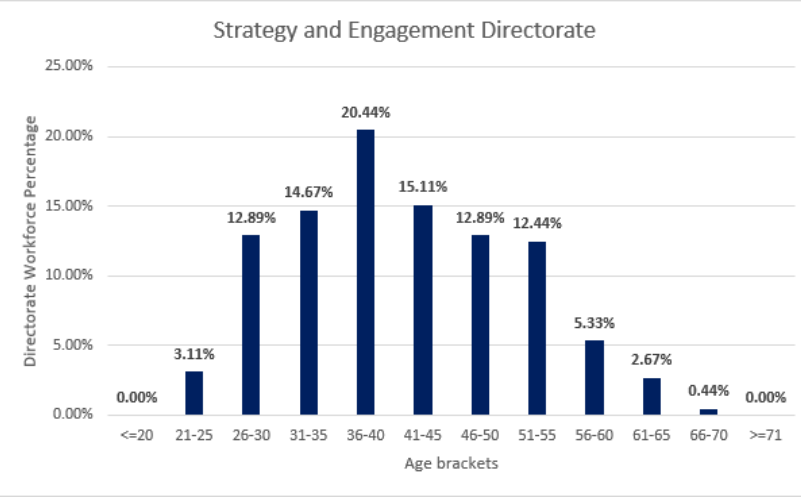
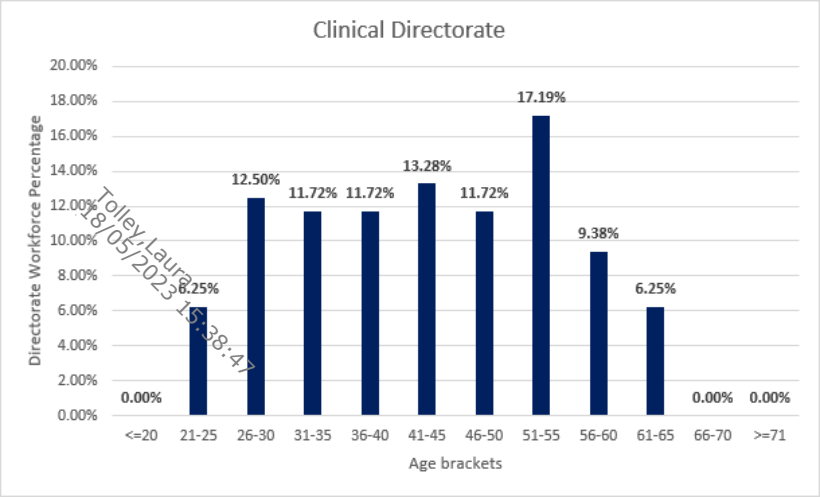
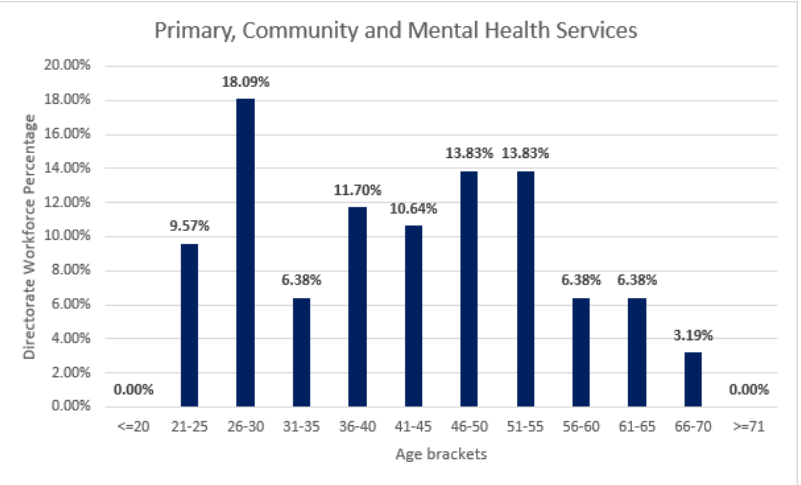
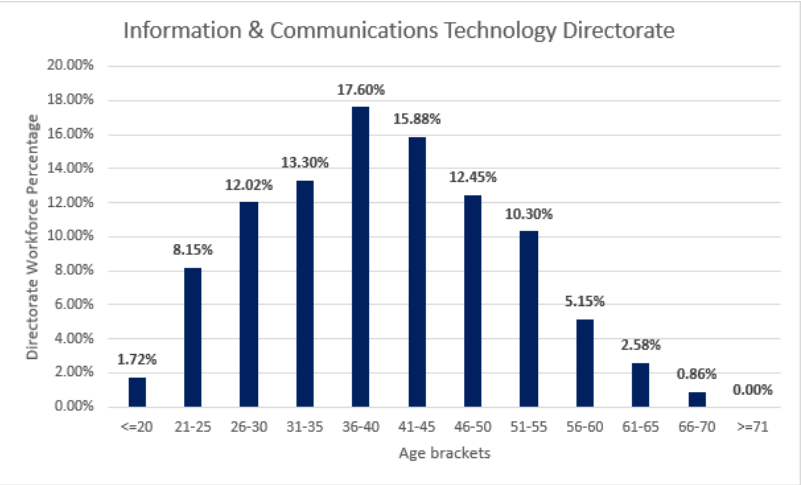
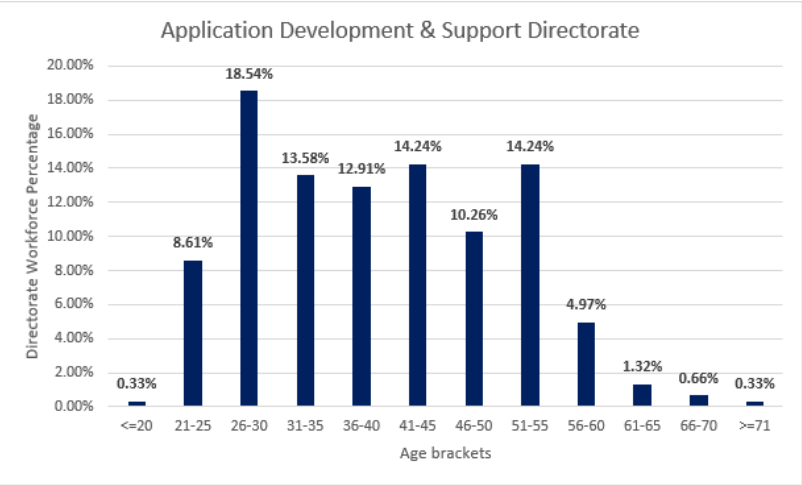
41.70% GENERATION X
(aged between 41 – 56)

43.81% MILLENNIALS
(aged between 25 – 40)

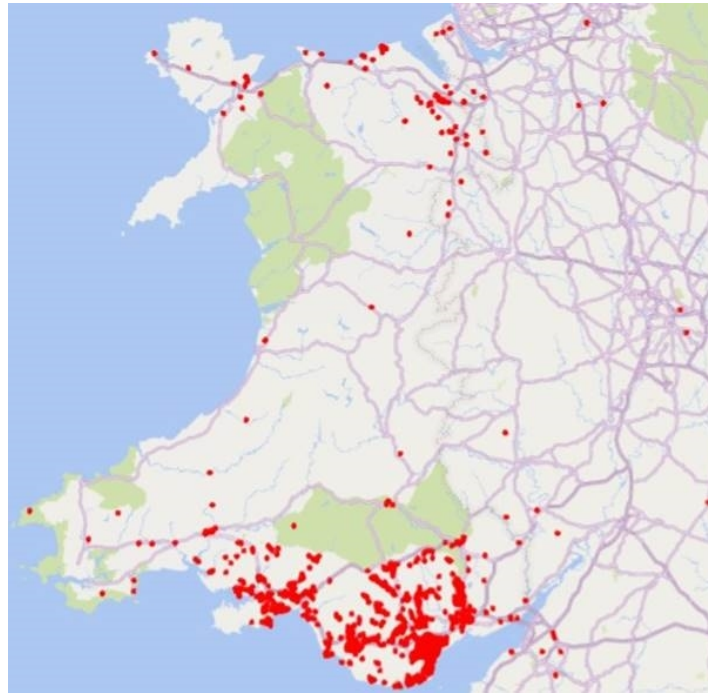
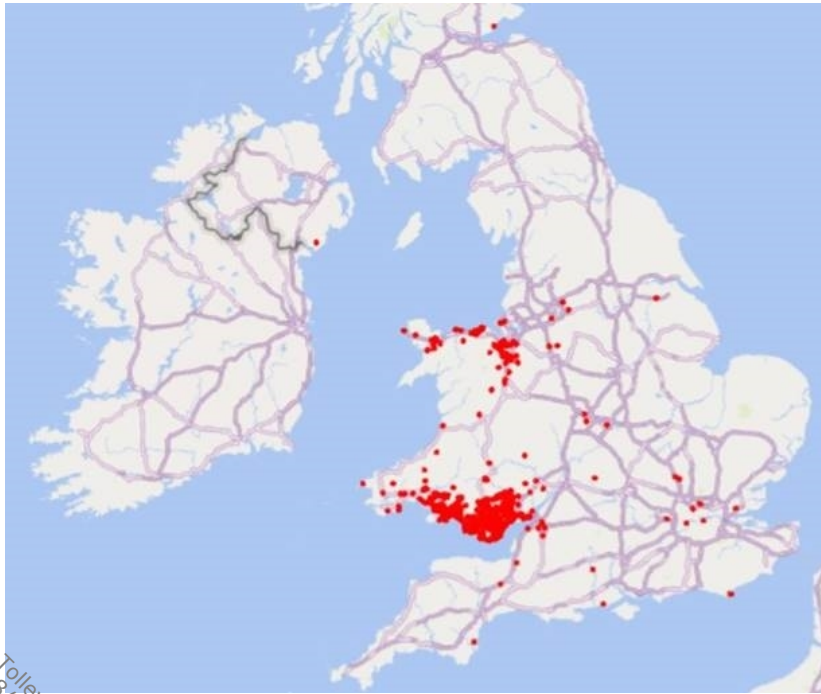
5.71% GENERATION Z
(aged under 25)

86.7% I would recommend my organisation as a place to work (NHS STAFF SURVEY)

Directorate Age profile



Where our employees live



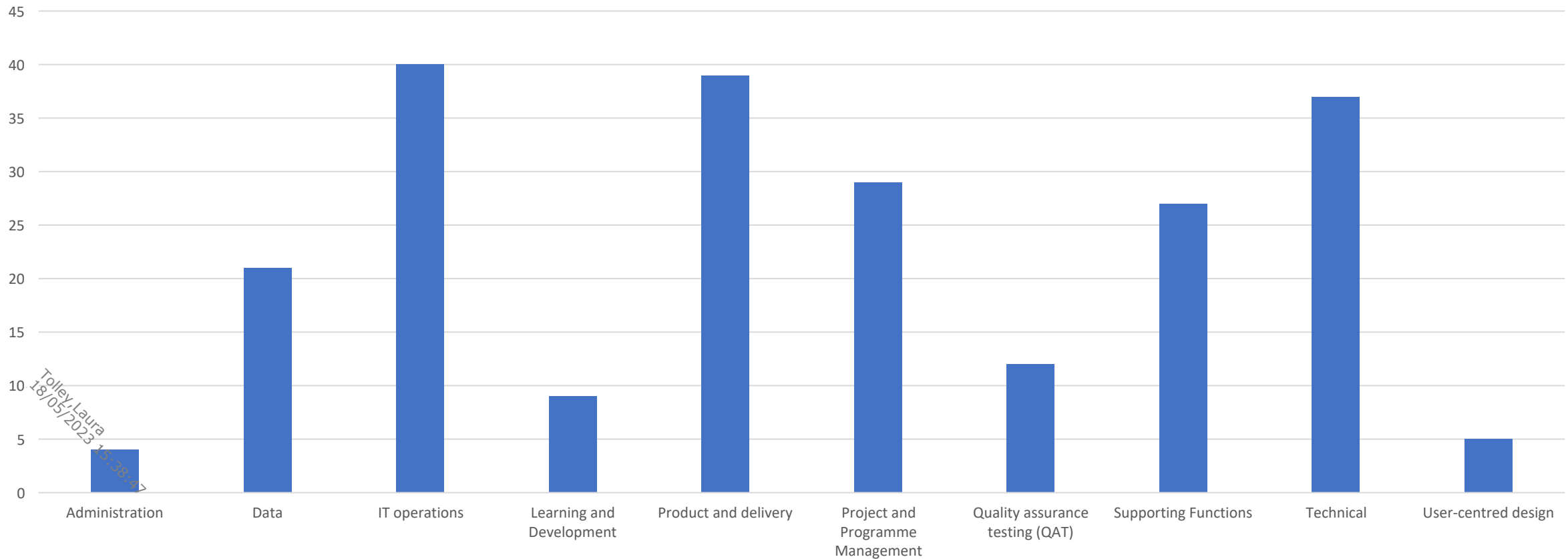
60% of employees within Cardiff area (CF post code)

New contracting arrangements need to be considered to support attracting and retaining talent from the wider Wales and UK geography.

City	%
Cardiff	59.70%
Swansea	18.06%
Newport	11.83%
Llandudno	3.56%
Chester	2.49%
Bristol	0.53%
Shrewsbury	0.44%
Llandrindod	0.36%
London	0.36%
Hereford	0.27%
Birmingham	0.18%
Brighton	0.18%
Crewe	0.18%
Gloucester	0.18%
Luton	0.18%
Taunton	0.18%
Belfast	0.09%
Bournemouth	0.09%
Bow Street	0.09%
Carlisle	0.09%
Coventry	0.09%
Doncaster	0.09%
Kirkcaldy	0.09%
Manchester	0.09%
Oldham	0.09%
Salisbury	0.09%
Slough	0.09%
Southend	0.09%
Stockport	0.09%
Torquay	0.09%
Twickenham	0.09%

Forecasted Recruitment per DDaT Plus Categories

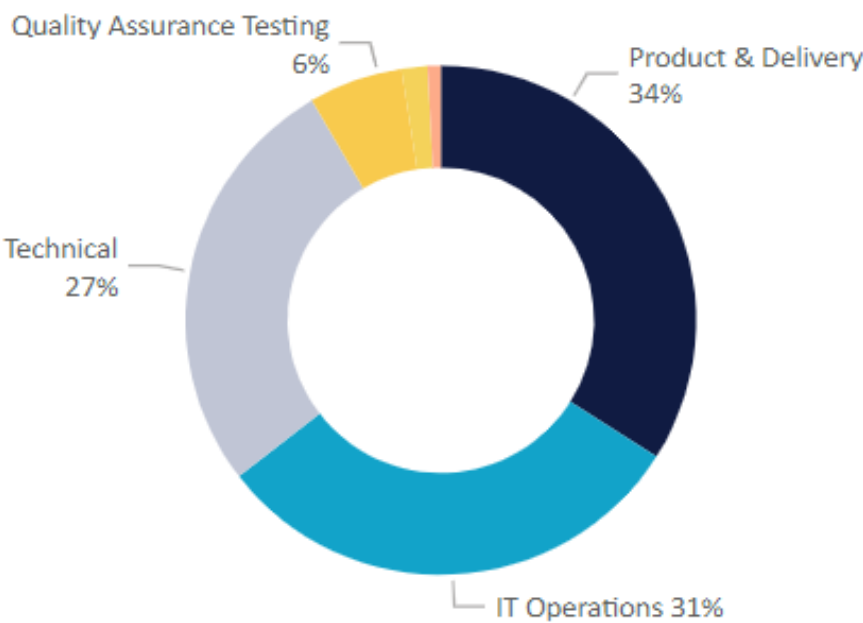
Forecasted Recruitment DDaT Plus Job Family – signed off at Directorate Head/Above level



*Learning & Development = Business Change Team

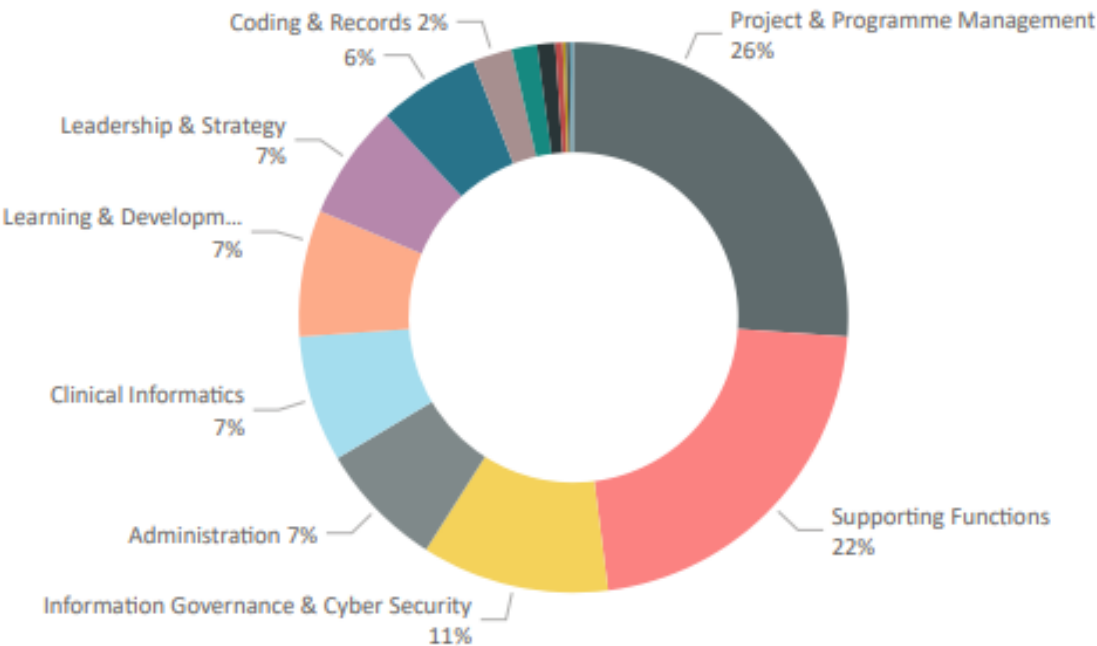
DDaTPlus Profile of DHCW Workforce

Breakdown of DDaT Job Families in DHCW Workforce



DDaT Category Only

- DDaT Job Families
- Data
 - IT Operations
 - Product & Delivery
 - Quality Assurance Testing
 - Technical
 - User-centre design



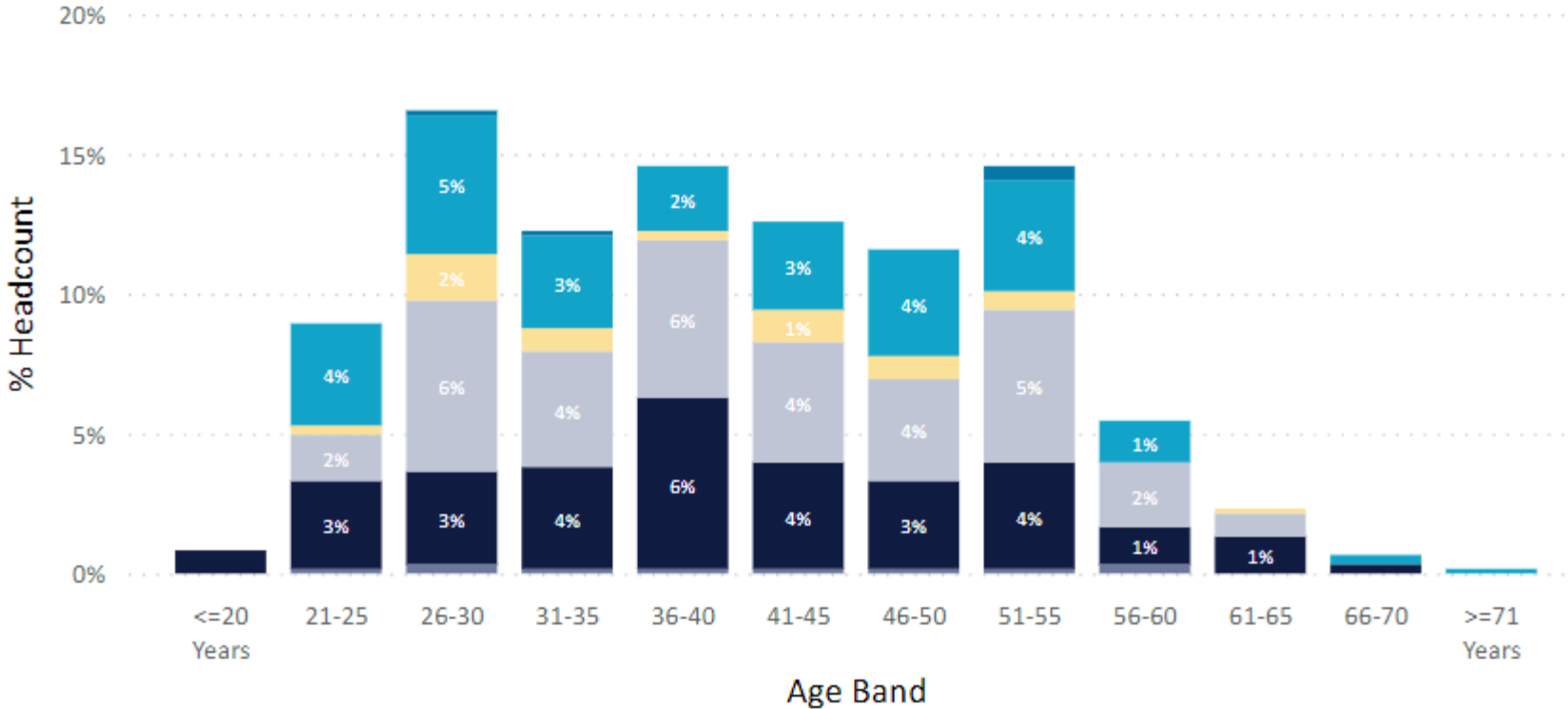
"Plus" Category Only

- "Plus" Job Families
- Administration
 - Supporting Function
 - Project and Programme Management
 - Learning & Development e.g. Business change

Age Profile

% Employee By Age-Band in DDaT Job Family for DHCW

DDaT Data IT Operations Product & Delivery Quality Assurance Testing Technical User-Centred Design

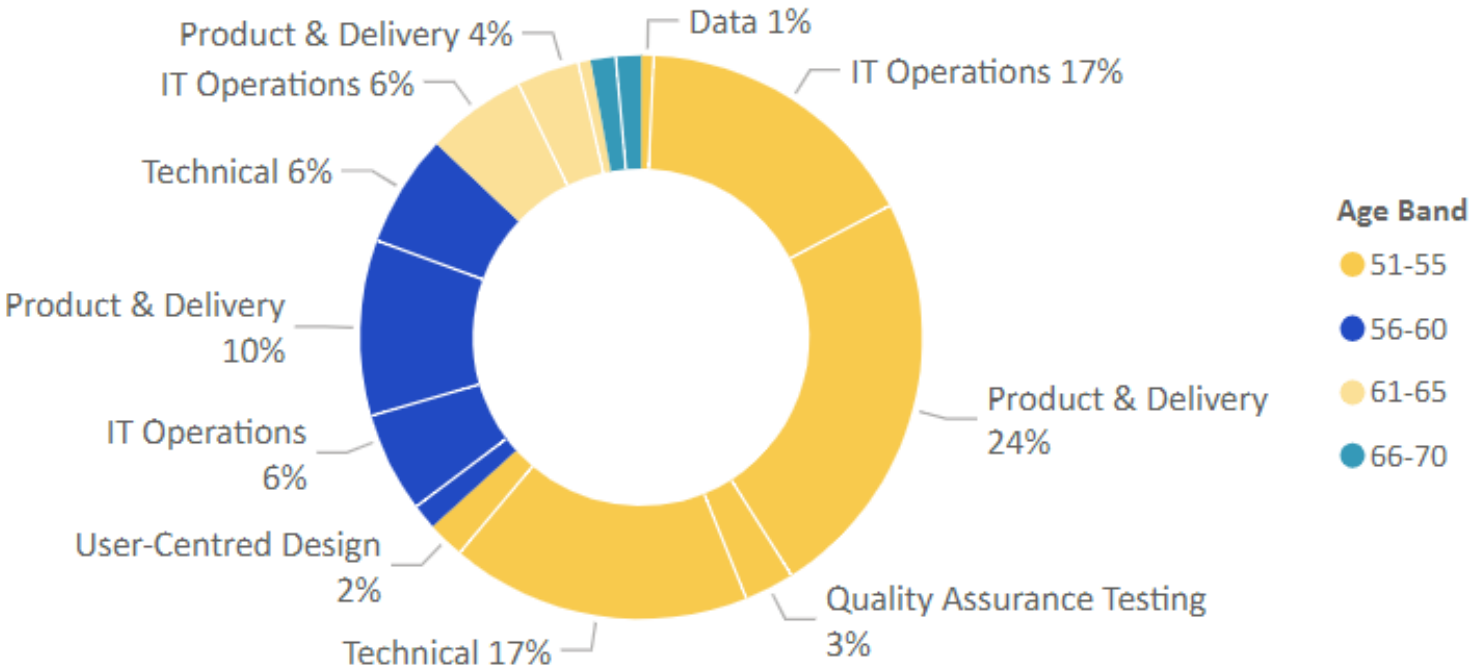


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Age Profile in DDaT job family

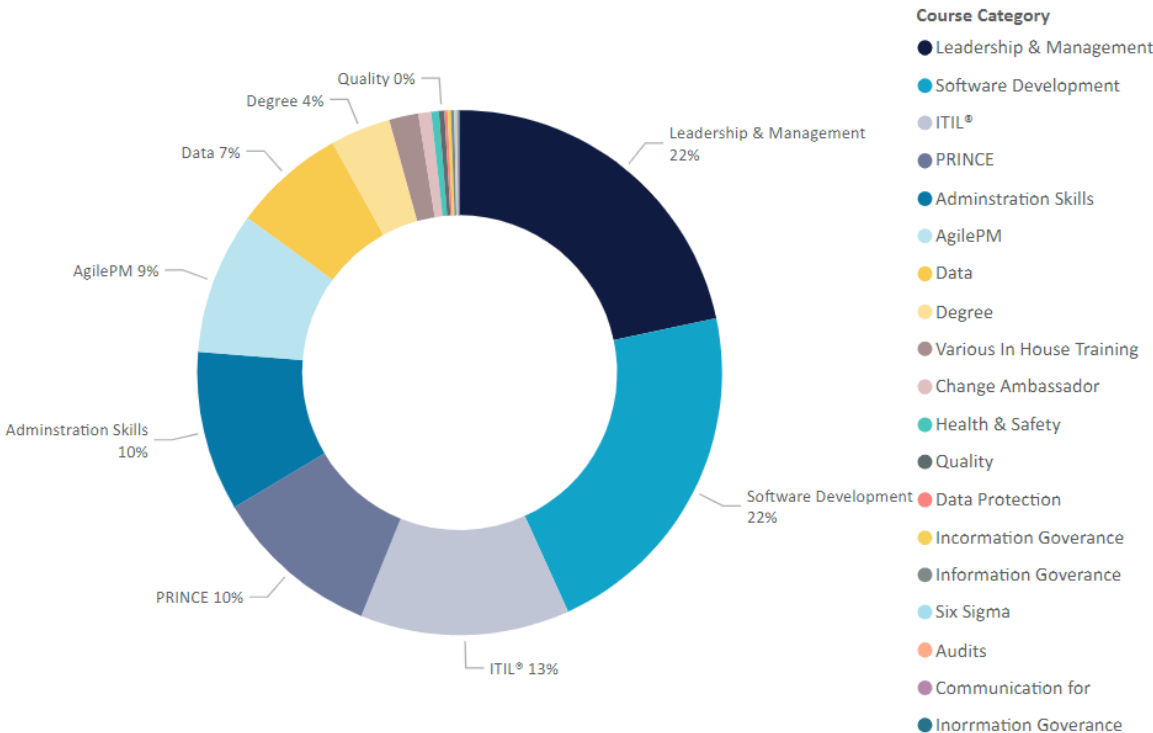
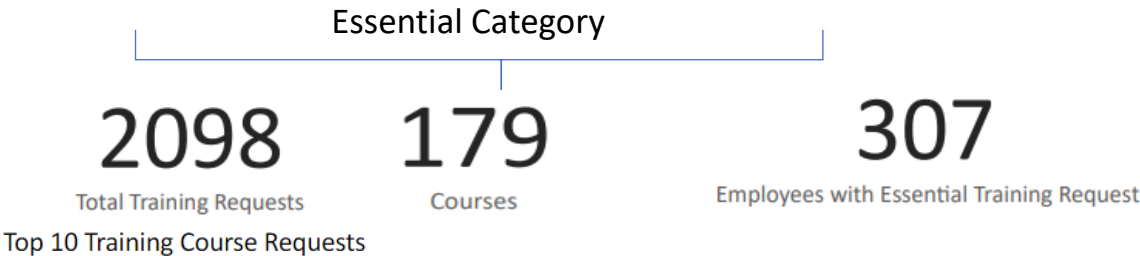
Succession Planning

% Employee in DDaT Job Family for DHCW for over 50s

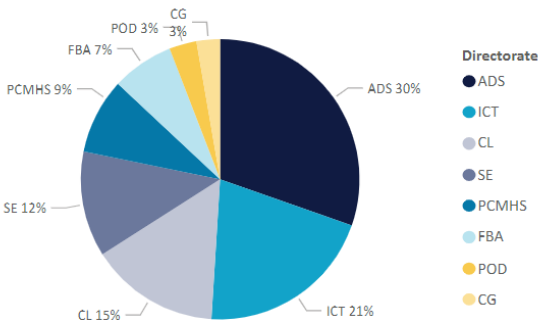


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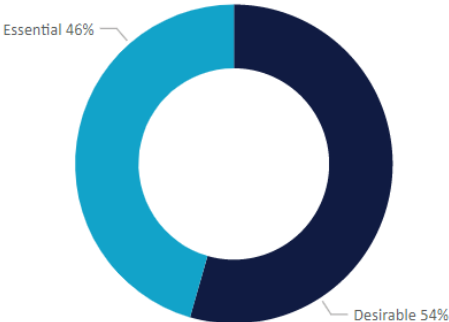
Skills Gap Analysis



Employees Requesting Training by Directorate



Training Request Breakdown By Priority



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DIGITAL HEALTH AND CARE WALES

TRANSFER OF DIGITAL EYECARE PROGRAMME

Agenda Item	5.4
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Sam Hall, Director of Primary, Community and Mental Health Digital Services
Prepared By	Alison Paul. National Programme Manager Digital Eyecare Programme
Presented By	Helen Thomas, Chief Executive Officer

Purpose of the Report	For Approval
Recommendation	
<p>The Board is being asked to:</p> <ol style="list-style-type: none"> 1) NOTE the recommendation of the recent gateway zero review, supported by Welsh Government, requesting DHCW take over the ownership and management of the Digital Eye Care Programme, currently managed by Cardiff and Vale UHB 2) NOTE progress and planned actions to meet the proposed transfer date of 1st June. 3) APPROVE to the proposed transfer date of 1st June and to pause and reset the Programme during the period of due diligence and transition. 	

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Tŷ GLAN-YR-AFON 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD

Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Mobilising digital transformation and ensuring high quality health and care data
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CORPORATE RISK (ref if appropriate)	
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Timely Care
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: An EQIA will be undertaken upon completion of the due diligence and transition	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below The Eyecare Digitalisation Programme enhances the quality of eyecare to Welsh citizens
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Any legal implications will be worked through during the transition phase
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Any financial implications will be worked through during the transition phase
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below To be worked through during the transition phase
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
RESEARCH AND INNOVATION	No, there are no specific research and innovation implications

IMPLICATION/IMPACT	relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CaVUHB	Cardiff & Vale University Health Board	LHB	Local Health Board
CIN	Clinical Implementation Network	NWSSP	NHS Wales Shared Services Partnership
EPR	Electronic Patient Record	OGC	Office of Government Commerce
SRO	Programme Senior Responsible Officer	RAID	Risks, Assumptions, Issues, Dependencies

2 SITUATION/BACKGROUND

- 2.1 The National Digital Eye Care Programme is a Welsh Government programme of work in place to digitise the Ophthalmology Electronic Patient Record [EPR] and Referral processes across NHS Wales. The National programme has been managed and delivered by Cardiff and Vale University Health Board [CaVUHB] on behalf of the Welsh Government, all Welsh Local Health Boards [LHBs] and Primary care Optometrists
- 2.2 In summer 2022 CaVUHB approached DHCW to take on responsibility for the management of the Programme and to start preparations for Service Acceptance. Consequently, the SRO commissioned a strategic Assessment (OGC "Gateway 0") of the Programme. The review was conducted by the Welsh Government Integrated Assurance Hub in March 2023 who awarded a "Delivery Confidence Assessment" status of Amber/Red.
- 2.3 The Review Team made six recommendations as follows:

Ref	Recommendation	Urgency (C/E/R)	Target date for completion
1.	The Programme Team should, develop and implement a communications strategy and engagement plan.	C- Critical	1 st May 2023
2.	The Programme Team should further develop risks and issues management documentation and embed RAID best practice.	C- Critical	1 st April 2023

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Ref	Recommendation	Urgency (C/E/R)	Target date for completion
3.	The SRO should review the Governance arrangements to clearly define the roles, responsibilities and members of the programme and stakeholder boards in order to make clear, focused, and timely decisions.	C- Critical	1 st May 2023
4.	The SRO should, develop a clear plan with key partners to set out delivery of the artefacts, completion of required approvals and to bring the solution into live service across Wales.	C- Critical	1 st May 2023
5.	The SRO should undertake a full financial reconciliation of the Programme finances.	C- Critical	1 st May 2023
6.	The Programme should be moved to DHCW.	E- Essential	Do by, 1 st June 2023

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The transition has been agreed in principle. DHCW has appointed the National Programme Manager (commenced 17th April), to work with CaVUHB to plan and execute the Programme transition.
- 3.2 We have arranged a series of Programme status review meetings to gather information from the senior CaVUHB Programme team, senior national programme stakeholders and LHBs to determine current status and expectations.

During May the following streams of work will be concluded:

- A series of review meetings with key stakeholders
- Introductory meetings between the DHCW National Programme manager and LHBs Programme Managers/SROs
- Review of Key Programme documents
- Receipt of the transition deliverables identified by the " Gateway 0" review

- Matrix of resources engaged on the Programme, including type, tenure, cost, role etc.
- Receipt of financial analysis for 22/23 and 23/24 and full understanding of finances and commercials
- Fully understand the requirements for the O365 licenses for release to Optometrists

On conclusion of this work the SHA Board will be updated.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 To date, only one LHB other than CaVUHB has gone live with Open Eyes, this being for Glaucoma at Cwm Taf Morgannwg UHB, the eye clinics of which are provided by CaVUHB. CaVUHB has been using Open Eyes EPR prior to the National Programme commencing. A clear commitment and up to date delivery plans for the remaining Health Boards to go live with Open Eyes EPR remains to be achieved. Electronic referrals from Optometrists have not yet been implemented, but has been developed.
- 4.2 The National Programme Manager (DHCW) has met with the CaVUHB Programme Manager and Architect and agree that transfer of the Programme could take place on the 1st June, subject to Board approval, but should be considered as the first step. The transition of the live service (currently hosted in Cardiff and Vale UHB) including technical solution will need joint planning during the summer 2023 to ensure a successful and smooth transfer to DHCW at an agreed date in the autumn 2023.
- 4.3 The Transition phase will provide time for appropriate due diligence to be conducted and identify technical solutions for future DHCW hosting of Open eyes and for providing ongoing support.
- 4.4 A number of high-level activities are planned during May and during the transition phase.
- 4.5 The approach to be taken would be to pause and reset the Programme during the period of due diligence and transition.

5 RECOMMENDATION

The Board is being asked to:

- 1) **NOTE** the recommendation of the recent gateway zero review, supported by Welsh Government, requesting DHCW take over the ownership and management of the Digital Eye Care Programme, currently managed by Cardiff and Vale UHB
- 2) **NOTE** progress and planned actions to meet the proposed transfer date of 1st June.
- 3) **APPROVE** to the proposed transfer date of 1st June and to pause and reset the Programme during the period of due diligence and transition.

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6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Management Board	May 2023	NOTED
SHA Public Board	25th May 2023	

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DIGITAL HEALTH AND CARE WALES RISK MANAGEMENT REPORT

Agenda Item	6.1
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Bethan Walters, Risk and Regulation Officer
Presented By	Chris Darling, Board Secretary/Risk Owners

Purpose of the Report	For Approval
Recommendation The Board is being asked to: NOTE the Risk and Board Assurance Framework Workplan; RECEIVE and DISCUSS the status of the Corporate Risk Register including changes since the last meeting; APPROVE the DHCW Risk Appetite statement and associated risk tolerances and appetite per risk domain.	

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1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Delivering High Quality Digital Services
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CORPORATE RISK (ref if appropriate)	All are relevant to the report
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 9001
If more than one standard applies, please list below: ISO 14001 ISO 20000 ISO 27001 BS 10008	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below: Safe Care Effective Care	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Risk Management and Assurance activities, equally affect all. An EQIA is not applicable.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.

SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WG	Welsh Government
NI	National Insurance	DPIF	Digital Priorities Investment Fund
DSPP	Digital Services for Patients and the Public		

2 SITUATION/BACKGROUND

- 2.1 The DHCW Risk Management and Board Assurance Framework (BAF) Strategy was endorsed by the Audit and Assurance Committee, Digital Governance and Safety Committee and approved formally at the SHA Board on the 27 May 2021. This outlined the approach the organisation will take to managing risk and Board assurance.
- 2.2 The [Risk and BAF workplan for 2023/24](#) includes progress of activity tracked on the forward workplan.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 Board members are asked to consider risk, in the context of assurance 'what could impact on the Organisation being successful in the short term (1 – 12 months) and in the longer term (12 – 36 months)'.
- 3.2 The wider considerations regarding organisational risk factors have been previously stated but remain relevant. They include, sector, stakeholder, and system factors, as well as national and international environmental factors.
- 3.3 In considering environmental and international factors members should note the World Economic Forum Long Term Global Risks Landscape (2023) report, more information can be found [HERE](#). This report considers risk from an international perspective, the report highlights a number of highly relevant areas for consideration by DHCW, which were discussed by Board members at the Board Development Day held on the 9 March 2023.

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- 3.4 The below are key points to note/summaries from the World Economic Forum Term Global Risks Landscape (2023) for context and consideration by the Board:

Widespread cybercrime and cyber insecurity features in both the 2 year and 10 year top ten global risks by severity of impact.

A new Chapter – Digital rights: privacy in peril, has been included in the report. Key extracts from this section include:

Research and development into emerging technologies will continue at pace over the next decade, yielding advancements in AI, quantum computing and biotechnology, among other technologies. For countries that can afford it, these technologies will provide partial solutions to a range of emerging crises, from addressing new health threats and a crunch in healthcare capacity. For those that cannot, inequality and divergence will grow. In all economies, these technologies also bring risks, from widening misinformation and disinformation.

At a national level, a patchwork of fragmented data policy regimes at local or state levels raises the risk of accidental and intentional abuses of data in a manner that was not considered by the individual's original consent.

Developing a more globally consistent taxonomy, data standards, and legal definition of personal and sensitive information is a key enabler.

Spurred by both increased cyberattacks and tighter data laws, the voluntary disposal and destruction of personal data may become a stronger priority – with potential environmental co-benefits of minimizing data storage needs.

- 3.5 DHCW's Corporate Risk Register currently has 30 risks on the Register, 17 of which are detailed at item 6.1ii Appendix B. There are 13 Private risks (11 of which are considered at every Digital Governance and Safety Committee and 2 considered at Audit and Assurance Committee)
- 3.6 Board members are asked to note the following changes to the Corporate Risk Register 6.1iii Appendix B (new risks, risks removed and changes in risk scores) for the period 1 March 2023 to 30 April 2023:

NEW RISKS (4)

Risk Ref	Risk Title	Risk Description
DHCW0316	Technical Debt Accumulation	IF DHCW is unable to reduce and/or prevent further accumulation of technical debt, THEN DHCW will be unable to embrace latest technologies and modernise working practices, RESULTING IN increasing challenges to deliver high quality digital services and meeting customer demands within reasonable timescales.
DHCW0317	**PRIVATE**	**PRIVATE**
DHCW0318	**PRIVATE**	**PRIVATE**
DHCW0319	**PRIVATE**	**PRIVATE**

RISKS REMOVED (5)

Risk Ref	Risk Title	Risk Description	Statement
DHCW0286	**PRIVATE RISK**	**PRIVATE RISK**	Downgraded for management at Directorate level
DHCW0288	Data Centre Migration Revenue Funding	IF Data Centre migration activity takes place in 2023/24 THEN additional cost pressures will emerge RESULTING IN a requirement to source additional funding.	Downgraded for management at Directorate level
DHCW0284	Increased Utility Costs Financial Pressures	IF utility costs increase significantly as expected THEN costs will exceed those normally budgeted for RESULTING IN increased facilities costs and a financial pressure	Downgraded for management at Directorate level
DHCW0311	Digital Cost Pressure – Supplier Price Model Changes	IF suppliers revise product charging methodology with a resulting increase in costs, THEN there will be an increased cost pressure for the IMTP period, RESULTING IN an increased risk to the organisations ability to reach a break-even position.	Downgraded for management at Directorate level given the strengthened account management arrangements
DHCW0314	Digital Cost Pressures – Supply Chain Risk	IF supply chain issues such as the chip shortage and underlying digital price pressures and contract renewals have a negative impact upon prices THEN there will be additional equipment and maintenance contracts price increases RESULTING IN an increased risk to the organisations ability to reach a break-even position.	Downgraded for management at Directorate level

RISKS WITH A CHANGE IN SCORE (3)

There were three changes in score during the period

Risk Ref	Risk Title	Risk Description	Statement
DHCW0237	New Requirements impact on resource and plan	IF new requirements for digital solutions continue to come in, THEN staff may need to be moved away from other deliverables in the plan RESULTING in non-delivery of our objectives and ultimately a	Reduced in score due to the mitigation in place with new IOPR, proposed actions to manage stakeholder expectations of deliverables, enhanced visibility of constraints and new planning processes including prioritisation

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		delay in benefits being realised by the service.	
DHCW0304	NHS Wales SLA Income Increases	IF DHCW is not funded for committed additional spend to support current and new services THEN further cost pressures may become unmanageable RESULTING IN a decrease in resource to support services, reduction in IMTP deliverables and a possible deficit position reported.	Reduced in score. Work has progressed to achieve sign off, but a smaller number remaining and still to be worked through/confirmed.
DHCW0299	Supplier capacity to support Electronic Prescription Service readiness activities	IF: key stakeholders and suppliers are not able to support Electronic Prescription Service readiness activities and implementation due to resourcing pressures THEN: configuration, assurance, general set up activities during the readiness phase and business Change/implementation activities will be delayed RESULTING IN: delay to the Primary Care Electronic Prescription Service Programme delivery timetable	Reduced in score from likely to possible dropped from a 20 to 15 following review at Programme Board

- 3.7 The Board are asked to consider the DHCW Corporate Risk Register Heatmap showing a summary of the DHCW risk profile. The Board should note the increase in the number of financial pressure risks added to the corporate risk register over the past ten months and the change of organisational risk profile as a result and the potential threats and opportunities this risk profile gives DHCW. The key indicates movement since the last risk report.

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		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)			**DHCW0277 → **DHCW0278 → **DHCW0279 → **DHCW0280 → **DHCW0281 → **DHCW0282 → **DHCW0309 → **DHCW0317 ★ DHCW0299 – Supplier capacity to support EPS ↓	**DHCW0315 →	
	MAJOR (4)			DHCW0263: DHCW Functions → DHCW0264: Data Promise → DHCW0296 – Allergies/Adverse Reactions – Single Source → DHCW0306 – Switching Service - Succession → DHCW0307 – Switching Service Responsive Development → DHCW0308 – Sustainable funding for NIAs → **DHCW0310 →	DHCW0292 – Insufficient human resource capacity → DHCW0300 – Canisc (Screening and Palliative Care) → **DHCW0301 → DHCW0312 – Digital Cost Pressures – Supplier Cost Model changes → DHCW0313 – Digital Cost Pressure – Service Model Changes → DHCW0316 – Technical Debt Accumulation ★ **DHCW0318 ★ **DHCW0319 ★	DHCW0298 – Delay in Implementation of LINC (WLIMS 2) → DHCW0314 – Digital Cost Pressure – Supplier Cost Model changes →
	MODERATE (3)				DHCW0237: New requirements impact on resources and plan ↓ DHCW0259: Staff Vacancies → DHCW0269 – Switching Service – Data warehouse → DHCW0304 – NHS Wales SLA Income Increases ↓	
	MINOR (2)					
	NEGLIGIBLE (1)					

★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased **Private risks

- 3.8 All the risks on the Corporate Risk log are assigned to a Committee as outlined in the Risk Management and Board Assurance Framework Strategy to provide the SHA Board with the necessary oversight and scrutiny. As previously stated, the private (commercially sensitive, cyber and security related) risks are reviewed in detail by the Committee's in a private session.
- 3.9 The annual review of [DHCW's risk appetite and associated information](#) has recently taken place with a Board Development discussion in March 2023, and further discussion and feedback from Board members, as well as the refinement of the BAF Report Dashboard for 2023/24.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 4.1 The Board is asked to note the recent changes in the corporate risk profile, as a result of the escalation of four new risks, change in score of three risk and the removal of five risks.

5 RECOMMENDATION

- 5.1 The Board is being asked to:

NOTE the Risk and Board Assurance Framework Workplan;

RECEIVE and **DISCUSS** the status of the Corporate Risk Register including changes since the last meeting;

APPROVE the DHCW Risk Appetite statement and associated risk tolerances and appetite per risk domain.

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6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Risk Management Group	02/05/2023	Discussed and Verified
Management Board	12/05/2023	Discussed and Verified

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6.1ii Appendix B – Corporate Risk Register

Risk Matrix

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)	5	10	15	20	25
	MAJOR (4)	4	8	12	16	20
	MODERATE (3)	3	6	9	12	15
	MINOR (2)	2	4	6	8	10
	NEGLECTIBLE (1)	1	2	3	4	5

Key – Risk Type:

Critical	Significant	Moderate	Low
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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0298	Business & Organisational	<p>Delay in the Implementation of LINC (WLIMS 2)</p> <p>IF the new Laboratory Information Management System (LIMS) service is not fully deployed before the contract for the current LIMS expires in June 2025 THEN operational delivery of pathology services may be severely impacted RESULTING IN potential delays in treatments, affecting the quality and safety of a broad spectrum of clinical services and the potential for financial and workforce impact.</p>	05/05/2021	27/04/2023	15	<p>AIM - Reduce Impact</p> <p>FORWARD ACTIONS</p> <p>Business continuity options are being explored including extending the contract for the current LIMS to cover any short-term gap in provisions.</p> <p>ACTIONS TO DATE</p> <p>27/04/23 {JS} Updated plan received from supplier and feedback gathered from DHCW, health boards & trusts. DHCW provided written feedback to supplier</p> <p>24/03/23 - An updated plan has been received and feedback has been gathered from the DHCW, health boards and trusts and provided to the supplier.</p> <p>17/01/23 - LINC added as an associated register. Supplier expected to deliver a detailed plan by the end of January 2023. Contractual options being worked through re. extension of legacy and delivery of the replacement service.</p> <p>07/02/2023 Email confirmation of executive ownership, changes to DOS given the reliance on programme delivery to avoid the risk</p> <p>05/12/22 [NB] - Review of the Supplier Implementation plan took place on the 30th November 2022. Formal Feedback to the gathered from the service.</p> <p>01/11/22 [GE] - DHCW will be taking control of this project on 1st January 2023</p> <p>01/11/2022 Escalated to Corporate register</p>	20 (5x4)	6 (3x2)	Executive Director of Strategy	Non mover	Audit & Assurance Committee	Service Delivery	Mission 2 - Delivering high quality technology

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6.1ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0299	Business & Organisational	<p>Supplier capacity to support Electronic Prescription Service readiness activities</p> <p>IF: key stakeholders and suppliers are not able to support Electronic Prescription Service readiness activities and implementation due to resourcing pressures THEN: configuration, assurance, general set up activities during the readiness phase and business change/implementation activities will be delayed RESULTING IN: delay to the Primary Care Electronic Prescription Service Programme delivery timetable</p>	13/07/2022	18/05/2023	12	<p>AIM: REDUCE likelihood</p> <p>FORWARD ACTIONS: Section 255 Agreement has been agreed with NHS Digital. Contract Change Notices being negotiated with key suppliers to deliver EPS readiness in line with Key Milestones.</p> <p>ACTIONS TO DATE:</p> <p>18/05/2023 score reviewed at programme board and agreed reduction in likelihood from Likely to Possible (4 to 3) April 2023. Risk to be reviewed at EPS programme board meeting on 18th May.</p> <p>March 2023. Risk reviewed at EPS programme board in March 2023 resulting in no change to risk scoring. NHS England have made changes to staff allocated to support EPS delivery in Wales.</p> <p>27/02/2023 No further progress ongoing discussions</p> <p>01/02/2023 the impact and likelihood of this risk have increased score update to reflect the changes</p> <p>Section 255 Agreement has been agreed with NHS Digital. Agreement with Department of Health and Social Care endorsing the request to expand the use of EPS across Wales.</p>	15 (5X3)	6 (3X2)	Executive Director of Strategy	Reduced	Digital Governance & Safety Committee	Development of Services	Mission 3 - Expanding the content
DHCW0292	Service Interruption	<p>Insufficient human resource capacity in the infrastructure teams to undertake BAU activity and activities in the 1-year plan</p> <p>IF DHCW are unable to secure revenue funding to support major infrastructure developments identified in the IMTP and 1-year business plans, THEN there will be a delay to these activities RESULTING IN increased costs and/or system failures.</p> <p>Examples include:</p> <ul style="list-style-type: none"> * Data Centre 2 Project * Migration of systems from legacy virtual server 	01/04/2022	03/04/2023	16	<p>AIM: REDUCE Likelihood</p> <p>FORWARD ACTIONS:</p> <p>Develop workforce plan for the resources required for major Infrastructure maintenance work such as those identified.</p> <p>ACTIONS TO DATE:</p> <p>03/04/2023 MP - Work ongoing to mitigate report suggested improvement areas</p> <p>23/02/2023 MP - Report delivered and discussions ongoing to effect recommendations and address concerns.</p> <p>02/02/2023 MP - Awaiting report output from 3rd party engagement.</p> <p>29/11/2022 MP -Ongoing engagement with a 3rd party to carry out analysis of teams capacity.</p> <p>25/10/2022 MP - Order being raised for 3rd party to analyse the capacity within teams and provide recommended sizing.</p> <p>27/09/2022 MP - Review of resource capacity to take place.</p> <p>25/08/2022. CLJ. Independent third party being engaged to undertake an assessment on the sizing of the teams which have resource constraints and highest levels of unfunded</p>	16 (4x4)	8 (4x2)	Executive Director of Digital Operations	Non-Mover	Digital Governance & Safety Committee	Financial	Mission 2 - Delivering Technology

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		platform * WPAS Hardware Replacement * Legacy Operating System Replacements				resources. The output of this will be used to develop the case for increased funding levels in the affected teams (if needed)							
DHCW0300	Security	Canisc System Phase 2 IF there is a problem with the unsupported software used within the Canisc system THEN the application may fail RESULTING IN potential disruption to operational service namely Palliative care and Screening Services requiring workarounds.	07/12/2022	22/04/2023	16	<p>AIM - Reduce Likelihood and Impact</p> <p>FORWARD ACTIONS</p> <p>Continue development of new solution. Implement across Wales.</p> <p>ACTIONS TO DATE</p> <p>Patient Preferences and Pall Care MDT have been released for UAT, however slippage on original timelines have changed proposed dates for remaining deliverables as below</p> <p>Proposed dates for User Acceptance Testing are:</p> <p>September 23 for Specialist Pall Care form</p> <p>September 23 for Caseload Management</p> <p>30/01/23 Development has continued on solutions to replace Canisc functionality in the WCP team. Proposed dates for User Acceptance Testing are:</p> <p>27 Feb 23 for Patient Preferences and Pall Care MDT</p> <p>16 June 23 for Specialist Pall Care form</p> <p>30 June 23 for Caseload Management</p>	16 (4x4)	6(3x2)	Executive Medical Director	Non-Mover	Digital Governance & Safety Committee	Service Delivery	Mission 3 - Expanding the content
DHCW0312	Finance	Digital Cost Pressure – Exchange Rate Fluctuation IF the exchange rates for digital services contracts materially and directly currency linked THEN there will be an increased cost pressure for the IMTP period, RESULTING IN an increased risk to the organisations ability to reach a break-even position.	28/02/2023	05/05/2023	16	<p>AIM - reduce likelihood</p> <p>FORWARD ACTIONS</p> <p>MC 05/05/23: Finance to agree proposed hedging approach with commercial services for management board/audit committee approval by the end of May 2023</p> <p>ACTIONS TO DATE:</p> <p>03/04/2023: An updated database has now been compiled with formal guidance surrounding escalation within the appropriate organisational governance forums.</p> <p>The finance team in partnership with the commercial team will look at producing formal hedging strategies which align to standing orders and standing financial instructions. This is to be considered at the next Finance/ Commercial service review session.</p>	16 (4x4)	9 (3x3)	Executive Director of Finance	New Risk	Audit & Assurance	Financial	Mission 4 Driving Value

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						<p>MC 27/02/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. Commercial services to validate currency linked contracts. Finance to research medium term position as part of the formal calculation/modelling process. Agree hedging approach with commercial services for management board/audit committee approval.</p> <p>MC 27/02/23:- Audit Committee Digital Cost Pressure Deep Dive held at October session. Financial Sustainability audit focussing on Digital Cost Pressures presented to February Audit Committee. Single risk split into four risks for more focussed managed and mitigating action identification."</p>							
DHCW0313	Finance	<p>Digital Cost Pressure – Service Model Changes</p> <p>IF externally and internally sourced service provision models change resulting in movement from CAPEX based solutions to OPEX THEN there will be an increased cost pressure for the IMTP period, RESULTING IN an increased risk to the organisations ability to reach a break-even position.</p>	28/02/2023	05/05/2023	16	<p>AIM REDUCE LIKELIHOOD</p> <p>FORWARD ACTIONS</p> <p>05/05/2023: Cloud Adoption Group to support delivery of the Cloud Business Case which will detail the organisations shift to cloud and associated costs.</p> <p>MC 05/05/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. External - Commercial service to identify potential areas and include discussion as part of a horizon scanning agenda item at contract review meetings, Internal – Senior Finance Business partners to assess and escalate appropriately via established SoP.</p> <p>The proposed timelines for this mitigation will run until September 2023</p> <p>ACTIONS TO DATE:</p> <p>05/05/2023: The Cloud Adoption Oversight Group has been established which (alongside implementation of the Product Approach) will play a key role in planning potential changes in service delivery models.</p> <p>03/04/2023: An updated database has now been compiled with formal guidance surrounding escalation within the appropriate organisational governance forums.</p> <p>DHCW will look to propose to DOD a process of identifying and managing cost pressures of this nature as part of its sustainable funding approach. Initial notification for discussion will be held as part of the National digital updates planned for the 04/04/23</p> <p>MC 27/02/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. External - Commercial service to identify potential areas and</p>	16 (4x4)	9 (3x3)	Executive Director of Finance	New Risk	Audit & Assurance	Service Delivery	Mission 4 – Driving Value

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						include discussion as part of a horizon scanning agenda item at contract review meetings, Internal – Senior Finance Business partners to assess and escalate appropriately via established SoP. MC 27/02/23: - Audit Committee Digital Cost Pressure Deep Dive held at October session. Financial Sustainability audit focussing on Digital Cost Pressures presented to February Audit Committee. Single risk split into four risks for more focussed managed and mitigating action identification.							
DHCW0316	Finance	Technical Debt Accumulation IF DHCW is unable to reduce and/or prevent further accumulation of technical debt, THEN DHCW will be unable to embrace latest technologies and modernise working practices, RESULTING IN increasing challenges to deliver high quality digital services and meeting customer demands within reasonable timescales.	19/04/2023	19/04/2023	16 (4x4)	AIM: Reduce Likelihood FORWARD ACTIONS: To be confirmed ACTIONS TO DATE: 19/04/2023 approved by ED of Operations for escalation to Corporate Register	16 (4x4)	8 (4x2)	Executive Director of Digital Operations	New Risk	Audit & Assurance Committee	Financial	Mission 2 - Delivering Technology
DHCW0259 Tolley, Laura 18/05/2023 15:38:47	Business & Organisational	Staff Vacancies IF DHCW are unable to recruit to vacancies due to skills shortages and unavailability of suitable staff THEN this will impact on service deliverables and timescales RESULTING in delays to system support and new functionality for NHS Wales users.	11/12/2020	03/05/2023	12	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: All Directorates have returned the WFP plans with any future resource requirements and an analysis is underway with a signed off plan for April 2024 for the new financial year. At this point the risk rating for vacancies will be reviewed. ACTIONS TO DATE 03/05/2023 Recruitment Plan for the year is being finalised following the workforce planning exercise which will allow us to focus effort in timely manner. Also planning carrying out Careers Fairs aligned to last years successes. No foreseen issues with the ability to achieve the plan 30/03/23 We continue to recruit at pace and in line with the trajectory for the end of year. We have now re-set with the	12 (3x4)	6 (2x3)	Director of People and OD	Reduced	Audit and Assurance Committee and Local Partnership Forum	Service Delivery	Mission 5 - Trusted Partner

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Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						<p>workforce plans and will be resetting the monthly and quarterly recruitment targets based on internal and external numbers. We will be looking to improve process and interview training for all managers over the next few months. We will continue to utilise a number of recruitment methods via TRAC, CV library and agencies.</p> <p>08/02/23 All Directorates have been sent the Workforce Planning template to help plan resource more effectively and to have a Directorate Workforce Plan in place by April 2023. The plans will be reviewed on a quarterly basis by Finance & People & OD Business Partners.</p> <p>22/12/22 A trajectory tool has been created to monitor recruitment against vacancy. The strategic resource group continues to meet bi-monthly</p> <p>29.11.22 A trajectory tool has been created to monitor recruitment against vacancy. The strategic resource group continues to meet bi-monthly</p> <p>Deep dive activity around Milestones and resource requirements underway at present and will look to be completed by end Nov 22</p> <p>DHCW will be finalising the Resourcing Strategy for 2022-23. The strategy will look at a number of initiatives to ensure that DHCW achieves its recruitment target. This will include an improvement in workforce planning data as well as exploring further collaboration opportunities. DHCW are already experienced success with LinkedIn and CV library, and we will continue to utilise these sources. To support retention, DHCW are planning to work in partnership with WIDI to develop programmes to upskill and reskill our existing workforce. Additionally DHCW will be developing new contractual vehicle/s commencing from April 2023 which will support procurement of specialist resource from external providers; either where the recruitment process has not secured the resources required or that highly skilled resource can be better sourced for short periods in line with funding streams that a determination that the procurement approach is more optimal in order to quickly and effectively secure time critical delivery of key projects</p>							
<div>Tolley Laura 18/05/2023 15:38:47</div> <div>DHCW0263</div>	Information Governance	DHCW Functions IF directions from Welsh Government do not provide a sound legal basis for the collection, processing and dissemination of Welsh	26/01/2021	02/05/2023	12	<p>AIM: REDUCE Likelihood</p> <p>FORWARD ACTIONS:</p> <p>Continue discussions with Welsh Government colleagues to define the parameters of the functions.</p>	12 (4x3)	4 (4x1)	Executive Medical Director	Non-Mover	Digital Governance & Safety Committee	Information Access & Sharing	Mission 4 - Value and Innovation

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		resident data, THEN (i) partners, such as NHS Digital, may stop sharing data, (ii) DHCW may be acting unlawfully if it continues to process data RESULTING IN (i) DHCW being unable to fulfil its intended functions regarding the processing of data, or, in the case of continued processing, (ii) legal challenge, or (iii) the need to submit a further application to the Confidentiality Advisory Group (which may not be successful) to assess the public interest in processing confidential data without a legal basis or consent.				ACTIONS TO DATE: Meeting with WG CDO, Deputy Director for Digital, Head of Policy, CEO of DHCW and Associate Director for IG on the 31st January - Discussion on legal basis for DHCW responsibilities for becoming recipient of Data from both General Practice and Community and Hospital Pharmacy - Legal basis for that provision needs agreement by those Data Controllers following advice from WG legal Team - Consultation with ICO also required under Section 36 of the GDPR - WG producing a Plan for engagement and Delivery over Q1 of 22/23 FY DHCW meeting WG on 31/1 to discuss how the Data Promise Programme is progressed, confirming roles, responsibilities and timeframes Actions set against Welsh Government to define a set of Directions that will enable DHCW to move forwards on BAU and to provide cover for important functions such as NDR: (i) DHCW’s establishment functions and initial set of directions in the form of a letter has been published on the Welsh Government’s website, to ensure that DHCW’s remit is clear and transparent. (ii) Welsh Government have informed the Confidentiality Advisory Group (CAG) of DHCW’s new statutory status and legal basis for processing data. CAG have confirmed that they are content that we would no longer be requesting section 251 support for the handling of data not related to research. (iii) Welsh Government are planning to issue a new direction for DHCW regarding the collection of prescription data, which will test the process for issuing new directions. (iv) a letter was sent from Ifan Evans to confirm DHCW’s functions in response to a request for clarity from the Chair of the Digital Governance and Safety Committee and a deep dive provided at November 2021’s meeting.							
<div>Tolley, Laura 18/05/2023 15:38:47 DHCW0264</div>	Information Governance	Data Promise IF the national conversation regarding the use of patient data (Data Promise) is delayed, THEN stakeholders and patients will not be assured that the proposed uses of Welsh resident data include sufficient controls to	26/01/2021	02/05/2023	12	AIM: REDUCE Likelihood FORWARD ACTIONS: Continue discussions with Welsh Government colleagues to define the Data Promise. ACTIONS TO DATE: Meeting with WG CDO and DHCW CEO took place on 31st January - Understanding that resource and finance would be required in order for DHCW to deliver a Programme	12 (4x3)	4 (4x1)	Executive Medical Director	Non-Mover	Digital Governance & Safety Committee	Information Storing and Maintaining	Mission 1 - Enabling Digital Transformation

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Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		ensure data is treated responsibly, handled securely, and used ethically. RESULTING IN (i) potential challenges to proposed uses of data, and/or a loss of public/professional confidence, and (ii) a failure to realise the desired outcomes regarding 'data and collaboration' (effective and innovative uses of data, joined up services, better outcomes for individuals) set out in Welsh Government's Digital Strategy.				<p>approach to delivering DHCW identified actions - Initial observations were that the DHCW actions came with a significant Communications/Engagement overhead - matters of WG and clinical leadership discussed - WG to come back with a plan of actions and clarity on financial resource available.</p> <p>DHCW meeting WG on 31/1 to discuss how the Data Promise Programme is progressed, confirming roles, responsibilities, and timeframes</p> <p>Letter from DHCW CDO sent back to WG on 17/11/2022</p> <p>The specific responsibilities for implementation of the Data Promise have been given to the Head of Data Policy in Welsh Government, who will be supported by a Data Policy Manager who will focus on delivering the Data Promise. (i) Stakeholder engagement is underway. (ii) The Minister for Health and Social Services has endorsed the proposals to deliver a Data Promise for health and care. (iii) A steering group has been set up to review and comment on Data Promise materials and help to make decisions on the direction of the programme. (iv) Aim of launching the Data Promise 'publicity' campaign in 2022.</p>							
DHCW0306	Business & Organisational	<p>Switching Service - Succession</p> <p>IF there is no succession plan for the Switching Service, and a continued reliance on an architecture design and software which is 20+ years old and beyond end-of-life with limited / diminishing skills in the IRAT team to support it THEN the service will become obsolete and any development of new mechanisms and automation for the acquisition of data to embrace the latest technologies enabling flexible local configuration will not be achievable RESULTING IN the potential for ISD being unable to make data available to WG,</p>	31/01/2023	25/04/2023	12	<p>AIM: REDUCE Likelihood REDUCE Impact</p> <p>FORWARD ACTIONS: Agree an implementable plan to address these recommendations from the Internal Audit Report with the NDR programme as the preferred mitigation and way forward</p> <p>ACTIONS TO DATE:</p> <p>25/04/2023: Further update to be provided to DG&S Committee in the ISD report to say that the short-term approach is to tolerate the responsive development and succession risks as a level of mitigation is already in place, while working on the longer-term plan to replace the functionality of the Switching Service within the NDR. Once the plan for acquisition of data has been implemented, there will still be a need to ensure that the data sets currently acquired through the Switching Service are migrated to the new acquisition method, alongside any new "priority" data sets that are identified within the wider NDR programme.</p> <p>04/04/2023 Deep dive during the Risk Management Group in April Further internal discussions will be progressed to firm up a longer-term plan of mitigation offering where possible clear timelines or structure</p> <p>Provided Management response to Internal Audit recommendations</p>	12 (4x3)	6 (3x2)	Executive Medical Director	Non-Mover	Digital Governance & Safety	Information Storing and Maintaining	Mission 4 - Driving Value and Innovation

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		HBs, FDU and SAIL, as a key function of the Switching Service is to provide reports for Welsh Government. This would cause significant reputational damage to DHCW and particularly so depending on when (date) it happens. It would also have knock-on effects to these agencies (FDU, DU etc.)											
DHCW0307	Business & Organisational	Switching Service - Responsive development IF Welsh Government requirements for more in-depth data are requested, it may not be possible as the Switching Service is too complex to modify and amend in order to meet any new demands made upon it, as there is a reliance on legacy software (20+ years old) and limited / diminishing skills in the IRAT team to support it THEN any amendments to reflect changing service requirements or design cannot be made, and will therefore hold back any development and enhancement of the service to meet future needs RESULTING IN the service becoming obsolete and any development of new mechanisms and automation for the acquisition of data to embrace the latest technologies enabling flexible local configuration will not be achievable.	31/01/2023	25/04/2023	12	AIM: Reduce LIKELIHOOD Reduce IMPACT FORWARD ACTIONS: Agree an implementable plan to address these recommendations from the Internal Audit Report with the NDR programme as the preferred mitigation and way forward ACTIONS TO DATE: 25/04/2023: Further update to be provided to DG&S Committee in the ISD report to say that the short-term approach is to tolerate the responsive development and succession risks as a level of mitigation is already in place, while working on the longer-term plan to replace the functionality of the Switching Service within the NDR. Once the plan for acquisition of data has been implemented, there will still be a need to ensure that the data sets currently acquired through the Switching Service are migrated to the new acquisition method, alongside any new “priority” data sets that are identified within the wider NDR programme. 04/04/2023 Deep dive during the Risk Management Group in April Further internal discussions will be progressed to firm up a longer-term plan of mitigation offering where possible clear timelines or structure. 28/02/2023: Ongoing engagement with NDR in respect of plan Management response to Internal Audit recommendations	12 (4x3)	4 (2x2)	Executive Medical Director	Non-Mover	Digital Governance & Safety	Information Storing and Maintaining	Mission 4 - Driving Value and Innovation

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DHCW0308	Information Governance	<p>Sustainable funding for NIIAS</p> <p>IF a sustainable financial position cannot be found for the National Intelligent Integrated Audit Solution (NIIAS) THEN a DHCW funding risk at end of contract (November 2023) will create financial challenges to DHCW internal core funding decisions RESULTING IN difficult financial control issues and jeopardising contract renewal</p>	31/01/2023	05/05/2023	12	<p>AIM - Reduce likelihood</p> <p>FORWARD ACTIONS –</p> <p>Commercial and Procurement support on options appraisal</p> <p>ACTIONS TO DATE -</p> <p>05/05/23 Non recurrent internal funding explored for year 1 of the contract (to be agreed by directorate), longer term funding to be addressed with WG or via National Sustainable Funding exercise by the end of May 2023</p> <p>06/04/23 Further meeting with Finance to determine utilisation of capital to fund part of contract - Business Case into WG to secure costs longer term</p> <p>20/02/23 Meeting with DCHW DoF at the start of March 2023 - Finance Case drafting prior to that meeting with the support of Head of Management Accounting - Action to go back to Exec Board and Management Board for March."</p>	12 (3x4)	6 (2x3)	Executive Medical Director	Non mover	Audit & Assurance	Information Access and Sharing	Mission 3 - Expanding the content, availability and functionality
DHCW0269	Business & Organisational	<p>Switching Service</p> <p>IF the current switching service fails THEN no data new will be acquired into the ISD Data Warehouse RESULTING IN the inability to provide updates to multiple reporting systems.</p>	07/12/2020	25/04/2023	9	<p>AIM: REDUCE Likelihood and REDUCE Impact</p> <p>FORWARD ACTION:</p> <p>Now that the Director of Operations is in post, ISD are looking to share ownership of the risk with Operational Services and the internal audit review of the Switching Service by NHS Wales Shared Services Partnership (NWSSP) should provide specific feedback in order to advance this work.</p> <p>ACTION TO DATE:</p> <p>04/04/2023 Deep dive during the Risk Management Group in April Further internal discussions will be progressed to firm up a longer-term plan of mitigation offering where possible clear timelines or structure</p> <p>01/03/2023 Still awaiting a response from NDR on the future of the service following internal Audit review</p> <p>23/12/2022 No update from NDR or IRAT teams</p> <p>30/11/2022 Awaiting responses from NDR and IRAT teams around critical responses to recommendation</p> <p>31/10/2022 - The internal audit review of the Switching Service by NHS Wales Shared Services Partnership has presented initial findings, which are being reviewed in order to develop appropriate responses to the recommendations and the development of a specific management action plan</p>	12 (3x4)	6 (3x2)	Executive Director of Digital Operations	Non-Mover	Digital Governance & Safety Committee	Information Storing and Maintaining	Mission 4 - Value and Innovation

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						<p>16/09/2022 - Discussed at Execs, concerns raised this has been downgraded prematurely and there would be more assurance following the external audit report</p> <p>04/08/2022: Should the switching service fail, there is a process in place, whereby spreadsheets can be imported to manually update the service. The overall risk impact should be reduced. Downgraded to Directorate level by owner</p> <p>15/07/2022 - Discussion has taken place to progress the shared ownership of this risk between ISD and Operational Services. The internal audit review of the Switching Service has begun with a number of meetings having taken place in June and July.</p> <p>21/02/2022 - NDR confirmed that a plan to replace switching service functionality will be considered as part of the data strategy work. In the meantime, a paper is being drafted within ISD to propose some immediate solutions for geographical resilience in order to consider reducing the risk score.</p>							
DHCW0296	Clinical	<p>Allergies/Adverse Reactions - Single Source</p> <p>IF allergies and adverse reactions are not stored in a single source and in a simple, structured, standardised and SNOMED-coded manner THEN a clinician may not be able to retrieve all the relevant, updated information in the system that they are logged in RESULTING IN Potential patient harm due to missing or outdated information being presented in the system being used by the clinician.</p> <p>Possible Causes:</p> <ul style="list-style-type: none"> • Single source of truth (Clinical Data Engine) in which to input and retrieve information not used widely • Lack of integration API with CDE - 	13/09/2022	02/05/2023	12	<p>AIM: REDUCE Likelihood and Impact</p> <p>FORWARD ACTION:</p> <p>Awaiting response from NDR Programme following the internal Audit report</p> <p>ACTION TO DATE:</p> <p>Apr/2023: A new Shared Allergies Record will be set up aligned to the work of the Shared Medicines Record - Timescales yet to be determined. SMR project to include AR in their remit. Strategy to be determined.</p> <p>01/03/2023 Still awaiting a response on the future of the service following internal Audit review</p> <p>24/01/2023 - Response to the Internal Audit review has identified the change in scope to this risk with IRAT team taking ownership. New risks will be raised for separate Matters Arising within the report.</p> <p>23/12/2022 No update from NDR or IRAT teams</p> <p>30/11/2022 Awaiting responses from NDR and IRAT teams around critical responses to recommendation.</p> <p>31/10/2022 - The internal audit review of the Switching Service by NHS Wales Shared Services Partnership has presented initial findings, which are being reviewed in order to develop appropriate responses to the recommendations and the development of a specific management action plan</p> <p>16/09/2022 - Discussed at Execs, concerns raised this has been downgraded prematurely and there would be more assurance following the external audit report</p> <p>04/08/2022: Should the switching service fail, there is a</p>	12 (4X3)	8 (4X2)	Executive Medical Director	Non mover	Digital Governance & Safety Committee	Safety /Wellbeing	Mission 2 - Delivering Technology

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Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		Interoperability <ul style="list-style-type: none">• Allergen not SNOMED coded• Reaction not SNOMED coded• Difficulty filtering through SNOMED results• No standard as how to portray Adverse reactions (i.e.: not all systems display them in the patient banner)				process in place, whereby spreadsheets can be imported to manually update the service. The overall risk impact should be reduced. Downgraded to Directorate level by owner							
DHCW0237	Business & Organisational	New requirements impact on resource and plan IF new requirements for digital solutions continue to come in, THEN staff may need to be moved away from other deliverables in the plan RESULTING in non-delivery of our objectives and ultimately a delay in benefits being realised by the service.	30/03/2020	27/04/2023	16	AIM: REDUCE Impact and REDUCE Likelihood FORWARD ACTIONS: Continue to monitor new requirements and new initiatives. Use formal change control methods to ensure impact is mapped and impacted work is re-baselined. ACTIONS TO DATE: The risk for 23-26 will be managed in the context of the IMTP 23-26 which was approved at the SHA Board on 30 March 2023. The 23-26 IMTP and Annual Business planning cycle is running which identifies priorities for next year and assesses capacity against the plan. This will result in an organisational plan from April where priorities are clear and resource should be directed towards. This plan will also illustrate unresourced requests and pipeline products which aren't resourced as at time of publication. These can only enter the plan via a formal change control where resource has been confirmed as available. The status of products as 'pipeline' will be communicated to NHS partners to manage expectations. Annual Business Plan approved April 2022 - this plan is flexible and new requirements will be assessed against available capacity and go through a formal change control process before being added to the plan. New requirements coming through some of which are on a candidate list until resource is confirmed. Anticipated new requirements from Emergency and Unscheduled Care (Six Goals Framework) and new National Vaccination programme. New WG commissioning process being investigated to help coordinate new requests for work.	12 (3x4)	9 (3x3)	Executive Director of Strategy	Reduced	Digital Governance & Safety Committee	Development of Services	Mission 5 - Trusted Partner

6.1ii Appendix B – Corporate Risk Register

Ref	Risk Type	Description	Opened date	Review date	Rating (initial)	Action Status	Rating (current)	Rating (Target)	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0304	Finance	<p>NHS Wales SLA Income Increases</p> <p>IF DHCW is not funded for committed additional spend to support current and new services THEN further cost pressures may become unmanageable RESULTING IN a decrease in resource to support services, reduction in IMTP deliverables and a possible deficit position reported.</p>	24/01/2023	26/04/2023	20	<p>AIM: To finalise SLA's and organisational approval.</p> <p>FORWARD ACTIONS: Detailed supporting packs to be issued 1st March 2023.</p> <p>ACTIONS TO DATE: 03/04/2023 MC: DHCW has formally received 11 signed SLAs leaving a residual balance of 11 organisations awaiting submission. The Director of Finance is to provide an update and chase progress at the Director of Digital forum scheduled for 4th April 23</p> <p>27/02/23 MC: Additional cost schedules circulated to digital leads and deputy directors of finances for inclusion within initial planning assumptions. Presentation given to NSMB on 13th Dec 2022 outlining approach.</p> <p>Proposal on infrastructure costs to IMB on 7th Feb 2023 who endorsed the re-charging approach."</p>	12 (4x3)	10 (5x2)	Executive Director of Finance	Reduced	Audit & Assurance	Financial	Mission 2 - Delivering high quality technology.

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DIGITAL HEALTH AND CARE WALES

BOARD ASSURANCE FRAMEWORK REPORT

Agenda Item	6.2
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Chris Darling, Board Secretary
Presented By	Chris Darling, Board Secretary/Risk Owners

Purpose of the Report	For Approval
Recommendation The Board is being asked to: APPROVE the BAF Report Dashboard for 2023/24. RECEIVE and DISCUSS the status of each strategic mission, principal risk, action plan and current status.	

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Tŷ GLAN-YR-AFON 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD

Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	Delivering High Quality Digital Services
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CORPORATE RISK (ref if appropriate)	All are relevant to the report
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 9001
If more than one standard applies, please list below: ISO 14001 ISO 20000 ISO 27001 BS 10008	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below: Safe Care Effective Care	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: Risk Management and Assurance activities, equally affect all. An EQIA is not applicable.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.

SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WG	Welsh Government
NI	National Insurance	DPIF	Digital Priorities Investment Fund
DSPP	Digital Services for Patients and the Public		

2 SITUATION/BACKGROUND

- 2.1 The DHCW Risk Management and Board Assurance Framework (BAF) Strategy was endorsed by the Audit and Assurance Committee, Digital Governance and Safety Committee and approved formally at the SHA Board on the 27 May 2021. This outlined the approach the organisation will take to managing risk and Board assurance. The BAF was developed and reviewed during 2022/23.
- 2.2 The BAF Report Dashboard has recently been reviewed and updated with input from Executive Leads and other DHCW staff, building on the BAF introduced in 2022/23.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The Board Assurance Framework (BAF) Dashboard brings together in one place all of the relevant information on the risks to the DHCW's strategic missions. The BAF dashboard provides information to Board members on the controls and assurances in place as well as the gaps and actions needed to mitigate risk and delivery against DHCW's strategic missions.
- 3.2 DHCW have five strategic missions, the BAF Report Dashboard has five associated principal risks articulated against each strategic mission. Going into 2023/24 there is a current risk score and target risk score for each principal risk, the aim being the controls, assurances and actions planned throughout the year should reduce the risk occurring and increase the chance of achieving the strategic mission. Each strategic mission has a risk appetite assigned to the mission, which reflects the approach DHCW will take to managing risk relating to that strategic mission. The risk appetite for each strategic mission and the associated portfolio areas can be seen below:

Strategic Mission	Risk Appetite
1. Provide a platform for enabling digital transformation	Cautious
2. Deliver high quality digital products and services	Cautious
3. Expand the health and care record and the use of digital to improve health and care	Moderate
4. Drive better value and outcomes through innovation	Open
5. Be the trusted strategic partner and a high quality, inclusive and ambitious organisation	Moderate

3.3 The changes made to the BAF Report Dashboard for 2023/24, seen as Appendix A 6.2i can be summarised as:

Mission one - Provide a platform for enabling digital transformation

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title
- Current score reviewed and reduced in reflection of this year's plan and progress target score reviewed and increased in light of the action plan changes
- Controls and action plans revisited and revised in line with the mission priorities and progress

Mission 2 - Deliver high quality digital products and services

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title
- Controls and action plans revisited and revised in line with the mission priorities and progress

Mission 3 - Expand the digital health and care record and the use of digital to improve health and care

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title
- Current and target score reviewed and updated in line with the action plans for this year
- Controls and action plans revisited and revised in line with the mission priorities and progress

Mission 4 – Drive better value and outcomes through innovation

- Title updated in line with the IMTP review
- Controls and action plans revisited and revised in line with the mission priorities and progress

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Mission 5 – Be the trusted strategic partner and a high quality, inclusive and ambitious organisation

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title
- Current score reviewed and reduced in reflection of this year's plan and progress
- Target score reviewed and reduced in reflection of this year's plan and progress
- Controls and action plans revisited and revised in line with the mission priorities and progress

3.4 Each strategic mission is provided with a RAG score assigned by the Executive Lead for the strategic mission, which is a delivery confidence assessment based on the risk and the plans in place to address and drive the strategic mission.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 The Board is asked to note the recent changes in the BAF principal risks and overarching RAG score.

5 RECOMMENDATION

5.1 The Board is being asked to:

APPROVE the BAF Report Dashboard for 2023/24.

RECEIVE and **DISCUSS** the status of each strategic mission, principal risk, action plan and current status.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Risk Management Group	02/05/2023	Discussed and Verified
Management Board	12/05/2023	Discussed and Verified

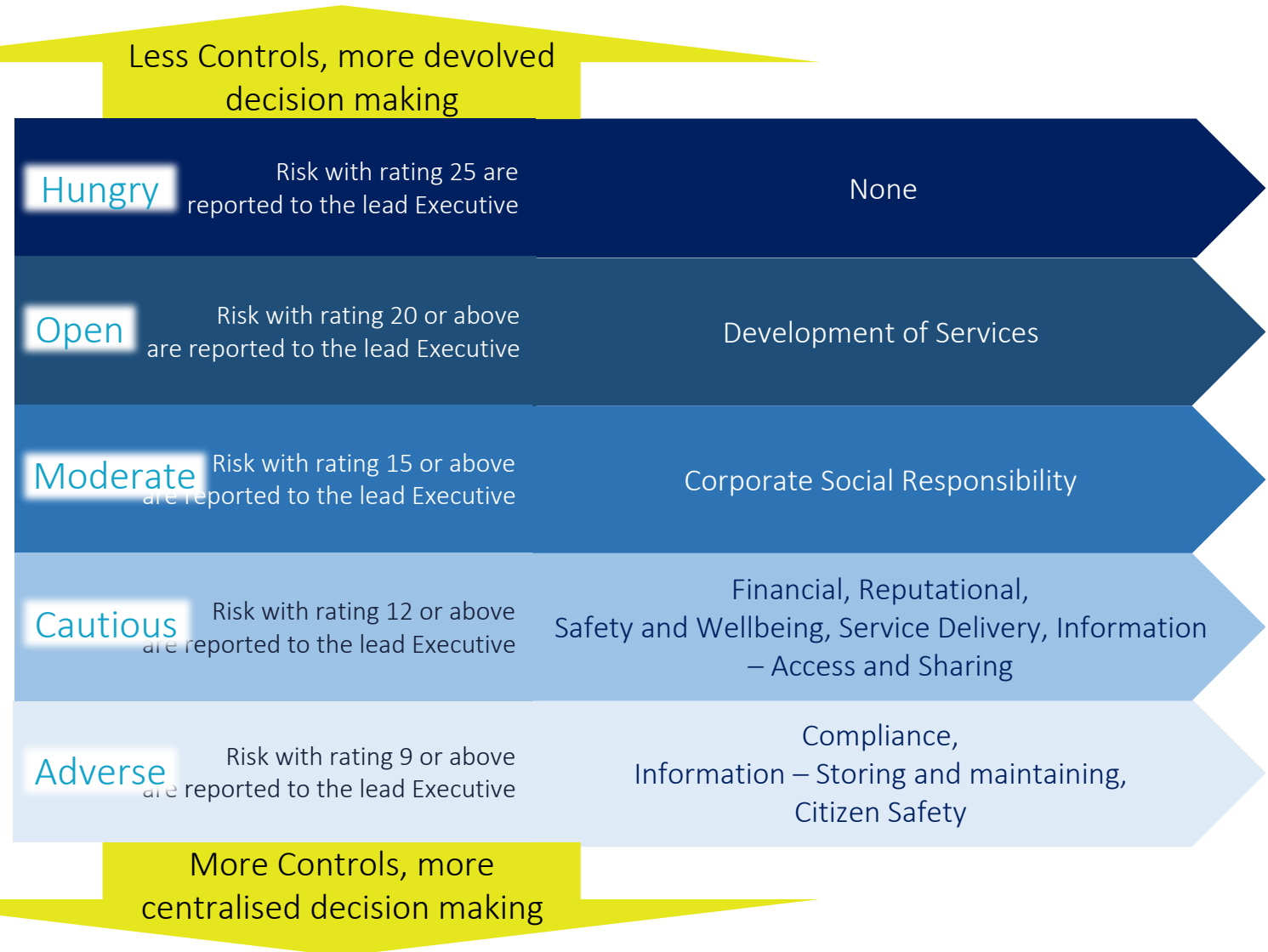
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The Board Assurance Report Dashboard 2023/24

DHCW Risk appetite statement and tolerances

DHCW RISK APPETITE

- DHCW must take risks to achieve its strategic aims and deliver beneficial outcomes to stakeholders
- Risks will be taken in a considered and controlled manner
- Exposure to risks will be kept to a level of impact deemed acceptable by the Board
- The acceptable level may vary from time to time and will therefore be subject to at least annual review and revision
- Any risk outside our agreed appetite may be accepted and will be subject to a governance process to ensure visibility and management
- Some particular risks above the agreed risk appetite may be accepted because:
 - the likelihood of them occurring is deemed to be sufficiently low
 - they have the potential to enable realisation of considerable reward/benefit
 - they are considered too costly to control given other priorities
 - the cost of controlling them would be greater than the cost of the impact should they materialise
 - there is only a short period of exposure to them
 - mitigating action is required by an external party



Type	Detail	Current risk score and rationale	Target risk score and rationale
OBJ	1. 2023/24: Provide a platform for enabling digital transformation		
PR	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace	12 - 4 (Likely) x 3 (Moderate) This risk score is derived from our analysis of systems as part of developing new strategies over the last twelve months.	6 – 2 (unlikely) x 3 (Moderate) Each of our strategies addresses complexity and silos through a commitment to standards based open architecture, which is intended to streamline and simplify our systems and delivery interoperability.
OBJ	2. 2023/24: Deliver high quality digital products and services		
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.	9 - 3 (Possible) x 3 (Moderate) Established operational support is in place and work has been undertaken in recent years to improve the availability and security of the services, but further action is needed to ensure resilience and security is at the required level.	4 – 2 (Unlikely) x 2 (Minor) There are clearly articulated plans for the activity required to increase the resilience and security of the system which should reduce the risk to an acceptable level with careful scrutiny and monitoring.
OBJ	3. 2023/24: Expand the digital health and care record and the use of digital to improve health and care		
PR	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.	9 – 3 (Possible) x 3 (Moderate) The digital health and care record has developed over recent years, but we know this expansion must continue at pace to ensure that patients and clinicians have the best possible information to support the achievement of high quality care outcomes.	6 – 2 (Unlikely) x 3 (Moderate) The new NDR strategy has set out a clear and prioritised road map for the single health record along side development in digital services such as WCP and WNCR. We will continue to explore enhanced functionality supporting use cases in the strategy and using AI.
OBJ	4. 2023/24: Drive better value and outcomes through innovation		
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.	16 – 4 (Likely) x 4 (Major) Fragmented approaches to driving value from data may result in lost opportunities to innovate, enhance operational delivery and improve health and care outcomes.	12 – 3 (Possible) x 4 (Major) A best practice approach and operating model to sharing data for operational delivery, research and innovation.
OBJ	5. 2023/24: Be the trusted strategic partner and a high quality, inclusive, and ambitious organisation		
PR	IF we are not a Trusted Partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.	12 – 3 (Possible) x 4 (Major) As a developing organisation the current risk score reflects the work still to do in terms of continuing to be a learning organisation which will support capacity and capability of staff as well as working collaboratively with partner organisations. This includes the implementation of the DHCW organisational structure and approach across the organisation.	8 - 2 (Unlikely) x 4 (Major) There are multiple activities that contribute to the delivery of the strategic objective and these include a focus on the digital workforce, capacity and capability, being organised in the most efficient and effective way, as well as working in a high trust environment with partners to enable digital transformation.

Principal risk heat map

Progress Report

The planned activity for the principal risks is for action April 23 – March 24 with aim to move towards or achieve the target risk score by then. The report will be presented to the SHA Board in May and November each year, it will provide a self assessment RAG status from the objective/mission owner to indicate the current areas of concern. Additionally it will give an overview of progress on the action plans to address any gaps and will provide narrative as to the trajectory of the principal risks. Areas of concern will be allocated to the relevant Committee of the Board for ongoing scrutiny between SHA Board Reviews.

Starting points for each risk are shown by numbers corresponding to the objective/mission in the heat map to the right, in future reports changes in score will be indicated through movement along the black line. Should a risk increase in score this will be highlighted by a dotted line and the number will be moved to that space.

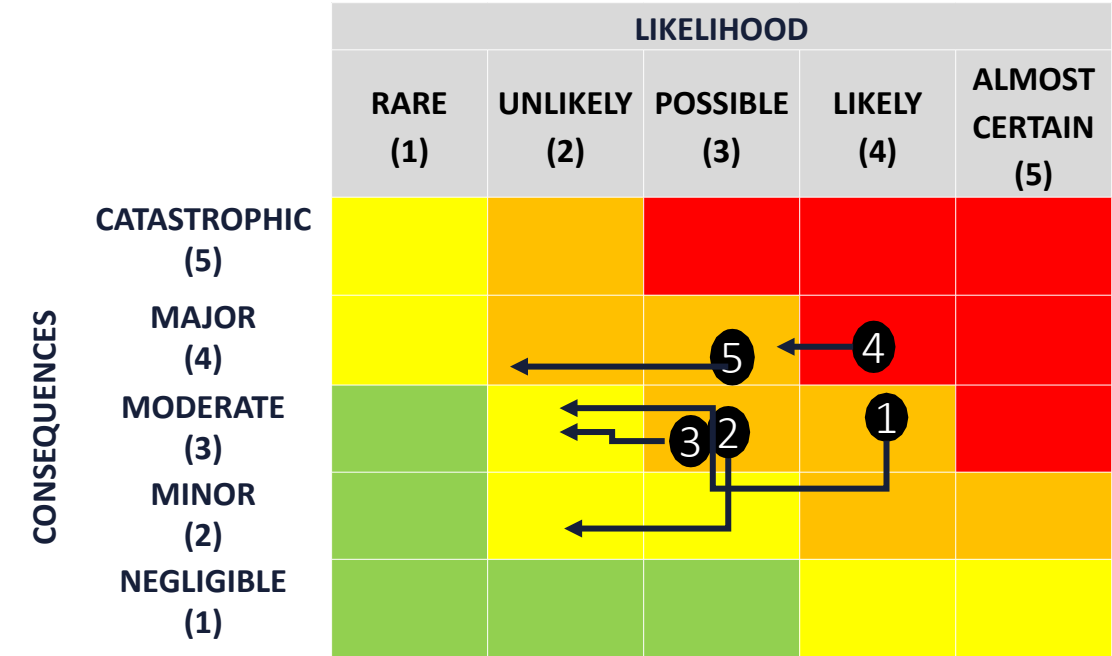
Strategic Principal Risk Impact Statement

Should any of the strategic risks being realised the consequence would include potential of harm to patients, impacts on the working conditions of staff, poor quality service, failure to achieve the required digital transformation at pace, potential litigation at both a corporate and personal level with financial and/or penal sanctions and/or significant reputational damage which could threaten the future of the organisation and it's success.

Questions to ask yourself:






- Is the progress of the action plans later in the report sufficient to achieve the target score?
- Are you satisfied the principal risks are still accurate and reflective with reference to the delivery of the strategic objectives?


Residual Principal Risk Severity Map (showing direction of travel to target)



Assurance Summary

Key – Control and assurance RAG Rating	Strategic Mission Delivery Confidence LOW	Significant concerns over the adequacy/effectiveness of the controls in place in proportion to the risks
	Strategic Mission Delivery Confidence MEDIUM	Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks
	Strategic Mission Delivery Confidence HIGH	Controls in place assessed as adequate/effective and in proportion to the risk
	Insufficient Data to provide RAG	Insufficient information at present to judge the adequacy/effectiveness of the controls


Type	Detail	Associated risk impact domain		Risk Appetite	Risk Appetite rationale/likely scenario	Assurance Assessment
M	1. 2023/24: Provide a platform for enabling digital transformation	<ul style="list-style-type: none"> Reputational Development of services Information – Access and Sharing Information – Storing and maintaining 	<ul style="list-style-type: none"> Financial Service Delivery Patient/Citizen Safety Corporate Social Responsibility 	CAUTIOUS	DHCW will accept a small amount of risk in ensuring compliance with information governance, information security and cyber security. We will manage the associated corporate risks at their appetite levels to protect against the potential consequences.	
PR	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace					
M	2. 2023/24 Deliver high quality digital products and services	<ul style="list-style-type: none"> Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Information – Access and Sharing Compliance 	CAUTIOUS	DHCW will accept a small amount of risk in the provision of secure and resilient high quality digital services. Where we are developing services we will take more risks.	
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.					
M	3. 2023/24 Expand the digital health and care record and the use of digital to improve health and care	<ul style="list-style-type: none"> Reputational Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk to deliver successful expansion of the digital health and care record with input from users. We will carefully manage the associated corporate risks with a focus on prioritising any patient/citizen safety risk concerns.	
PR	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.					
M	4. 2023/24 Drive better value and outcomes through innovation	<ul style="list-style-type: none"> Reputational Information – Access and Sharing 	<ul style="list-style-type: none"> Development of services 	OPEN	DHCW will accept risks in the pursuit of driving innovation to achieve better value evidenced by improved outcomes.	
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.					
M	5. 2023/24: Be the trusted strategic partner and a high quality, inclusive, and ambitious organisation	<ul style="list-style-type: none"> Reputational Safety and Wellbeing 	<ul style="list-style-type: none"> Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk in the pursuit of becoming recognised as a trusted partner and a high performing inclusive organisation.	
PR	IF we are not a Trusted Partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.					

MISSION 1: Provide a platform for enabling digital transformation					RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks				Amber	Amber
EXECUTIVE OWNER: Director of Strategy			RISK APPETITE: CAUTIOUS			SELF ASSESSMENT ASSURANCE RATING		KEY CONTROLS	ASSURANCE	
REPORTING PERIOD: 1 ST April – 31 ST October 2023			DATE OF REVIEW: 01 ST November 2023							
RISKS	PRINCIPAL RISK 1						CURRENT SCORE		TARGET SCORE	
	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace						12/25 4 (Likely) x 3 (Moderate)		6/25 2 (Unlikely) x 3 (Moderate)	
					★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased					
	ASSOCIATED CORPORATE RISK/S				Risk Key:					
					CURRENT SCORE		TARGET SCORE			
	DHCW0264 – Data Promise				12 (4x3)		4 (4x1)			
	DHCW0309**				15 (5x3)		5 (5x1)			
CONTROLS AND ASSURANCE	KEY CONTROLS GAPS		ACTION PLAN (CONTROLS)		ASSURANCE GAPS		ACTION PLAN (ASSURANCE)		PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER – May 23	
	1.New cloud based national health and care data store 2. API Priorities Roadmap 3. Strategy for priority platforms/architecture building blocks 4. Clinical Data Engine 5. Published Open Architecture Standards 6. Code of Conduct for Sharing Personal Information (WASPI) 7. Engagement and communication of the Data Promise 8. Cloud Plan and Business Case 9. Updated Infrastructure Strategy 10. Annual NIS CAF Assessments		1. Work on the establishment of a new cloud based national health and care data store 2. Delivery of an API Priorities Roadmap 3. Continue with the development of a strategy 4. Implement Clinical Data Engine 5. Work with stakeholder to publish standards 6. Consultation on the WASPI Code of Conduct 7. Continued working with WG to agree engagement & communication methods 8. Develop a prioritised Cloud plan and business case 9. Further development of the Infrastructure Strategy 10. CRU to report upon the status of NHS Wales cyber posture to WG		1. Analysis and reporting on data use 2. Reporting on APIs that have moved into production and are live 3. Reporting on progress against plan emerging from Strategy 4. Analysis and reporting of healthcare data 5. Ability to monitor against compliance with standards 6. Reporting on implementation of the Code of Conduct 7. Communications Plan with timescales 8. Monitoring of optimisation of cloud usage 9. Strategy meets the growing needs of the service and reflects technological advances 10. CRU Annual Plan (hosted by DHCW on behalf of WG)		1. Develop reporting on data use 2. Develop and increase the number of live APIs 3. Develop reporting requirements 4. Identify reporting requirements in line with strategy 5. Determine reporting requirements for communication 6. Produce implementation plan and identify reporting requirements 7. Engage with WG to define timescales for communication 8. Development of enhanced cloud reporting 9. Dialogue with partner organisations to ensure needs are met 10. Board to receive CRU Annual Plan		PROGRESS HIGHLIGHTS: 1. Build of new cloud based data store progressing 2. API Delivery team established working on priority APIs 3. Deliverables included in IMTP 6. WASPI Code of Conduction Formal Consultation progressing. 8. Cloud Strategy confirmed and Cloud Council established 10. Cyber Security three year plan developed and approved by the SHA Board FORWARD LOOK PRIORITY: * Assure and operationalise cloud based data store and APIs, document and publish open architecture specifications and roadmap	

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MISSION 2: Deliver high quality technology, digital products and services				RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks				Amber	Amber	
EXECUTIVE OWNER: Director of Operations		RISK APPETITE: CAUTIOUS				SELF ASSESSMENT ASSURANCE RATING	KEY CONTROLS	ASSURANCE		
REPORTING PERIOD: 1 ST April – 31 st October 2023		DATE OF REVIEW: 01 st November 2023								
RISKS	PRINCIPAL RISK 2				CURRENT SCORE		TARGET SCORE			
	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.				9/25 3 (Possible) x 3 (Moderate)		4/25 2 (Unlikely) x 2 (Minor)			
	ASSOCIATED CORPORATE RISK/S			Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased						
	RISK REFERENCE	CURRENT SCORE	TARGET SCORE	RISK REFERENCE	CURRENT SCORE	TARGET SCORE				
	DHCW0298 – Delay in LINC	20 (5X4)	6(3X2)	DHCW0280**	15 (5X3)	10 (2X5)				
	DHCW0315**	20 (5X4)	10 (5X2)	DHCW0281**	15 (5X3)	10 (2X5)				
	DHCW0292 – Insufficient HR Capacity (ICT)	16 (4X4)	8 (4X2)	DHCW0282**	15 (5X3)	10 (2X5)				
	DHCW0301**	16 (4X4)	8 (4X2)	DHCW0316 Technical Debt Accumulation	16 (4X4)	8 (4X2)				
	DCHW0278**	15 (5X3)	9 (3X3)	DHCW0317 **	15 (5X3)	6 (3X2)				
	DHCW0277**	15 (5X3)	10 (2X5)	DHCW0304 – NHS Wales SLA	12 (4X3)	10 (5X2)				
DHCW0279**	15 (5X3)	10 (2X5)	DHCW0296 – Allergies/ Adverse Reactions	12 (4x3)	8 (4x2)					
CONTROLS AND ASSURANCE	KEY CONTROLS GAPS	KEY CONTROLS ACTION PLAN	ASSURANCE GAPS	ACTION PLAN (ASSURANCE)	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER – May 23					
	1. Product Strategy 2. WCCIS Strategic Review 3. WEDS Strategic Review 4. National Eyecare System Gateway Review 5. Welsh Emergency Care Data Set 6. LINC System 7. RISP System 8. Single Medicine Record 9. ETP Early Adopter	1. Agree product approach and timeline for implementation 2. Delivery of the recommendations from the WCCIS Strategic review 3. Review outputs of the WEDS Strategic review 4. Review outputs of the National eyecare system gateway review and confirm future arrangements 5. Produce the Welsh Emergency Care Data set 6. Configure, build and test new LINC System in readiness for roll out 7. Complete procurement and FBC for new RISP system 8. Build Single record in medicines for every patient in Wales 9. Implement ETP across Early adopter sites in Primary Care and Community Pharmacies	1. Approved Product Strategy plan 2. Reporting against progress and annual plan for WCCIS 3. Reporting against progress and annual plan for WEDS 4. Formal approval of Eyecare future arrangements 5. Validation of the Welsh Emergency Care Data Set 6. Approved roadmap for the implementation of LINC 7. Approved FBC for new RISP System 8. Reporting on roll out of the Single Record to Service Management Board 9. Approved roll out	1. SHA Board to approve the product strategy plan 2. Ongoing monitoring of progress and annual plan 3. Ongoing monitoring of progress and annual plan 4. Ongoing discussions 5. Implement tools to validate Data set 6. Agreed NHS Wales position on LINC System 7. Engagement with Welsh Government on FBC 8. Reporting mechanism and approved project plan present at SMB 9. Monitoring of approved roll out plan for ETP	• Product approach developed and presentations given to: SHA Board, Local Partnership Forum, DHCW Leadership Day • Approach to progress the LINC Programme agreed by the SHA Board and wider partners. • Proposal to transfer the Eyecare Programme developed and for consideration by the SHA Board (May 23) • Operations delivery structure being reviewed to ensure ongoing focus and oversight for the strategic mission					

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MISSION 3: Expand the digital health and care record and the use of digital to improve health and care					RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks		Amber	Amber
EXECUTIVE OWNER: Director of Strategy		RISK APPETITE: MODERATE						
REPORTING PERIOD: 1 ST April – 31 ST October 2023		DATE OF REVIEW: 01 ST November 2023		SELF ASSESSMENT ASSURANCE RATING			KEY CONTROLS	ASSURANCE
RISKS	PRINCIPAL RISK 3					CURRENT SCORE	TARGET SCORE	
	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.					9 /25 3 (Possible) x 3 (Moderate)	6 /25 2 (Unlikely) x 3 (Moderate)	
	ASSOCIATED CORPORATE RISK/S				Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased			
					CURRENT SCORE	TARGET SCORE		
	DHCW0299 – Supplier capacity to support EPS				20 (5x4)	6 (3x2)		
	DHCW0300 – Canisc System Phase 2				16 (4x4)	6 (3x2)		
CONTROLS AND ASSURANCE	DHCW0308 - Sustainable funding for NIAS				12 (3X4)	6 (2X3)		
	DHCW0319 Cumulative Value of spend with DSPP delivery partner				16 (4X4)	4 (2X2)		
	KEY CONTROLS GAPS	ACTION PLAN (CONTROLS)	ASSURANCE GAPS	ACTION PLAN (ASSURANCE)	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER – May 23			
	1. Digital Health Care Record 2. Enhanced WNCR 3. Cancer Improvement Plan 4. NHS App Roll-out/Release Plan	1. Engage with DHCW teams and suppliers, roadmap plan to increase clinical content through APIs 2. Roadmap for enhanced WNCR functionality 3. Develop future phases of the improvement plan 4. Monitor usage of the app	1. Migrate applications to cloud native and open architecture 2. User research and user design to drive priorities and enhancements 3. User research and user design to drive priorities and enhancements 4. User research and user design to drive priorities and enhancements	1. Develop plans for cloud migration and transition to open architecture 2. Report on user feedback, benefits realisation, and service performance 3. Report on user feedback, benefits realisation, and service performance 4. Report on user feedback, benefits realisation, and service performance	PROGRESS HIGHLIGHTS 2. WNCR Adult transition to live service, WNCR Paediatrics programme established 4. NHS Wales App public beta launch. FORWARD LOOK FOCUS * Develop common framework or user research and user design * Develop common framework for benefits realisation. * NHS Wales App adoption and enhanced functionality.			

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MISSION 4: Drive better values and outcomes through innovation					RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks		Amber	Amber	
EXECUTIVE OWNER: Medical Director		RISK APPETITE: OPEN							
REPORTING PERIOD: 1 ST April – 31 ST October 2023		DATE OF REVIEW: 01 ST November 2023							
PRINCIPAL RISK 4						CURRENT SCORE		TARGET SCORE	
IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.						16/25 4 (Likely) x 4 (Major)		12/25 3 (Possible) x 4 (Major)	
RISKS	ASSOCIATED CORPORATE RISK/S				Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased				
					CURRENT SCORE		TARGET SCORE		
	DHCW0312 - Digital Cost Pressure – Exchange Rate Fluctuation Risk				16 (4x4)		9 (3x3)		
	DHCW0313 - Digital Cost Pressure – Service Model Changes				16 (4x4)		9 (3x3)		
	DHCW0269 – Switching Service - Data Warehouse				12 (3x4)		6 (3x2)		
	DHCW0263 – Establishment & Functions				12 (4x3)		4 (4x1)		
	DHCW0307 - Switching Service - Responsive development				12 (4x3)		6 (3x2)		
	DHCW0306 - Switching Service - Succession				12 (4x3)		4 (2x2)		
	DHCW0310 – PowerBI Dashboard Publication				12 (4x3)		8 (4x2)		
	KEY CONTROLS GAPS		ACTION PLAN (CONTROLS)		ASSURANCE GAPS	ACTION PLAN (ASSURANCE)	PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER – May 23		
1. R&I Governance 2. Research Committees 3. Access to secure anonymised Data 4. Health Intelligence portal 5. Analytics Strategy		1. Agree and approve the R&I Governance arrangements 2. Confirm Research commitments with academic partners 3. Operationalise secure research platform (SeRP) to enable the provision of secure access to anonymised data 4. Develop Health Intelligence portal 5. Development of a formal informational analytics strategy		1. Approval of R&I government governance arrangements 2. Agreed Research plan 3. Roadmap for implementation of SeRP 4. Agreed implementation plan for Health Intelligence portal 5. Agreed plan for implementation of Analytics strategy	1. SHA Board approval of R&I governance arrangements 2. Approved Research plan in place 3. Approved Roadmap for implementation of SeRP 4. Management Board approval of HIP plan 5. Approval of plan for Analytics Strategy	• R&I Governance arrangements is in place with the formation of the operational and engagement group first meeting in Q1 . • Review of formal academic research partnership agreements taking place. • DHCW Information Strategy being developed Contribution to all Wales innovation action plan and IP strategy, along with R&D framework led by Health and Care Research Wales.			
9/10						9			
						172/266			

MISSION 5: Be the trusted strategic partner and a high quality, inclusive and ambitious organisation

EXECUTIVE OWNER: Director of Finance/Deputy CEO | **RISK APPETITE: MODERATE**

REPORTING PERIOD: 1st April – 31st October 2023 | DATE OF REVIEW: 1st November 2023

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks



Amber

Amber

PRINCIPAL RISK 5

IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us
RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.

CURRENT SCORE

TARGET SCORE

ASSOCIATED CORPORATE RISK/S

Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased

RISK REF

CURRENT SCORE

RISK REF

CURRENT SCORE

TARGET SCORE

DHCW0237 - New requirements impact on resources and plan

16 (4X4)

9 (3X3)

DHCW0318**

16 (4x4)

1 (1x1)

DHCW0259 – Staff Vacancies

12 (3x4)

6 (3x2)

KEY CONTROLS GAPS

ACTION PLAN (CONTROLS)

ASSURANCE GAPS

ACTION PLAN (ASSURANCE)

PROGRESS ON ACTION PLAN – NARRATIVE BY EXEC OWNER – May 23

1. Digital Workforce Review
2. Equality, Diversity and Inclusion (EDI) Strategy
3. Digital Inclusion Charter
4. NHS Wales Digital Maturity position confirmed
5. Foundational Economy
6. Decarbonisation
7. Wellbeing of Future Generations Act
8. Sustainable Funding Model
9. FinOps Function
10. Benefits Management Framework
11. Digital Programme Office
12. Business Continuity Policy
13. Brand Management Guidance
14. Quality Standards
15. DHCW ISO Internal Audit Plan
16. Governance Assurance

1. Published and review agreed Digital Workforce action plan with Welsh Government Consultation with WG and NHS Wales on future sustainable funding models for Digital
2. EDI Strategy approval by Board
3. Develop action plan to embed the 6 pledges of the digital inclusion charter
4. Co-ordinate next steps post maturity surveys
5. Gather data to monitor the contribution to Foundational Economy
6. Qualitative and Quantitative reporting to Welsh Government
7. Work with Wellbeing of future generations act commissioner in readiness for April 20234
8. Work develop a future national and local funding model
9. Develop a FinOps function for Cloud
10. Develop a benefits management framework
11. Establish a digital programme office
12. Implementation of the Business Continuity Policy
13. Develop DHCW Brand Management guidance
14. EDI Strategy approval by Board
15. Implementation of the duty of quality and production of annual quality report
16. Produce and Approve ISO Internal Audit Plan
17. Provide annual Governance reports and BAF reviews

1. Reporting on progress against Digital WF Review action plan.
2. Regular reporting on implementation of EDI Strategy
3. Reporting on compliance with the Digital inclusion Charter
4. Routine Digital Maturity reporting in NHS Wales
5. Foundational economy bi- annual reporting to Welsh Government
6. Delivery of roadmap and Decarbonisation action plans
7. Reporting progress to the Wellbeing & Future generations office
8. Balanced financial plan
9. Roadmap for FinOps implementations
10. Implement a Benefits Management Framework
11. Establish Governance and reporting requirements for Digital Programme Office
12. Business continuity plans in place for all teams
13. Embed Brand guidance across DHCW
14. Publication of Annual Quality Report
15. External Audit reports
16. Reporting to Board on Governance compliance and structures

1. Continual review plan to ensure dynamic and robust
2. Share and learning from Best practice
3. Ongoing reporting and benchmarking on Digital inclusion charter
4. Progress the HIMSS Digital Maturity Matrix KLAS user survey.
5. Monitoring ongoing by DHCW Foundational Economy Group
6. Reporting on Decarbonisation action plan
7. Continued engagement with the WBFGA office
8. Ongoing discussions with Welsh Government
9. Agreed roll out plan for FinOps and reporting to Cloud Council
10. Benefits Management Reporting
11. Regular reporting on Digital Programmes Progress
12. Reporting on BC progress
13. Continued monitoring of Brand usage
14. Continued monitoring on compliance
15. Published External Audit reports available
16. Continued Board engagement and embedding of processes

1. DWR all Wales group established
2. To date the EDI strategy has been approved by the SHA Board.
3. Digital Inclusion Executive Lead agreed as the CEO and Working Group established.
4. Wales first phase digital maturity assessment completed
5. Work on plans relating to decarbonisation, WBFGA and foundational economy are progressing well.
6. Recent budget setting process has highlighted the importance of a sustainable national and local funding arrangement and work to understand how to frame this has started which will include the benefits and value proposition
7. Digital programme office design and function are being finalised
8. Branding details being finalised , work is progressing well
9. Revised Stakeholder Engagement Plan developed following Board Development session.
10. Focus in Quality is on the
11. Risk Appetite and BAF Report for 2023/24 developed for consideration by the Board in May 23

Plans are being implemented well across the key areas, areas of focus include the sustainable funding model development , compliance with the quality Act and workforce planning in particular filling vacancies in priority areas and talent development

DIGITAL HEALTH AND CARE WALES

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

Agenda Item	6.3
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Alyson Smith, Head of Organisational Performance
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	For Discussion/Review
Recommendation	The Board is being asked to: DISCUSS/REVIEW the report as representative of the performance of the organisation for March - April 2023.

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Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

1 IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	All Objectives apply
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CORPORATE RISK (ref if appropriate)	n/a
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	ISO 9001
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	Governance, leadership and accountability
If more than one standard applies, please list below:	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: n/a
Choose an item.	Outcome: n/a
Statement: Organisational performance reporting equally effects all. An EQIA is not applicable.	

IMPACT ASSESSMENT	
<u>QUALITY AND SAFETY</u> IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and development of transparent organisational performance reporting has a positive impact on quality.
<u>LEGAL</u> IMPLICATIONS/IMPACT	Yes, please see detail below There is a duty to monitor, report on and improve performance.
<u>FINANCIAL</u> IMPLICATION/IMPACT	Yes, please see detail below Should effective performance management not take place there could be financial implications.
<u>WORKFORCE</u> IMPLICATION/IMPACT	Yes, please see detail below Key organisational decision makers and leaders should be aware of an act upon the elements of performance for which they hold responsibility or accountability.
<u>SOCIO ECONOMIC</u> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<u>RESEARCH AND INNOVATION</u> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

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Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IOPR	Integrated Organisational Performance Report	WRIS	Welsh Radiology Information System
WNCR	Welsh Nursing Care Record	IMTP	Integrated Medium Term Plan
IT	Information Technology		

2 SITUATION/BACKGROUND

- 2.1 This document provides a summary of the Digital Health and Care Wales (DHCW) Integrated Organisational Performance Report (IOPR) to end April 2023. A similar report is presented to the DHCW Management Board monthly where Management Board attendees present and discuss performance and resulting actions or risks.
- 2.2 The Board IOPR is presented on a bi-monthly basis in arrears. Updates on DHCW's Integrated Medium Term Plan (plan) are included in the Board IOPR on a quarterly basis in arrears, providing assurance that progress is aligned to DHCW's published plan. Please note that this element of the IOPR contains details of the 2022-23 IMTP, to provide a full year report to the end of March.
- 2.3 The Board IOPR contains a Score Card which provides indicators for four operational domains of Finance & Workforce, Governance & Quality, Operational Service Delivery and Engagement & Feedback.
- 2.4 Each page of the Board IOPR contains an icon which references the associated strategic mission. These are explained in more detail on page 4 of the Board IOPR.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

Summary

May has been a challenging month for service delivery, with nine Major IT service incidents. Whilst the majority of those nine were of minimal effect to service, one **incident affecting the Master Patient Index** has required significant resource to resolve. The issue with the Master Patient Index was experienced following an activity to improve data quality that DHCW was undertaking with our supplier, IBM.

Following successful testing in the user acceptance environment, the eMPI system change failed in the live environment. eMPI activity is fully logged, which enabled all activity to be

tracked and rolled back to an assured position. However, the knock-on effect of the failed change has increased workload on our Service Desk, affecting our abandoned call rate, and also diverted resource from delivering against our plan, to resolve the issues that the technical change activity caused.

A full investigation and lessons learned incident review will be undertaken. DHCW's strategy to mitigate against this kind of incident is to address the technical debt in our systems and architecture – legacy technologies are typically more complex, have more interdependencies, and are consequently more difficult to manage and more costly to fix when there is an issue. Our cloud strategy is also an important part of our mitigation strategy..

As we have reached the end of a financial year, there is much activity underway to renew **Service Level Agreements**, and this can be seen in the number of meetings which have taken place across the period (noting that there have been some re-scheduled meetings due to competing priorities across the NHS). These are important meetings with stakeholders to agree service delivery for the year ahead. This dialogue is combined with the delivery of a new plan, and very difficult choices which need to be made to balance our finances for the year ahead, with resources under extreme pressure across the NHS.

There has been a surge of **commercial activity** across DHCW through the last period, which is reflected in the IOPR and in the Strategic Procurement paper to the Board. This includes major commercial work on key programmes like the National Data Resource and the Welsh Intensive Care Information System. Of particular note is commercial work on the two diagnostics programmes which were transferred to DHCW from the NHS Wales Collaborative in January. The **RISP Radiology Programme** has completed procurement and development of a Full Business Case which will be presented to all Health Boards, Velindre Trust and DHCW Boards for approval this month. And the commercial team has led complex work for the **LINC Laboratory Information Programme**. Board members will be kept updated of developments in each of these major diagnostics programmes through public and private meetings.

Our People and Organisational Development figures have seen a slight fall in key metrics for **annual performance reviews**, and we have an ongoing initiative to ensure that managers and teams are responding to the need to improve on completion in this area. In addition to this, we continue with our ambitious recruitment target so that DHCW can deliver the digital transformation initiatives in our plan.

We have held a very well-attended **staff conference** remotely during April (opened by Judith Paget), with a face-to-face awards ceremony during the evening of the second day. Feedback on the conference has been positive. The conference was an opportunity for staff to engage in different ways, and to find out about key delivery initiatives across the organisation, as well as being able to learn more about our updated strategic missions, the work that goes into each one, and the part that they play.

Cyber Security

Working with Welsh Government, the National Cyber Security Centre and colleagues across NHS Wales, we continue to review and monitor our cyber security measures in light of current

threats, to protect our national digital systems.

Plan on a Page

The Plan on a Page provides an at-a-glance overview of the key initiatives planned into the year.

Scorecard

The Scorecard provides an 'at a glance' indicator of performance in key areas. Further indicators will be included, and existing ones may be amended, in response to strategy, planning and performance requirements. The details below highlight selected indicators from the scorecard:

Operational Measures

Operational Service Support = RED. There were twelve Major IT Incidents in the period. Major IT incidents are disruptions to IT services that are categorised at Priority 1 or Priority 2 by NHS Wales' national service desk, depending on the impact and urgency of each incident. DHCW aims to resolve Major IT service incidents as quickly as possible and in line with the NHS Wales nationally agreed target resolution times. A Major IT incident could cause partial or complete disruption for a group of users of a single service, or could disrupt several services across NHS Wales, depending on the situation. The priority of each incident, and the duration of the disruption, is shown in the report. Where appropriate, Major IT Incidents are reviewed in detail by our Incident Review and Learning Group to minimise future occurrences and improve IT service delivery.

Three incidents in March: 1 x Welsh Laboratory Information Management System; 1 x Welsh Patient Administration System, affecting Welsh Clinical Portal and Welsh Admin Portal; 1 x Welsh Clinical Portal and Master Patient Index.

Nine incidents in April: 1 x Welsh Patient Administration System, affecting Welsh Clinical Portal and Welsh Admin Portal; 1 x stand-alone Welsh Patient Administration System; 5 x Welsh Radiology Information System, two of which were related to local network issues; 1 x Welsh Clinical Communication Gateway affecting the GP Test Requesting service; 1 x Master Patient Index.

Service Level Agreement (SLA) meetings = AMBER. Fourteen of 22 meetings were conducted to schedule. The SLA review meetings focus on the delivery of services to the Health Boards and Trusts, discussing performance, issues and new requirements.

IT Service Availability for the 2022-23 full year was 99.977% with a total of 45 Major IT incidents, affecting 23 IT services.

Workforce Measures

Sickness Absence = GREEN. Sickness is at 3.11%, which is well below the national NHS Wales average / benchmark.

Personal Development Appraisals Compliance = AMBER. Performance has decreased slightly

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to 84%, which is below the Welsh Government target of 85%. Performance against this measure is reviewed at monthly management reviews and six-monthly directorate reviews.

Statutory and Mandatory Training = GREEN. Compliance is at 91.3%, which is above the Welsh Government target of 85%.

DHCW's Strategic Resourcing Group is focused on the wider development of the organisation's resourcing and continues to build on the successes that have been seen in recruitment to date. The work with commercial partners to support resourcing of DHCW's plan continues.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

4.1 There are no matters for escalation to the Board in this period.

5 RECOMMENDATION

5.1 The Board is asked to:
DISCUSS /REVIEW the report as representative of the performance of the organisation for the period March - April 2023.

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
DHCW Management Board	12 th May 2023	Approved

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DIGITAL HEALTH AND CARE WALES

BOARD PERFORMANCE MARCH - APRIL 2023

Tolley, Laura
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INTRODUCTION

This Integrated Organisational Performance Report provides evidence of performance against key indicators across Digital Health and Care Wales (DHCW) and is linked to the Strategic Missions (below) defined within our Integrated Medium Term Plan (IMTP).

Performance is monitored and managed at various levels throughout the DHCW governance structure, with final oversight through Management Board and then our Special Health Authority (SHA) Board.

CONTENTS





- IMTP 2022-23
- Organisational Scorecard and Escalations
- Corporate Planning
- People and Organisational Development
- Commercial Services
- Operational Service Management
- Clinical Assurance and Information Governance
- Governance and Quality
- Engagement



INTEGRATED MEDIUM TERM PLAN AND PERFORMANCE 2022-23

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DIGITAL HEALTH AND CARE WALES | IMTP PLAN ON A PAGE 2022-23

MISSIONS -	PORTFOLIOS	Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
 ENABLING DIGITAL TRANSFORMATION	Information Availability and Flow	Open Architecture: Develop implementation plans for embedding Architectural Building Blocks into NHS Wales digital architecture and continue to deploy APIs during the year			
			Data Strategy: Develop Data Strategy implementation Plan as part of the National Data Resource.	Data Platform: procurement of national data platform	Deliver the Data Strategy and national dataset developments
	Protecting Patient Data	Information Governance: Develop and promote a Welsh Government National Information Governance Framework			System access: National Audit Tool Roadmap
		Cyber: Ongoing audit and assurance from Cyber Resilience Unit. Continue to implement DHCW Cyber Service Improvement plan			
	Sustainable Infrastructure	Infrastructure Strategy: Further develop sub strategies			
		Cloud: Migrate initial services to cloud hosting plus Cloud First procurements			
		Data Centres: Review second data centre provision			
 EXPANDING the content, availability and functionality of the DIGITAL HEALTH AND CARE RECORD	Digital Healthcare Professional Empowerment	Nursing solution: More features and further roll out			
		Cancer solution: Initial implementation			
		Digital Health Record: Populating the Digital Health Record and extending electronic test requesting to more disciplines	Establish M365 Centre of Excellence	Populating the Digital Health Record and extending test requesting	
	Digital Patient Empowerment	Digital Services for Patients and the Public: Initial priorities and work packages			
 Delivering HIGH QUALITY TECHNOLOGY, DATA PRODUCTS AND SERVICES	Public Health	Test Trace Protect: Respond to highest priority confirmed requirements for Test Trace and Protect			
	Primary, Community & Mental Health	GP Systems: Manage the transition to new GP systems agreement ensuring support for cluster development plans			
		Welsh Community Care Information System: Strategic Review	Welsh Community Care Information System: Future Roadmap	Mental Health: Functionality and Information sharing	Healthy Child Wales Programme functionality enhancements in the Child Health system
	Planned and Unscheduled Care	Covid-19 Recovery: Respond to Covid-19 recovery initiatives			
		Unscheduled Care digital developments including the Emergency department system and supporting the Welsh Ambulance Service			
		Welsh Patient Administration System - Betsi Cadwaladr West		Eye Care: integration with national systems	Intensive Care System available for roll out
	Diagnostics	Welsh Patient Administration System - Velindre			
		Welsh Radiology Information System Roadmap of decommissioning			
		Work with New Radiology and Laboratory Information Programmes: Support the RISP procurements and LINC delivery			
	Digital Medicines	Endoscopy: Review National Programme requirements as they emerge			
		Readiness for early e-prescribing and medicines management sites along with enabling patient medicines management			
		E-Prescribing and Medicines Administration: award contract framework for health boards to buy system for hospitals	Shared Medicines Record: design		
 DRIVING VALUE AND INNOVATION for better outcomes and value based care	Research and Innovation		Research and Innovation: Complete development of DHCW R&I Strategy	Delivery of Research and Innovation Strategy	
	Value from Data	Analytics: Responding to analytical requirements from Covid-19, Primary Care and Value in Health			

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CYBER

DHCW has developed a 3-year cyber plan and supporting financial request which has been approved by SHA Board and submitted to WG. We continue to progress the elements that do not require additional funding.

CLOUD

DHCW has established a Cloud Enterprise Agreement with Microsoft and Google. We have migrated services to the new Microsoft Tenancy and optimised costs. We have designed a scalable Google Cloud tenancy which will initially support the new National Data Platform.

RESEARCH AND INNOVATION

Delivery of the Research and Innovation strategy is ongoing until 2026. Key milestones delivered to date related to the 4 strategic aims are as follows:

- Aim 1 – Appointment into Head of R&I post and initial scoping of opportunities such as find, recruit, follow-up service that can benefit the R&I ecosystem in Wales. In addition contribution to national Innovation strategy and all Wales IP policy.
- Aim 2 – Governance structure developed and agreed.
- Aim 3 – Initial partnership discussions and exploration of set up of partnership groups
- Aim 4 – Development of R&I survey to understand knowledge and experience within DHCW, exploration of training opportunities and presenting R&I opportunities at national events such as BioWales in London.



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MISSION 1:
ENABLING DIGITAL TRANSFORMATION

DIGITAL HEALTH AND CARE WALES | IMTP PLAN ON A PAGE 2022-23

1. Enabling Digital Transformation

Information Availability and Flow

- Open Architecture
- Information Standards
- Integration Repositories
- Reference Data
- National Data Resource (NDR)

Protecting Patient Data

- Information Governance
- Cyber Security
- Cyber Resilience

Sustainable Infrastructure

- Core Infrastructure
- Cloud Strategy

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MISSION 1:
ENABLING DIGITAL TRANSFORMATION



PORTFOLIO 1:
INFORMATION AVAILABILITY AND FLOW

Develop an 'open platform' approach to digital innovation, by responding to national standards for how data, software and technologies work together, and how external partners can work with the national digital platform and national data resource.

Q1 APR-JUN 2022		Q2 JUL-SEP 2022		Q3 OCT-DEC 2022		Q4 JAN-MAR 2023	
OPEN ARCHITECTURE: Develop implementation plans for embedding Architectural Building blocks into NHS Wales digital architecture and continue to deploy APIs during the year.							
		DATA STRATEGY: Develop implementation plan as part of the National Data Resource Programme		DATA PLATFORM: procurement of national data platform		DATA STRATEGY: Deliver the Data Strategy and national dataset developments	
SITUATIONS OF NOTE: Legal Gateway/Availability of Data work with WG is continuing.							
DELIVERY:						OUTCOMES:	
<p>OPEN ARCHITECTURE: The NDR Programme supports the ambition of Open Architecture through three NDR ‘enabler’ projects:</p> <ul style="list-style-type: none">• API Management: The current phase of the API Project is nearing completion. Testing has completed, assurance is progressing, and knowledge transfer is underway. The Developer Portal is on track to deliver in April 2023. The first consumers of API Management Platform: Terminology (C&VUHB) and WCRS [Documents] (ABUHB) are on track to deliver for April 2023.• Care Data Repository (FHIR Façade/Server): The FHIR Façade for WRRS has been developed and is ready for testing. The current development phase of the CDR project is being developed through the Data Platform Setup project.• Clinical Data Engine: Interim contractual arrangements are in place. Acute Coronary Syndromes Pathway form being created in partnership with the Wales Cardiac Network; this element of the project is progressing towards assurance activities.						The local and national Data Platforms will underpin the Digital Health and Care Record, to service analytical data stores through a federated approach across the health and care system.	
<p>DATA STRATEGY: Priority Data Sets project has re-started and is consulting on scope. It is closely aligned with the Information Governance project which has entered Phase 2 delivery, and the Target Operating Model project which is making good progress on sprint 1 – development of a prioritisation tool and framework; sprint 2 (operational delivery framework) development has commenced. There are 12 federated projects (NHS Wales organisations, Social Care Wales and DHCW). Social Care Wales & Welsh Government Deliberative Engagement exercise discovery phase continues to progress.</p> <p>DATA & ANALYTICS PLATFORM: Infrastructure high-level design work has been completed and is progressing to assurance. The National Data and Analytics platform (NDAP) ‘readiness for production’ work is also reaching conclusion. Assurance of the platform, and Service Management activities are also progressing.</p> <p>ADVANCED ANALYTICS (AA): The Advanced Analytics strategy was approved by the NDR Programme Board in December 2022. Inaugural AA board meeting held in Feb 2023.</p> <ul style="list-style-type: none">• TOOLS: GitHub Cymru and SeRP discovery projects have completed, and recommendations reports published. Pilot service projects have been initiated.• INNOVATION: Big Data Event held the 29th of March 2023; the aim was to engage Wales Health and Care Organisations with many high-profile speakers and a Google Cloud hands-on technical session.• CAPABILITY: Phase 2 of the Analytics Learning Programme has completed and been evaluated. Phase 3 (Finance) has been initiated.							

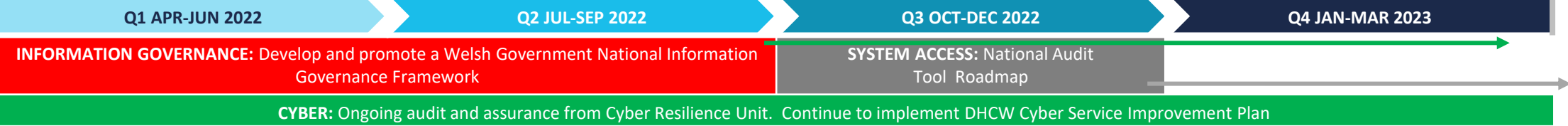


MISSION 1:
ENABLING DIGITAL TRANSFORMATION



PORTFOLIO 2:
PROTECTING PATIENT DATA

Develop an Information Governance and Cyber Security framework, standards and mechanisms that prioritise patient and service user safety and confidentiality, and protect data from external and internal threats, resulting in data remaining secure and NHS Wales being trusted to host patient and service user personal information.



SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: None	
DELIVERY:	OUTCOMES:
<p>INFORMATION GOVERNANCE: A new version 1 of the IG Toolkit Platform has been provided for population of a newly revised IG assurance question set in Quarter 4 22/23 – The New Toolkit provided to Health Boards and Trusts – with further implementation of the new platform in Q1 23/24 for General Practice and Q2 23/24 for Community Pharmacies (to support Electronic Prescribing Services (EPS).</p> <p>A Framework supporting all Wales IG assurance processes will be defined in the forthcoming DHCW IG Strategy.</p> <p>A revision of the subscription charging model and fees for the Data Protection Officer (DPO) Service for General Practitioner (GP) have been agreed and accepted by DHCW and GPC Wales.</p>	<p>Enabling organisations to better measure their level of compliance against national Information Governance standards and legislation using a new platform with increased functionality based on the Information Commissioners Office (ICO) Accountability Framework.</p> <p>A more financially sustainable position has been achieved for the DPO Service which will now reflect annual uplifts based on inflationary and service provision.</p> <p>The DHCW IG Strategy will be completed by Q1 23/24.</p>
<p>CYBER: The 3-year Cyber Plan has been approved by the DHCW board. This incorporates the Service Improvement Plan items and the results and Network and Information.</p> <p>Cyber Resilience Unit – Cyber Assessment Framework completed for 22/23. Plans in place for 23/24 submission to WG for review.</p>	<p>The Cyber Improvement Plan will increase protection from threats against user devices and servers, preventing both the likelihood and impact of malicious attacks, provide new technical controls, policies and ways of working that will help DHCW protect the NHS Infrastructure. It will also increase DHCW’s cyber posture and national baseline of standards for NHS Wales.</p> <p>Ensuring that NHS Wales is compliant with Network Information Systems (NIS) regulations.</p>

FOOTNOTE TO PLAN ON A PAGE- CYBER: DHCW has developed a 3-year cyber plan and supporting financial request which has been approved by SHA Board and submitted to WG. We continue to progress the elements that do not require additional funding.

Board Report: Mission 1 – Portfolio 2 – Protecting Patient Data

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MISSION 1:
ENABLING DIGITAL TRANSFORMATION



PORTFOLIO 3:
SUSTAINABLE INFRASTRUCTURE:

Develop and maintain a high-quality national infrastructure, transitioning to the cloud for better availability, reliability, safety, security, speed and agility.



Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

INFRASTRUCTURE STRATEGY: Further develop sub strategies

CLOUD: Migrate initial services to cloud hosting plus Cloud First procurements

DATA CENTRES: review second data centre provision

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

Allocated, agreed and on-going funding presents the biggest challenge especially with suppliers moving to a revenue-based charging structure.
Several large vendor contracts have (or will be in 23/24) moved from perpetual to subscription licencing model.

DELIVERY:

INFRASTRUCTURE STRATEGY: Building on the foundational cloud and data strategies approved by DHCW board in 2021-22. A stream of 5 technical strategies are in development and set to be approved through the DHCW Technical Design Authority Group (TDA).

CLOUD: The current agreement for MS Cloud has been migrated from a Cloud Solution Provider Program (CSP) to an Enterprise Agreement (EA) style; allowing DHCW a better pricing model. Reserved instances were purchased end of Q4, the net savings will be reinvested into cloud related activities to reduce revenue requirement in 23/24. High Level Design TAD for GCP has been signed off, ICT resources aligned to assist third party create landing zone.

DATA CENTRES: The procurement of the second data centre has completed with work now continuing with the winning bidder to finalise data hall configuration arrangements and availability date. Handover of new hall is expected in June 2023. Business case partially approved by Welsh Government, with agreement to meet the revenue request, capital will be resourced from discretionary, delaying other planned capital programmes.

OUTCOMES:

The sub-strategies will help form a standardised approach within DHCW and sit alongside the cloud and data strategies. Assisting the cloud first approach, the journey to greater cloud consumption and product road map developments.

Migration to Cloud aligned to future product roadmaps supports the ambitions of A Healthier Wales and provides an increased flexibility and resilience to services.

The second data centre will further DHCW's reduction in carbon footprint and ability to move to a cloud-first approach with the ability to decrease footprints with the contract framework.

FOOTNOTE TO PLAN ON A PAGE- CLOUD: DHCW has established a Cloud Enterprise Agreement with Microsoft and Google. We have migrated services to the new Microsoft Tenancy and optimised costs. We have designed a scalable Google Cloud tenancy which will initially support the new National Data Platform.



MISSION 3:

EXPANDING THE CONTENT, AVAILABILITY AND FUNCTIONALITY OF THE DIGITAL HEALTH AND CARE RECORD

DIGITAL HEALTH AND CARE WALES | IMTP PLAN ON A PAGE 2022-23

3. Expanding The Content, Availability And Functionality Of The Digital Health And Care Record

Digital Healthcare Professional Empowerment

- Cancer Informatics Programme
- NHS Wales e-Library
- Office 365
- Welsh Clinical Portal
- Electronic Test Requesting (Pathology)
- Electronic Test Requesting (Radiology)
- Electronic Test Requesting (New)
- Welsh Information System for Diabetes Management
- Welsh Nursing Care Record

Digital Patient Empowerment

- Digital Services for Patients and the Public
- NHS Wales Websites

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MISSION 3:

EXPANDING THE CONTENT, AVAILABILITY AND FUNCTIONALITY OF THE DIGITAL HEALTH AND CARE RECORD



PORTFOLIO 4:

DIGITAL HEALTH PROFESSIONAL EMPOWERMENT

Improving and expanding the content, availability and functionality of the Digital Health and Care Record, agnostic of health board and geographical boundaries and supporting evidence based decision making and connectivity using NHS Wales e-library and Microsoft 365 suite.



Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
NURSING SOLUTION: More features and further roll-out			
CANCER SOLUTION: Initial implementation			
DIGITAL HEALTH AND CARE RECORD (DHCR): Populate the DHCR and extend electronic Test Requesting to more disciplines.		Establish Microsoft 365 Centre of Excellence	Populate the DHCR and extend Test Requesting
SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: Funding for the Cancer services deliverables – to include Palliative Care, Screening Services and Breast Test Wales and other phase 2 requirements – runs to March 2024.			
DELIVERY:		OUTCOMES:	
NURSING SOLUTION: The Welsh Nursing Care Record product transitions beyond its project closure in March 2023, with continuation funded by a Service Level Agreement payable by all 7 health boards and Velindre trust. At the same time, the WNCr paediatrics project commences.		No initial impact of the agreed release content swap. Collaborative testing across Wales has proven beneficial prior to the WNCr release that will provide a Single Instance product. All Health Boards and Velindre trust have taken SMB approved version preceding Single Instance WNCr, which will now come online in Q2 23/24, aligned to 24/7 support of the vastly simplified product. The Business Continuity solution persists to cover any service outages in the meantime.	
CANCER SOLUTION: Palliative Care Patient Preferences and Palliative Care MDT have been developed and are available across Wales for User Acceptance Testing. Swansea Bay pilot site for Breast Cancer Dataset form and Breast MDT form January – February 2023 whilst dual running in Canisc. Implementation planning, training and testing with Health Boards for the upcoming adoption of the 13 Cancer Dataset and MDT forms across Wales on a tumour site basis.		Swansea Bay are now live with the new solution for Breast Tumours and no longer using Canisc to register these diseases. Agreed plans with Health Boards to adopt Cancer Dataset and MDT forms as follows: April 2023 – Breast, May 2023 – Urology, June 2023 - Lower gastrointestinal (GI), July 2023 - Upper gastrointestinal (GI) and Lung.	
MICROSOFT 365 CENTRE OF EXCELLENCE: The CoE has completed consultation and has agreed the service offering with the HBs and trusts. Development of Power Platform apps continues, with a current focus on national apps on behalf of: Lymphoedema Wales Clinical Network; NWSSP (staff movement advice modernisation); Traumatic Stress Wales and the Diabetes Remission Programme.		The CoE capability has been established and the handover to the substantive team is complete. During April the CoE will promote a full range of services to all NHS Wales organisations: <ul style="list-style-type: none"> • Provide support, advice and guidance in current usage and governance of the national M365 licenses • Enable Health Board and Trusts M365 development • Enable modernising and transforming of key processes and share nationally 	

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MISSION 3:
EXPANDING THE CONTENT, AVAILABILITY AND FUNCTIONALITY OF THE DIGITAL HEALTH AND CARE RECORD



PORTFOLIO 5:
DIGITAL PATIENT EMPOWERMENT

Provide Digital services for patients and the public to enable seamless interaction with health and care services supporting patients to fully participate in their own health and well being

Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

DIGITAL SERVICES FOR PATIENTS AND THE PUBLIC: Initial priorities and work packages

SITUATIONS OF NOTE:

High – There is no agreed timetable yet for a Welsh Patient online journey (POL) nor Welsh Language interface for the NHS login which is provided by NHS England; the remainder of the app is fully bilingual throughout from launch. Engagement is ongoing with the Welsh Language Commissioner regarding Welsh Language standard 58 for NHS Login. Escalation through DHCW CEO to NHS Digital CEO and through Welsh Government. Progress has been made on this in Q4 with NHS England stating that they can commit to discovery work (investigation) of Welsh POL journey. Their stated aim was to commence discovery end of April 2023. DSPP continue to reach out to agree a contract for work to be undertaken.

Medium – IM1 data integration for EMIS has been delivered and initial testing complete, with final production testing to be carried out beginning of 23/24. An engagement and deployment plan for EMIS practices needs to be confirmed and MHOL migration activity agreed with Primary Care Service support model has been agreed & will be implemented for the commencement of Public Beta in conjunction with Kainos, and to be refined/iterated during managed release plan.

NEXT PERIOD:

During Q1 23/24 the formal transition from private beta to Public Beta (soft launch, available from app stores) will commence. A new contractual work package will be commissioned to deliver further capability to the App as well as commissioning the revised service support model for Public Beta. Planning will be progressed for an ‘Accelerator Conference’ to help the team identify early adopters of DSPP best practice technology solutions called DSPP exemplars. Procurement activity to be initiated for a 3rd party accreditation service. Production testing of EMIS IM1 interface to enable planning for EMIS deployment.

RISKS/ISSUES/CONCERNS:

No Welsh POL journey in place (requiring NHS England commitment)
Funding risk for activity not yet commissioned for Welsh POL.
Long-term arrangements for operational service to be confirmed. Transition planning initiated Q4 but will continue throughout 23/24

DELIVERY:

Private Beta has been positively received with ongoing use beyond the initial live user testing and with a satisfaction rate of over 70%. Over 500 repeat prescriptions have been ordered, 3472 GP records viewed, and 100 appointments booked. Feedback and lessons have informed the approach for public beta. All 10 practices involved have agreed to be onboarded for the Public Beta phase.

Development and readiness activity to support commencement of Public Beta has been ongoing in collaboration between DSPP, DHCW Primary Care and Kainos, to ensure new feature (aligned to open front door) and early adopter practice readiness. Practice deployment (Cegedim) will be phased, enabling initial further live testing and feedback.

IMPACT:

The NHS Wales App will provide access to key health services through a mobile phone app (Apple and Android platforms) and supporting web services. It is being developed on an agile basis, informed by user research and user design principles. There are over 1 million people in Wales already registered with a NHS Login – the integrated user authentication process within the NHS Wales App.

The second phase deployment of the App (Public Beta) will be supported by engagement activity to encourage GP Practice adoption and the availability of functionality within the App (e.g. appointment scheduling and repeat prescriptions). Further extended functionality will be added to the App through 2023 and 2024, using an open architecture approach which will enable third party services to be launched from or within the App.



MISSION 2:

DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES

DIGITAL HEALTH AND CARE WALES | IMTP PLAN ON A PAGE 2022-23

2. Delivering High Quality Technology, Data Products And Services

Public Health	Primary, Community and Mental Health	Planned and Unscheduled Care	Diagnostic	Digital Medicines
<ul style="list-style-type: none">• Test, Trace and Protect• Screening Services	<ul style="list-style-type: none">• Choose Pharmacy• Cluster Working• Child Health (CYPRIS)• Dental E-Referrals• GP Systems• GP Test Requesting• Welsh Community Care Information System	<ul style="list-style-type: none">• 111 Integration• Eye Care Digitisation Integration• Maternity• WAST Electronic Patient Record Integration• Welsh Community Communication Gateway• Welsh Emergency Department System• Welsh Intensive Care Information System• Welsh Patient Administrative System• Welsh Patient Referral Service	<ul style="list-style-type: none">• Endoscopy• Laboratory Information Network Cymru• Welsh Laboratory Information Management System• Radiology Informatics Solution• Welsh Radiology Information System• Welsh Image Archive Service• Welsh Point of Care Testing	<ul style="list-style-type: none">• Welsh Hospital E-Prescribing Pharmacy and Meds Admin• Electronic Transfer of Prescriptions• E-Prescribing and Medicines Management• Patient Access to Medications• National Medicines Repository• Welsh Hospital Stock Management System

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MISSION 2: DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



PORTFOLIO 6: PUBLIC HEALTH:

Improving and expanding the content, availability and functionality of the Digital Health and Care Record, agnostic of health board and geographical boundaries and supporting evidence based decision making and connectivity using NHS Wales e-library and Microsoft Office 365 suite



Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
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TEST, TRACE, PROTECT (TTP): Respond to the highest priority requirements for TTP

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:
At the request of Welsh Government the contract tracing solution will be scaled back, DHCW will be providing business as usual support only.
Due to the expiration of the Control and Patient Information 3(4) provision it has not been possible to refresh the Immunosuppressed and At Risk Cohorts within the Welsh Immunisation System prior to the Spring Campaign. A legal basis has now been established for the next year and these groups will be updated in May 2023.

DELIVERY:	OUTCOMES:
<p>WELSH IMMUNISATION SERVICE (WIS):</p> <p>The team have delivered the software changes needed to implement the Spring Campaign at the end of February 23.</p> <p>On course to achieve the separation of the Welsh Immunisation System and Children and Young Peoples Immunisation System by the end of April.</p>	<p>To Enable the vaccination of citizens in line with JCVI advice, including the use of newly licensed products for this campaign.</p> <p>This is a key enabler for more effective and efficient delivery of both services, and modernisation of the products.</p>

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MISSION 2:
DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



PORTFOLIO 7:
PRIMARY, COMMUNITY AND MENTAL HEALTH:

Building digital infrastructure across primary and community care by developing, operating and maintaining a set of high-quality national digital services reflecting new models of local care, closer to home.



Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
GP SYSTEMS: Manage the transition to a new GP systems arrangement ensuring support for Cluster development plans			
WELSH COMMUNITY CARE INFORMATION SYSTEM: Strategic Review	WELSH COMMUNITY CARE INFORMATION SYSTEM: Future Roadmap	MENTAL HEALTH: Functionality and Information Sharing	HEALTHY CHILD WALES PROGRAMME: Functionality enhancements in the Child Health System

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

GP SYSTEMS:

Phase 2 of the GP Systems Framework is underway with a national call off for GP systems due to take place in the summer of 2023.

A high-level proposal for the provision of digital services to support the Primary Care Model for Wales has been shared with the Strategic Programme for Primary Care (SPPC). Initial priority areas identified for further scoping; establishing an IG Framework, a review of the Primary Care Information Portal and available data, understanding the proposal for a National Digital Design for Community Information and provision of infrastructure to support roaming working. It is anticipated that a strategic partnership agreement is established between DHCW and the SPPC.

DELIVERY:

WCCIS STRATEGIC REVIEW: The Strategic Review Phase 2 work has now concluded. Business case for potential platform replacement is being prepared for submission in April.

WCCIS ROADMAP: DHCW has produced a forward plan for the Technology work stream that outlines the work required to complete the associated road map. The roadmap will include information on releases and go-lives. This is now complete and is updated regularly.

MENTAL HEALTH: DHCW has worked with stakeholders to agree the priorities across Community and Mental Health information dataset requirements.

GP SYSTEMS: Implementation of new GP Systems Framework Contract. Phase one: Practice choice and migrations complete where applicable.

DENTAL REFERRALS: Re-procurement complete and Contract awarded

OUTCOMES:

The Welsh Community Care Information System provides a single national system for sharing of information securely between health and social care services.

To develop a National service and Information standards for community information services. Stakeholders: Social Care, Community Nursing, Mental Health and Allied Health Professionals.

New Contract in place for practices whose support was due to expire.

New Contract in place for community dentists to enable electronic referrals to continue.

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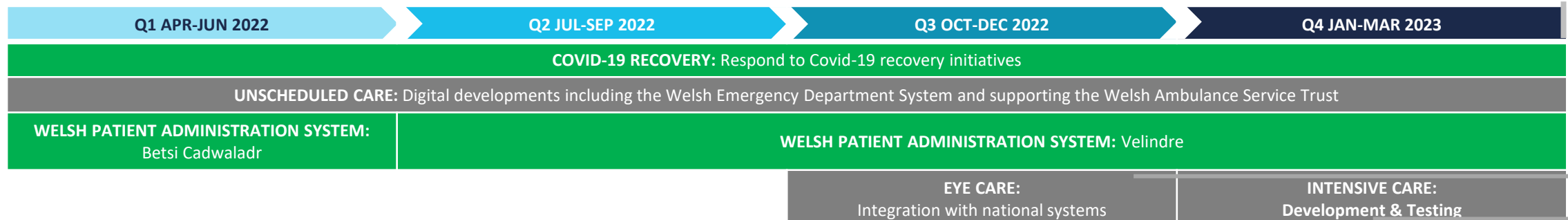


MISSION 2: DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



PORTFOLIO 8: PLANNED AND UNSCHEDULED CARE:

Develop, operate and maintain a set of high-quality national digital services to enable new models of planned and unscheduled patient care and management



SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

WEDS has a RED status, without a date for Morryston go live, the rest of Wales will not make plans. As this is an ongoing situation, confidence in the national solution is falling. EyeCare. A national programme currently run by Cardiff and Vale is to transition to DHCW for National Programme Management. Outcome of Gateway Zero WG Treasury Review imminent. Outcome of review will enable DHCW transition discussions and planning to commence. OpenEyes with MPI interface is live in C&V and CTM [2 sites]. WCRS is in HB UAT [test phase]. WCRS/WIAG signoff achieved. WICIS is being impacted by major issues found late in the delivery cycle, which are immediately on the critical path.

DELIVERY:

WELSH PATIENT ADMINISTRATION SYSTEM (WelshPAS): The WelshPAS has been deployed in Velindre NHS Trust as a single instance PAS, including substantial data migration from the original CaNISC system.

WELSH EMERGENCY DEPARTMENT SYSTEM (WEDS): The only live site implemented in Neath Port Talbot MIU has remained operational with some on-going issues and low confidence in system stability. Significant progress needs to be seen before the system progresses to Morryston ED.

Escalation via supplier Executive team has resulted in activity to assess a proposal from the supplier to move away from central infrastructure in the national data centres and instead implement on local on-premises infrastructure.

There is also uncertainty regarding proposed DPIF funding.

WELSH INTENSIVE CARE INFORMATION SYSTEM (WICIS): Testing has highlighted issues relating to pathology integration and prescribing which have delayed the implementation schedule. Development and testing is ongoing to help resolve this.

OUTCOME:

The introduction of WelshPAS and WCP to Velindre enables the final decommissioning of CaNISC. This final phase will take place in stages during the course of the Year as 3rd party users are moved to suitable alternate systems.

The WEDS delay is creating a lack of trust in the supplier and solution by all Health Boards, which may impact the future viability of the project.

The supplier had delivered some progress but risk of instability and supplier responsiveness remain critical problems, preventing meaningful engagement with Morryston ED.

The proposal for local on-premise implementation requires feasibility assessment from both a commercial and technical perspective. A strategic review has been commissioned to independent consultants to deliver an options appraisal on the future of the National Programme.

The project and supplier continue to work with pathology colleagues and critical care Pharmacists to develop the solution and find solutions to the problems identified.



MISSION 2: DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



PORTFOLIO 9: DIAGNOSTICS:

Develop, operate and maintain a set of high-quality national digital services to enable the modernisation of diagnostics.



Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

WELSH RADIOLOGY INFORMATION SYSTEM: Roadmap for decommissioning

WORK WITH NEW RADIOLOGY AND LABORATORY INFORMATION SYSTEMS: support the RISP procurements and LINC delivery

ENDOSCOPY: Review National Programme requirements as they emerge

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

LINC status has been escalated through formal channels and regular updates are provided to Chief Executive Group, LINC & RISP transitioned to DHCW on the 1st Jan 2023.

DELIVERY:

Radiology Informatics Solution Programme, RISP: In January 2023, in the RISP Programme Board, all Health Boards endorsed a recommendation that Philips be awarded a contract, following financial approval the intention is to formally award the contract in June.

Laboratory Informatics Network Cymru, LINC: this project to replace the legacy Pathology Laboratory system has seen delays to the original project timelines. Further work is required on the plan from the supplier and production of design documents to define the scope and scale of the work DHCW needs to undertake.

Welsh Image Archive Service, WIAS: Project is dependent upon provision of a resilient VPN before being able to test data migration (Images) approaches.

Endoscopy: Results from Cwm Taf Morgannwg, Hywel Dda, Swansea Bay and Powys health boards are now available in WRRS for viewing in WCP across organisational and geographical boundaries. Enablement of a new Endoscopy cloud reporting system in Betsi Cadwaladr is going LIVE in April 23, with results availability in WCP progressing.

OUTCOMES:

Contract Award is still expected in Q1 2023-2024.

Delays to the implementation of the new system.

Two key operational services moved from being on premise to cloud based. The operational services are working effectively in the cloud. WIAS requires the resilient VPN.

Clinicians treating an individual patient who has had an Endoscopy test in these health boards, can now see the result in WCP, regardless of their NHS Wales organisation. This gives the clinician more clinical information to make a judgement, potentially reducing the number of duplicate patient procedures and improving the patient healthcare experience.



Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

Readiness for early e-Prescribing and medicines management sites along with enabling patient medicines management

E-PRESCRIBING AND MEDICINES ADMINISTRATION:
Award framework for Health Boards to buy system

SHARED MEDICINES RECORD: Design

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

- All health boards have received their Secondary Care electronic Prescribing and Medicines Administration (ePMA) funding letters from Welsh Government to recruit pre-implementation teams. Velindre and Welsh Ambulance Service Trusts requests to be submitted to Welsh Government.
- Application Programme Interfaces (API) delivery team established, with priority focussed on delivering the APIs needed to support secondary care ePMA implementations.
- Primary Care Electronic Prescription Service (EPS) Technical Proof of Concept (TPoC) progressing. TPoc planned to start in May 2023.
- Community pharmacy system supplier innovation fund established to fund EPS development required by system suppliers to support EPS use in Wales.
- Proof of concept completed to safely share medicines with the Shared Medicines Record (SMR).

DELIVERY:**SECONDARY CARE ELECTRONIC PRESCRIBING AND MEDICINES ADMINISTRATION (EPMA):**

- Procurement project formally closed following the publication of the multi-vendor framework
- All health boards have received their pre-implementation team funding letters to begin local procurement activities.
- ePMA communities of practice established to share lessons learned, best practices and to prepare for ePMAs implementations across Wales
- Application Programme Interfaces (API) delivery team established, with priority focussed on delivery the APIs needed for ePMA implementations

PRIMARY CARE ELECTRONIC PRESCRIPTION SERVICE (EPS):

- Continuing to work collaboratively with NHS England to implement EPS across Wales. This will enable a GP prescription to be sent to a patient's nominated community pharmacy digitally. This includes working closely with GP system suppliers to complete software development to their products to be EPS compliant.
- EPS Technical Proof of Concept (TPoC) progressing. TPoC planned for May 2023.
- Community pharmacy system supplier innovation fund established to fund EPS development required by system suppliers to support EPS use in Wales.

SHARED MEDICINES RECORD (SMR):

- Proof of concept completed to safely share medicines with the SMR

PATIENT ACCESS:

- Discovery phase completed on (1) patient community pharmacy nomination and (2) to track status of a primary care prescription within the NHS Wales App.
- Welsh language group established to translate medicines information into Welsh when viewing in the NHS Wales app
- Requirements being gathered to enable a push notification in the NHS Wales App to inform a patient when their GP prescription is ready for collection from their nominated community pharmacy.

OUTCOMES:

Through electronic prescribing it will be possible to improve the way patients, clinicians and pharmacists access and manage the provision of medicines across the health system.

Establishing a seamless digital communication and sharing of prescription information between prescribing and dispensing systems from GPs and non-medical prescribers to a community pharmacy of choice.

The Shared Medicines Record will improve visibility of patients' medications which will contribute to increased patient safety.

Provision of a patient application that allows data sharing from GP, community pharmacy and hospital systems to patients. This is to support patients to understand which medicines to take and when, to record their choices, record any problems they are experiencing with medicines, and how and when their medicines are supplied.



MISSION 4:
DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE

DIGITAL HEALTH AND CARE WALES | IMTP PLAN ON A PAGE 2022-23

4. Driving Value And Innovation For Better Outcomes And Value Based Care

Research and Innovation

Value From Data

- National Data Repository
- Data and Analytic Services
- PROMS and PREMS
- Value in Health

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MISSION 4:

DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE



PORTFOLIO 11:

RESEARCH AND INNOVATION: Delivering research insights and innovation for service improvement.

Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

RESEARCH AND INNOVATION: Complete development of DHCW Research & Innovation strategy

Delivery of Research and Innovation strategy

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: Need to secure long-term funding for a dedicated DHCW R&I resource, funding for the current resource ending in December 2023.**DELIVERY:**

The DHCW R&I Governance Process (and associated new group structures, R&I Project Approval and Stakeholder Engagement processes) developed, reviewed and approved by Management Board. Meetings of the R&I Engagement and Operations Group commence April 2023.

Resources for R&I: Head of R&I commenced work in January 2023. Senior Product Specialist from software allocated to the team until 31st March 2023. Support post being appraised by A4C panel.

Engagement: R&I presentations to promote and raise awareness of our work and outputs (presented at BioWales 2023 and contributed to Wales Innovation action plan). Workshop also held in December presenting the outcomes of the project to Welsh Government colleagues to inform next steps for potentially moving towards outcomes-based agreements in Wales.

Partnerships: Discussions regarding collaborations, closer working and joint bids (e.g. with WIDI, Cardiff Metropolitan University (Green Transition Fund), Cardiff University (AI, Data Science, Medical School), Swansea University (Centre for Doctoral Training). Welsh DigiTrials proposal. Bevan exemplar projects.

1st DHCW Annual Report for R&I summarising achievements to date and plans for supporting R&I within DHCW, and our key role supporting external R&I studies.

OUTCOMES:

All key DHCW R&I activities (requests, projects, programmes, collaborations and partnerships) will be taken forward in a more business-like, transparent and assured way from 1st April 2023 with adherence to the four thematic principles detailed in the R&I Strategy (Approved Sept 2023).

Capacity and expertise established within DHCW to take forward the R&I Strategy

More effective promotion of the Strategy, our processes for, the sharing of our intent and examples of the impact of work we do.

Successful joint bids for funding bringing resources into the team. R&I projects being taken forward in key strategic areas (Data Science, AI, Decarbonization, Data 2 Knowledge, clinical informatics etc). Establishment of a possible Welsh DigiTrials resource to support clinical trials and National AI Hub led by Cardiff University

Annual Report that can be shared as part of our engagement strategy to promote and raise awareness of what we do.

FOOTNOTE TO PLAN ON A PAGE- RESEARCH AND INNOVATION: Delivery of the Research and Innovation strategy is ongoing until 2026. Key milestones delivered to date related to the 4 strategic aims are as follows:

- Aim 1 – Appointment into Head of R&I post and initial scoping of opportunities such as find, recruit, follow-up service that can benefit the R&I ecosystem in Wales. In addition contribution to national Innovation strategy and all Wales IP policy.
- Aim 2 – Governance structure developed and agreed.
- Aim 3 – Initial partnership discussions and exploration of set up of partnership groups
- Aim 4 – Development of R&I survey to understand knowledge and experience within DHCW, exploration of training opportunities and presenting R&I opportunities at national events such as BioWales in London.



MISSION 4: DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE



PORTFOLIO 12:

VALUE FROM DATA: Driving value from data for better patient outcomes and service planning.

Q1 APR-JUN 2022

Q2 JUL-SEP 2022

Q3 OCT-DEC 2022

Q4 JAN-MAR 2023

ANALYTICS: Respond to analytical requirements from COVID-19, Primary Care and Value in Health**SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS :** None.**DELIVERY:**

Publication of Prevalence data for 2020/2021 and also 2021/2022 in the Primary Care Information Portal.

The All Wales Diabetes Module was released in the Primary Care Information Portal during February.

Completion of the Digital Economy Act internal audit.

Development of the module for Practices to submit their Access Standards for the end of the QAIF 2022/2023 contract.

VBHC completed dashboards:

1. Acquired Brain Injury
2. Knee Arthroplasty
3. Liver Registry
4. Myeloma Dashboard
5. Epilepsy dashboard

All 38 milestones have been delivered across the year.

OUTCOMES:

The benefit of this is The prevalence of identified conditions can be monitored and compared with previous years. This will benefit GP Practices, Clusters, Health Boards & WG.

The impact of this is that the Audit+ module enables GP Practices to identify patients showing pre-diabetes indicators, as well as managing the care of patients that have been diagnosed with diabetes. This will impact on GP Practices, Clusters, Health Boards & WG.

This allows the team to prepare for the formal Digital Economy Act accreditation review. This benefits DHCW & Swansea University.

To enable accurate payments in relation to Access Standards and provide local HB with appropriate data in relation to the Access provision for patients offered by each Practice. The key stakeholders are the GP Practices, Clusters, Health Boards, and WG.

The benefits for each of the dashboards include;

1. To highlight the demand on the service of acquired brain injury patients and make data widely available to health boards.
2. To make data on knee arthroplasty patients available widely to health boards.
3. To highlight the increasing demand on the service of liver disease and pinpoint areas where demand is greatest.
4. To make information on myeloma patients, such as admissions, incidence and survival rates, widely available to health boards.
5. To help evaluate the success of the management of epilepsy within primary care

Stakeholders for each of these dashboards include clinicians and other staff working in each specialty area .

We have delivered ongoing support to all stakeholders and ensured the continual BAU activities for the information services team. Stakeholders include WG, GPs, HBs, Wales Cancer Network, WCCIS, ViH programme and Patients.



FINANCIAL MANAGEMENT | FINANCIAL HIGHLIGHTS END OF MARCH 2023



DHCW is reporting achievement of all of the key financial indicators for the period

Achieved

DHCW is reporting the following against its key Financial Performance Indicators:

- Revenue – Operational underspend as per forecast of £0.069m after applying the savings target profile.
- Capital – Current Spend of £11.731m against CRL of £11.789m.
- PSPP – DHCW have paid 98% of non-NHS invoices within 30 days.

INDICATOR	RESULT	SUMMARY
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)		Small operational surplus of £0.069m.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit CRL)		£11.731m spend for period against a capital limit of £11.789m
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)		PSPP target achieved 98% achieved against a target of 95%
Bank Sufficient bank balances		Balance as at 31/03 £1.1m

SUMMARY:

- The organisational month end revenue underspend is currently £0.069m against a forecast of breakeven.
- Capital spend to date is £11.731m of the total CRL of £11.789m.
- PSPP target exceeded @98%
- Cash balance of £1.130m.

Please note that full financial details up to April 2023 are included in SHA Board Papers



IT Service Availability in March 2023

was **99.992%**

with **3** MIs totalling **3.5** hours of
disruption across **5** services

IT Service Availability in 2022-23 was

99.977% with

45 MIs totalling **59** instances of

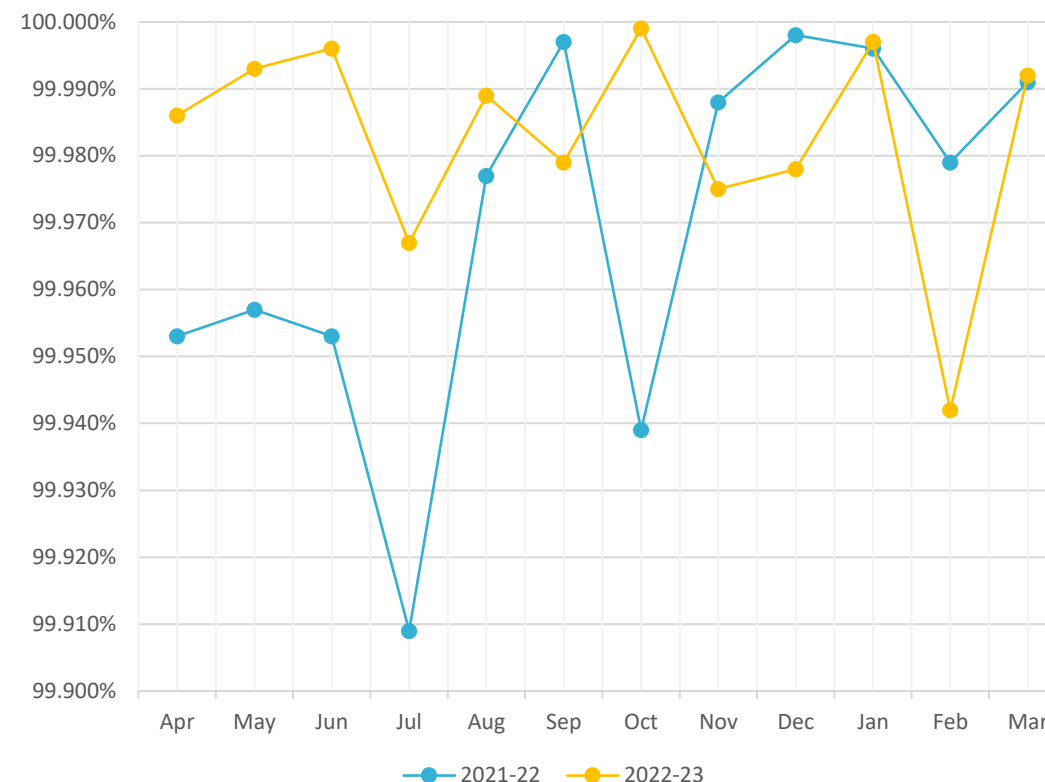
disruption across **23** Services

SUMMARY

There are three work streams developing DHCW's approach to IT Service Availability:

- The first is tracking the major IT incidents (MIs) reported to Management Board and Board through the IOPR – presenting the availability figure, developing changes to the underlying approach to MI reporting and refining the scope of the current calculation model.
- The second is developing a Power BI dashboard to present DHCW's IT Service Availability data.
- The third is exploring the wider service issues around IT Service Availability, e.g. partial availability, start and end times, systematisation of data, Service Category (Critical /Standard), multiple impacts with staggered restoration, scheduled maintenance windows.

DHCW Service Availability Annual Comparison



Please note that April data will be reflected in the next report so that this report provides an annual perspective to the end of March 2023



INTEGRATED ORGANISATIONAL PERFORMANCE REPORT: APRIL 2023

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The **SCORE CARD** presents a high-level view of the business areas which are monitored and presented in greater detail throughout this report. This month there are **four indicators which are AMBER**, and **one as Red**: being addressed as detailed in later sections.

Operational Measures:

- **Operational Service Support** – Twelve Major IT Incidents; one SLA breach. 5 x WRIS, 3 x WPAS (two of which affected multiple services), 1 x WCCG, 1 x MPI, 1 x WLIMS and 1 x WCP. IT Service Availability decreased to 99.982% on the month.
- **Operational Service Delivery** – Windows Server 2008 end of extended - 4 servers outstanding, 2 of which are mitigated.
- **Cyber Security Assurance** – increased to 82%. 7 Services are overdue for pen testing
- **Service Level Agreement meetings** – Four meetings took place in March and ten in April, eight meetings were cancelled at the request of the Health Boards and one by mutual agreement due to industrial action.
- **Strategic Engagement meetings** – Two meetings took place in March and none in April.
- 1 of 54 Audit Actions not completed by target date

Workforce Measures:

- **Sickness Absence** – Decreased to 3.11%, by 0.32%. This figure includes 7 Covid-19 related absences. Anxiety, Stress, Depression is the top reason for absence.
- **Appraisal Compliance** – 78%; below Welsh Government target of 85%.
- **Statutory and Mandatory Training** – decreased slightly to 91.3% but remains above target.

FINANCE & WORKFORCE			GOVERNANCE & QUALITY		
FINANCE	Small operational overspend of £0.038m	£0.751m spend for period against a capital limit of £0.751m	Maintain Public Sector Payment Policy to pay non NHS creditors within 30 days of receipt of valid invoice: Target = 95% (actual = 99%)	1/54 audit actions not completed by target date	ISO and BS Standards compliant with requirement
	Sickness absence (actual 3.11%)	Appraisals compliance target = above 85% (achieved 78%)	Statutory and Mandatory Training compliance target = above 85% (achieved 91.3%)	Clinical Risk Management	Corporate Risk Management
OPERATIONAL SERVICE DELIVERY	Commercial Services contract management compliant with KPI	Operational Service Support includes some areas which need attention. 12 Major IT Service Incidents, one not resolved within the SLA target	Continue to support NHS Wales recovery	Service Level Agreement performance meetings with stakeholders =14/22 conducted to schedule	Two Strategic Engagement meetings in March, none planned for April
	Clinical Assurance and Information Governance requests one FOI responded to outside of KPI. Incidents resolved within KPI	Operational Service Delivery includes some areas which need attention.		Customer Satisfaction Feedback to Local Service Desk target = above 93% (actual 95%)	
OPERATIONAL SERVICE DELIVERY			ENGAGEMENT & FEEDBACK		



There are no escalations from Management Board.

DIRECTORATE ESCALATIONS TO MANAGEMENT BOARD

REF	STATUS	ESCALATION	NEXT STEPS /OUTCOME
n/a	n/a	n/a	n/a

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PLAN ON A PAGE 2023-24 | PORTFOLIOS

Key

Funded	Confidence in availability of funding or budget allocation
Resource not confirmed	Limited confidence in funding or budget allocation



Portfolios	Qtr 1 Apr-Jun 2023	Qtr 2 Jul-Sep 2023	Qtr 3 Oct-Dec 2023	Qtr 4 Jan-Mar 2024	2024-2025	2025-2026
1.1 Data Platform and References Services	Care Data Repository					
	Establish Data and Analytics Platform	Data and integration Hub				
1.2 Open Architecture and Interoperability	API Roadmap	APIs into production				
	Platform and Product Roadmaps					
1.3 Protecting Patient Data	Data Promise Programme	National IG Governance Framework				
		National Audit System Award				
1.4 Sustainable and Secure Infrastructure	Cloud Plan and Business Case					
	Cyber Plan					
				Data Centre Move		
2.1 Public Health	Vaccine Transformation Discovery		Screening Programme Priorities			
2.2 Primary, Community and Mental Health	Digital Partner for Strategic Programme for Primary Care					
	Welsh Community Care Information System Strategic Review Recommendations					
				GP Systems Preferred Supplier(s)		
2.3 Planned and Unscheduled Care	Welsh Patient Administration across North Wales	Welsh Patient Administration Health Board Boundary Change				
	Procure an All Wales Maternity system					
	Eye Care Gateway Review and transition arrangements					
2.4 Urgent and Emergency Care	Welsh Emergency system - review outputs of strategic review	Intensive Care System roll out				
2.5 Diagnostics	New laboratory management system readiness (LINC)				Start LINC roll out	Complete LINC roll out
	New radiology management system business case	New radiology management system readiness (RISP)			Start RISP roll out	Complete RISP roll out
2.6 Digital Medicines	Digital Medicines Transformation (DMTP) initial stages of: single medicines record, electronic transfer of prescriptions, hospital e-prescribing, patient access to meds				DMTP next stages	DMTP next stages
3.1 Health and Care Professions	Electronic requesting expanded across specialties					
	Future phases of Cancer Informatics Solution				Cancer Improvement Plan deliverables	
3.2 Patients and the Public	NHS Wales App launch GP services	Develop core functional services			Support and further development	
		Onboarding and connection of third party suppliers with NHS Wales App core services				
4.1 Research and Innovation	Rules of engagement with industry partners		Review of academic research partnership and develop a catalogue of commitments			
4.2 Value from Data	Analysis and modelling for Strategic Programmes and Public Health					
	Information and Analytics Strategy			Implement 'Official Statistics' plan		
	Ongoing priority analytics in Value in Health and Primary and Community					

27/41

206/266



PEOPLE & ORGANISATIONAL DEVELOPMENT | SUMMARY

SICKNESS ABSENCE



Sickness absence - 3.11% overall. This is a decrease of 0.32% since the previous month.

Long term sickness - 1.89% decrease by 0.30% from last month.

Short term sickness - 1.22% decrease of 0.03% from last month.

STATUTORY AND MANDATORY TRAINING



Statutory and Mandatory Training is 91.3% although a slight decrease by 0.5% from last month, it remains above the Welsh Government target of 85% for NHS Wales.

APPRAISALS



Appraisal completion rate is 78%, a reduction by 6% from last month. This below the Welsh Government target of 85%.

TURNOVER



Turnover is 7.64% - slight reduction of 0.29% from last month

VARIATION



Special Cause
Concerning
variation



Special Cause
Improving
variation



Common
Cause

ASSURANCE



Consistently
fail target



Consistently
hit target



Hit and miss
target
subject to
random

● Target
● Averag
--- Process
Limits



COMMERCIAL SERVICES | STRATEGIC PROCUREMENT ACTIVITY

The following procurement contracts will be presented to the DHCW Board for approval, as noted in the Schedule.

TITLE	ALL WALES / DHCW INTERNAL	OVERVIEW OF THE SCOPE	INDICATIVE CONTRACT VALUE	INDICATIVE TERM (YEARS)	CONTRACT START DATE	SHA BOARD DATE	CURRENT STATUS
Data Quality System (DQS)	All Wales	Provision of a Data Quality System (DQS) to GP practices for data quality and reporting requirements for national and local initiatives. The software extracts, analyses and presents patient information that is derived from the data held in the practice clinical information system.	£7.2m	3+1+1	01/06/2023	25/05/2023	In plan for May 2023 SHA board approval
MS Dynamics 365 Integrated Telephony Provision	All Wales	Establish a service for an integrated telephony service into the Test, Trace, Protect CRM portal. The contract is to provide a provision in readiness should the TTP CRM need to be re-instated in response to a resurgence of Covid/Pandemic.	£6m	1+1+1	01/07/2023	25/05/2023	In plan for May 2023 SHA board approval
National Messaging Integration	All Wales	Renewal of the licences for the integrated messaging software which enables the various systems and solutions used in and by NHS Wales.	£6m	3	01/07/2023	25/05/2023	In plan for May 2023 SHA board approval
Radiology Imaging System	All Wales	Digital solution to store, access, review and report radiology images.	£60m	10	01/07/2023	TBC	The full business case (FBC) is scheduled for SHA Board approval in May 2023. It is dependent on final approval of the FBC by WG, an extra-ordinary SHA board may be sought.
Welsh Maternity System	All Wales	An All Wales digital Maternity solution to be implemented for December 2024	£7m	5+2	01/01/2024	TBC	Procurement planning stage- defining a route to market
Clinical Data Engine	DHCW Internal	Digital Health and Care Wales is seeking to procure technical capability to facilitate access to structured clinical data using open standards, and a mechanism for capturing data as a Clinical Data Engine (CDE). This forms a key building block to the open architecture approach as described as a deliverable of the National Data Resource Programme.	£15m	3+1+1	TBC	TBC	Procurement planning stage- defining a route to market
External Resources Framework	DHCW Internal	Establishment of a Framework Agreement with multiple lots for the provision of individual resources to augment the DHCW teams OR to outsource projects to external organisations.	£12m	4	TBC	TBC	Awaiting award approval. If proceeding, to be submitted for approval at May 23 SHA Board

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OPERATIONAL PERFORMANCE | INCIDENT & SERVICE REQUEST MANAGEMENT

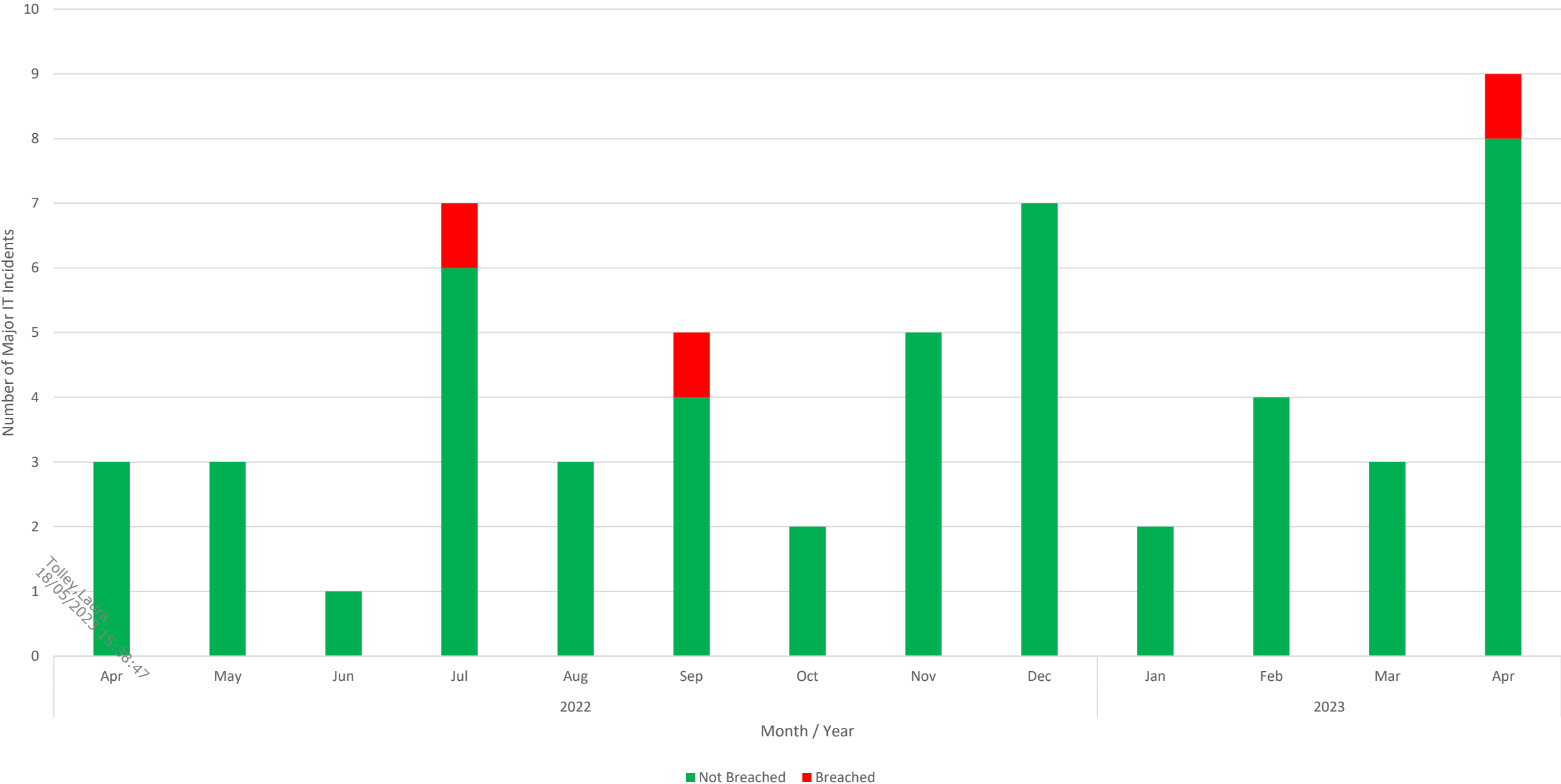
PERFORMANCE AREA	METRIC	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23^
National Services - Critical (Excluding GP Services)	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	1632 (95%)	1301 (94%)	1063 (93%)	1127 (95%)	1204 (96%)	1197 (97%)	1110 (97%)	1378 (97%)	1115 (91%)	1156 (92%)	1079 (98%)	1449 (98%)	1025 (97%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	5322 (97%)	5809 (97%)	5276 (97%)	5777 (98%)	5643 (98%)	5701 (98%)	5401 (99%)	5688 (98%)	4860 (98%)	5089 (98%)	4855 (98%)	5048 (98%)	3307 (98%)
National Services – Standard	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	441 (99%)	403 (96%)	322 (98%)	390 (95%)	453 (98%)	330 (98%)	438 (99%)	409 (96%)	298 (97%)	412 (94%)	675 (99%)	469 (99%)	228 (100%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	1128 (97%)	1191 (97%)	1026 (98%)	1222 (98%)	1384 (97%)	1388 (99%)	1648 (98%)	1600 (98%)	1280 (98%)	1401 (98%)	1407 (98%)	1388 (98%)	756 (99%)
Desktop Support Service - Critical	Total Incidents Resolved (% resolved within timescale)	1156 (97%)	1375 (97%)	1258 (94%)	1027 (97%)	1258 (95%)	1136 (95%)	1291 (94%)	1195 (93%)	992 (94%)	1250 (96%)	1235 (95%)	1315 (94%)	TBC
	Total Service Requests Resolved (% resolved within timescale)	1137 (96%)	969 (97%)	971 (96%)	903 (96%)	848 (96%)	1018 (97%)	1056 (97%)	1053 (96%)	789 (94%)	840 (95%)	800 (96%)	1078 (94%)	TBC

PERFORMANCE AREA	METRIC	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23
National GP Services - Critical	Calls Logged as Incidents (% resolved within timescale)	619 (99%)	645 (99%)	732 (99%)	730 (98%)	681 (100%)	757 (100%)	863 (99%)	949 (100%)	627 (98%)	765 (100%)	800 (99%)	TBC	TBC
	Calls Logged as Service Requests (% resolved within timescale)	178 (99%)	156 (99%)	294 (100%)	308 (100%)	279 (99%)	378 (99%)	331 (99%)	308 (100%)	260 (98%)	382 (100%)	299 (100%)	TBC	TBC

^Note April ServicePoint data Preliminary to 23/04.



OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS





OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS MARCH 2023 (DETAIL)

SERVICE(S) AFFECTED	WELSH CLINICAL PORTAL (WCP), MASTER PATIENT INDEX (MPI)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8314492 PROBLEM REF 28449
DATE/TIME LOGGED	14/03/2023 09:22	DATE/TIME RESOLVED	14/03/2023 09:49	Time to resolution: 27 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	Users across NHS Wales reported that they were unable to use patient search in the all Wales Instance of Welsh Clinical Portal (a core function of WCP). Investigations were undertaken by the support teams who identified that a policy hadn't been updated following a planned decommissioning. Amending the policy restored access to the patient search function. This resulted in 10 calls being raised and the service was unavailable for 27 minutes.			
SERVICE(S) AFFECTED	WELSH PATIENT ADMINISTRATION SYSTEM (WELSHPAS), WELSH CLINICAL PORTAL (WCP), WELSH ADMIN PORTAL (WAP)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8335338 PROBLEM REF 28483
DATE/TIME LOGGED	22/03/2023 11:39	DATE/TIME RESOLVED	22/03/2023 12:10	Time to resolution: 31 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	Users in Cwm Taf Morgannwg University Health Board reported that they were experiencing slowness and system freezing with the Welsh Patient Administration Service (Welsh PAS). The support team failed the service over to the secondary site which restored service. Root cause analysis investigations continue. A total of 11 calls were received with the service being unavailable for 31 minutes.			
SERVICE(S) AFFECTED	WELSH LABORATORY INFORMATION MANAGEMENT SYSTEM (WLIMS)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8338905 PROBLEM REF 28492
DATE/TIME LOGGED	23/03/2023 11:36	DATE/TIME RESOLVED	23/03/2023 12:39	Time to resolution: 63 Minutes Incident did not breach the 8 hour SLA target
DESCRIPTION	New users across Wales reported that they were unable to access the Welsh Laboratory Information Management System (WLIMS). Users were presented with an 'access is denied' error message and could not launch the application. Investigations identified that a planned change to the licensing servers caused an unexpected response, which resulted in the service being unavailable to some users. The change was reverted which restored access. This resulted in 15 calls being raised with the Service Desk and the Service was unavailable to some users for 63 minutes.			

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OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS APRIL 2023 (DETAIL) 1 OF 3

SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8362680 PROBLEM REF 19407
DATE/TIME LOGGED	03/04/2023 17:12	DATE/TIME RESOLVED	03/04/2023 17:28	Time to resolution: 16 Minutes Incident did not breach the 4 hour SLA target
DESCRIPTION	Users in Swansea Bay University Health Board reported that they were unable to log in to WRIS in Singleton & Morriston Hospitals, instead receiving 'invalid session GUID (Text String)' errors. Investigations identified that this incident was a recurrence of a known error that was thought to have been fully mitigated in a recent upgrade. A restart of the service restored functionality to users. This resulted in one call being received by DHCW with the service being unavailable for 16 minutes. The problem record that this incident is related, has been reopened and returned to an under investigation state.			
SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8382375 PROBLEM REF 27480
DATE/TIME LOGGED	13/04/2023 10:12	DATE/TIME RESOLVED	13/04/2023 10:15	Time to resolution: 3 Minutes Incident did not breach the 4 hour SLA target
DESCRIPTION	Users in Cwm Taf Morgannwg University Health Board reported that they were unable to log in to WRIS across all sites. Investigations identified connections issue between webservice and database, this incident showed similarity with local network issues experienced in Aneurin Bevan University Health Board. Cwm Taf Morgannwg University Health Board and the WRIS team agreed to resolve and monitor. A restart of the service restored connectivity. This resulted in one call to the service being unavailable for three minutes.			
SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8389637 PROBLEM REF NO PROBLEM RECORD RAISED
DATE/TIME LOGGED	17/04/2023 12:06	DATE/TIME RESOLVED	17/04/2023 12:26	Time to resolution: 20 Minutes Incident did not breach the 4 hour SLA target
DESCRIPTION	Users across all sites within Cwm Taf Morgannwg University Health Board were unable to log in to new WRIS sessions. It was discovered that the WRIS Service running in Cwm Taf Morgannwg University Health Board had been consuming more and more memory and was causing performance issues. A restart to the WRIS Service restored access to users. A single priority 1 incident was raised in relation to this Major Incident, with a recorded downtime of 20 minutes.			



OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS APRIL 2023 (DETAIL) 2 OF 3

SERVICE(S) AFFECTED	WELSH PATIENT ADMINISTRATION SERVICE (WELSH PAS)			SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8392486 PROBLEM REF 28596
DATE/TIME LOGGED	18/04/2023 10:30	DATE/TIME RESOLVED	18/04/2023 10:56	Time to resolution: 26 Minutes Incident did not breach the 8 hour SLA target		
DESCRIPTION	Users in Cwm Taf University Health Board reported that they were experiencing slowness and system freezing with the Welsh Patient Administration Services (Welsh PAS). The support team failed the service over to the secondary site which restored service. Root cause analysis investigations continue. One call was received with the service being unavailable for 26 minutes.					
SERVICE(S) AFFECTED	WELSH PATIENT ADMINISTRATION SYSTEM (WELSH PAS), WELSH CLINICAL PORTAL (WCP), WELSH ADMIN PORTAL (WAP), WELSH NURSING CARE RECORD (WNCR)			SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8393966 PROBLEM REF 28598
DATE/TIME LOGGED	18/04/2023 14:20	DATE/TIME RESOLVED	18/04/2023 14:46	Time to resolution: 26 Minutes Incident did not breach the 8 hour SLA target		
DESCRIPTION	Users in Swansea Bay University Health Board reported that they were experiencing slowness and system freezing with the Welsh PAS, which caused system function loss within WNCR and WCP. The support team failed the service over to the secondary site which restored service. Root cause analysis investigations continue. A total of 11 calls were received with the service being unavailable for 26 minutes.					
SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^			SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8395930 PROBLEM REF NO PROBLEM RECORD RAISED
DATE/TIME LOGGED	19/04/2023 10:02	DATE/TIME RESOLVED	19/04/2023 12:16	Time to resolution: 134 Minutes Incident did not breach the 4 hour SLA target		
DESCRIPTION	Users in Velindre Cancer Centre reported that they were unable to access WRIS. Investigations by the DHCW WRIS Team discovered that the server which WRIS runs from in Velindre was unreachable. Velindre Local IT were able to restart the host server which brought back up the WRIS Service for Velindre users. This resulted in one priority 1 incident being raised and a downtime of 134 minutes to the WRIS service.					



OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS APRIL 2023 (DETAIL) 3 OF 3



SERVICE(S) AFFECTED	WELSH CLINICAL COMMUNICATIONS GATEWAY (WCCG), GP TEST REQUESTING (GPTR)	SERVICE LEVEL: CLINICAL STANDARD	P2	INCIDENT REF 8402692 PROBLEM REF 28627
DATE/TIME LOGGED	21/04/2023 09:22	DATE/TIME RESOLVED	21/04/2023 11:00	Time to resolution: 98 Minutes Incident did not breach the 36 hour SLA target
DESCRIPTION	<p>Users across NHS Wales reported that they were experiencing browser related issues with WCCG and GPTR, and some users were unable to log in due to this.</p> <p>Investigations undertaken by the support teams identified that the necessary URLs hadn't been included in an updated Microsoft Edge compatibility list for Internet Explorer (IE) mode, which caused applications to open in Edge without IE mode enabled. The previous version of the list had the correct version.</p> <p>Amending the site list restored access to the patient search function. This resulted in two internal calls being raised and with the service being impacted for 98 minutes.</p>			
SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8420079 PROBLEM REF 24799
DATE/TIME LOGGED	28/04/2023 11:24	DATE/TIME RESOLVED	28/04/2023 11:35	Time to resolution: 11 Minutes Incident did not breach the 4 hour SLA target
DESCRIPTION	<p>User in Aneurin Bevan University Health board reported that they were unable to access WRIS when logging in.</p> <p>Investigations identified that this relates to a known error with the service. The root cause of which remains under investigation, however a restart of the primary webserver restored access.</p> <p>This resulted in one call being raised and system unavailability of 11 minutes.</p>			
SERVICE(S) AFFECTED	MASTER PATIENT INDEX (MPI)	SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF PROBLEM REF 28532
DATE/TIME LOGGED	03/04/2023	DATE/TIME RESOLVED	ONGOING	Time to resolution: Incident breached the 4 hour SLA target
DESCRIPTION	<p>Data quality activity was carried out on the Master Patient Index (MPI) on Thursday 30th of March which was intended to address an issue relating to records which have been flagged on the system as having potential data quality issues. The exercise was carried out in conjunction with our supplier (IBM), following successful testing in the UAT environment. However, this caused an issue with the production environment which necessitated a rollback of the change. This was implemented within the four hour target, but the ongoing data checking/correcting process has continued for over a month, hence reporting this as a breach of the four hour SLA target.</p>			



OPERATIONAL PERFORMANCE | SERVICE DESK

	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEP-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23
Total Number of calls logged	16704	17427	16698	17170	17688	19613	21152	21735	14617	17632	17505	19580	16077
% All Abandoned Calls (Threshold 4%)	6.5%	3.9%	10.4%	6.9%	4.0%	4.1%	7.1%	6.6%	5.3%	3.5%	7.5%	3.8%	4.2%
Average Speed of Answer (Seconds) (Target 30 sec)	12	12	14.5	10	10.5	10.5	11.5	12.5	13.5	10.0	19.0	11.5	6.0

SUMMARY:

First Line Fix Rate remains at 37% for the second month.

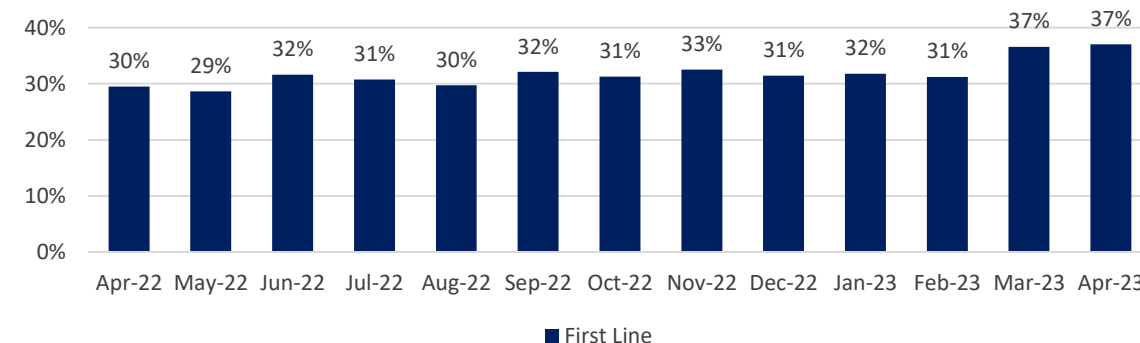
The number of telephone calls received throughout April was 5482.

Our abandoned calls rate has risen slightly to 4.2% and is slightly above target. There were issues with Virgin Media and Cegedim during April.

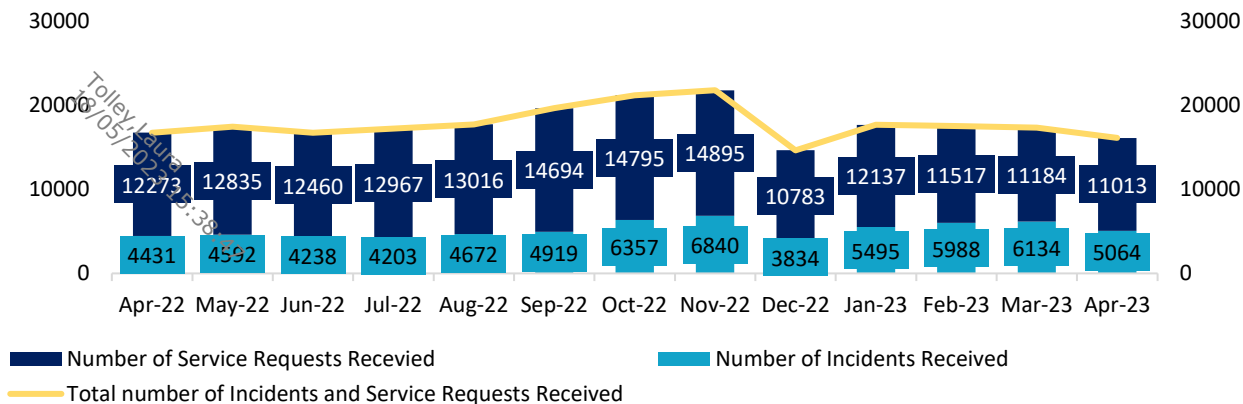
Staff Satisfaction results have dropped to 93% but remain above target.

Customer Satisfaction for April was 96% and has risen by 1%.

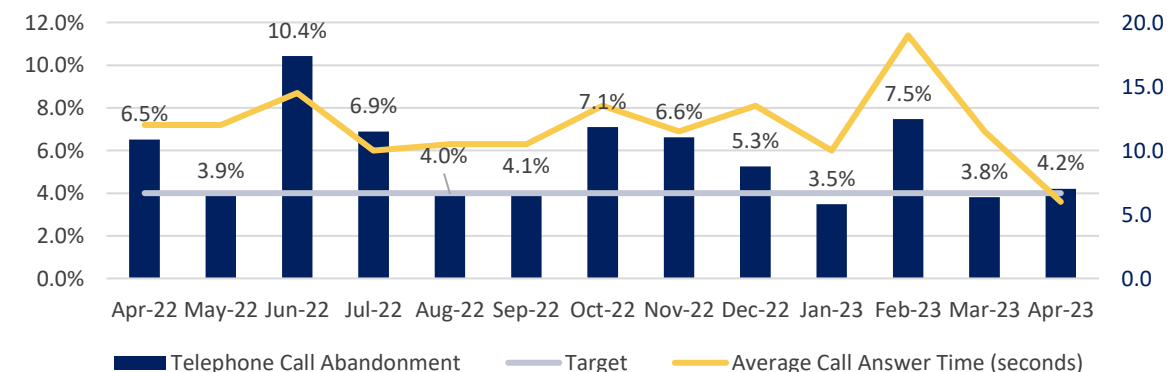
First Line Fix Rate



Incidents and Service Requests Received



Telephone Abandoned Calls





CLINICAL INCIDENTS:

There are four incident investigations underway, one of which was logged in March. There have been no new incidents were logged in April

INFORMATION GOVERNANCE:

- In March 2023,
 - DHCW received four Freedom of Information (FOI) Act requests.
 - Seven FOIs were responded to in March 2023.
- In April 2023,
 - DHCW received seven Freedom of Information (FOI) Act requests and one Subject Access Request.
 - Four FOIs and one Subject Access Request were responded to in April 2023.
- All requests were responded to within the statutory timescales. A summary of the responses are provided on the next slide.
- One outstanding request has not been responded to within the statutory timescales and will be reported as part of next month's Management Board report

Response

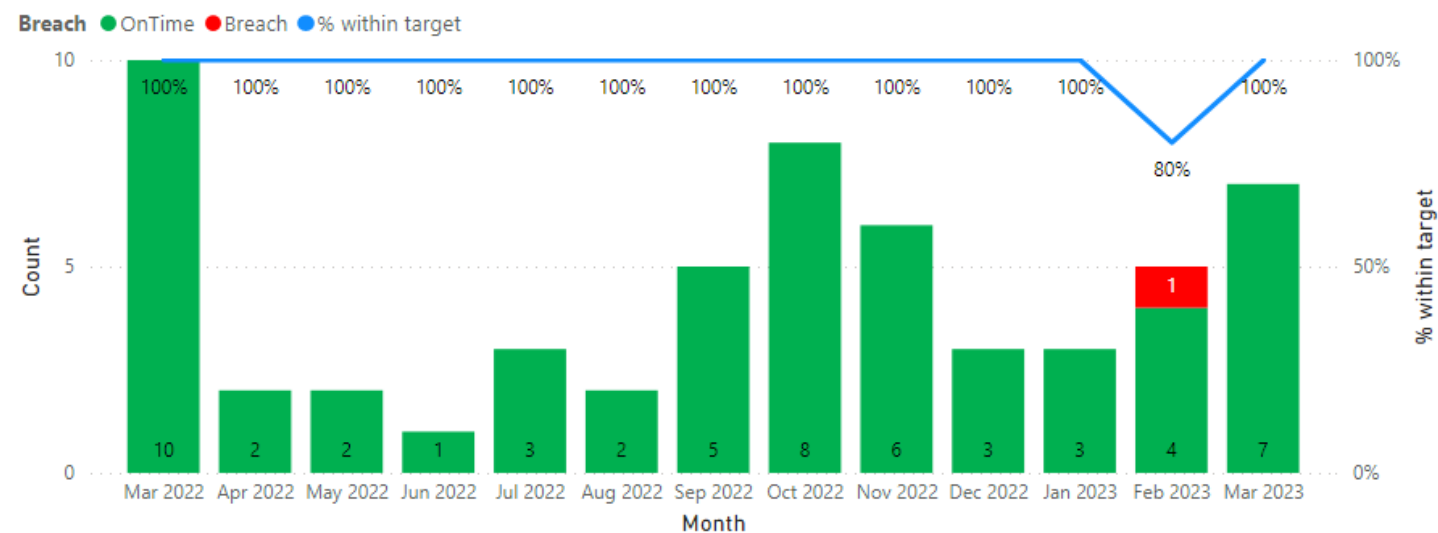


Diagram is for responses to Freedom of Information Act requests only.



SUMMARY INDICATORS	OCT-22	NOV- 22	DEC - 22	JAN -22	FEB-23	MAR-23
ISO 9001 Quality Management						
ISO 14001 Environmental Management						
ISO 20000 Service Management						
ISO 27001 Information Security Management						
BS 76000/76005 Valuing People						
Service Desk Institute (SDI)						
BS 10008 Evidential weight & Legal admissibility						

Summary of External Findings Indicators Key Points:

- **ISO 9001** – 1 new Minor Non-Conformity (NC) from the re-certification audit on Document Control & 1 Opportunity for Improvement (OFI)
- **ISO 14001** – 6 OFI
- **ISO 20000** – 6 open NCs to be reviewed by External Auditor (SGS) prior to certification transfer
- **BS 76000** – 20 open findings, which are mixture of NC's & OFI
- **BS 76005** – 1 open OFI
- **ISO 27001** – 1 Minor NC pending closure

Quality & Regulatory Compliance Summary:

- The agile, risk based internal audit programme has audits provisionally scheduled up to September 2023 with 24 audits completed within the financial year. The audit programme is currently reporting 100% on target. Moving into 2023-24 the programme will continue to target 2 audits per month. A further auditor training course will be run during Q1 2023/24.
- The Duty of Quality in the Health and Social Care (Quality and Engagement) (Wales) Act 2020 came into force on the 1st of April 2023, and the Duty of Quality implementation project plan is progressing in line with expectations. A presentation around the Duty of Quality is being prepared for the next Staff Conference on the 26th and 27th of April 2023. The Quality team will be engaging with directorates during Q1 to allow for preparation of the first 'Always On' Quality report.
- Quality annual plan and Cyber Resilience Unit annual plan have been taken to Management Board and will be taken to Audit & Assurance committee in April.

Indicators -

- **Quality Improvement Actions List (QIAL)** = A proposal has been submitted to Quality Group to form a '*QIAL Action Task & Finish Group*' to meet monthly, the objective of the group is to reduce the current open QIALs which have passed their target dates. The group will summarise and escalate the completed actions and positions of QIALs to the IMS and Quality Group monthly. Updates from the group will be included in the Quality Group highlight report.
- **Integrated Management System (IMS) Document Reviews** = 72% with 28% overdue (target 95%), 10% decrease from last month. Quality Team is working very closely with Authors and Department Heads to ensure that all overdue documentation is reviewed, updated and approved. Overdue documents are being monitored and actioned within the IMS Assurance Group with any concerns and issues being escalated to the Quality Group for further action.

**PROGRESS:**

- A revised Action Plan was approved at Management Board in March 2023.
- SHA Board development Session planned for April to discuss the Action Plan.
- Internal Audit recommendations have been incorporated into the revised Action Plan.
- Targeting May 2023 SHA Board for approval of Action Plan.
- The Project and Planning teams meet regularly with Health Boards to work with IMTP milestones in order to agree joint plans
- DHCW signed the Digital Inclusion Charter in September 2022. Executive Directors Strategic Session in April 2023 will inform next steps to embed the 6 pledges.
- The Digital Programme Leads meeting initiated with all delivery organisations.
- Job Descriptions drafted for Engagement team.
- Inaugural meeting for Professional Network for Engagement & Comms has been agreed.

**STRATEGIC ENGAGEMENT MEETINGS:**

DATE	ORGANISATION
10 th March 2023	Velindre University NHS Trust
22 nd March 2023	Powys Teaching Health Board
3 rd May 2023	Welsh Ambulance Service Trust
10 th May 2023	Public Health Wales
24 th May 2023	Hywel Dda University Health Board
21 st June 2023	Health Education And Improvement Wales
28 th June 2023	Betsi Cadwaladr University Health Board
5 th July 2023	Cwm Taf Morgannwg University Health Board
6 th July 2023	NHS Wales Shared Services Partnership
31 st July 2023	Cardiff and Vale University Health Board
13 th September 2023	Aneurin Bevan University Health Board
4 th October 2023	Powys Teaching Health Board

- *Meeting cancellations at the request of the health board, aside from DHCW's meeting with WAST on the 2nd March 2023, which was cancelled by both parties, due to industrial action and other considerations.*

**SERVICE LEVEL AGREEMENT / SERVICE REVIEW MEETINGS:**

DATE	ORGANISATION
6 th March 2023	Public Health Wales (PHW)
17 th March 2023	National Imagine Academy Wales (NIAW)
23 rd March 2023	Velindre University NHS Trust (VUNHST)
31 st March 2023	Welsh Ambulance Services NHS Trust (WAST)
4 th April 2023	Finance Delivery Unit (FDU)
6 th April 2023	Aneurin Bevan University Health Board (ABUHB)
11 th April 2023	Powys Teaching Health Board (PTHB)
14 th April 2023	Betsi Cadwaladr University Health Board (BCUHB)
17 th April 2023	Cardiff & Vale University Health Board (CVUHB)
19 th April 2023	Swansea Bay University Health Board (SBUHB)
20 th April 2023	Hywel Dda University Health Board (H DUHB)
21 st April 2023	Velindre University NHS Trust (VUNHST)
24 th April 2023	Health Education and Improvement Wales (HEIW)
24 th April 2023	Cwm Taf Morgannwg University Health Board (CTMUHB)
27 th April 2023	Llais (was Community Health Councils)
27 th April 2023	NHS Wales Health Collaborative
28 th April 2023	NHS Wales Shared Services Partnership (NWSSP)
3 rd May 2023	Cardiff & Vale University Health Board (CVUHB)
5 th May 2023	Public Health Wales (PHW)
11 th May 2023	Welsh Ambulance Services NHS Trust (WAST)

**SUMMARY:**

Customer Satisfaction levels remain above target at 95%.

SBU HQ Baglan

Polite, professionalism, understanding

Hywel Dda University Health Board

My problem was resolved quickly and efficiently by the lovely lady I spoke to, she was very patient and friendly. The service was easy to use.

NWSSP - Cwmbran House (Pontypool)

person who dealt with my call was very friendly and helpful, got me set back up in no time at all.

W98022 - Cwmtawe Medical Group (vSd)

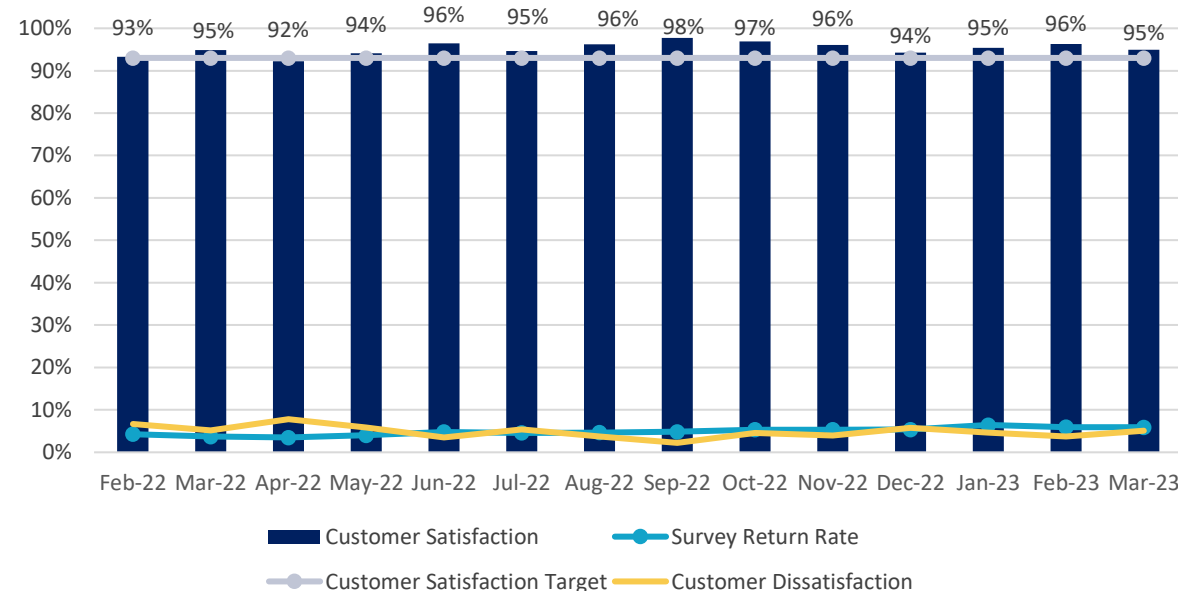
Very helpful, quick response to the issue, generally very conscientious telephone manner, explained every step in detail, made the process very simple and solved the problem quickly.

W95063 - Heathbridge House (vSd)

Prompt and easy to use. Call handler was excellent and helped me to resolve my issue. I have had several contact with the Helpdesk over the last few weeks and my issue has been resolved each time. The support offered has been excellent on each occasion.

W97040 - Ely Bridge Surgery (vCd)

The person that I spoke to was very helpful and solved the issue that I had. I had a mind blank and forgot my Nadex but the person that I was speaking to was very patient and reassuring.

Customer Satisfaction

"It's easy once you know where things are, I've surprised myself with how quickly I've picked it up. The skin bundles are really easy to do and self-explanatory when you read the questions." – **Cwm Taf Morgannwg (WNCR)**



"I thought I was going to struggle, but it's easy and I'm not duplicating work anymore." – **Cwm Taf Morgannwg (WNCR)**



"I hated it yesterday morning, but by the afternoon I absolutely loved it." – **Cwm Taf Morgannwg (WNCR)**



"This system has made me work more efficiently, after every rounding I instantly complete the RA whereas previously on paper I would complete later on." – **Cwm Taf Morgannwg (WNCR)**



"I am dyslexic and find the spelling prompts really helpful. This has improved my confidence." – **Cwm Taf Morgannwg (WNCR)**



Diolch!

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES

FINANCE REPORT FOR THE PERIOD ENDED 30 APRIL 2023

Agenda Item	6.4
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Name of Meeting	SHA Board
Date of Meeting	25 May 2023

Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Executive Sponsor	Claire Osmundsen-Little Executive Director of Finance & Business Assurance
Prepared By	Mark Cox, Associate Director of Finance
Presented By	Mark Cox, Associate Director of Finance

Purpose of the Report	For Noting
Recommendation	
<p>The Board is being asked to:</p> <p>NOTE the contents of the financial report for April 30th 2023, the actions taken to ensure the achievement of key financial targets and the current status of 2022/23 financial accounts.</p>	

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 18/05/2023 15:38:47

1. IMPACT ASSESSMENT

<u>STRATEGIC OBJECTIVE</u>	All Objectives apply
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CORPORATE RISK (ref if appropriate)	N/A
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
If more than one standard applies, please list below:	

<u>DHCW QUALITY STANDARDS</u>	N/A
If more than one standard applies, please list below:	

<u>HEALTH CARE STANDARD</u>	N/A
If more than one standard applies, please list below: This is not a policy but a planning framework.	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
N/A	

[Workforce EQIA page](#)

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there is no specific research and innovation implications relating to the activity outlined within this report

Acronyms			
DHCW	Digital Health and Care Wales	DPIF	Digital Priority Investment Fund
SLA	Service Level Agreement	PSPP	Public Sector Payment Policy
DSPP	Digital Services for Patients & Public	NDR	National Data Resource
VAT	Value Added Tax	HMRC	His Majesty's Revenue & Customs
IM&T	Information Management & Technology	LINC	Laboratory Information Network Cymru
RISP	Radiology Informatics System Procurement		

1. EXECUTIVE SUMMARY

The purpose of this report is to present DHCW's financial position for the year ending March 31st 2023 and assess the key financial projections, risks and opportunities for 2023/24. The report also advises the Board of financial performance and issues of the current financial year to April 30th 2023.

DHCW receives funding to support 3 main activities:

- Ongoing provision of core services via Welsh Government & NHS organisation's (which is delegated to directorate budgets).
- COVID-19 Response systems & activity (supported as agreed with Welsh Government) and
- Welsh Government Digital Priority Investment Fund allocations to support discrete development and implementation programmes & projects.

DHCW is required by statutory provision not to breach its financial duty (to secure that its expenditure does not exceed the aggregate of its resource allocations and income received). This duty applies to both capital and revenue resource allocations.

Key Statutory Financial Performance indicators, they can be brigaded as follows:

The two key statutory financial duties are:

- To remain within its Revenue Resource Limit
- To remain within its Capital Resource Limit

Additional financial targets are:

- **Public Sector Payment Policy (PSPP):** The objective for the organisation All NHS Wales bodies are required to pay their non-NHS creditors in accordance with HM Treasury's public sector payment compliance target. This target is to pay 95% of non-NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier.
- **Cash:** Manage residual year end balances to a maximum of £2m.

Tolley, Laura
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1.1 Financial Performance April 1st 2022 – March 31st 2023

2022/23 Financial Performance Overview

Subject to audit, the organisation is reporting achievement of all financial targets for the financial year with following pre audit results:

- Revenue - £0.073m underspend
- Capital - £0.088m underspend
- PSPP target exceeded @98%
- End of Year Cash balance of £1.13m (under the notional £2m ceiling).

Core Operations: DHCW is reporting a revenue underspend of breakeven £0.009m for the period to March 31st which is subject to final agreement from Audit.

The target Public Sector Payment Policy (PSPP) target has been exceeded with 98% of non-NHS invoices being paid within 30 days.

Cash balance of £1.13m as at March 31st.

COVID-19: DHCW received £9.128m funding and £0.167m additional pay award funding for Covid and expended £9.233m throughout the year resulting in a small underspend of £0.062m

Digital Priority Investment Fund: £31.4m spend has been recorded against schemes to March resulting in a year end underspend of £0.001m.

Capital: Spend at year end totalled £11.701m of the total CRL of £11.789m resulting in a year end underspend of £0.088m.

2022/23 Financial Accounts

The draft 2022/23 Financial Accounts have now been submitted to Welsh Government. The draft was presented to Board members and later to Audit & Assurance Committee on May 4th before submission to Welsh Government on May 5th.

The final audited accounts for 2022-23 will be submitted to be approved by the Audit Committee and the Board on 27th July before submission to the Welsh Government on 31st July.

Tolley, Laura
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2.1 Financial Performance April 1st 2023 – April 30th 2023

2023/24 Financial Overview

The initial IMTP forecast presented that whilst DHCW met its statutory financial targets for 2022/23, the financial challenges the organisation is facing relating to addressing its underlying position including emerging price pressures, growth in demand for support for core operations, increasing cyber threats, and the Digital Priority Investment Fund (DPIF) initiatives transitioning to live services. This necessitated notification to Welsh Government of a current forecast IMTP deficit position (£1.9m via a formal Accountable Officer published on March 17th (see Appendix A) .

Following on from this letter Welsh Government issued a response dated 31st March (see Appendix B) highlighting, that DHCW has been working on several mitigating actions and since our initial letter and discussions have been ongoing with Health Boards and Trusts to address the financial challenges the organisation has identified and requested that “firm actions and agreements are concluded urgently”.

Whilst DHCW is not statutorily required to submit a three year balanced IMTP, however, in the absence of a balanced IMTP there was a request for DHCW to submit a balanced Annual Plan.

DHCW Executives undertook a detailed review and a number of choices and actions were considered to enable DHCW to deliver a balanced Annual Plan.

- Additional Energy and Procurement Savings R £0.200m
- Clinical Financing Efficiencies R £0.200m
- Further Rationalisation in Estates R £0.100m
- Additional Pay Efficiencies NR £0.800m
- Other Savings NR £0.552m

The initiatives have been added to the DHCW savings plan and will be monitored as part the established monitoring process.

Following finalisation of the SLA funded positions DHCW will resubmit an Annual Plan with a forecast balance position. Together with WG Chief Digital Officer over the forthcoming year DHCW will work towards a future funding model that reflects the requirements now that the organisation is established and defining its new operating model.

Tolley, Laura
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2023/24 April Financial Performance

- **Core Operations:** DHCW is reporting forecast achievement of all financial targets with performance summarized as follows:
 - **Revenue performance:** DHCW is reporting a revenue underspend of £0.038m for the period to April 30th.
 - **Capital performance:** spend to date is £0.751m of the total Capital Resource Limit (CRL) of £10.911m.
 - **The target Public Sector Payment Policy (PSPP)** of 95% has been exceeded with 99% of non-NHS invoices being paid within 30 days.
 - **Savings:** The initial £2.4m savings target has been supplemented by a further £1.9m requirement to support the organisations breakeven position with an in month overachievement of £0.034m against plan for the period.
 - **Forecast End of Year position:** DHCW is forecasting breakeven position for revenue and breakeven for capital.
 - **Cash Management** - Cash balances stood at £2.3m at the end of April (a slight increase of £1.3m from March). The intention is to minimise cash balances with an end of year target to a maximum of £2m.
 - **Financial Risk** – Identified risks include:
 - General Digital Inflation - The underlying digital price changes continue to be identified, quantified and managed.
 - Under delivery of Saving Schemes - Savings programme will be continually monitored with opportunities for over achievements identified.
 - Disputed SLA – Risk reflects all currently unsigned SLA's to be resolved with organisations.
 - **Opportunities** – The Microsoft VAT recovery exercise has entered an extremely technical phase with queries raised related to system architecture and operating model. DHCW continues to work with our tax advisors and HMRC in order to reach a positive outcome.
- **COVID-19:** The revised revenue allocation to support COVID 19 Digital Solutions is £8.0m. To April £0.4m (5%) of revenue allocation had been spent with an increasing expenditure run rate dependent on letter and text messaging requirement for the year.
- **Digital Priority Investment Fund:** Revenue funding of £38.4m and capital funding of £8.3m (after disbursements to other NHS organisations). Management of project spend profiles remain a key activity with continued focus upon steady state funding once transition to service has been completed. DHCW is awaiting confirmation of the recent submission of the NDR business case and funding letters relating to the cyber and data centre requirements.

In terms of pipeline DPIF developments, the transition of the National Digital Eye Care Programme to DHCW has been agreed in principle and is subject to review in terms of readiness and funding. It is a Welsh Government programme of work in place to digitise the Ophthalmology Electronic Patient Record [EPR] and Referral processes across NHS Wales. The

National programme is currently being delivered by Cardiff and Vale University Health Board [CaVUHB] on behalf of the Welsh Government, all Welsh Local Health Boards [LHBs] and Primary care Optometrists. Once the review has been satisfactorily concluded formal transition will occur with the appropriate financial impact reflected within DHCW plans and forecast.









HIGH LEVEL PERFORMANCE AGAINST KEY TARGETS

The following table presents a summary indicator of performance against key financial targets.

Movement indicators articulate a positive movement (upwards arrow), negative movement (downwards arrow) or no movement (sideways arrow). As this is the first reporting period no movement has been logged.

Table 1: Performance against KPI's

Key	RAG
Good Performance /On Target	Green
Management intervention required	Yellow
Target materially missed or at risk – Director intervention required	Red

Indicator	Cumulative Performance	Forecast outlook	Comment
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.038m  Movement	£0.0m Breakeven  Movement	Small period operational overspend of £0.038m has been recorded to the end of April. DHCW is forecast to breakeven by the end of the financial year.
Remain within Capital Expenditure Limit (To ensure net Capital Spend does not exceed the Capital Expenditure Limit)	£0.0m Underspend  Movement	Breakeven  Movement	The current capital funding envelope is £10.911m, DHCW is reporting a £0.751m capital spend to date.
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)	99%  Movement	95%  Movement	PSPP target achieved. Target – 95%, Actual 99%.
Cash Balances Appropriate balances to meet creditor requirements	£2.3m Increase from £1.2m 	Positive Cash Balance <£2m 	Cash balance on April 30th has increased in month by £1.2m. Cash balances will continue to be managed down to the end

	Movement	Movement	of year target of £2m.
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3 RECOMMENDATION

The Board is being asked to:

NOTE the contents of the financial report for April 30th 2023, the actions taken to ensure the achievement of key financial targets and the current status of 2022/23 financial accounts.

4 APPROVAL/SCRUTINY

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME

Tolley, Laura
18/05/2023 15:38:47



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Judith Paget
NHS Wales Chief Executive/
Director General Health and Social Services Group
Welsh Government
Cathays Park
Cardiff
CF10 3NQ

17th March 2023

Dear Judith,

Re: DHCW Integrated Medium Term Plan 2023/24 – 2026/27

DHCW is forecast to meet its statutory financial targets for 2022/23. However the financial challenges the organisation is facing relating to addressing its underlying position and also the emerging price pressures and growth to support its core operations, increasing cyber threats, and the Digital Priority Investment Fund (DPIF) initiatives transitioning to live services, necessitate notification of a current forecast IMTP deficit position.

In 2023/24 there are unavoidable priorities including the Data Centre move and national cyber investments, where we have worked collectively with the WG NHS Chief Digital Officer to find a workable solution. Equally DHCW has increased the SLA with Health Boards and Trusts to ensure financial sustainability in key areas of Digital. This letter details our current status and underlying deficit position, our confirmed and assumed funding position and details the implications for three core areas:

- 1 Core operations
- 2 Digital Priorities Investment Fund
- 3 Covid 19

It will highlight the actions we are taking to bridge the funding gap, but conclude that we anticipate a gap relating primarily to unavoidable energy and digital price costs pressures which will mean that we are unable to balance the plan.

1 Financial Year 2022/23

DHCW will end this financial year with a balanced position, this is supported via non recurrent staff vacancies now recruited to as the SHA is fully up and running. This has allowed the organisation to meet its underlying pressure and energy costs emerging during the year whilst delivering a recurrent savings plan of £1.1m.

As part of the organisations national digital leadership considerable progress has been made in ensuring the appropriate level of VAT recovery has been determined to help support system wide challenges (including producing an offsetting LINC Programme recovery position totalling £2.3m).

DHCW has also provided further leadership as part of the coordinating response to the recent cyber security incident effecting the GP Out of Hours system provided by OneAdvanced. The quick turnaround allowed for cost effective mitigation actions to be completed and as a consequence avoiding considerable costs and service impact across the system.

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E: igdc@gig.cymru



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2 Overview of Funding Sources

DHCW has a complex funding mechanism via multiple streams across services (with multiple funding sources both central & NHS) and non-recurrent programmes.

Key funding sources include:

- Welsh Government Core Allocation
- Welsh Government Primary Care IM&T Allocation
- NHS Wales Service Level Agreements
- Welsh Government Digital Priority Investment Fund
- COVID 19 Digital Solutions

3 2023/24 IMTP Funding Assumption

The current assessment of funding to be incorporated within the IMTP for 2023/24 totals £162.4m. This includes an £8.7m increase in NHS Wales SLA to support the All Wales Microsoft licence costs and Digital Services. Primary Care IM&T increases reflect GP licencing cost increases.

Source of Funds	2022/23 £m	2023/24 £m	Increase £m	Increase %	Observation
Recurrent					
Welsh Government - Core	49.502	50.805	1.303	3%	Confirmed 17th February
Welsh Government - Primary Care IM&T	15.817	16.967	1.150	7%	Confirmed 17th February
Welsh Government - Depreciation	10.122	9.484	-0.638	-6%	Confirmed 17th February
NHS Wales - SLA	9.380	15.686	6.306	67%	Awaiting Confirmation
All Wales Digital Licensing	23.657	26.010	2.353	10%	Awaiting Confirmation
Total	108.478	118.952	10.474	10%	
COVID-19 Response					
Test, Trace & Protect	3.603	1.500	-2.103	-58%	Confirmed 7th February
Vaccination	5.525	6.500	0.975	18%	Confirmed 7th February
Total	9.128	8.000	-1.128	-12%	
Digital Priority investment Fund					
Allocation	33.300	35.456	2.156	6%	Position agreed 3 rd March
Total	33.300	35.456	2.156	6%	
Grand Total Funding	150.906	162.408	11.502	8%	

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4 Core Operations

The core operations encompass the ongoing activities to deliver services and the functions of the SHA.

4.1 Underlying Position

DHCW is carrying forward an underlying deficit of £1.3m into 2023/24. The position incorporates cost pressures resulting from growth in requirements within:

Historic Healthcare Through Technology/Efficiency Through Technology Fund instigated investments generating increasing revenue pressures in:

- **Choose Pharmacy (£0.5m)** -The Choose Pharmacy platform was developed by NHS Wales Informatics Service (NWIS), the predecessor of DHCW, in 2012-13 as part of a Welsh Government project to establish community pharmacy as the first port of call for common ailments following a Programme for Government commitment in 2011.

Usage of the system has grown from 32 pilot pharmacies in 2013 to 705 of the 710 pharmacies in Wales in 2020, with the number of consultations increasing from 311 in 2013 to 533,239 in 2022 resulting in greater staff and digital infrastructure requirements whilst producing significant benefits in primary care by avoiding the need to be seen at GP Surgeries with the resultant time gains.

- **Welsh Care Records Service (£0.2m)** – Data growth requiring additional storage, licencing and backups.

Legacy Funding arrangements (£0.6m) – Historical funding arrangements (sometimes over 10 years old) may not have clear consistency between cost drivers of current service models and underpinning activity. Consequently, there has not been a provision for growth. Although DHCW has tried to address emerging pressures as part of the 2023/24 SLA process, a more holistic approach will be required across all services provided.

During 2022/23 the underlying pressures were mitigated using non recurrent savings, there is a need to address recurrently in part via efficiencies/savings and via appropriate charging to organisations who receive the service/benefit.

4.2 Emerging Issues & Pressures

Following the initial drafting of the organisations IMTP, the financial plan has revealed significant pressures which are over and above those manageable via mitigating savings and efficiency plans without the removal of key strategic deliverables or service degradation.

This information has enabled DHCW to identify a revenue funding gap for the three years within the plan, currently assessed at £1.9m, £2.0m and £2.5m for the financial years 2023/24 – 2025/26 respectively.

Considerable pressures relate to unavoidable cost increases (such as general inflation, growth, and supplier cost increases). In particular, the need for the organisation to “self fund” energy cost increases out of its core allocation (as opposed to central funding options in 2022/23) now means that an assessed 1.9% of core funding will be required to support this, decreasing available funds for service provision pressures.



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Ensuring interoperability amongst an ever-increasing number of digital services has also presented material pressures not only in the requirement for integration staffing resource but also third party supporting solutions.

DHCW has identified these unavoidable costs:

- a) **Inflationary pressures made up of energy and digital inflation (£4.7m)** - This pressure incorporates general inflation, energy price increases, digital sector specific issues such as software licencing linked to exchange rates, digital price model changes and the direction of travel from capital based charging to more subscription based revenue models.
- b) **Service Growth (£1.8m)** – This pressure reflects the additional requirement as a result of system and user demand such as network bandwidth requirements to support agile working, increased infrastructure licensing requirements and growth in applications requiring interoperability/integration resource.
- c) **Data centre move (£1.6m)** - A Business Justification Case (BJC) detailing the requirement for Capital and Revenue funding for the Data Centre Two Transition Project has been developed. This is required to provide continuity of digital services resulting from the expiration of the current data centre contract in June 2023. The total Capital funding requirement of £0.8m will be sourced from our internal discretionary capital funding and revenue costs sourced non recurrently via DPIF.
- d) **Cyber Resilience Investment Plan (£0.7m)** - DHCW has developed a 3-year Cyber Security plan which lays out various activities to improve its security posture to meet an acceptable, base level of Cyber and Information Security. This base-level of security has been derived from the Security of Network & Information Systems Regulations (NIS Regulations). To successfully deliver the key objectives, the plan also highlights the critical investment and resources required by DHCW for the Financial Year 2023-2024, to cover the cost of establishing and resourcing this requirement. The total Capital funding requirement is £0.974m and a recurrent total revenue requirement is £1.66m. It is proposed that the capital requirement be sourced via DPIF and revenue costs for 2023/24 reprofiled with a reduced requirement of £0.7m as the service is scaled up within an adjusted timeframe.
- e) **Management of transition of digital programmes (£4.3m)** - Over the IMTP term there are also expected to be additional digital services provided as a result of DPIF funded schemes transitioning to live operational status including, Welsh Nursing Care Record, Microsoft Centre of Excellence and Digital Intensive Care Unit. These costs have been incorporated within the SLA increase requirement for 2023/24.

4.3 New Services and Digital Cost Recharged Via Service Level Agreement

Additional NHS Wales Service Level Agreement funding incorporated within the IMTP total £8.7m.

This funding will support digital infrastructure cost pressures/growth, new services and All Wales licensing commitments.

The SLA increases awaiting local organisation approval can be brigaded as follows in terms of expected positive resolution:

- High Certainty - £5.9m (68%) reflects previous agreed contractual and business case commitments.
- Moderate Certainty (a) - £1.1m (13%) reflects DPIF programme transitioning to live service with organisation support.
- Moderate Certainty (b) - £1.0m (12%) reflects Digital Infrastructure growth costs with charging principles agreed by the Infrastructure Management Board with membership representing all NHS organisations.
- Low Certainty - £0.6m (7%), reflects application service growth/emerging requirements currently being



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ratified.

DHCW continues to liaise with organisations in order to formally agree charges for 2023/24, but given pressures being experienced systemwide and the continued absence of an overarching mechanism for funding growth, this exercise will present a recurring challenge as service and core funded elements remain unclear with user/Welsh Government sources still to be resolved in some cases.

4.4 Service Choices

The organisation is faced with a number of service model and technological changes to not only facilitate service improvement (and environmental benefits) but also the achievement of our accounting direction to move away from a capital expenditure model to a more revenue based one. One key initiative will be the move away from on premise datacentres to cloud services (where practical and provide the most value).

Cloud Transition - DHCW is currently constructing its cloud transition plan to support delivery of the approved strategy. Whilst it is thought activity will primarily encompass engagement, design, planning within year one of the IMTP, year 2 onwards projects a revenue pressure as requirement grows. A funding mechanism to support this transition will be required.

4.5 Discretionary Capital Position

The capital programme for 2023/24 is supported by central funding of £2.614m, whilst this is an increase on the 2022/23, allocation pressures remain as a consequence of addressing technical debt and previous variable funding allocations to support investment requirements:

- Infrastructure Refresh & Growth - £1.0m
- Datacentre Migration - £0.8m
- Facilities & Decarbonisation - £0.2m
- National Integrated Audit Solution - £0.6m

5 Digital Priority Investment Fund

The organisation has been in discussion with the Welsh Government Chief Digital Officer to secure funding to support the Datacentre Migration and Cyber Security Investment requirements, whilst this has been assumed within the current draft of the plan, should it not materialise, the pressures for 2023/24 would increase by £2.3m.

These elements will be jointly funded via internal discretionary capital and supporting DPIF funding. The key issue is to address funding uncertainty in transition from programme to service, over the IMTP period, we will see major schemes requiring a stable sustainable funding mechanism, including:

- Digital Services for Patients & Public
- Digital Medicines Transformation
- National Data Resource
- Welsh Community Care Information System

We have assumed for the purposes of IMTP that these will be covered via SLA or similar arrangements with



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user organisations.

6 Funding for COVID Digital Solutions

DHCW had submitted a requirement of £9.5m to support assessed 2023/24 need, however the funding confirmed on February 7th is some £1.5m less at £8.0m. This has removed any allowance for product development (including adoption of cloud), price inflation and contingency to be able to respond at speed to PHW/WG requests or meet any surge requirement.

7 Addressing the Immediate and Medium Term Issues

DHCW will endeavour to identify mechanisms to balance the financial position in the short term focussing on the need to cover energy, contractual risk and finalise NHS SLA increases. DHCW will continue to look to identify mitigating actions (such as estates rationalisation) and work with the Director of Operations and the wider service to identify more transformative medium term efficiency and savings initiatives. As part of the organisation's mitigation plans an ambitious savings target of 3.6% against discretionary funding has been set for 2023/24 (exceeding the Welsh Government minimum expected target set at 2.5%).

DHCW will continue to work with Welsh Government Digital and Finance leads, alongside NHS Wales stakeholders, to develop a framework with the aim to mitigate the future pressures presented within this letter, this will not however address the immediate issues. Over the medium term to inform the 2024/25 IMTP process, a formal review to provide an agreed balanced service wide approach to sustainable funding should be jointly commissioned to inform 2024/25 financial plans and funding flows. Increasingly, we are transitioning to a more revenue-based product driven funding model and collectively we are working on what the sustainable funding model looks like.

Given the above unavoidable cost assessment in particular the energy contractual price pressures and net underlying deficit means it is unlikely that DHCW will be in a position to achieve financial balance for 23/24.

Yours sincerely

Helen Thomas
Chief Executive Officer
Digital Health and Care Wales

Tolley, Laura
18/05/2023 15:38:47

Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/
Prif Weithredwr GIG Cymru
Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/
NHS Wales Chief Executive
Health and Social Services Group



Llywodraeth Cymru
Welsh Government

Helen Thomas
Chief Executive
Digital Health and Care Wales

Helen.Thomas5@wales.nhs.uk

Our Ref: JP/BS/SB

31st March 2023

Digital Health and Care Wales - Annual Plan 2023/24

Dear Helen

Thank you for your Accountable Officer letter, dated 17 March, which sets out a range of financial, strategic planning and savings delivery risks.

The current position is that DHCW has a financial deficit and I note that the Board has been unable to develop a balanced three-year Integrated Medium Term Plan (IMTP). You will be aware that in the absence of a balanced IMTP you will be required to submit an annual plan.

I note the organisation has been working on a number of mitigating actions and since your letter and discussions have been ongoing with your partners to address the financial challenges the organisation has identified. I recognise your plan is expected today and there may have been further developments, however if the position is unchanged it is imperative that firm actions and agreements are concluded urgently.

Whilst I recognise DHCW is not statutorily required to submit an IMTP, you will be aware that we take the same planning approach across all NHS organisations in Wales to ensure a joined-up and consistent planning environment. Your letter reflects an assessment at a point in time and your Board will be aware that the level of financial deficit detailed in your letter is not an acceptable position and further progress will be expected.

I recognise the challenges of the current operating environment and context which are translating into the current planning landscape, including system and operational risks, the inflationary pressures and impact of COVID. Given this prevailing outlook organisations will be considering a range of difficult choices and the Board will need to set out and understand those choices and decision points as part of the plans going forward. It is crucial that the

1

Board is clear on what plans will deliver and the choices that will be made to deliver the required financial improvement.

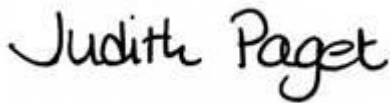
Financial plans are also a reflection of the service delivery and workforce challenges at a point in time. It is essential that there is clarity on what are certain and definite issues and what represent risks that could be mitigated or tackled with different solutions.

The Finance Delivery Unit (FDU) and Welsh Government Officials have undertaken touchpoints with all organisations to consider draft financial positions. Detailed feedback has been provided and included issues related to variation and consistency where further progress is expected prior to final plan submissions.

The Board will need to be fully appraised of the implications of the plans presented to them, in terms of whether they are able to approve the plan, and if not, what is the Board proposing to do. The Board needs to understand the significance of submitting an IMTP or an annual plan.

As leaders we have set out the expectation and support for greater system working across organisations. Chief Executives have a clear determination to deliver change on a wider regional and national basis. I welcome this commitment and look forward to seeing the progress and impact of that work.

Yours sincerely

A handwritten signature in black ink that reads "Judith Paget". The script is cursive and fluid.

Judith Paget CBE

cc: Nick Wood, Deputy Chief Executive NHS Wales
Samia Edmonds, Planning Programme Director
Mike Emery, Director for Digital and Technology

Tolley, Laura
18/05/2023 15:38:47

SHA Board Briefing

Financial Performance: Period to April 30th 2023

Claire Osmundsen Little

May 2023

Tolley, Laura
18/05/2023 15:38:47



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and Care Wales



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- Summary Performance
- Revenue Pun Rate

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- Summary Performance
- Revenue Performance
 - Organisational Run Rate
 - Savings Performance
 - COVID Response
 - Digital Priorities Investment
- Capital Programme
- Risks & Opportunities

Recommendations

FINANCIAL UPDATE | OVERVIEW

The purpose of this report is to present DHCWs financial performance against key targets for the financial year 2022/23. The report also advises the Board of financial performance and issues of the current financial year to April 30th 2023 and the key financial projections, risks and opportunities.





- The report sets out the financial position as at the end of the financial year and for April 2023 against current budgets.
- DHCW receives funding to support 3 main activities:
 1. Ongoing provision of core services via Welsh Government & NHS organisations (which is delegated to directorate budgets).
 2. COVID-19 Response systems & activity (supported as agreed with Welsh Government) and
 3. Welsh Government Digital Priority Investment Fund allocations to support discrete development and implementation programmes & projects.
- The report provides an overview of activity taken to ensure the delivery of a balanced financial plan and that future resource requirements can be supported financially.

Tolley, Laura
18/05/2023 15:38:47

FINANCE UPDATE | SUMMARY PERFORMANCE AGAINST KEY INDICATORS

DHCW is reporting achievement of all of the key financial indicators for the period

Achieved

Indicator	Annual Performance	Comment
<div>Revenue Breakeven</div> <div>(To secure that the organisations expenditure does not exceed aggregated income)</div>	<div>£0.072m Underspend</div> <div>Reduced from £0.169m</div> <div></div> <div>Movement</div>	<div>Small period operational underspend of £0.072m has been recorded to the end of March.</div> <div>The underspend has been generated within the following areas:</div> <div><ul style="list-style-type: none">Core: £0.009mDPIF: £0.001mCOVID: £0.062m</div>
<div>Remain within Capital Expenditure Limit</div> <div>(To ensure net Capital Spend does not exceed the Capital Expenditure Limit)</div>	<div>£0.088m Underspend</div> <div>increased from £0.048m</div> <div></div> <div>Movement</div>	<div>£11.731m spend for period against a capital limit of £11.789m</div>
<div>Public Sector Payment Policy</div> <div>(To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)</div>	<div>98%</div> <div></div> <div>Movement</div>	<div>PSPP target achieved. Target – 95%, Actual 98%.</div>
<div>Cash Balances</div> <div>Appropriate balances to meet creditor requirements</div>	<div>£1.2m</div> <div>Decrease from £5.4m</div> <div></div> <div>Movement</div>	<div>Cash balance on March 31st has decreased in month £4.2m.</div> <div>The end of year figure met the Welsh Government target of £2m maximum balances.</div>

- SUMMARY:
- Statutory Obligations:**
Achievement of all targets for year end.
 - Emerging Developments:**
The notional 6.3% pension of £2.4m and the consolidated pay award of £0.77m (to be paid in May).

Tolley, Laura
18/05/2023 15:08:47

FINANCE UPDATE | 2022/23 FINANCIAL ACCOUNTS

The 2022/23 End of Year accounts preparation process has been initiated with two material developments:

Final Accounts Timetable

- Thursday 4th May Board Development session
- Thursday 4th May Audit & Assurance Committee submission
- Friday 5th May for the accounts package.
- Friday 12th May for the Remuneration Report, Accountability Report and Performance Report
- The final audited accounts for 2022-23 will be submitted to be approved by the Audit Committee and the Board on 27th July before submission to the Welsh Government on 31st July.

Revised Audit Standard ISA315 Identifying and Assessing the Risks of Material Misstatement

The new standard will be used to support the review of the 2022/23 Accounts. The additional requirement is reflected in higher than planned fees.

Impact:









- The finance team (and others) may receive a greater number of enquiries from our audit teams at the planning stage of the audit.
- The audit team will require greater senior level resource to support the new standard.
- For DHCW audit fees increased by 10.2% circa 16K.

Tolley
18/05/2023 15:30:43

INDICATORS

DHCW is reporting achievement against plan of all of the key financial indicators for the period

Achieved

Indicator	Cumulative Performance	Forecast Outlook	Comment
<div>Revenue Breakeven</div> <div>(To secure that the organisations expenditure does not exceed aggregated income)</div>	<div>£0.038m</div> <div></div> <div>Movement</div>	<div>£0.0m Breakeven</div> <div></div> <div>Movement</div>	<div>Small period operational overspend of £0.038m has been recorded to the end of April. Positive variance against plan.</div> <div>DHCW is forecast to breakeven by the end of the financial year.</div>
<div>Remain within Capital Expenditure Limit</div> <div>(To ensure net Capital Spend does not exceed the Capital Expenditure Limit)</div>	<div>£0.0m Underspend</div> <div></div> <div>Movement</div>	<div>Breakeven</div> <div></div> <div>Movement</div>	<div>The current capital funding envelope is £10.911m, DHCW is reporting a £0.751m capital spend to date in line with plan.</div>
<div>Public Sector Payment Policy</div> <div>(To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)</div>	<div>99%</div> <div></div> <div>Movement</div>	<div>95%</div> <div></div> <div>Movement</div>	<div>PSPP target achieved. Target – 95%, Actual 99%.</div>
<div>Cash Balances</div> <div>Appropriate balances to meet creditor requirements</div>	<div>£2.3m Increase from £1.2m</div> <div></div> <div>Movement</div>	<div>Positive Cash Balance <£2m</div> <div></div> <div>Movement</div>	<div>Cash balance on April 30th has increased in month by £1.2m.</div> <div>Cash balances will continue to be managed down to the end of year target of £2m.</div>

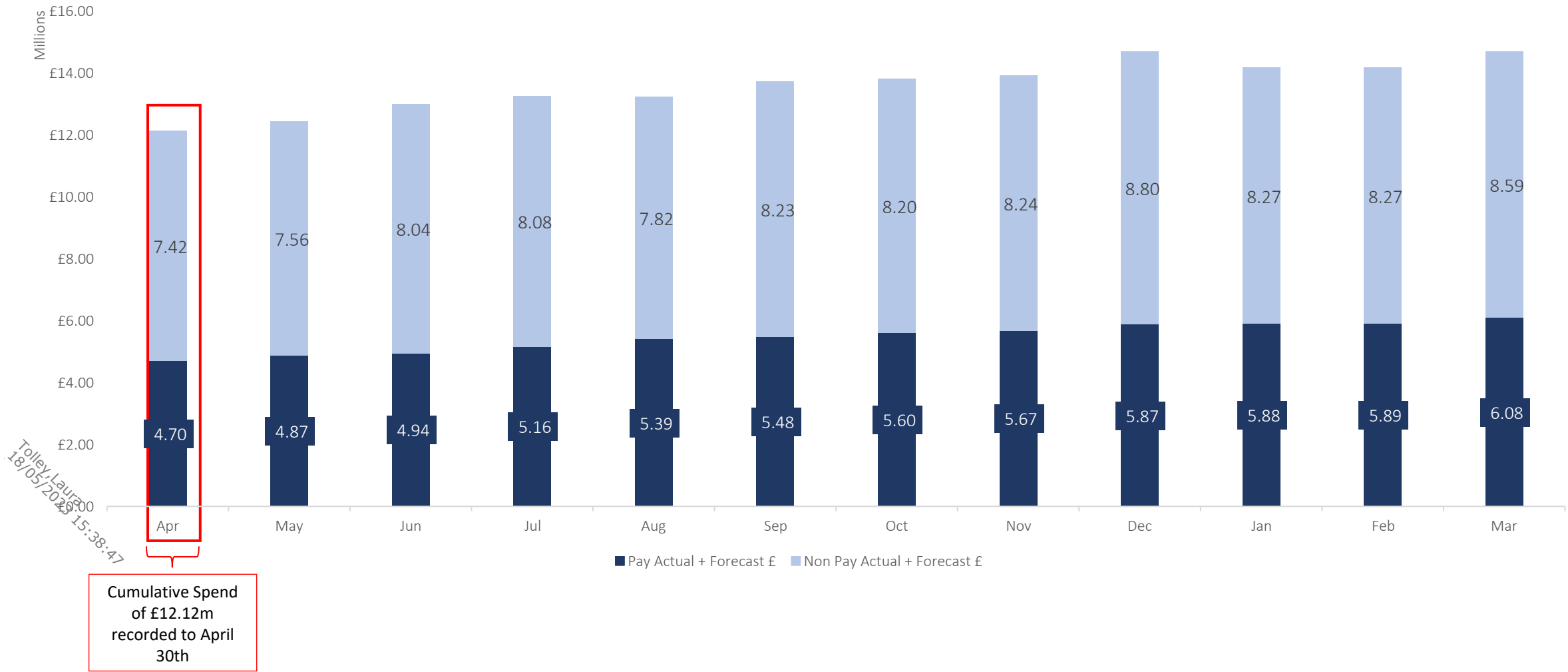
- SUMMARY:
- **Statutory Obligations:**
Forecast achievement of all targets for year end.
 - **Emerging Developments:**
Additional Pay Award Funding 1.5% consolidated to be paid in May.

Tolley, Laura
18/05/2023 11:38:45

FINANCE UPDATE | REVENUE RUN RATE

The run rate for the year is materially affected by the latest DPIF expenditure profiles. At present the initial plan includes major spend items relating to contractual payments and NHS disbursements. The organisational run rate is given below. The upturn in pay reflects onboarding of additional staff and in non pay the delivery in Digital Programmes.

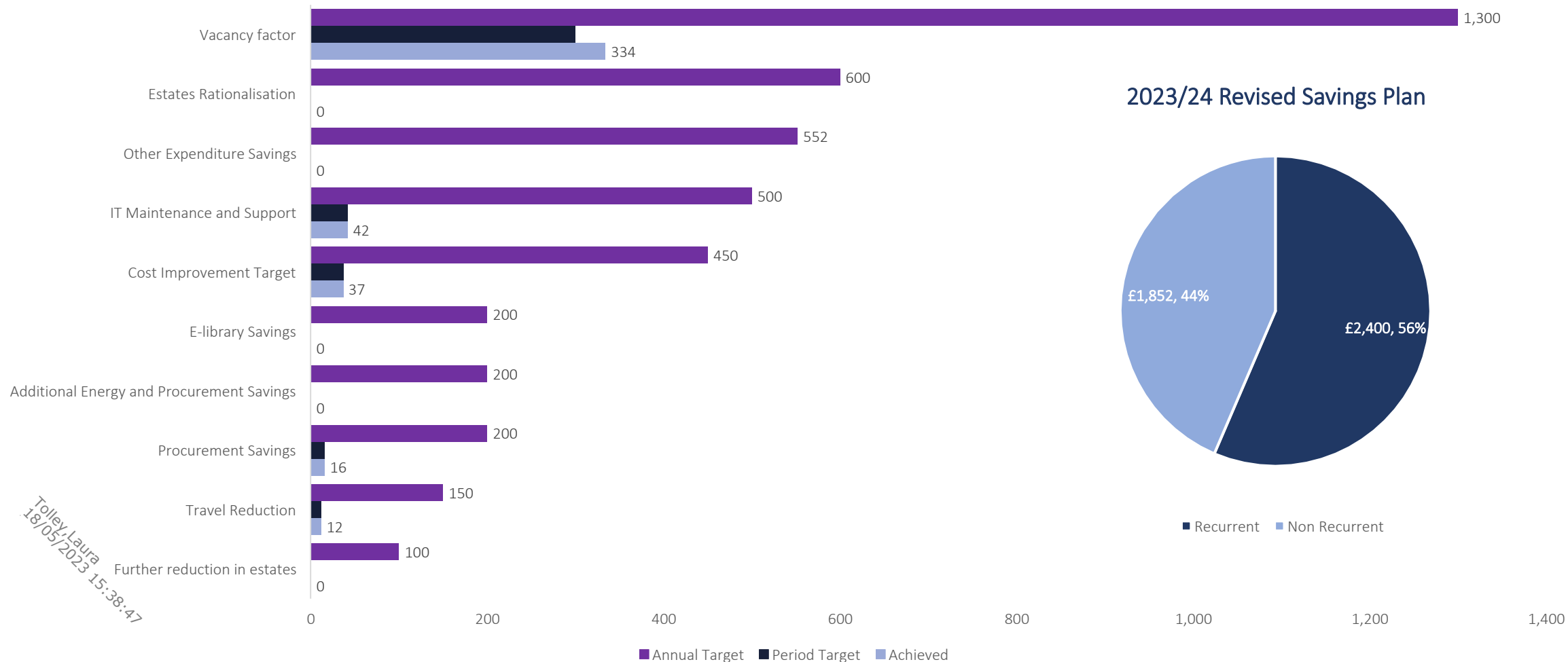
Organisational Expenditure Run Rate £m



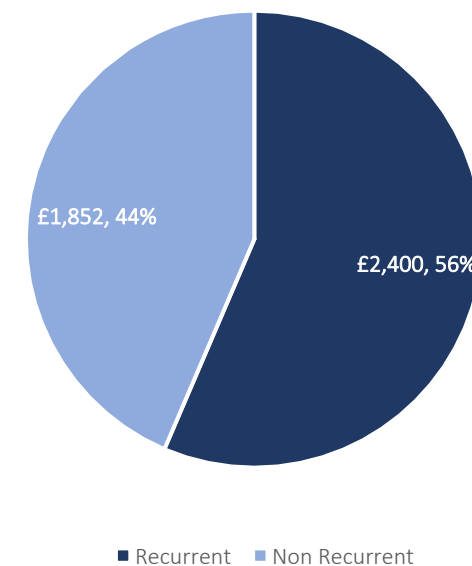
FINANCIAL UPDATE | SAVING PLAN PERFORMANCE

The savings performance including the additional actions to deliver a balanced Annual Plan against profile for each element is identified below

Savings Target Performance against Plan April 23-23 £000's



2023/24 Revised Savings Plan

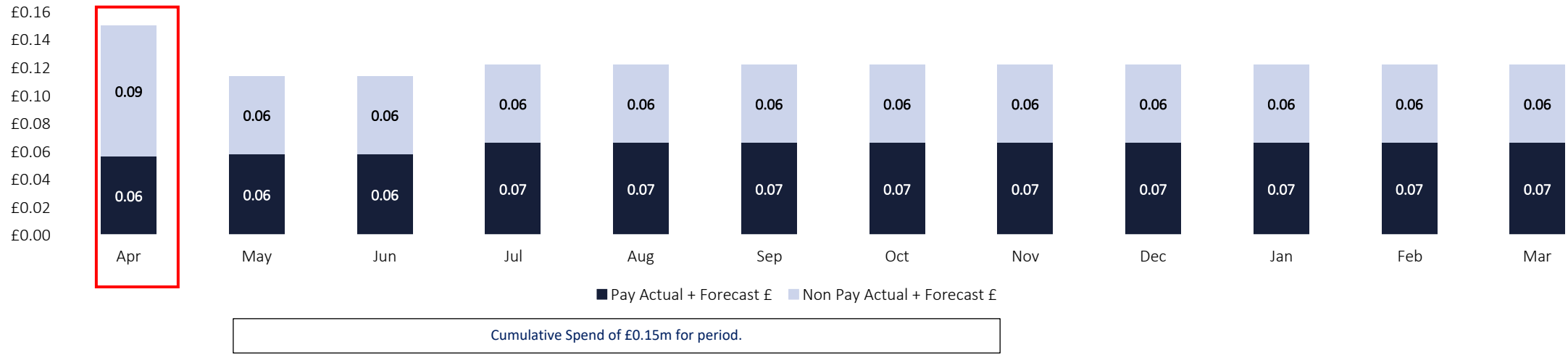


Tolley, Laura
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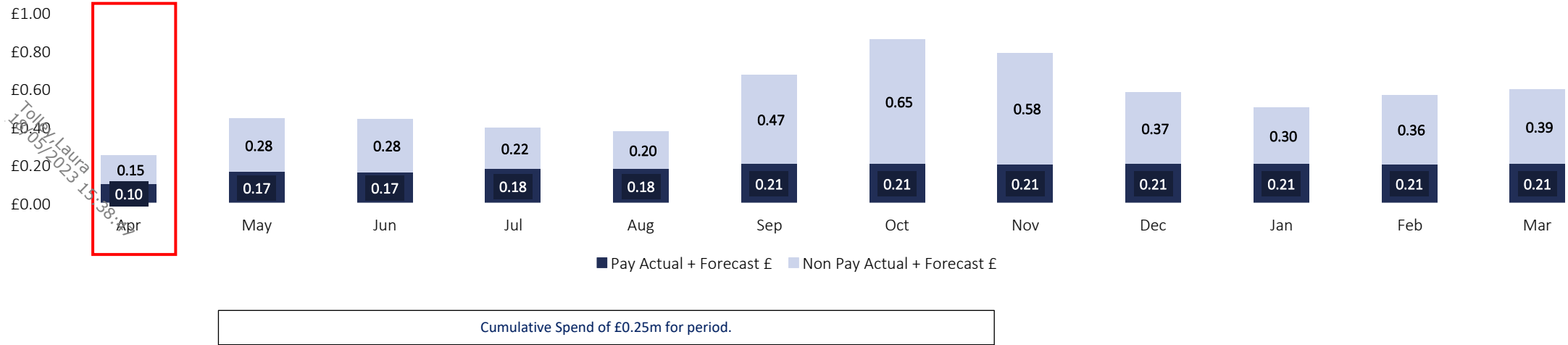
FINANCE UPDATE | COVID 19 REVENUE PERFORMANCE

At the end of April the cumulative spend for Covid is £0.4m against an annual budget of £8.0m. Expenditure will be dependant on future development requirement, the volumes of letters and text messaging requirements & further onboarding of staff.

COVID Test, Trace & Protect Run Rate £million



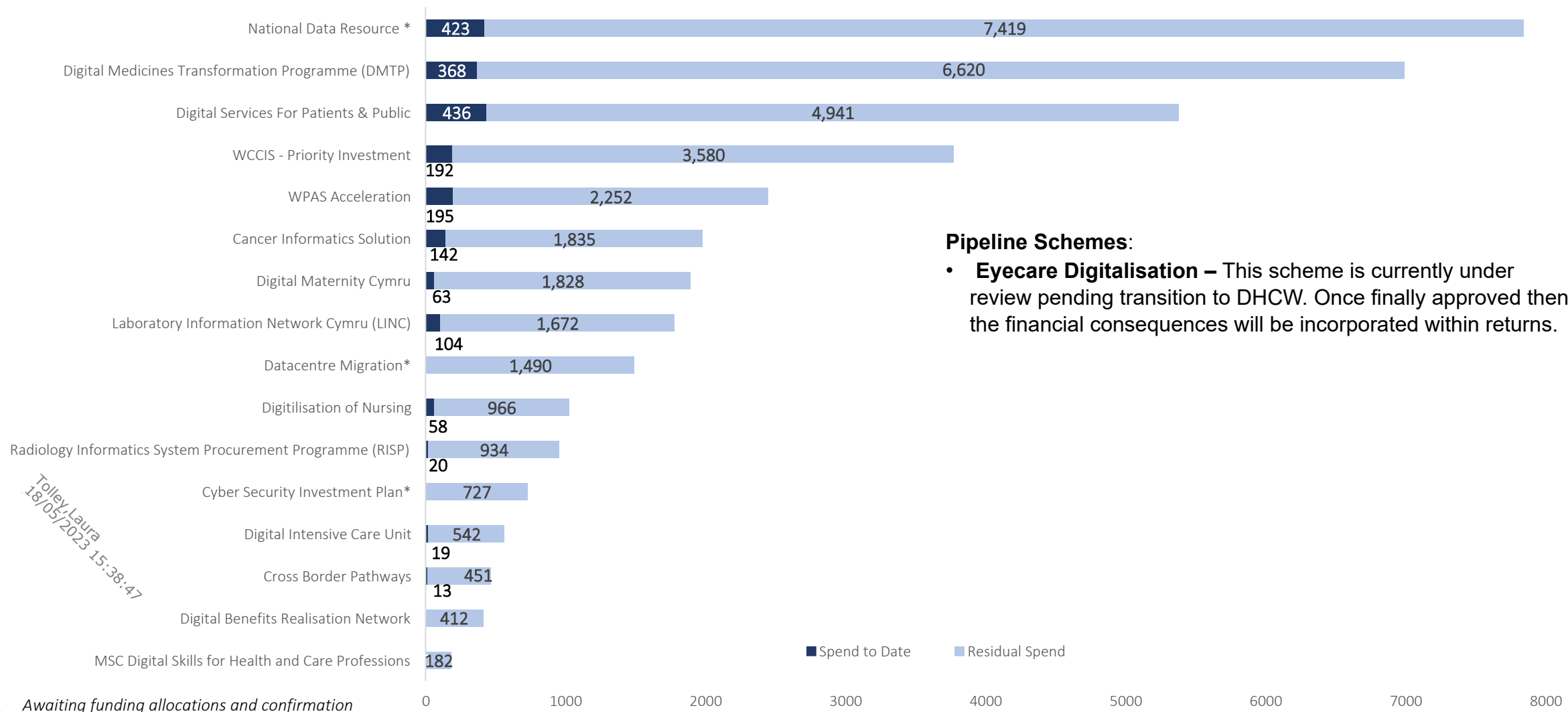
COVID Vaccine Run Rate £million



FINANCE UPDATE | DPIF REVENUE PERFORMANCE

The organisation has recorded £2.0m cumulative revenue spend against DPIF schemes to April. The anticipated DPIF expected revenue allocation is projected to total £38.4m for 2023/24.

DPIF Revenue Expenditure to April £000's



Pipeline Schemes:

- **Eyecare Digitalisation** – This scheme is currently under review pending transition to DHCW. Once finally approved then the financial consequences will be incorporated within returns.

Tolley, Laura
18/05/2023 15:38:47

FINANCE UPDATE | CAPITAL SPEND PERFORMANCE

DHCW has recorded £0.751m of capital spend against a current allocated allowance of £10.911m leaving a residual balance of £10.16m to be spent before the end of the financial year.

Scheme	CRL Annual Forecast £000's	Period Plan £000's	Period Actual £000's	Under/-Overspend £000's	Residual Balance £000's
Discretionary					
Infrastructure Communications Technology	2,414	450	450	0	1,964
Estates, Facilities & Decarbonisation	200	0	0	0	200
Total Discretionary	2,614	450	450	0	2,164
Digital Priority Investment					
Digital Services for Patients & Public	980	141	141	0	839
Digital Medicines Transformation Portfolio	59	0	0	0	59
Radiology Information System Procurement (RISP)	0	7	7	0	-7
Laboratory Information Network Cymru (LINC)	2,047	128	128	0	1,919
Digital Maternity Cymru	240	0	0	0	240
Digital Intensive Care Unit	4,707	25	25	0	4,682
Welsh Patient Administration System (WASP) Standardisation	264	0	0	0	264
Total Digital Priority Investment	8,297	301	301	0	7,996
Total Capital Plan	10,911	751	751	0	10,160

Tolley, Laura
18/05/2023 11:38:47

FINANCE UPDATE | RISKS & OPPORTUNITIES

DHCW Financial Risks and Opportunities are summarised below.

Financial Risks

General Digital Inflation & Contractual Energy Cost increases:

The underlying digital price pressures and energy prices continue to be identified, quantified and managed.

Under delivery of Saving Schemes (€0.6m) Low

Savings programme will be continually monitored with opportunities for over achievements identified.

Disputed SLA (€4.9m) Medium

Reflects all currently unsigned SLA’s to be resolved with organisations.

RISP High

Confirmation of funding to enable contract placement

Financial Opportunities

- **Microsoft VAT Recovery:** Discussions continue with our VAT advisors and HMRC are ongoing.

Tolley, Laura
18/05/2023 15:38:47

FINANCE UPDATE | RECOMMENDATIONS

DHCW Board are requested to:

- Note the unaudited end of year position to March 31st 2023.
- Note the status of milestones to finalise the Financial Accounts 2022/23.
- Note April 2023 financial performance and the actions taken to ensure revenue breakeven for 2023/24 following the Accountable Officer correspondence.

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	25 May 2023
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Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Committee	Audit and Assurance Committee
Chair of Committee	Marian Wyn Jones, Independent Member
Lead Executive Director	Claire Osmundsen-Little, Executive Director of Finance
Date of Last Meeting	18 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	Alistair Klaas Neill GM, Independent Member and Vice Chair of Audit and Assurance Committee

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

Tolley, Laura
18/05/2023 15:38:47

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Tŷ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below:	

DUTY OF QUALITY ENABLER	Information
DOMAIN OF QUALITY	Effective
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		

Tolley, Laura
18/05/2023 15:38:47

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
LINC	Laboratory Information Network Cymru		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
ASSURE	Detail any areas of assurance that the Committee has received.
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Committee.

PUBLIC SESSION

ALERT Tolley, Laura 18/05/2023 15:38:47	<ul style="list-style-type: none"> Welsh Language Compliance and Improvement Framework. An issue with the use of Welsh Language had been identified with the NHS app log in. A meeting had taken place with the Welsh Language Commissioners Office to discuss an exemption from this part of the Welsh Language Scheme for two years. Final approval was awaited. Finance Update. An update on the year end and outlook for 2023/24 was provided. The audit of financial statements was on target to be delivered ahead of schedule. Members noted the financial context and challenges looking ahead to 2023/24 relating to inflationary and other pressures. This was considered in the context of DHCW's Accountable Officer Letter.

<p>ASSURE</p>	<ul style="list-style-type: none"> • Internal Audit Annual Audit Plan 2023/24. The Committee received the Internal Audit Plan for approval and assurance that Internal Audit had capacity within the team to carry out the plan in 2023/24. • Four Internal Audit reviews were received for assurance with three, Corporate Governance, Waste Management and Risk Management receiving a substantial assurance and Workforce Planning: PADR a reasonable assurance. • Audit Wales Outline Audit Plan 2023/24. The Committee received the Audit Wales Outline Audit Plan for approval and assurance. • Audit Wales Committee Update. The Committee noted the update which included an update on Digital Inclusion. • Structured Assessment / Baseline Governance Review Action Plan Report. The Committee noted for assurance the 'Opportunities for Improvement' action plan which had been populated following receipt of the Structured Assessment. • Local Counter Fraud Update. The Committee received the Local Counter Fraud update and were assured to note there had been no new referrals in this quarter. • Risk Management and Board Assurance. Members received assurance that work was ongoing on the risk appetite and risk tolerance. The number of risks had increased to its highest level since the inception of the register, but this reflected the context in which DHCW were currently operating. • Welsh Language Compliance and Improvement Framework. The Committee were assured to note the progress being made on Welsh Language Compliance within the organisation. • National Fraud Initiative Self Appraisal Check List. Members noted the introduction of the National Fraud Initiative and were assured that all actions identified would be completed by the end of Quarter 1. • Duty of Quality and Candour Act Implementation Plan. The Committee received a presentation outlining the implications of the Act for DHCW and were pleased to note the approach being taken to ensure the whole organisation was part of the process •
<p>ADVISE</p>	<ul style="list-style-type: none"> • Audit Action Tracker. The Committee were advised that progress was being made on the actions with 21 of 53 actions considered complete. Further support was being provided by the Executives following the increase in volume of recommendations / actions. • Standards of Behaviour Report. The Committee were pleased to note the progress made to increase the number of declarations made by the Band 8a and above workforce of DHCW and noted the 13 offers of hospitality which had been accepted during the period. • High Value Purchase Order Report. The Committee received the High Value Purchase Order and noted the cumulative sum total of orders with a value of more than £0.75m.

Tolley, Laura
18/05/2023 15:38:47

	<ul style="list-style-type: none"> • Procurement and Scheme of Delegation Compliance Report. The Committee noted the standard report which detailed three Single Tender Actions and one Change Control Note. • Quality and Regulatory and Cyber Resilience Unit Compliance Update Report. The report was noted by the Committee and received assurance that DHCW quality systems were independently scrutinised. • Legislative Assurance Framework. Members were assured that the Legislative Assurance Framework was being reviewed on a monthly basis and updated accordingly. • Decarbonisation, Estates and Compliance Report. The Committee received an update and discussed if those working from home were encouraged to make low carbon choices at home.
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PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> • Laboratory Information Network Cymru (LINC) Programme Update. The Audit and Assurance Committee received a verbal update on the programme.
ASSURE	<ul style="list-style-type: none"> • Private Risk Register. The Committee received the Private Risk Register and were assured the one risk was in the process of being downgraded. • IT Stock Review Progress on Internal Audit Recommendations. Members were assured to note the actions implemented.
ADVISE	<ul style="list-style-type: none"> • Audit Actions (Private). The Committee were advised seven actions and noted two were complete with the remaining five on target for completion.

Delegated action taken by the committee:	
APPROVED: <ul style="list-style-type: none"> • POL-CG-006 Control of Contractors • POL-CG-012 Asbestos Management Policy • POL-CG-17 Fire Safety Policy • POL-CG-018 Environmental and Sustainability Policy • NEW – Smoke-Vape Free Policy • Local Counter Fraud Annual Plan (including Workplan 2023/24) • Internal Audit Annual Audit Plan 2023/24 • Audit Wales Outline Audit Plan 2023/24 	

Date of next committee meeting:

3 July 2023

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	25 May 2023
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Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Committee	Digital Governance and Safety Committee
Chair of Committee	Rowan Gardner, Chair of Digital Governance and Safety Committee
Lead Executive Director	Rhidian Hurle, Executive Medical Director
Date of Last Meeting	11 May 2023
Prepared By	Carys Richards, Governance Co-ordination
Presented By	Rowan Gardner, Chair of Digital Governance and Safety Committee

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

Tolley, Laura
18/05/2023 15:38:47

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STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below:	

DUTY OF QUALITY ENABLER	Information
DOMAIN OF QUALITY	Effective
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		

Tolley, Laura
18/05/2023 15:38:47

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance & Safety		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail any areas of assurance that the Committee has received
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Committee

PUBLIC SESSION

ALERT	<ul style="list-style-type: none"> The Incident Review and Organisational Learning Annual Report was comprehensive and identified a number of learning areas for DHCW over the past year including: IT incident management, service desk communications processes, change management. WASPI (Wales Accord on the Sharing of Personal Information) Code of Conduct consultation, was noted with discussions surrounding the strategic benefits of moving towards a Code of Conduct, encompassing the achievements during the pandemic which, with a sustained, consistent approach, would lead to a healthier Wales.
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ASSURE	<ul style="list-style-type: none"> The Committee received the following Assurance Reports <ul style="list-style-type: none"> Information Governance Assurance Report Informatics Assurance Report Information Services Assurance Report Research & Innovation Strategy Assurance Report The Digital Programme Overview Update was received and discussed. Delivering the Data Promise for Health and Social Care in Wales was noted. Data Sharing during coronavirus report was noted. Assurance was received on Corporate Risk DHCW0296 Allergies and Adverse Reactions with the Committee receiving the outcome from a recent deep dive exercise.
ADVISE	<ul style="list-style-type: none"> An update on the progress of the Intellectual Property Policy was received with work continuing and the policy itself is to be presented at the next meeting on 3 August 2023. The Corporate Risk Register – PUBLIC, was discussed and it was noted the number of new risks added since the last meeting and the Committee were made aware that the number of risks on the Corporate Risk Register was at its highest since DHCW had established.

PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> N/A
ASSURE	<ul style="list-style-type: none"> The Cyber Security Assurance Report was received and the positive cyber engagement with staff across the organisation was noted. The Committee welcomed the Cyber Resilience report from Audit Wales.
ADVISE	<ul style="list-style-type: none"> The Corporate Risk Register – PRIVATE was discussed in detail.

Delegated action taken by the committee:

The Committee approved two policies;

- Principles & Standards of Privileged Access Management
- Anti-Malware

Date of next committee meeting:

3 August 2023

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	25 May 2023
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Public or Private	Private
IF PRIVATE: please indicate reason	The IM Digital Network is a Private meeting

Name of Committee	All Wales Independent Member Digital Network
Chair of Committee	David Selway, Independent Member, DHCW
Lead Executive Director	Chris Darling, Board Secretary
Date of Last Meeting	19 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	David Selway, Independent Member

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

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18/05/2023 15:38:47

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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below:	

DUTY OF QUALITY ENABLER	Information
DOMAIN OF QUALITY	Effective
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		

Tolley, Laura
18/05/2023 15:38:47

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WCCIS	Welsh Community Care Information Systems	NDR	National Data Resource
IM	Independent Member		

Definitions	
ALERT	Alert the Board to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail any areas of assurance that the Network has received
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Network

PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> Welsh Community Care Information Systems (WCCIS). The Network received a presentation on WCCIS and noted the importance of a functioning and effective system.
ASSURE	<ul style="list-style-type: none"> Deployment of NHS Wales App – Development Plans. The Network received an update on the current status of the Deployment of the NHS Wales App.

	<p>Members discussed the ways in which GP practices could be encouraged to utilise the App.</p> <ul style="list-style-type: none"> • IM Digital Network Evaluation and Feedback. The Network received the Evaluation Report for the performance of the Network for 2022/23 and provided their views on the forthcoming agendas. The Chair of DHCW attended to provide the feedback to the Chairs Peer Group to seek their support for the continuation of the Network.
ADVISE	<ul style="list-style-type: none"> • National Data Resource (NDR). The IM Digital Network received an update on the status of the NDR with National Platforms soon to go live.

Delegated action taken by the committee:
N/A

Date of next committee meeting:
19 July 2023

Tolley, Laura
18/05/2023 15:38:47

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	25 May 2023
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Public or Private	Private
IF PRIVATE: please indicate reason	Local Partnership Forum is a Private meeting

Name of Committee	Local Partnership Forum
Chair of Committee	Helen Thomas, Chief Executive Officer
Lead Executive Director	Sarah-Jane Taylor, Director of People and Organisational Development
Date of Last Meeting	4 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	Helen Thomas, Chief Executive Office

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

Tolley, Laura
18/05/2023 15:38:47

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CORPORATE RISK (ref if appropriate)	
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Workforce
<u>DOMAIN OF QUALITY</u>	Person Centred
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement: There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		

Tolley, Laura
18/05/2023 15:38:47

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
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Acronyms			
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Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
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ADVISE	Detail here any areas of ongoing monitoring where an update has been provided to the Committee

PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> There were no items for the Board to be alerted to.
ASSURE	<ul style="list-style-type: none"> Corporate Risk Register and Board Assurance Framework. The Local Partnership Forum received the Corporate Risk Register and discussed the 31 risks. The risk score for the one risk on Staff Vacancies for which LPF had oversight was reduced following a deep dive at the last Audit and Assurance Committee.

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	<ul style="list-style-type: none"> • Workforce Update. The Local Partnership Forum received a verbal update on the following: Update of People and OD Strategy, Strategic Equality Plan, Gender Pay Gap Report and Strategic Workforce Group. • Trade Union Update. The Local Partnership Forum received a verbal update on the issues of importance affecting Union Members. • Quality & Engagement Act Update. The Local Partnership Forum were provided with a brief update on the Act with a more detailed plan on the quality standards being incorporated into the Workforce Strategy update for the next meeting. • Workforce Performance Report. The Local Partnership Forum noted the Workforce Performance Report and noted the positive trend in most reported areas. • DHCW Estates Plan. The Local Partnership were pleased to note the progress being made against the Estates Plan.
ADVISE	<ul style="list-style-type: none"> • Staff Conference and Awards Planning Update. The Local Partnership Forum were informed that the preparation for the Staff Awards was well underway with the theme for the conference being Mission Possible, DHCW's five strategic missions. • Health and Wellbeing Network Update. The Group were updated on the work being done by the network and the future campaigns set out for 2023/24.

Delegated action taken by the committee:
N/A

Date of next committee meeting:

6 June 2023

Tolley, Laura
18/05/2023 15:38:47