

Cyfarfod Bwrdd Iechyd a Gofal Digidol Cymru - Cyhoeddus

Thu 30 November 2023, 10:00 - 14:05

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 Bwrdd 28 Medi 2023

I'w Cymeradwyo

Cadeirydd

 2.1 DHCW SHA Board Meeting Minutes 20230928 V1.pdf (12 pages)

2.1.1. Materion yn Codi

2.2. Cofnodion Cryno Preifat Heb eu Cadarnhau o Gyfarfod Bwrdd 28 Medi 2023

I'w Cymeradwyo

Cadeirydd

 2.2 DHCW SHA Board Meeting PRIVATE ABRIDGED Minutes 20230928 V1 - Copy.pdf (3 pages)

2.2.1. Materion yn Codi

2.3. Cofnodion heb eu Cadarnhau o Gyfarfod Cyffredinol Blynnyddol 28 Medi 2023

I'w Cymeradwyo

Cadeirydd

 2.3 DHCW AGM Minutes 20220928 V1.pdf (5 pages)

2.3.1. Materion yn Codi

2.4. Cofnodion Gweithredu

I'w Nodi

Cadeirydd

 2.4 Action Log.pdf (1 pages)

2.5. Blaengynllun Gwaith

Tolley, Laura
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I'w Nodi Ysgrifennydd y Bwrdd

- 2.5 Forward Workplan Report.pdf (4 pages)
- 2.5i SHA Board Forward Workplan 2023-24.pdf (1 pages)

2.6. Adroddiad Bwlch Cyflog rhwng y Rhywiau

I'w Cymeradwyo Cyfarwyddwr Pobl a Datblygu Sefydliadol

- 2.6 Gender Pay.pdf (9 pages)

2.7. Diwygio'r Rheolau Sefydlog - Cylch Gorchwyl y Pwyllgor Cyflawni Rhaglenni

For Approval Ysgrifennydd y Bwrdd

- 2.7 Amendment to SO's - Programmes Delivery Committee Terms of Reference Report.pdf (5 pages)

10:10 - 10:40
30 min

3. PRIF AGENDA- I'W DRAFOD

3.1. Cyflwyniad Gwrando a Dysgu ar y Cyd – Gwaith Gofal Brys a Gofal mewn Argyfwng

I'w Draford Cyfarwyddwr Meddygol Gweithredol

- 3.1 Shared Listening & Learning Cover Paper.pdf (4 pages)
- 3.1i SHA Listen and Learn UEC Dashboard .pdf (10 pages)

10:40 - 10:55
15 min

4. I'W ADOLYGU

4.1. Adroddiad y Cadeirydd a'r Is-Gadeirydd

I'w Draford Cadeirydd

- 4.1 Chair and Vice Chair Report November .pdf (6 pages)

4.2. Adroddiad y Prif Swyddog Gweithredol

I'w Draford Prif Swyddog Gweithredol

- 4.2 CEO Report - Nov 23 V1.pdf (7 pages)

10:55 - 13:00
125 min

5. EITEMAU STRATEGOL

5.1. Strategaeth Gofal Sylfaenol

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

- 5.1- Primary Care Strategy (v2).pdf (5 pages)

5.2. Strategaethau Cyfarwyddiaethau Clinigol

I'w Chymeradwyo Cyfarwyddwr Meddygol Gweithredol

- 5.2 DHCW Clinical Strategies Report - SHA Board - 30 Nov 23.pdf (6 pages)

Egwyl - 10 muned

5.3. Adroddiad Caffael Strategol

I'w Gymeradwyo Cyfarwyddwr Gweithredol Strategaeth

Tolley, Laura
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- 📄 5.3 REP - Procurement Report SHA Board November 2023 PUBLIC.pdf (5 pages)
- 📄 5.3i App1i DHCW Commitment of Expenditure Over Chief Executive Limit; HSCC e-Journals (P21.73) .pdf (8 pages)

5.4. Cynllun Tymor Canolig Integredig (IMTP)

I'w Trafod *Cyfarwyddwr Gweithredol Strategaeth*

- Amodau Atebolrwydd 2023-24
- Cynllun IMTP 2024-25

- 📄 5.4 IMTP Update Report SHA Board Nov 2023.pdf (7 pages)

5.5. Adroddiad Cyllid

I'w Drafid *Cyfarwyddwr Gweithredol Cyllid*

- 📄 5.5 TEM-DHCW - SHA Board Finance Report Cover Period 7 Final F-01.pdf (8 pages)
- 📄 5.5i PRES-DHCW SHA Board Finance Briefing Report October 2023 Final F-01.pdf (20 pages)

Egwyl - 30 muned

13:00 - 14:00
60 min

6. LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

6.1. Adroddiad y Gofrestr Risgiau Corfforaethol

I'w Trafod *Ysgrifennydd y Bwrdd*

- 📄 6.1 Risk Management Report.pdf (9 pages)

6.2. Adroddiad Perfformiad Sefydliadol Integredig

I'w Drafid *Cyfarwyddwr Gweithredol Strategaeth*

- 📄 6.2 REP-DHCW SHA Board IOPR Cover Sheet Sept-Oct 2023.pdf (6 pages)
- 📄 6.2i REP-DHCW SHA Board Report IOPR SEPT-OCTOBER 2023.pdf (23 pages)

6.3. Perfformiad Hanner Blwyddyn yn Erbyn y Cynllun

I'w Drafid *Cyfarwyddwr Gweithredol Strategaeth*

- 📄 6.3 REP-DHCW SHA Board Half Year Performance Against Plan Q2 Cover Sheet -Oct 2023.pdf (6 pages)
- 📄 6.3i REP-DHCW Half Year Performance Against Plan OCTOBER 2023.pdf (20 pages)

6.4. Adroddiad Crynhoi Cynnydd y Pwyllgor Archwilio a Sicrwydd

Ar gyfer Sicrwydd *Cadeirydd y Pwyllgor*

- 📄 6.4 Audit and Assurance Committee Highlight report.pdf (5 pages)

6.5. Adroddiad Ar y Prif Bwyntiau'r Pwyllgor Llywodraethu a Diogelwch Digidol

Ar gyfer Sicrwydd *Cadeirydd y Pwyllgor*

- 📄 6.5 DG&S Chair's Report for Board 30 Nov 2023.pdf (5 pages)

6.6. Adroddiad Crynhoi Cynnydd y Fforwm Partneriaeth Lleol

Ar gyfer Sicrwydd *Cadeirydd y Grwp*

- 📄 6.6 Local Partnership Forum Highlight report v1 (003).pdf (4 pages)

6.7. Adroddiad Crynhoi Cynnydd y Pwyllgor Cyflawni Rhaglenni

Ar gyfer Sicrwydd *Cadeirydd y Pwyllgor*

Tolley, Laura
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14:00 - 14:05

5 min

7. MATERION I GLOI

7.1. Unrhyw Faterion Brys Eraill

I'w Trafod

Cadeirydd

7.2. Dyddiad y Cyfarfod Nesaf

I'w Nodi

Cadeirydd

Dydd Iau 26 Ionawr 2024

Tolley, Laura
23/11/2023 10:39:08

DHCW SHA Board Meeting – PUBLIC – Unconfirmed

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 28 September 2023 as a virtual meeting broadcast live via Zoom.



10:00 to 13:30



28 September 2023

Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	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
Alistair Klaas Neill	AKN	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer / Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW

In Attendance	Initial	Title	Organisation
Anthony Byrne	AB	Consultant - Palliative Medicine (for item 3.1)	CAV
Chris Darling	CD	Board Secretary	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW

Gareth John	GJ	Head of Information Delivery (for item 3.1)	DHCW
Sarah-Jane Taylor	SJT	Director of People and Organisational Development	DHCW
Laura Tolley	LT	Head of Corporate Governance (Secretariat)	DHCW
Steffan William	SW	Translator	Translation Services

Apologies	Title	Organisation
Ruth Glazzard	Vice Chair	DHCW

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	DPIF	Digital Priority Investment Fund
IM	Independent Member	IMTP	Integrated Medium-Term Plan
IOPR	Integrated Organisational Performance Report	CAV	Cardiff & Vale University Health Board
WG	Welsh Government	WAST	Welsh Ambulance Services Trust
DMTP	Digital Medicines Transformation Portfolio		

Item No	Item Detail	Outcome	Action
PRELIMINARY MATTERS			
1.1	<p>Welcome and Apologies</p> <p>The Chair welcomed everyone bilingually to the DHCW SHA Board meeting.</p> <p>The Chair confirmed the meeting was being broadcast live via Zoom, in addition, the recording would be available via the DHCW website for any persons unable to access the meeting live. The Zoom platform was being used to allow for members to be visible throughout the entire meeting and for simultaneous translation to take place, allowing members to engage in the meeting in English or Welsh.</p> <p>The Chair provided some housekeeping notices regarding the technical aspects of live streaming the meeting, the planned breaks,</p>	Noted	None to note

	and the use of the consent agenda for items 2.1 to 2.9.		
1.2	Apologies for Absence Apologies for absence were noted from: <ul style="list-style-type: none"> Ruth Glazzard, Vice Chair 	Noted	None to note
1.3	Declarations of Interest There were no declarations of interest.	Noted	None to note
CONSENT AGENDA – FOR APPROVAL AND NOTING			
2.1	Unconfirmed Minutes of 27 July 2023 Board Meeting The Board resolved to: APPROVE the minutes of the Board meeting held on 27 July 2023.	Approved	None to note
2.2	Unconfirmed Private Abridged Minutes of 27 July 2023 Board Meeting The Board resolved to: APPROVE the unconfirmed private abridged minutes of 27 July 2023 board meeting.	Approved	None to note
2.3	Unconfirmed Private Abridged Minutes of 10 August 2023 Extraordinary Board Meeting The Board resolved to: APPROVE the minutes of the extraordinary Board meeting held on 10 August 2023.	Approved	None to note
2.4	Action Log The Board resolved to: NOTE the action log.	Noted	None to note
2.5	Forward Workplan The Board resolved to: NOTE the contents of the Forward Plan.	Noted	None to note
2.6	DHCW Decarbonisation Returns The Board resolved to: NOTE the DHCW Decarbonisation Returns.	Approved	None to note
2.7	DHCW response to Welsh Parliament Health and Social Care Committee and Public Accounts and Public Administration Committee Scrutiny of DHCW Report The Board resolved to: NOTE the DHCW response to Welsh Parliament Health and Social Care Committee and Public Accounts and Public Administration Committee Scrutiny of DHCW Report.	Noted	None to note
2.8	Amendments to Standing Orders, Standing Financial Instructions and Scheme of Delegation The Board resolved to:	Approved	None to note

	APPROVE the amendments to Standing Orders, Standing Financial Instructions and Scheme of Delegation.		
2.9	COVID-19 Injury Update NOTE the COVID-19 Inquiry Update.	Noted	None to note

MAIN AGENDA

PART 3 – FOR DISCUSSION

3.1	Shared Listening and Learning Presentation		
	<p>Rhidian Hurle, Executive Medical Director introduced the item and advised the presentation was an excellent example of collaboration between clinicians and data analysts which had a positive impact on the palliative care patient journey.</p> <p>Gareth John, Head of Information Delivery and Anthony Byrne, Consultant in Palliative Care, CAV shared the presentation and provided an overview of the palliative care approach and complexity challenge in addition to the clinical context. The following was also highlighted:</p> <ul style="list-style-type: none"> • Opportunities with data of the whole population included: <ul style="list-style-type: none"> - Understanding pathway flows more predictably - Identify triggers for intervention - Evidence to innovate • A hackathon was held to understand areas such as what services people interact with in their last year of life, what deviations from the 'ideal' pathway may look like and unscheduled care interactions. • Hackathon cohort derived from death registrations with deaths due to external causes excluded; • Healthcare interaction data sources included: <ul style="list-style-type: none"> - WAST emergency 999 calls - Emergency department attendances - Admitted patient care - GP out of hours - 111 service - Specialist palliative care - Welsh demographic service • Power BI was used to analyse findings and display 'patient on a page' data • The data was able to show the total days that the cohort spent in hospital or an ambulance • Hackathon reflections included: <ul style="list-style-type: none"> - Pleased with what was achieved in 2 working days; - Enthusiasm, engagement and collaboration from clinical 	Received & Discussed	None to note

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	<p>and information teams;</p> <ul style="list-style-type: none"> - Equal partnership in the development; - Template now created with healthcare professionals for successful collaboration. <p>The following observations and comments were made:</p> <ul style="list-style-type: none"> • The work was shared at the NHS Wales Leadership Board in the Summer and was very well received; • Learning and understanding system wrap around patients was gained during the process; • The Health and Social Care service needed to be interacting and integrating in a better way; • Understanding services interaction allows patients to be seen at the right time, in the right place at the right time; • It would be hugely beneficial for clinicians to access data to improve patient care; • The project has been set up as a sustainable programme of work to allow leads to look at the data and services to access the data immediately; • DHCW had published a pilot data dashboard which gives all clinicians across Wales access; • Data has given the power and justification to ensure sustainable collaboration between all sectors. • There were a number of pilot projects being taken forward as a result of the learning. <p>The Chair commented that the presentation was a fantastic example of bringing data into real time healthcare with the potential to make a really important difference to the patient experience.</p> <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the Shared Listening and Learning Presentation.</p>		
PART 4 – FOR REVIEW			
3.1	<p>Chair and Vice Chair Report</p> <p>The Chair outlined the following highlights from within the report:</p> <ul style="list-style-type: none"> • Chairs Peer Group Meeting - Judith Paget, NHS Wales CEO joined to discuss the learnings that would be taken forward following the very distressing situation at the Countess of Chester Hospital, in addition there was a discussion around the NHS Wales financial position; • Llais Cymru Meeting – The Chair informed the Board of the informative discussions held with the Llais Cymru Chair and Chief Executive Officer which included conversations on how to ensure the citizen voice was at the forefront of all future developments; • Programmes Delivery Committee – A new Committee of the SHA Board was in the process of being formally established with the first meeting being held in November 2023. The Terms of Reference for the Committee would be brought to the SHA Board 	Received & Approved	None to note

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	<p>for approval at the next meeting.</p> <p>The Board resolved to:</p> <p>RECIEVE the contents of the Chair and Vice Chair report and ENDORSE the use of the Common Seal.</p>		
3.2	<p>Chief Executive's Report</p> <p>Helen Thomas, Chief Executive Officer (HT) provided the following highlights from the report:</p> <ul style="list-style-type: none"> • Staff Engagement - Ongoing high staff engagement at the Staff Briefings with over 500 staff joining and contributing to the sessions; • Four Nations Meetings – DHCW hosted this meeting with digital leaders across Nations with a discussions particularly focussing on workforce development issues, digital maturity and commercial operations; • Digital Maturity – DHCW were working with Directors of Digital across NHS Wales on Digital Maturity with an initial assessment being completed. In addition, DHCW undertook a usability survey which provided a lot of insight and as a result two working groups have been established to take this work forward; • Eyecare Programme – This transferred from Cardiff& Vale UHB (CAV) to DHCW on 1 June 2023, the programme was currently in a pause and reset phase with work closely being undertaken with CAV colleagues to gain clarity on programme requirements and implementation plans. Key dependencies were being worked through and the Board would be kept updated on this as necessary; • Joint Escalation and Intervention Arrangements – The Board were advised that a letter from Welsh Government had been received confirming DHCW remained in 'routine arrangements' which was positive. <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the contents of the Chief Executive's report.</p>	Received & Discussed	None to note
PART 5 – STRATEGIC ITEMS			
<p>Tolly, Laura 25.11/2023 10:39:08</p>	<p>Finance Report</p> <p>Claire Osmundsen-Little, Executive Director Finance presented the finance report for the period ending and highlighted the following:</p> <ul style="list-style-type: none"> • Finance Improvement Exercise – after the initial savings exercise and DHCW submission, a further request was made 	Received & Discussed	None to note

	<p>for DHCW to target DPIF cost reductions. DHCW were working with Programme Leads to produce an impact assessed consolidated response;</p> <ul style="list-style-type: none"> Revenue performance: DHCW is reporting a revenue underspend of £0.152m for the period to August 31st; Capital performance: spend to date was £2.588m this represents an underspend of £0.069m against period plan; The target Public Sector Payment Policy (PSPP) of 98% had been exceeded with 98% of non-NHS invoices being paid within 30 days; Cash Management - Cash balances stood at £5.655m at the end of August; Digital Priority Investment Fund: £36.7m with spend of £13.482m; An overview of risks and opportunities were shared. <p>The following observations and comments were made:</p> <ul style="list-style-type: none"> The NHS financial challenge related primarily to deficits in Health Boards and Trusts; DHCW were confident on the ability to deliver the COVID requirements with the funding allocated to it; Work was being undertaken with Welsh Government and teams in DHCW to look at the possibility of the Data Centre Transition being self-funded; The Board would be updated once Welsh Government had provided feedback on the submitted plans; Digital is a tool to enable us to move to new operation model, that could transform the way care is delivered and drive value and benefits, therefore at a time where transformation is needed this should be an area that is invested in to drive the benefit as it will help the system come out of the financial challenge it is currently facing. DHCW scrutiny panel was an effective group for the organisation; VAT recovery outcome was awaited from HMRC; The dependency of digital to deliver safe patient care was emphasised. <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the Finance Report.</p>		
5.2	<p>Stakeholder Engagement Plan Update</p> <p>Ifan Evans, Executive Director of Strategy (IE) shared the update and advised the report outlined progress made on the delivery of DHCW's Engagement Strategy and associated action plan. IE highlighted the following:</p> <ul style="list-style-type: none"> The refined action plan focused around four interlinked pillars with specific measurable actions; A new Engagement and Strategic Partnerships team was 	Noted	None to note

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	<p>being developed to support the delivery of the strategy and action plan;</p> <ul style="list-style-type: none"> Progress on DHCW's Stakeholder Engagement plan was highlighted and IE gave thanks to all involved in the delivery of the plan. <p>The following observation was made:</p> <ul style="list-style-type: none"> Pillar 3 – establishing as a trusted system leader was probably the most difficult part of the plan and this was usually achieved in increments. <p>The Board resolved to:</p> <p>NOTE the Stakeholder Engagement Plan Update.</p>		
5.3	<p>Communications Strategy</p> <p>Chris Darling, Board Secretary (CD) advised the Communications Strategy was being presented for approval and had been subject to significant engagement during its development. CD highlighted the following:</p> <p>The strategy built upon the work of the Stakeholder Engagement Strategy with close collaborative working between the Communications and Engagement functions.</p> <p>Feedback gathered through various engagement sessions had informed the strategy.</p> <p>The Communications Strategy strategic aims were highlighted as:</p> <ul style="list-style-type: none"> To establish DHCW's reputation as a trusted strategic partner To build on our internal communications - supporting staff to feel informed and empowered, making DHCW a great place to work and a high quality and ambitious organisation To develop our stakeholder communications – building relationships to work in partnership To grow our public communications – building understanding of DHCW's role and how digital and data will help the NHS in Wales work better, what DHCW is doing to address digital inclusion and encouraging people to work for us To enhance our digital communications – delivering high quality digital communications which reflect our purpose and ambition as a digital organisation. <ul style="list-style-type: none"> Six intended outcomes linked back to the aims which were included in the report; A summary of changes since the Board Development session included: <ul style="list-style-type: none"> Strategy has been moved to a three-year strategy with an associated action plan; More clarity on what communication is and how everyone has a role to play in the area of communication; 	Approved	None to note

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	<ul style="list-style-type: none"> - Strengthened the focus on the Welsh Language; - Strengthened communicating the challenges DHCW face; - Increased focus on collaboration particularly with staff and stakeholders; - Increased focus on staff responsibility in delivering corporate messaging; - Additional focus on building trust and learning when things have gone wrong; - Emphasis on right message, right audience at the right time. <p>CD expressed thanks to all involved in the development of the strategy.</p> <p>The following observation was made:</p> <ul style="list-style-type: none"> • Main challenge to implementation was messaging to external staff and stakeholders, and in the current climate how DHCW can demonstrate and reinforce DHCW's role in system and that it can transform the way health and care is delivered. In addition to digital being seen as value added rather than an extra cost. <p>The Board resolved to: APPROVE the Communications Strategy.</p>		
5.4	<p>People and Organisational Development Strategy Action Plan Update</p> <p>Sarah-Jane Taylor, Director of People and Organisational Development (SJT) shared the strategy action plan update and highlighted the key themes from the Strategy which were:</p> <ul style="list-style-type: none"> - Extraordinary Leadership - Great Organisation to Work - Strategic Workforce Planning - Grow your Own - Wellbeing and Engagement - New Ways of Working <p>SJT provided an update on work undertaken within the themes including leadership and talent management, strategic workforce planning and the work of the Health and Wellbeing Network.</p> <p>The Board resolved to: NOTE the People and Organisational Development Strategy Action Plan Update</p>	Noted	None to note
PART 6 - GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE			
6.1	<p>Programme Governance Arrangements</p> <p>CD shared an update on Programme Governance Arrangements and advised:</p>	Noted	None to note

	<ul style="list-style-type: none"> • DHCW commissioned an independent review supported by Welsh Government which was carried out by Mr Steve Combe MBE, independent governance advisor; • The implications of the report were considered via DHCW Board Development, Audit & Assurance Committee and in liaison with Welsh Government; • DHCW have met with Welsh Government Officials and have agreed that financial and delivery accountability for all DHCW hosted programmes would transition to sit with the DHCW Accountable Officer – Chief Executive Officer; • Welsh Government would hold DHCW to account for the delivery of programmes using existing performance management arrangements; • Welsh Government have developed a phasing of transfer of programmes and this was currently being discussed; • The DHCW Chair, together with CEO have agreed to establish a sub-committee of the DHCW Board to provide assurance and scrutiny on delivery of major DHCW programmes in an open and transparent manner; • The Terms of Reference for the new Committee would be presented to the SHA Board for approval in due course; • The first meeting of the new Committee was planned for November 2023. <p>The following comment was made:</p> <ul style="list-style-type: none"> • Work was being undertaken within DHCW to determine what the scope of the new Committee would include. <p>The Board resolved to: NOTE the Programme Governance Arrangements.</p>		
6.2	<p>Integrated Organisational Performance Report</p> <p>Ifan Evans, Executive Director of Strategy delivered the integrated organisational performance report to end of August 2023 and the following areas were highlighted:</p> <ul style="list-style-type: none"> • Changes in format of the report included <ul style="list-style-type: none"> - Scorecard included history of information over the past 6 months; - IMTP was included all on one page; - Presentation of financial certainty was explained. • National Data Resource Programme had gone live in August; • Several significant contracts had been completed; • DMTP has progressed well during the period; • An overview of workforce data was shared; • An overview of operational performance was shared with assurance provided all incidents went through DHCW's 	Received & Discussed	None to note

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	Incident Review & Learning Group.		
	<p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the Integrated Organisational Performance Report.</p>		
6.3	<p>Corporate Risk Register</p> <p>CD presented the report and advised the UK Government National Risk Register was published in August 2023 which included a section on AI safety and the cyber-attack: health and care system, learning from this report would be subject to a future Board Development session.</p> <p>CD advised the Corporate Risk Register currently had 28 risks on the register. There were 11 Private risks (ten of which are considered at every Digital Governance and Safety Committee, and one considered at Audit and Assurance Committee). CD noted as the new Programmes Delivery Committee is established, the Committee would have oversight of risks related to the remit of the Committee moving forward.</p> <p>Since the last meeting, three new risks had been added:</p> <ul style="list-style-type: none"> - DHCW0326 – Insufficient commitment to build out functionality from the NHS Wales App - DHCW0327 – Delays in operationalising NDR platform impacting services which require NDR - DHCW03258 - **Private** <p>Three risks had been removed from the register, these were detailed in the report and one risks changed in score:</p> <ul style="list-style-type: none"> - DHCW0322 –funding letter confirmed for 2023/24 with ongoing discussions to secure funding for 2024/25 <p>The following observations and comments were made:</p> <p>Action 20230928 -A01</p> <ul style="list-style-type: none"> • Risk report to be updated to include under the heatmap with risks removed and rational for removal; <p>Action 20230928 -A02</p> <ul style="list-style-type: none"> • Risk report to include opportunities going forward. <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the Corporate Risk Register</p>		<p>ACTION A01 – Risk report be updated to include summary & rational of risks removed under heatmap.</p> <p>ACTION A02 – Opportunities to be included in the report.</p>
6.3	<p>Equality, Diversity and Inclusion Update</p> <p>SJT provided the Equality, Diversity and Inclusion (EDI) Update and highlighted the following:</p> <ul style="list-style-type: none"> • Strategic Equality Plan went live in March 2023; • There were several members, covering all the protected characteristics involved in the EDI Network; • The EDI Network reviews surveys, policies and other organisational documents; 	Noted	None to note


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	<ul style="list-style-type: none"> • Key themes included in the Strategic Equality Plan and actions are all on track to be delivered within the agreed timescales; • DHCW were involved in a number of strategic groups across NHS Wales; • DHCW had achieved a number of standards which was extremely positive; • A sample of feedback from the EDI Network was shared. <p>The Board resolved to: NOTE the Equality, Diversity and Inclusion Update.</p>		
5.5	<p>Digital Governance and Safety Committee Highlight Report</p> <p>Rowan Gardner, Committee Chair provided an update from the last Committee meeting held on 3 August 2023, and noted the Board were alerted to escalations in a private session.</p> <p>The Board resolved to: NOTE the Digital Governance and Safety Committee Highlight Report.</p>	Noted	None to note
PART 6 - CLOSING MATTERS			
6.1	<p>Any Other Urgent Business</p> <p>There was no other urgent business raised.</p>	Discussed	None to note
6.2	<p>Date and Time of Next Meeting</p> <ul style="list-style-type: none"> • Thursday 30 November 2023 <p>The meeting closed at 13:30</p>	Noted	None to note

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DHCW SHA Board Meeting – PRIVATE – Unconfirmed

Minutes of the private meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 28 September 2023 via Zoom.

 09:45 to 10:00

 28 September 2023

Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	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
Alistair Klaas Neill	AKN	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer / Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Board Secretary	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW
Sarah-Jane Taylor	SJT	Director of People and Organisational Development	DHCW

Laura Tolley	LT	Head of Corporate Governance (Secretariat)	DHCW
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Apologies	Title	Organisation
Ruth Glazzard	Vice Chair	DHCW

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	DG&S	Digital Governance & Safety
IM	Independent Member	WG	Welsh Government

Item No	Item Detail	Outcome	Action
PRELIMINARY MATTERS			
1.1	Welcome and Apologies The Chair welcomed everyone to the DHCW SHA Board private meeting. The Chair confirmed this was a one item meeting relating to escalations from the Committee Chair of the Digital Governance & Safety Committee, Rowan Gardner.	Noted	None to note
1.2	Apologies for Absence Apologies for absence were noted from: <ul style="list-style-type: none"> Ruth Glazzard, Vice Chair 	Noted	None to note
1.3	Declarations of Interest There were no declarations of interest.	Noted	None to note
MAIN AGENDA			
PART 2 – FOR DISCUSSION			
2.1	Escalations from the Digital Governance & Safety Committee		
	Rowan Gardner, Digital Governance & Safety Committee Chair alerted the Board to specific areas of cyber security concerns raised during the Committee meeting held on 3 August 2023 The Board were assured these areas would be monitored closely by the Committee.	Noted	None to note

	The Board resolved to: NOTE the Escalations from the Digital Governance & Safety Committee.		
PART 4 - CLOSING MATTERS			
4.1	Any Other Urgent Business There was no other urgent business raised.	Discussed	None to note
4.2	Date and Time of Next Meeting TBC	Noted	None to note

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DHCW Annual General Meeting – Unconfirmed

Minutes of the meeting of Digital Health and Care Wales (DHCW) Annual General Meeting held on Thursday 28 September 2022 as a virtual meeting broadcast live via Zoom.



16:00 – 17:00



28 September 2023

Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Ruth Glazzard	RG	Vice Chair	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	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
Alistair Klaas Neill	AKN	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer / Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Board Secretary	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW

Sarah-Jane Taylor	SJT	Director of People and Organisational Development	DHCW
Laura Tolley	LT	Head of Corporate Governance (Secretariat)	DHCW
Steffan William	SW	Translator	Translation Services

Apologies	Title	Organisation
Sam Hall	Director of Primary Community & Mental Health Digital Services	DHCW

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	DPIF	Digital Priority Investment Fund
AGM	Annual General Meeting	IMTP	Integrated Medium-Term Plan

Item No	Item Detail
1.1	<p>Welcome and Apologies</p> <p>The Chair welcomed everyone bilingually to the second Annual General Meeting for DHCW.</p> <p>The Chair confirmed the meeting was being broadcast live via Zoom, in addition, the recording would be available via the DHCW website for any persons unable to access the meeting live. The Zoom platform was being used to allow for members to be visible throughout the entire meeting and for simultaneous translation to take place, allowing members to engage in the meeting in English or Welsh.</p> <p>The Chair expressed thanks to DHCW CEO, Helen Thomas and DHCW Board members for their vision and commitment to DHCW.</p> <p>The Chair explained DHCW would not be here without the commitment, hard work and dedication of DHCW's people – so gave sincere thanks, personally and on behalf of the Board, to all DHCW staff who worked extremely hard throughout the year and continue to do so, he explained that all staff make a massive contribution to the delivery of quality digital health and care services for the people of Wales.</p> <p>The Chair added as Chair, he had been impressed with the culture and the work ethic of DHCW staff. In the past 12 months staff numbers had grown to almost 1,113 and new people had joined.</p>

	<p>Given all that happened globally in DHCW's second year of operation as a Special Health Authority the Chair explained he was very pleased and proud of DHCW's achievements and the way the organisation responded to the pandemic, the cost of living crisis, and ever increasing cyber threats to NHS Wales.</p> <p>The Chair explained 2022/23 hadn't been without its challenges, with DHCW having to prioritise activities and recruit staff to ensure we had capacity to continue our active work on delivering Programmes, including programmes transferred to DHCW to take forward from the NHS Wales Collaborative.</p> <p>The Chair commented that it was with pride DHCW digital services have been absolutely key to the safe delivery of care for people across Wales.</p>
1.2	<p>Apologies for Absence</p> <p>Apologies for absence were noted from:</p> <ul style="list-style-type: none"> Sam Hall, Director of Primary, Community & Mental Health Digital Services
1.3	<p>Annual Report and Accounts for 2022/23</p> <p>Helen Thomas, Chief Executive Officer (HT) presented the Annual Report and Accounts for 2022/23 and explained it was her privilege to bring the first ever 2022/23 DHCW Annual Report and Accounts for DHCW as a statutory body, reflecting on achievements and challenges during 2022/23 and looking ahead and added that the AGM was a considerable milestone reflecting on DHCW's second year of operation.</p> <p>HT explained the DHCW Annual Report 2022/23 was published as a single unified document could be seen in the AGM papers and noted they were available on the DHCW website, and it included:</p> <ul style="list-style-type: none"> The Performance Report The Accountability Report The Financial Statements <p>HT noted her pride that as the national digital organisation for NHS Wales, DHCW were the first NHS Wales organisation to publish its Annual Report in HTML format.</p> <p>HT reminded the Board that the Annual Report and Accounts as a whole must be fair, balanced and understandable and as the Accountable Officer she took personal responsibility for this, and the judgments required for determining that it is fair, balanced and understandable.</p> <p>HT extended thanks to all colleagues across the organisation with a special thanks to the staff involved in the delivery of the annual report and accounts.</p>
1.4	<p>DHCW 2022/23 Showcase and Forward Look including Financial Position Presentation</p> <p>The DHCW Board presented the DHCW 2022/23 Showcase and provided detailed information on the following areas:</p> <ul style="list-style-type: none"> Who we are and what we do - Areas included DHCW being part of the NHS in Wales, DHCW Vision and Missions, Our People Overview, Culture and Organisational Development and Board and Governance arrangements.

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	<ul style="list-style-type: none"> • Finances - Areas included financial performance against statutory targets and an overview of DHCW finances 2022/23. • Progress and achievements – Areas included performance and stability, cyber security, single record, primary care, choose pharmacy and Welsh immunisation system. • Foundations for digital transformation – Areas included, digital diagnostics, digital services for critical care units, Digital Maternity Cymru, Digital Medicines Transformation Portfolio, NHS Wales app and National Data Resource.
1.5	<p>Question and Answers</p> <p>1. When will the NHS Wales App be fully rolled out and what will it mean for those who have downloaded it?</p> <p>The App wouldn't be fully completed as it was an iterative process with new functionality explored and incorporated. The coming months would see a significant acceleration in the promotion of the app to get GP practices' connected and this would drive user uptake. The NHS Wales App functionality was aligned to the NHS England App and would include functionality such as appointment booking, repeat prescription ordering, viewing a summary of medical records.</p> <p>2. Will the financial challenges impact on how quickly digital transformation can be rolled out in NHS Wales?</p> <p>It was inevitable that the financial challenge would impact on the pace of digital transformation. DHCW's role would be to address and support the challenge by looking at areas where impact is minimised and to support core deliverables and key digital priorities.</p> <p>3. How can the Board measure how values and behaviours are embedded across the organisation?</p> <p>Assurance was gathered through a variety of data and information sources which included, but were not limited to, staff surveys, turnover analysis, exit interviews, discussions and the Local Partnership Forum, all information of which is reported regularly to the Board via the Integrated Organisational Performance Report, and Local Partnership Forum Highlight Report. However, the need for all Board members and staff to demonstrate and role model values and behaviours was emphasised.</p> <p>4. Staff numbers have increased greatly over the last year. How has DHCW developed it's recruitment plan to meet it's objective of becoming a fully bilingual organisation?</p> <p>83% of recruitment information was now bilingual. In addition, work was being undertaken to increase Welsh skills and confidence of Welsh speakers across DHCW.</p>
1.6	<p>Summary and Close</p> <p>The Chair gave thanks to all those in attendance and observing the second Annual General Meeting for DHCW.</p>



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NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

The meeting closed at 17:00

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Title	Date of Meeting	Business Area	Action/Decision Narrative	Action Lead	Due Date	Status/Outcome Narrative	Status
28092023-A01	28/09/2023	Corporate Governance	Risk report be updated to include summary & rational of risks removed under heatmap.	Chris Darling (DHCW - Board Secretary)	29/11/2023	Complete - Corporate Risk Report includes summary and rational of removed risks under heatmap	Complete
280920203-A02	28/09/2023	Corporate Governance	DHCW opportunites to be included in the report.	Chris Darling (DHCW - Board Secretary)	29/11/2023	Complete - Corporate Risk Report now includes opportunities in section 3 of the report	Complete

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DIGITAL HEALTH AND CARE WALES FORWARD WORKPLAN REPORT

Agenda Item	2.5
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Name of Meeting	SHA Board
Date of Meeting	30 November 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	SHA Board is being asked to
NOTE the report.	

Tolley Laura
23/11/2023 10:39:08

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

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

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>DUTY OF QUALITY ENABLER</u>	Information
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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.

Section 2: none have available in this section (4/4) use as appropriate where necessary.
Section 2:

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

2 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Chris Darling, Board Secretary	November 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

3 SITUATION/BACKGROUND

<p>3.1 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.</p>
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4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 The following items have been added to the Forward Workplan and are due to be presented at the meeting on 30 November 2023:
- Clinical Directorate Strategies (Information Governance, Information and Analytics, Clinical Informatics and Business Change)
 - Primary Care Strategy
 - Gender Pay Report
- 4.2 In addition, the following item has been added to the forward workplan and is scheduled to be presented to the January 2024 meeting:
- DHCW Follow-up Response to Welsh Parliament Health and Social Care Committee and Public Accounts Public Administration Committee Scrutiny Report

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 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.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
NOTE the report.	

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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	Main					
Additional Items	Executive Lead	Type	Route in & detail	28-Sep-23	30-Nov-23	26-Jan-24	28-Mar-24
Stakeholder Engagement Plan Update	Executive Director of Strategy	Main	Cycle of Business	✓			✓
Equality, Diversity and Inclusion Update	Director of People & Organisational Development	Main	People and Organisational Development	✓			✓
Welsh Government Decarbonisation Return	Executive Director of Finance	Consent	Cycle of Business	✓			
People and Organisational Development Strategy Action Plan Update	Director of People & Organisational Development	Main	Cycle of Business - to inc DHCW Staff Survey outcome	✓			
Communications Strategy	Board Secretary	Main	Cycle of Business	✓			
Information Governance Strategy	Executive Medical Director	Main	Cycle of Business	✓			
DHCW Response to Welsh Parliament Health and Social Care Committee and Public Accounts and Public Adminis	Board Secretary	Consent	August MB Agenda Setting	✓			
COVID-19 Inquiry Update	Board Secretary	Consent	Board Secretary	✓			
Amendments to Standing Orders, Standing Financial Instructions & Scheme of Delegation	Board Secretary	Main	Board Secretary	✓			
Programme Governance and changes to DHCW governance arrangements	Board Secretary	main	Board Secretary	✓			
Eyecare Transition Update	Director of Primary, Community and Mental Health Digital Services		Chief Executive Officer	✓			
Primary Care Strategy	Director of Primary, Community and Mental Health Digital Services	Main	Cycle of Business		✓		
Board Assurance Framework Report	Board Secretary	Main	Cycle of Business		✓		
Cyber Implementation of the 3-Year Plan	Executive Director of Operations	Main	Cycle of Business - PRIVATE		✓		
Corporate Risk Trending Analysis	Board Secretary	Main	Cycle of Business		✓		
Half Year Performance Against Plan	Executive Director of Strategy	Main	Cycle of Business		✓		
Clinical Directorate Strategies (Information Governance, Information and Analytics, Clinical Informatics and Busin	Executive Medical Director	Main	DG&S Agenda setting August - RH		✓		
Gender Pay	Director of People & Organisational Development	Main	Director of People and OD Email request - SJT		✓		
Integrated Medium Term Plan – Approval	Executive Director of Strategy	Main	Cycle of Business			✓	✓
DHCW Long Term Strategy	Executive Director of Strategy	Main	Cycle of Business			✓	
Strategic Workforce Planning Update	Director of People & Organisational Development	Main	Previous Board Action			✓	
End of Year Reporting Approach	Board Secretary	Consent	Cycle of Business			✓	
Board Champion Annual Report	Board Secretary	Consent	Cycle of Business			✓	
Digital Inclusion Update	Chief Executive Officer		Board action to receive 6 monthly updates			✓	
JET Actions	Board Secretary		JET - To be included via IOPR			✓	
DSPP Business Case	Executive Director of Strategy	Main	PDC November			✓	
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				✓
Gender Pay Gap Annual Report	Director of People & Organisational Development	Consent	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				✓
Adoption of Corporate Policies	Board Secretary	Consent	Cycle of Business. As Required				
DHCW Follow-up Response to Welsh Parliament Health and Social Care Committee and PAPAC Scrutiny Report	Board Secretary	Consent	15/11 requested by Head of Corporate Services for noting			✓	
Well-Being of Future Generations Act Objectives	Board Secretary	Consent	15/11 requested by Head of Corporate Services for approval				✓

Tolley Laura
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DIGITAL HEALTH AND CARE WALES

GENDER PAY

Agenda Item	2.6
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Name of Meeting	SHA Board
Date of Meeting	30 November 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	Lenisha Wright, Equality, Diversity, Inclusion and Wellbeing Specialist
Presented By	Sarah-Jane Taylor, Director of People and Organisational Development

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to
APPROVE the contents of the gender pay gap report.	

Tolley Laura
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Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
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CORPORATE RISK (ref if appropriate)	Not applicable
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<u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A More Equal Wales
If more than one standard applies, please list below: A Resilient Wales A Wales of cohesive Communities A Healthier Wales	

<u>DHCW QUALITY STANDARDS</u>	BS 76000:2015
If more than one standard applies, please list below: ISO 30415	

<u>DUTY OF QUALITY ENABLER</u>	Culture
<u>DOMAIN OF QUALITY</u>	Person Centred
If more than one enabler / domain applies, please list below: <ul style="list-style-type: none"> • Workforce • Leadership 	

<u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Date of submission: Not applicable
No, (detail included below as to reasoning)	Outcome: N/A
Statement: As this is not a policy, scheme or project, an EIA is not required	

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 As part of the Equality Act 2010 requirement.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Financial implications are expected with the implementation of the NHS Incremental Credit Application policy.
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.

Section 2:

SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below Closing pay gaps has positive impact on the wider community.
RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Sarah Brooks	19 October 2023	Approved
Shikala Mansfield	20 October 2023	Approved
Sarah-Jane Taylor	24 October 2023	Approved
Weekly Executive Directors	25 October 2023	Approved
Management Board	16 November 2023	Noted
SHA Board	30 November 2023	

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
UK	United Kingdom	ESR	Electronic Staff Record
SEP	Strategic Equality Plan	EIA	Equality Impact Assessment
NHS	National Health Service		

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3 SITUATION/BACKGROUND

3.1 Digital Health and Care Wales (DHCW) was established on 1st April 2021 as a Special Health Authority within NHS Wales and leads in the digital transformation of health and care. Alongside NHS health boards and trusts, DHCW leads on large-scale developments that make a significant difference to the people of Wales as well as health and care professionals in improving the way that data is collected, shared and used. As of 31st March 2023, DHCW employs 1133 staff which was the data used in the compilation of this report.

3.2 Why Gender Pay Gap reporting is important:

Gender pay gap reporting is a valuable tool for DHCW to assess levels of equality in the workplace. The analysis provides valuable information and data in respect of female and male members of the workforce on an annual basis.

3.3 Our obligation under Equality Act 2010 (Gender Pay Gap Information) Regulations 2017

The Equality Act 2010 (Gender Pay Gap Information) Regulation 2017 came into force on 6th April 2017, requiring employers with more than 250 employees to publish statutory calculations showing the pay gap between their female and male employees. Reporting must be undertaken annually to include information up to 31st March of each year.

The Equality and Human Rights Commission sets out that men and women in the same employment performing equal work must receive equal pay, unless any difference in pay is justified.

For the purpose of this report, the data used is derived from the Electronic Staff Records (ESR) and is based on gender identification provided by each employee.

3.4 Definitions:

Gender pay gap: The Human Rights Commission defines gender pay gap as the measure of the difference between female and male average earnings across an organisation who carry out the same or similar work. It is unlawful to pay employees unequally because of their gender.

Equal pay: Equal pay means that women and men in the same employment performing equal work must receive equal pay, as set out in the Equality Act.

Who counts as an employee for gender pay gap reporting: DHCW used the definition in the Equality Act 2010 to determine who counts as an employee to include employees holding contracts of employment with the organisation. This includes all staff on permanent, secondment and fixed term contracts, employed either full time or part-time. Employees on parental leave or sick leave on full pay are included. Contract or agency workers form part of the headcount of the agency that provides them, and they are therefore not included in DHCW reporting.

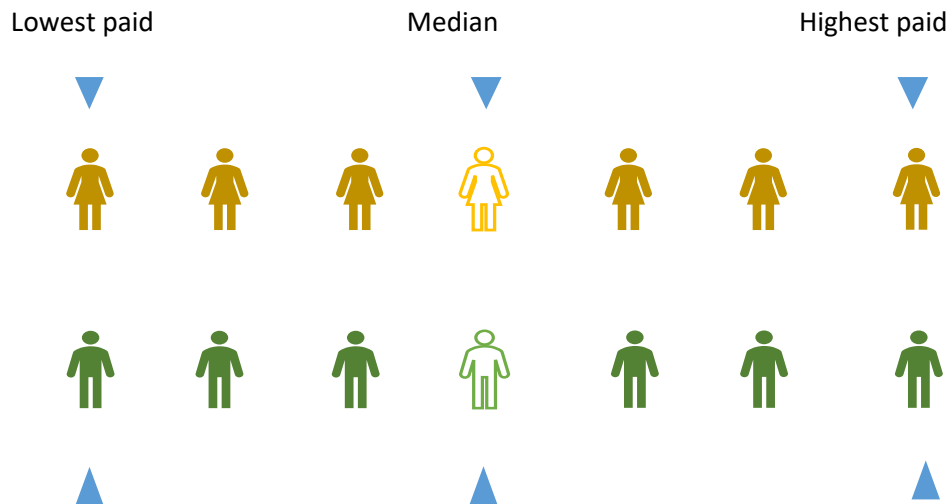
Female and male: Regulations do not define the terms 'female' and 'male' and the requirement to report gender pay gaps should not result in employees being singled out and questioned about their gender. The data used in this report comprises information provided by the Electronic Staff Record (ESR) and is based on gender identification provided by each employee.

3.4 Distinguishing between median and mean

Median

The median is the pay figure that falls in the middle of a range, when salaries or pay figures are lined up from lowest to highest, as represented in figure 1. The median gap calculation is based on the difference between the middle of the range of pay for male staff and the middle of the range of pay for female staff.

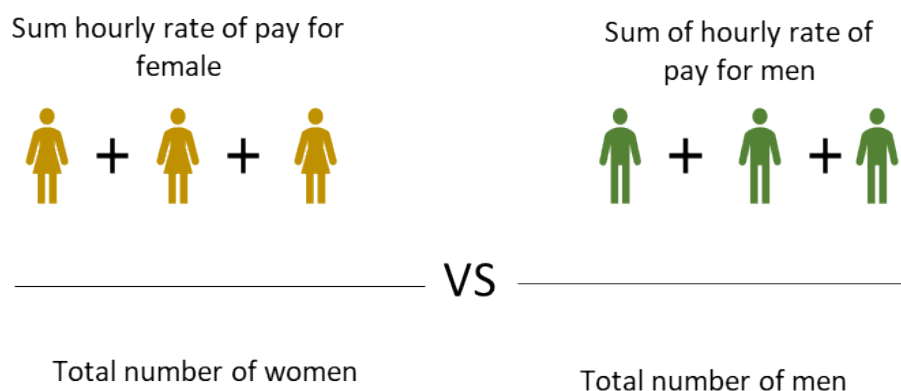
Figure 1: Median Calculation



Mean

The mean is calculated by adding up the hourly pay for female and male staff and dividing the figure by the number of employees as presented in figure 2. The mean gender pay gap calculation is based on the difference between the mean pay for male staff and mean pay for female staff.

Figure 2: Mean Calculation



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4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Methodology and data collection

All figures are based on data taken from the NHS ESR payroll system as at 31st March 2023.

4.2 DHCW Gender Breakdown

The total headcount at DHCW is 1133 for the period ending 31st March 2023. Figure 3 shows the percentage of female (42%) and male (58%) staff in the organisation.

Figure 3: Percentage Male and Female

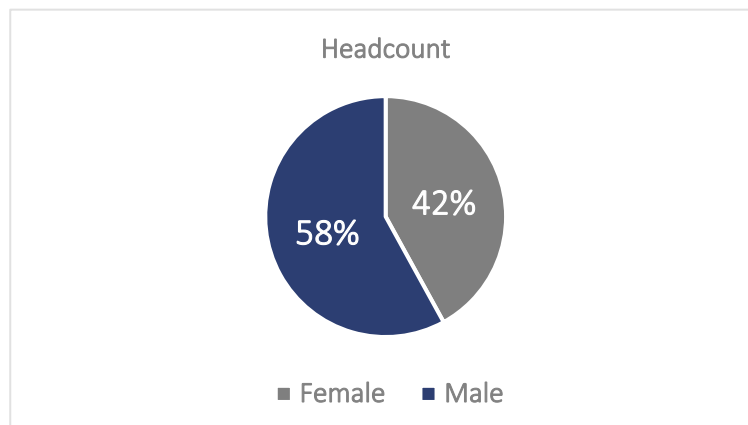


Table 1 shows the breakdown of female and male staff for 31st March 2023.

Table 1: Females and Males for the year ending March 2023

Gender	March 2023	
	Headcount	Full Time Equivalent (FTE)
Female	471 (42%)	448 (41%)
Male	662 (58%)	642 (59%)
Total	1133	1090

4.3 Breakdown by Pay Banding

As represented in Table 2 below, there are 13 staff who make up Executives and the Board, 6 (46%) females and 7 (54%) males. The chair, chief executive, executive directors and independent members make up executives and the board. It was reported by BBC News (2022) that nearly 40% of the board positions in the UK's biggest companies are now held by women. DHCW by comparison have higher female representation with 46% women in the executive and board category.²

The information in the table also compares the breakdown of females and males for the period ending 31st March 2022. Overall, the number of women in post has increased across all banding between the periods ending March 2022 and 2023.

Table 2: Breakdown by Salary Banding

Band	Female		Male	
	2022	2023	2022	2023
Executives and Board	4	6	6	7
Salaried GP	1	2	0	1
Band 9	2	4	4	5
Band 8d	5	6	5	7
Band 8c	9	11	20	23
Band 8b	16	22	38	48
Band 8a	39	51	72	95
Band 7	72	93	118	128
Band 6	105	117	151	160
Band 5	88	98	120	121
Band 4	40	50	48	62
Band 3	9	11	5	5

Breakdown by Contract Type

The Trade Union Congress (2022) reported that part time work is by far the most common form of flexible working arrangement, which is one of the reasons DHCW supports requests for part time working. ³The percentage of females working part time is 5.47%, which is a slight decrease from 5.8% (0.33%) reported at the end of the previous year. There has been an increase in males working part time from 1.9% for the year ending March 2022 to 3.35% at the end of March 2023.

Table 3: Distribution of Females and Males by Contract Type (Headcount)

Contract Type	31 st March 2023	
	Female	Male
Overall Headcount	42%	58.0%
Full time	36%	55%
Part time	6%	3%

²<https://www.bbc.co.uk/news/business-60430198>

³tuc.org.uk

Tolley, Laura
23/11/2023 10:39:08

4.4 Breakdown of Pay by Median and Mean and Quartile

Table 4 provides a breakdown of the hourly pay for females and males, the actual pay difference, and percentage median and mean pay gap percentages for 2023.

Table 4: Median and Mean Hourly Rate (£)

	Female	Male	Actual pay difference	Percentage pay gap
Median 31 st March 2023	£18.24	£20.81	£2.57	13.16%
Mean 31 st March 2023	£20.62	£21.83	£1.21	5.70%

There has been a slight increase in the median percentage pay gap by 0.82% and mean pay gap by 0.42% when compared with the previous year (March 2022). This difference is due to higher number of females joining the organisation at the entry salary band.

4.5 Closing the Pay Gap at DHCW

DHCW's Strategic Equality Plan ([SEP](#)) includes its commitment as an Employer of Choice, ensuring equal opportunities for all and recognises that there are factors outside of DHCW which impact pay. A clear commitment is evident in the actions outlined in our SEP, to address or minimise the impact of pay gaps where possible and within the parameters set by the pay system for the NHS.

We are confident that we will advance equality for all, including women through our People and Organisational Development Strategy [POD Strategy](#) which is built around our values for inclusion and fairness.

We want to continue to be an employer of choice, known for a culture of openness and transparency, of compassionate leadership and one that is a learning organisation which welcomes diverse ideas and feedback and invests in learning, development, talent and wider engagement.

Tolley, Laura
23/11/2023 10:39:08

Below is a list of current and future initiatives to address the gender pay gap and support gender equality for women in the organisation.

- We will collate and review equality data extracted from ESR to identify where gaps exist and ensure target driven interventions to increase participation in underrepresented groups.
- We will continue to identify and monitor progress on the delivery of actions derived from data analysis and pay gap reporting.
- We are committed to reviewing our recruitment equality data including the monitoring of female and male applications for jobs and part time workers and will explore gender data across pay bands.
- We will explore gender data across pay bands and directorates to better understand gaps for further improvements.
- We will improve our Talent Pipeline with the launch of our Talent Cohort which aims to develop and accelerate career pathways for our people. Through monitoring of the applications for the Cohort, we will assess where there may be gaps and identify interventions to increase participation for underrepresented groups.
- We will continue to raise awareness through campaigns, workshops and networks to showcase and celebrate the impact of women in the workplace as well as signposting resources and learning opportunities.

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no key risks/escalation to Board/Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the contents of the gender pay gap report.	

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

AMENDMENT TO STANDING ORDERS - PROGRAMMES DELIVERY COMMITTEE TERMS OF REFERENCE

Agenda Item	2.7
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Name of Meeting	SHA Board
Date of Meeting	30 November 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 Approval
Recommendation	SHA Board is being asked to
APPROVE the Amendment to Standing Orders - Programmes Delivery Committee Terms of Reference.	

Tolley, Laura
23/11/2023 10:39:08

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

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

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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.

Section 2:

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

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Chris Darling, Board Secretary	August 2023	Approved
Exec Team	September 2023	Discussed
Strategy SLT	September 2023	Discussed
Chris Darling, Board Secretary	September 2023	Approved
Management Board	September 2023	Endorsed
SHA Board	September 2023	Noted
Audit & Assurance Committee	October 2023	Noted
Programmes Delivery Committee	November 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SO's	Standing Orders	SFI's	Standing Financial Instructions
WG	Welsh Government		

Tolley, Laura
23/11/2023 10:39:08

3 SITUATION/BACKGROUND

- 3.1 DHCW commissioned an independent review into Programme Governance, supported by Welsh Government, which has been carried out by Mr. Steve Combe MBE, an independent governance advisor, with significant experience of NHS governance. The review commenced on the 7 November 2022. The report was finalised in April 2023 and shared by the DHCW Chair with the Minister for Health and Social Care. In addition, the DHCW Chief Executive shared the report with the Chief Executive for NHS Wales / Director General for the Health and Social Services Group.
- 3.2 The implications from the report were considered via:
- DHCW Board Development Day on the 27 April 2023
 - Consideration at the DHCW Audit and Assurance Committee on the 3 July 2023
 - Liaison with Welsh Government via the DHCW Chief Executive.
- 3.3 The main recommendation from the report was to simplify governance arrangements to include streamlining lines of accountability, ensure greater clarity on roles and responsibility, allowing DHCW hosted programmes to operate in an open and transparent manner.
- 3.4 The DHCW Chair, together with the CEO, have agreed to establish a sub-committee of the DHCW Board, the Programmes Delivery Committee, to provide assurance and scrutiny on delivery of major DHCW hosted programmes in an open and transparent manner. This proposal was approved by the SHA Board in September 2023.
- 3.5 Due to the new Programme Governance arrangements and to avoid duplication, the Digital Governance and Safety Committee terms of reference have been updated to remove the below reference:

The Committee will, in respect of its provision of advice and assurance:

Assure the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to discharge its responsibilities, with specific reference to;

- *Major national digital programmes and projects*

This was approved at the SHA Board meeting in September 2023.

Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1

The [Programmes Delivery Committee Terms of Reference](#) have been drafted in collaboration with key leads within DHCW, they have been reviewed and approved at the first meeting of the Programmes Delivery Committee on 9 November 2023 and following SHA Board approval, these will be added into [DHCW Standing Orders](#).
- 4.2

At the first meeting of the Programmes Delivery Committee, it was agreed a Committee Development Session would be held to discuss in detail the initial scope of the Programmes the Committee oversee, and this would be reported to the next Committee meeting in February 2024. The Programmes within the scope of the Committee will be kept under review on an ongoing basis, and formally considered a minimum of annually by the Committee.

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1

There are no key risks/matters for escalation to Board/Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the Amendment to Standing Orders - Programmes Delivery Committee Terms of Reference.	

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

SHARED LISTENING AND LEARNING PRESENTATION – URGENT AND EMERGENCY CARE DASHBOARD

Agenda Item	3.1
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Rachael Powell, Associate Director of Information, Intelligence & Research
Presented By	Paul Mason, Information Standards Management Lead (DHCW) / Jo Mower, Consultant Emergency Medicine (Cardiff & Value UHB)

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
DISCUSS the Shared Listening and Learning Presentation.	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	Drive better value and outcomes through innovation
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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>DUTY OF QUALITY ENABLER</u>	Information
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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	Yes, please see detail below This work supports the quality and safety agenda by providing necessary data and information to support ongoing decision making and service improvements across Wales.
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 There on ongoing discussions about the ongoing resource implications to sufficiently develop and support this work going forward.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below There on ongoing discussions about the ongoing resource implications to sufficiently develop and support this work going forward, including whether this works needs to be supported 24/7.

Section 2: any key available in this section (4/4) use as appropriate necessary.
Section 2:

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.

2 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	November 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
USC	Unscheduled Care	UEC	Urgent and Emergency Care

3 SITUATION/BACKGROUND

3.1	Information relating to Unscheduled Care (USC) across Wales has been an issue with regards to access to a single source of timely validated data to facilitate understanding of system wide USC pressures. The NHS Executive and 6 Goals Programme for Urgent and Emergency Care (UEC) therefore commissioned DHCW to develop a new dashboard, addressing these issues and improving the quality, availability, and presentation of this data.
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Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 The Board are asked to consider of the demands on unscheduled care services across Wales.
- 4.2 The Board are asked to consider if services could be improved by addressing some of the key issues relating to the quality and availability of USC data.

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 Improving the quality and availability of USC data through the UEC dashboard will lead to a better understanding of patient flow and management of demand across the system. This is important to operational teams working and operating within services but also for Welsh Government Policy Leads and NHS Executive colleagues to drive important system changes.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
DISCUSS the Shared Listening and Learning Presentation.	

Tolley, Laura
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GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Urgent and Emergency Care Operational Dashboard

Paul Mason – Information Standards
Management Lead

Tolley Laura
23/11/2023 10:39:08

Set the scene

- Crowding
- Value-based healthcare
- Unintended consequences

Tolley Laura
23/11/2023 10:39:08

Background

- Current Unscheduled Care (USC) dashboard doesn't give a full picture
- USC dashboards were built on old technology
- Data was spread across multiple dashboards and/or spreadsheets with no central location to view the data
- Quality of the data was poor
- Welsh Government were unable to access current Dashboards
- The NHS Executive and 6 Goals Programme for Urgent and Emergency Care (UEC) commissioned DHCW to develop a new UEC Dashboard

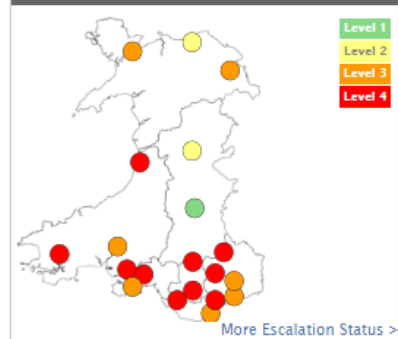
Tolley Laura
23/11/2023 10:39:08



Alerts and Warnings - Thursday, 9 November 2023 at 16:08

All Wales:
Daily Conference Calls take place at 11.00am 7 days a week. These are chaired by the Operational Delivery Unit (ODU). The ODU can be contacted at AMB_ODU@wales.nhs.uk
Note: All Wales data may not include all hospitals due to local compliance and whilst most data is an accurate reflection of activity, there are some new information feeds that should be treated with care.

Escalation Status Levels



Primary Care

NHS Direct Wales

Calls to 0845 ?
Calls to 0845 referred to 999 ?
Calls to 0845 referred to A&E ?

Consultations

In Hours The proxy measure has been withdrawn for technical reasons. We are currently developing our In Hours measure to better reflect actual activity.
Out of Hours (Total Count) ?

Ambulance

Cyfrinachol GIG - NHS Confidential

Current Patient Flow

999 Calls (R.A.G.)	HCP Calls Waiting	In Progress Prehosp	Patients At Hosp < 1 hr	Patients At Hosp > 1 hr
1, 48, 12	2			

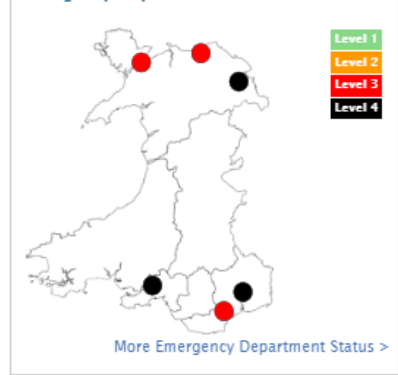
Hospitals with Delays over 1 hour

LHB	Hospital	Hosp < 1hr	Hosp > 1hr
HD	Bronglais	0	2
BC	Glan Clwyd	2	2

A&E

Currently in A&E	841
Currently in A&E (aged 85 and over)	115
In A&E at 9am	606
In A&E at 9am (aged 85 and over)	94
A&E Attendances in last 24 hours to 9am	2,677
A&E Attendances in last 24 hours to 9am (aged 85 and over)	169

Emergency Department Status Levels



In Hospital

Bed Occupancy More Bed Data >



Admissions

Elective	8
Emergency	144
Medical	123
Surgical	21
Total	152

Beds

Open and Unoccupied	2
Surge Open	9
Total Closed	67
Outliers	18
Repatriations	483 24

Post Treatment

Medically Fit	179
Delayed Transfers of Care (DTOC)	1,448
DTOC Breakdown	
Discharges	194

Critical Care Beds More Critical Care Data >

	Available	Occupied	Booked	Closed	DTOC > 4 Hours	DTOC > 24 Hours
Total	129	140	42	37	5	15

Tolley Laura
23/11/2023 10:39:08

The New UEC Dashboard features

- Escalation Levels all in one place:
 - General Medical Services
 - 111
 - GP Out of Hours
 - 999
 - Emergency Departments (ED)
 - Hospitals
 - Critical Care
- Activity Data
 - General Medical Services (Appointments, Patients Seen and DNA's)
 - 111 (Calls offered and Abandonment rates)
 - 999 (Real-time activity data, call demand, ambulance on route, ambulances outside ED's and Predicted demand)
 - ED (Real-time patients in the Department and historical demand)

Tolley Laura
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Demonstration of the dashboard features

Tolley Laura
23/11/2023 10:39:08

Why is this important and who is it for

- Better understanding of patient flow
- Management of demand
- Operational teams in NHS Wales
- NHS Executive
- Welsh Government Policy

Tolley Laura
23/11/2023 10:39:08

What we've achieved & Next steps

- Moved to a more sustainable platform
- Clear picture of the pressures being felt across all areas of UEC
- Ability to access from any device
- Access for Welsh Government
- Central data
- Continue to build on the successes of the platform and bring in more data feeds
- Move from the current methods of sharing some data via spreadsheets
- Build in predictive analytics across the areas
- Ongoing maintenance and support

Tolley, Laura
23/11/2023 10:39:08

Questions

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES CHAIR AND VICE CHAIR REPORT

Agenda Item	4.1
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Name of Meeting	SHA Board
Date of Meeting	30 November 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 & Ruth Glazzard, Vice Chair

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to RECEIVE and DISCUSS the report.

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>	ISO 27001
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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.

Section 2: any key available in this section (4/4) use as appropriate where necessary.
Section 2:

RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below

2 APPROVAL / SCRUTINY ROUTE

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

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
GP	General Practice	AHPs	Allied Health Professionals
WG	Welsh Government		

3 SITUATION/BACKGROUND

3.1	At each Public Board meeting, the Chair, and Vice Chair, presents 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.
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Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

Chair:

4.1 Independent Members Six Monthly and Annual Reviews

Since the last Board meeting I have completed all Independent Members six monthly and/or annual reviews, considering half year and full year progress against objectives, as well as reflections on progress and challenges faced. I am grateful for the engagement and discussions held, including feedback on future DHCW governance changes and implications.

4.2 Ministerial Meeting with Chair and Chief Executive Officer 4 October 2023

Myself and Helen Thomas, along with other NHS Wales Chair and Chief Executives had our quarterly Chair and Chief Executive Ministerial meeting on the 4 October. The financial pressures and plans to address these during 2023/24 was discussed along with projections and the need for a balanced position across NHS Wales in 2024/25. The importance of progressing Digital Cellular Pathology was also raised during the meeting.

4.3 Audit Wales Director Engagement Meeting 5 October 2023

On the 5 October I had my regular meeting with our Audit Wales Engagement Director. We discussed a number of areas including the proposed additional savings made by DHCW during 2023/24 and the approach to financial savings across NHS Wales. We also discussed the changes in programme governance arrangements being introduced.

4.4 Chairs Peer Group 10 October 2023

Since the last Board meeting, I attended the Chair Peer Group meeting on the 10 October. Key areas discussed have included national commissioning, workforce plans and staff retention.

4.5 Ministerial Visit – Ty Glan yr Afon 12 October 2023

I was delighted to host the Minister for Health and Social Services at our headquarters in Cardiff on 12 October 2023. I, along with members from the DHCW Executive Team and the Welsh Government Chief Digital Officer (Health and Care) discussed with the Minister the impact digital has on the quality and safety of the care provided to patients, as well as demonstrating DHCW's existing services and what is available to the health and care system. In addition, we discussed the need to continuously improve our products and services, ensuring users are at the centre of all our developments, and the importance of a sustainable funding model to facilitate this continuous improvement approach to digital product development. Finally, the Minister attended the Cyber and Resilience Operational Control Room and heard about the ongoing threats to NHS Wales and the work done to prepare for and manage the ongoing cyber threat.

4.6 NHS Wales Confederation Chairs Meeting 30 October 2023 and Welsh Confederation Management Committee 1 November 2023

The Chair of the NHS Wales Confederation Policy Sub-Group will be changing from Jan Williams, Chair of Public Health Wales to Kirsty Williams, Vice Chair of Powys Teaching Health Board. In addition, the Policy Sub-Group and Confederation Management Committee Terms of Reference have been updated.

4.7 Social Care Wales CEO & Chair meeting 1 November 2023

Myself and Helen Thomas met with the Chair and Chief Executive of Social Care Wales for our regular catch up on the 1 November. We discussed a number of areas including the impact of the

Tolby Laura
23/11/2023 10:39:08

current financial pressures, the national care service, and career pathways for care workers.

4.8 Programme Governance Arrangements Update

I am pleased to report progress in taking forward the changes associated with the new programme governance arrangements in DHCW since the last Board meeting. The Portfolio Oversight Management Board chaired by the DHCW CEO met in October and November, the [Programmes Delivery Committee](#) has had its first meeting on 9 November. There are a number of actions Welsh Government are taking forward working closely with DHCW to ensure implementation of the changes, these include:

- Confirming arrangements for transitioning from the SRO to Programme Chair
- Confirming the timeline for transitioning to the new arrangements, but WG have confirmed all programmes will transfer to the new arrangements by 31 March 2024
- Define the role of Programme Chair, Digital Policy Owner, Health Policy Owner

4.9 DHCW Senedd Roundtable Discussion 21 November 2023

On the 21 November, DHCW working in partnership with the Bevan Foundation hosted a round table discussion with Members of the Senedd (MS), DHCW and a number of public and third sector partners and stakeholders for a discussion on 'using digital and data to transform health and care in Wales'. It was a pleasure to host the event and see and hear the different views from politicians and partners.

4.10 Accountability Ministerial Task and Finish Advisory Group

On the 8 November 2023 the Minister updated on the Accountability Ministerial Task and Finish Group to look at the governance arrangements within NHS Wales, more information can be seen here: [Written Statement: Update on Accountability Ministerial Task and Finish Advisory Group \(8 November 2023\) | GOV.WALES](#)

4.11 Board Briefing – UMass Memorial Health / DHCW Board

On the 9 November Independent Member, Rowan Gardner facilitated an international Board learning session with Massachusetts based UMass Memorial Health. The session centred on how health and care can be transformed by digital with a focus on providing care in the community. I would like to express my thanks for the time UMass Memorial Health leadership team gave to share their experiences and hope we are able to follow up with further sessions in the future.

Vice Chair

4.12 Vice Chairs Ministerial Meeting 11 October 2023

The meeting was attended by the Minister for Health and Social Services, Deputy Minister for Social Services, Deputy Minister for Mental Health and Wellbeing and NHS Wales Chief Executive / Director General for Health and Social Services. Discussions included the current financial challenges, GP contract reform, Mental Health Services, Community Care capacity, and the additional funding for Allied Health Professionals, which allowed the opportunity to highlight the DHCW discovery work taking place with AHPs.

4.13 Vice Chair Peer Group 25 October 2023 and 15 November

Two Vice Chair Peer Group meetings have taken place since the last DHCW Board meeting. A range of topics have been discussed with a focus on the actions and requirements to deliver the ambitions of a Healthier Wales. Discussions and updates included: the Strategic Programme for Primary Care, the NHS Wales App and the work of the Digital Services for Patients and the Public Programme, Mental Health Services and Dentistry.

Tolley, Laura
23/11/2023 10:39:08

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- | | |
|-----|---|
| 5.1 | The new DHCW Programmes Delivery Committee has been established, but further changes are required to fully implement the programme governance changes agreed. |
|-----|---|

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
RECEIVE and DISCUSS the report.	

Tolley, Laura
23/11/2023 10:39:08

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	30 November 2023

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

Executive Sponsor	Helen Thomas, Chief Executive Officer
Prepared By	Laura Tolley, Head of Corporate Governance
Presented By	Helen Thomas, Chief Executive Officer

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
RECEIVE and DISCUSS the report.	

Tolley Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>	ISO 27001
If more than one standard applies, please list below: BS 10008:2014	

<u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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.

Section 2:

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

2 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Chris Darling, Board Secretary	November 2023	Approved
Helen Thomas, CEO	November	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	CDPS	Centre for Digital Public Services

Tolley, Laura
23/11/2023 10:39:08

3 SITUATION/BACKGROUND

- 3.1 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.
- 3.2 The purpose of this report is to keep the Board up to date with key issues affecting the organisation since the last meeting.

Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Chief Executive Management Team Meetings

The NHS Wales Chief Executive Management Team meetings were held on 24 October and 28 November where we heard views on delivering effective, safe and sustainable specialised services in Partnership and were joined by Wendy Gunney, South Wales Police Assistant Chief Constable on the importance of Right Care, Right Person. We also discussed progress on the NHS Executive and Chief Executive system roles with NHS Wales Deputy Chief Executive.

4.2 Executive Team Away Days

I was pleased to be joined by members of the executive team for two away days at the beginning of October. We held excellent discussions and agreed a number of actions in relation to a number of topics such as Executive portfolios, major incident review feedback, hybrid working and DHCW priorities for the 2024/27 planning cycle.

4.3 Directorate Reviews

Throughout October we held our Directorate Reviews, these were attended by members of the executive team and officer members across DHCW, and they provided a good opportunity to discuss performance, lessons learnt, challenges and also gain an understanding of the immediate focus for the coming months. I would like to give my thanks to all teams involved in preparing for and presenting at the reviews which were very informative.

4.4 NHS Executive Leadership Session

It was great to meet with colleagues from the NHS Executive in person in October where we discussed changes in governance arrangements and also priorities and collaborative working. We are looking forward to working closely with the NHS Executive going forward to ensure strategic alignment of digital activities.

4.5 Audit & Assurance Committee Meeting

On 17 October, I joined to observe the Audit & Assurance Committee meeting. It was pleasing to see the work of the Committee; I was particularly pleased to hear the Board Assurance Framework Deep Dive discussion around Digital Inclusion and the work that DHCW are doing in this area. My thanks to Committee Chair, Marian Wyn Jones for allowing me to observe.

4.6 Team Wales Event

On the 18 October I, along with the Chair and members of the Executive team attended Team Wales – leaders coming together from across NHS Wales. It was a great opportunity to see colleagues from across NHS Wales and discuss collectively areas such as Quality, Safety & Experience, Supporting the NHS Workforce, Financial Recovery and Value in addition to focused group discussions on Population Health, Wellbeing and Prevention and NHS in 10+ years.

4.7 Ministerial Visit to Neath Port Talbot

I had the pleasure of meeting the Minister for Health and Social Services twice during October, firstly at our Cardiff offices and the following week at Neath Port Talbot Hospital where the clinical and digital teams showcased the fantastic digital solutions that have been implemented and how they are making a positive difference to NHS Wales and to the delivery of patient care.

4.8 NHS Wales Leadership Board

The NHS Wales Leadership Board have met twice since the last Board where we were joined by Efa Gruffudd Jones, Welsh Language Commissioner to talk about Welsh Language priorities, discussed the Bevan Commission public engagement work and performance & finance updates.

4.9 National Portfolio Leadership Board

Welsh Government's inaugural NPLB took place in October, bringing together senior leaders from Welsh Government and NHS Wales to focus on digital and data priorities. Further work is underway to develop the supporting governance structures to enable the Board to make informed priority investment decisions.

4.10 Data Centre 2 Transition

The DHCW teams have been working hard over the past two months to prepare for the Data Centre 2 transition. Our aim is to transition the infrastructure currently held in the existing DHCW data centre hall to a replacement data centre hall, planned to take place between January – March 2024. The team's recent focus has been on the enabling network activities which are continuing.

4.11 Senior Leadership Day

The Board will be aware DHCW have commissioned the Kings Fund to deliver our Senior Leadership Programme. The first of these events was held at the beginning of November. It was fantastic to see so many of our leaders in person at Ty Glan Yr Afon, Cardiff and I would like to thank all those who joined for their engagement, enthusiasm, collaboration and input into the programme, which will continue over the next 8 months.

4.12 Autumn Planning and Learning Event

I was delighted to open the DHCW hosted Autumn Planning and Learning event, attended by over 100 people from across the NHS Wales planning community on 13 November. The NHS Wales Chief Executive and Minister were also in attendance for a panel session. The day was a success and my thanks to all those involved for delivering the event.

4.13 Joint Executive Team Meeting

A meeting with the Joint Executive Team in Welsh Government took place on 23 November. The discussions covered the topics set out below:

- Integrated Medium Term Plan Q1 & Q2 Performance
- Governance & Risk Management
- Workforce & Recruitment Challenges
- Planning & Financial Decisions under consideration
- Winter Pressures

The DHCW Executive team in attendance shared our mid-year achievements, gave an overview of the current position, the key challenges and risks for the organisation and provided a forward look with regard to the organisational financial plans for the coming months.

4.14 Centre for Digital Public Services (CDPS) Partnership Agreement

An extension to increase the value of DHCW's partnership agreement with CDPS, potentially up to £1m, was approved at the DHCW Management Board in October 2023. This is an important strategic partnership agreement which has the aim to improve our focus on public engagement and user needs building on the good work to date in the Digital Medicines and Maternity programmes. The partnership agreement demonstrates the close working between DHCW and the CDPS.

4.15 Health Board / Special Health Authority Engagement Sessions

The DHCW Executive team held an engagement session with the Welsh Ambulance Trust Service in October where we discussed topics including a Directory of Services and our collective challenges across NHS Wales and how digital can best support this at local, regional and national levels.

Tolley Laura
23/11/2023 10:39 AM

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no key risks/matters for escalation to Board/Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
RECEIVE and DISCUSS the report.	

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

DHCW PRIMARY CARE STRATEGY

Agenda Item	5.1
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Name of Meeting	SHA Board
Date of Meeting	30 November 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	Sam Hall/Martin Dickinson/Caroline Busby
Presented By	Sam Hall, Director of Primary, Community and Mental Health Digital Services

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to
<p>APPROVE the contents of the DHCW Primary Care Strategy 2024-27.</p>	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>DUTY OF QUALITY ENABLER</u>	N/A
<u>DOMAIN OF QUALITY</u>	N/A
If more than one enabler / domain 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: Strategy document	

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 A financial plan will be required.
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Staffing plan will be required.
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
RESEARCH AND INNOVATION	Yes, please see detail below

Section 2: any key available in this section (4/4) use as appropriate, necessary.

IMPLICATION/IMPACT	Subject to delivery of Priority 2: Development of a Health Informatics research and reporting capability, enabling access to information and analysis to inform decision making.
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2 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Board Development	September 2023	Discussed
Management Board	October 2023	Endorsed

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
PCMH	Primary Community and Mental Health		

3 SITUATION/BACKGROUND

3.1	Following the establishment of the new Primary, Community and Mental Health Directorate, a strategy has been developed focusing, initially, on the Primary Care Services Division. The aim of the strategy is to provide the organisational platform from which the Primary Care Services Division can deliver digital products/services with improved value and benefits.
3.2	Following consultation with the DHCW Management Board and presentation at the SHA Board Development Day, the strategy has been socialised with Welsh Government, Health Boards and the Strategic Programme for Primary Care representatives as well as being shared with clinical and professional bodies. Feedback has been incorporated into the version presented to the Board.

Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 4.1 To inform and develop the [Primary Care Strategy](#), 41 stakeholder interviews were completed, speaking to 54 different stakeholders. These included representative voices from Welsh Government, professional bodies, clinicians from a range of disciplines, internal project leads, patient groups, operational management, and human resources – as well it's subsequent socialisation (see 3.2).
- 4.2 In order to develop and deliver digital products and services to meet the everchanging demands and needs of the people of Wales, Primary Care digital services need to be transitioned into a product-based delivery model for us to move with the digital healthcare current and future market. As such, this strategy will help inform the development of our new Directorate structure and target operating model (TOM), with a shift in focus from project/programme delivery of a task, to value through outcomes. Value is not in 'what' we deliver, but in 'how' it is used and the impact it has on health and care in Wales.
- 4.3 Value generation is a strong thread through the strategy; a strategy supporting population health and care improvement in Primary, Community and Mental Health in Wales through development of expert knowledge, information and resources that enables user centered design, interoperability, robust connectivity, and security.
- 4.4 The strategy sets out Four Principles (Delivery Quality, Inform Policy, Build Value and Guide Standardise), along with Eight Priorities:
- Creation of a full, dedicated Product, Project, and Programme transition team (PPPT), working with end users and policy leads to ensure projects and programmes bring value.
 - Development of a Health Informatics research and reporting capability, enabling access to information and analysis to inform decision making.
 - Development of a Digital Futures team to help shape technology choices, seeking out good practice and innovation, and assessing with end users and policy leads how and when to develop or adopt services within Primary Care.
 - Extension of system development capability to encourage new entrants in the supplier market and enable more efficient delivery of requirements via alignment with existing UK standards and products.
 - Focus more development activity on building connectivity in-house to reduce dependencies on third party suppliers and deliver new requirements in a timely and cost-effective manner.
 - Development of a standards and capability function to provide confidence to our stakeholders, support supplier integration and data quality.
 - An agreed and mandated process for transition into BAU to support realisation of project/programme benefits in the long term.
 - Attendance at clinical and managerial expert user groups focused on problem solving and with the aim of strengthening our relationship with the primary care community as a strategic partner.
- 4.5 The strategy calls for a structural, operational, and cultural change, affecting ways of working, the role that PCMH plays in the overall Primary Care system, and the way in which a variety of stakeholders will make use of and interact with it.

Tolley, Laura
23/11/2023 10:39:08

4.6 Following formal sign-off of the strategy an action plan for delivering it will be developed consisting of:

- Financial plan
- Staffing plan
- Operational Plan
- Evaluation process and timescale

The four components will turn the vision into a reality, leading to the successful implementation of the strategy.

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no key risks / matters for escalation to Board / Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the contents of the DHCW Primary Care Strategy 2024-27.	

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

CLINICAL DIRECTORATE STRATEGIES REPORT

Agenda Item	5.2
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Rhidian Hurle, Executive Medical Director
Prepared By	Rachael Powell, Associate Director Information, Intelligence & Research Darren Lloyd, Associate Director Information Governance & Patient Safety Stephanie Harris, Associate Director CI Professionals & Business Change
Presented By	Rhidian Hurle, Executive Medical Director

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to
APPROVE the Clinical Directorate Strategies	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	NA
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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	BS 10008
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: All Duty of Quality Enablers apply. All Domain of Quality areas apply.	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: NA
Statement: The documents are strategies from which policy may follow which will be subject to EIA.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below All three strategies have a focus on adoption of a quality approach in the provision of our services. The Information Governance Strategy also includes compliance with the BS10008 quality standard. There is a clinical safety focus of our products outlined within the Clinical Informatics & Business Change Strategy.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below The Information Governance Strategy includes fulfilling legal responsibilities to adhere to GDPR, legal advice regarding WASPI and use of the IG toolkit for partners to assess compliance with minimum legal requirements.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report Financial requirements for the implementation activities for these strategies will be addressed within the current governance processes. Financial risks are managed within the organisations' risk management arrangements.

Section 2:

WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Development of the people and services provided by the Clinical Directorate through these strategies is likely to highlight new skills and capacity requirements. These will be addressed with business plans developed as part of the strategy implementation plans for specific areas e.g., in business plans developed for approval to expand our accredited training course offering.
SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below The Directorate strategies contribute to the cultural value that DHCW brings to Wales in our commitment to promote the Welsh Language through our teams and services. We are also supporting the design of national clinical products to provide our partners with equal opportunity to deliver equitable digital services across Wales.
RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below The Clinical Informatics & Business Change Strategy and Information & Analytics Strategy states intentions to support our DHCW research and innovation strategy. This will increase the participation in research activity.

2 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 Strategic Session (summary overview)	7 September 2023	Endorsed to continue with consultation and presentation to WEDs
Rhidian Hurle, Executive Medical Director / CCIO Wales	25 September 2023	Approved report for presentation to WEDs
Weekly Executive Directors	27 September 2023	Provided endorsement
Management Board	19 October 2023	Provided endorsement
Digital Governance & Safety Committee	2 November 2023	Provided endorsement
SHA Board	30 November 2023	For approval

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
AD	Associate Director	IIR	Information, Intelligence & Research
CCIO	Chief Clinical Information Officer	CIP	Clinical Informatics Professionals
WEDs	Weekly Executive Directors	BC	Business Change
IMTP	Integrated Medium Term Plan	IG	Information Governance
		PS	Patient Safety

3 SITUATION/BACKGROUND

3.1 The DHCW Clinical Directorate has been established with its current structure since November 2022, with a diversity of services that complement each other to add value within our organisation's product operating model. The stakeholders within our directorate services reflect that diversity, therefore we have developed our Clinical Directorate strategy in each of the three elements of our directorate to simplify the processes for engagement, endorsement, and approval. These three strategies align with other directorate's service strategies within DHCW, and our own Research and Innovation Strategy approved by the SHA Board in 2022.

3.2 This paper presents three DHCW Clinical Directorate strategies for 2023-2026:

- [Information & Analytics Strategy – Appendix 1](#)
- [Clinical Informatics & Business Change Strategy – Appendix 2](#)
- [Information Governance Strategy – Appendix 3](#)

Each strategy has been developed with stakeholder engagement during the past six months. This has included significant consultation within the directorate, the wider DHCW organisation and external stakeholders who access Analytics and Information Governance Services.

The stakeholder engagement activities have been recorded locally by the teams and documented in appendices in the previous MS Word document formats for assurance to the level of Weekly Executive Directors endorsement. This overall engagement was also summarised within the SBAR submission to the Digital Governance & Safety (DG&S) Committee for assurance.

Drafts of the strategies, in a publication format, were produced for Management Board and Committee with support from our Graphic Design Team in accordance with our updated branding guidelines in readiness for Committee and SHA Board approval. Final versions of the strategies have been produced for SHA Board approval.

3.3 Amendments/Developments from Management Board and DG&S Committee to SHA Board

Information & Analytics Strategy:

- Change to visual numbering of aims with larger graphics
- Formatting of location for 'Apprenticeships' and 'Rhannu & Dysgu' elements
- Addition of story between aim 2 and aim 3

Clinical Informatics & Business Change Strategy:

- Change to visual numbering of aims with larger graphics
- Removed Appendix 1 – referencing how the strategy fits with other strategies within the organisation as some documents are not approved or in the public domain yet. The appendix has served an internal purpose through to assurance at Committee level.
- Aim 4 – bullet lists reflect aim 4 elements correctly with reference to benefits realisation also.
- Review of language used in reflecting national benefits framework and digital benefits tool
- Added references to our Welsh Language activity in Aim 3 Our Customers (page 11) and in Cultural Value in the Outcome section of the strategy (page 13).

Information Governance Strategy:

- No changes

Tollu Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Our Vision

The new three-year strategies put in place the vision for the services provided by the Clinical Directorate which are to:

- Drive 'Value from Data' through the provision of a national information and analytics service for health and care in Wales, that facilitates service transformation and improves patient outcomes.
- Inspire and empower our partners, to shape and adopt our digital services to enhance patient experience, care, and outcomes. Putting people at the heart of our digital services.
- Leading information governance compliance for health and care in Wales

4.2 Our Aims

Each strategy outlines four aims for the business area:

- Information & Analytics Strategy
 - Aim 1 – Provide a national information and analytics service that embraces innovation.
 - Aim 2 – Focus on the quality, value and user experience of our service and products.
 - Aim 3 – Maximise our offer and value through effective collaboration.
 - Aim 4 – Develop our profession and invest in our people.
- Clinical Informatics & Business Change Strategy
 - Aim 1 – To maximise our support for health & care provision.
 - Aim 2 – To adopt a quality approach with professional standards.
 - Aim 3 – To establish a learning hub to invest in people.
 - Aim 4 – To enable acceleration of digital transformation & realisation of benefits.
- Information Governance Strategy
 - Aim 1 – To assure the Board that DHCW continues to meet its statutory obligations under information rights legislation and to ensure our IG function applies latest policy developments and good practice.
 - Aim 2 - To provide organisations and professionals in Wales with the Information Governance advice, guidance, services, and products they need to ensure health and care data is processed lawfully and appropriately.
 - Aim 3 - To contribute to the development and implementation of policy that builds trust with patients and the public by allowing them to exercise their information rights.
 - Aim 4 - To embed the domains and enablers of the duty of quality within DHCW's IG function.

- 4.3 Our outcomes and evaluation measurements are captured within the strategies, and each will be monitored throughout the strategy implementation plans. Implementation plans will be aligned to the five missions of the IMTP, within the appropriate portfolio and reflected within the Annual Business Plans, to enable monitoring of progress and performance through existing governance structures.

Tolley, Laura
23/11/2023 10:39:08

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 The Welsh Government Digital Strategy for Health and Care, DHCW's Organisational strategy and DHCW's business area strategies are critical to the positioning of our Clinical Directorate Strategies. Delays in the publication of the Digital Strategy for Health & Social Care in Wales has created an impact on the organisational level strategy. However, the business planning within the DHCW IMTP and associated planning cycle, has enabled the collaborative development of sub-strategies within DHCW, avoiding delay in establishing the quality foundations for services already adding value, upon which we will build in coming years, as our organisation matures. The sub-strategies are being used to inform elements within the principles of the DHCW organisation strategy.
- 5.2 It is our intention that these strategic documents will be regularly reviewed, and implementation plans adapted in an agile approach with appropriate governance to respond to changing needs, ensuring continuous learning and improvements are made to deliver quality services which are recognised for the value they add to NHS Wales.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the Clinical Directorate Strategies.	

Section 6: NB this must match the recommendation on page 1

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES STRATEGIC PROCUREMENT REPORT

Agenda Item	5.3
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Julie Francis, Head of Commercial Services
Presented By	Michelle Sell, Chief Commercial Officer

Purpose of the Report	For Approval
Recommendation	SHA Board is being asked to APPROVE the Contract Award.

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>	ISO 9001
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	N/A
<u>DOMAIN OF QUALITY</u>	N/A
If more than one enabler / domain 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

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 the 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 the agreement. Expenditure against the agreement will be managed in accordance with the contract management process.
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.

Tolerance
23/07/2023 10:39:08

Section 2: any key available in this section (4/4) use as appropriate where necessary.
Section 2:

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

2 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	16 Nov 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	HSCC	Health and Social Care Content
NICE	National Institute for Health and Care Excellence	PCR2015	Public Contract Regulations 2015
SFI	Standing Financial Instructions	SHA	Special Health Authority
SO	Standing Orders	VAT	Value Added Tax
WG	Welsh Government		

3 SITUATION/BACKGROUND

3.1	The Commercial Services Team, within the Strategy 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.
3.2	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.

Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Appendix 1 sets out one (1) Contract Award for the approval of the Board.

(i) P21.73 HSCC Licensed e-Journals

Contractors: BMJ Publishing Group Ltd, Elsevier, Mark Allen Healthcare, Springer Nature, Wiley and Wolters Kluwer

Term: 1st January 2024 – 31st December 2024 with no extension options

Value: £1,289,958.68 excluding VAT

Approval Requested: Contract Award

The agreement for which approval is being sought is for the provision of HSCC Licensed e-Journals. This is a replacement contract and forms an integral part of the NHS Wales' e-library for Health service.

The e-Journals are a vital resource within the NHS Wales e-Library for Health that the Authority have been providing for circa 20 years via various contracts, to ensure that healthcare professionals across NHS Wales have access to appropriate academic literature and training materials to support their education and training requirements.

The purpose of this contract is to secure the provision of fifty-four (54) e-Journals (including collections), a total of nine hundred and seventy-nine (979) resources, for a period of one (1) year, to ensure continuity of service. This in turn will allow all staff employed by NHS Wales, including those individually contracted to provide services to NHS Wales patients, and those working directly with Health and Social Care departments, to maintain access to the e-Journals.

This procurement was undertaken via a mini competition under the NICE Electronic and Print Content Framework, Lot 4 for Print and Electronic Journals (NICE FAHEE/2125), utilising the Terms and Conditions of the HSCC Licence Agreement.

Tolley, Laura
23/11/2023 10:39:08

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 **P21.73 HSCC Licensed e-Journals** – Contract Award 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 from the e-Library Board have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome; As assured by the Executive Medical Director.
 - Funding for the agreement comes directly from established budgets within Digital Health and Care Wales as assured by the Executive Director of Finance.
 - The intention to enter into this Agreement has been notified to Welsh Government.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
APPROVE the Contract Award as detailed in Appendix 1.	

Tolley, Laura
23/11/2023 10:39:08

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

Scheme Title	Health and Social Care Content ("HSCC") Licensed e-Journals
Total Contract Value	£1,289,958.68 excluding VAT
Suppliers	<p>The contract will be awarded to six (6) Suppliers:</p> <p>BMJ Publishing Group Ltd - £57,720.00 excluding VAT. Elsevier - £152,453.90 excluding VAT. Mark Allen Healthcare - £78,489.00 excluding VAT. Springer Nature - £392,876.00 excluding VAT. Wiley - £129,765.78 excluding VAT. Wolters Kluwer - £478,654.00 excluding VAT.</p>
Contract Awarded for Use by	Digital Health and Care Wales for All Wales
Terms and Conditions	National Institute for Health and Care Excellence ("NICE") Electronic and Print Content Framework HSCC Licence Agreement
Date Prepared	20 th October 2023
Prepared By	Elisha Arnold, Senior Category Officer
Scheme Sponsor	Rhidian Hurle, Executive Medical Director / Chief Clinical Information Officer Wales

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

1. DESCRIPTION OF GOODS / SERVICES / WORKS

Digital Health and Care Wales ("DHCW") have the responsibility of procuring electronic resources for the NHS Wales e-Library for Health. The e-Library for Health was established circa 20 years ago and provides comprehensive digital access to support the learning and development of all NHS Wales staff in the delivery of care to patients. The e-Library suite consists of evidence-based subscriptions, guidelines, e-Books, databases and e-Journals of which this procurement is a component part. The benefits attributable to this procurement are included in Section 4 below. The procurement was via a mini-competition under the NICE Electronic and Print Content Agreement LOT 1: Health & Social Care Content (HSCC) Licence Agreement. This contract is underpinned by the Terms and Conditions of the Health and Social Care Content ("HSCC") Licence Agreement which is only applicable to providers who own, or are licensed to provide access to, the intellectual property of their resources.

The scope of this agreement is for the provision of fifty-four (54) e-Journals (including collections), a total of nine hundred and seventy-nine (979) resources to ensure continuity of service between the existing contracts and new contract, therefore allowing all NHS Wales staff to maintain access.

The term of the agreement is for a period of twelve (12) months only, in order for the usage of individual e-Journals to be reviewed on an annual basis via a usage to cost ratio to ensure that the Authority is achieving value for money.

A formal contract management process will be implemented and managed via the NHS Wales e-Library Service Management Board and DHCW's Commercial Services Team, to ensure that the contract/s delivers the intended deliverables and benefits during the term of the agreement.

The anticipated maximum contract value is £1,289,958.68 excluding VAT, and governance procedures have been adhered to via the Welsh Government ("WG") Ministerial notification process.

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	1 st January 2024
Expected End Date of Contract	31 st December 2024
Contract Extension Options (E.g., maximum term in months)	There are no options to extend the contract beyond its original term.

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 up our architecture to enable faster, consistent sharing of data with partners and suppliers	<input 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 type="checkbox"/>
Goal 4: Enable users to derive value from data collected from national and local systems through Big Data Analysis	<input checked="" type="checkbox"/>

2.2 INTEGRATED MEDIUM-TERM PLAN

Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
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	<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 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 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 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 type="checkbox"/>	Integration	<input checked="" type="checkbox"/>	Collaboration	<input checked="" type="checkbox"/>	Involvement	<input checked="" type="checkbox"/>
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3. PROCUREMENT ROUTE

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

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

In order to secure an appropriate Supplier for this procurement, a mini competition was undertaken via the NICE Electronic and Print Content Framework, Lot 4 for Print and Electronic Journals (NICE FAHEE/2125).

Welsh Government approval was sought in the form of a Contracting Briefing Paper prior to the publication of the Invitation to Tender (“ITT”) on e-TenderWales due to the anticipated value of the contract exceeding the procurement thresholds outlined in 12.11.1 of DHCW’s Standing Financial Instructions (“SFI’s”). The specific dates for the key stages in the procurement process are set out in Section 3.3 below.

The contract is underpinned by the Terms and Conditions of the NICE Electronic and Print Content Framework HSCC Licence Agreement.

3.3 What has been the approximate timeline for procurement?

Activity	Date
Briefing Paper Issued to Welsh Government	15 th August 2023
Welsh Government Acceptance of Briefing	21 st August 2023
Publication of the ‘Invitation to Tender’	15 th September 2023
Clarification Period Starts	15 th September 2023
Clarification Period Ends	22 nd September 2023
The Authority’s Deadline for the Publication of Responses to Tender Clarification Questions	26 th September 2023
Deadline for Submission of a Tender to the Authority	29 th September 2023
Evaluation Period	2 nd October 2023 – 27 th October 2023
Welsh Government to Provide Formal Acknowledgement of Noting Award	23 rd November 2023
DHCW SHA Board Approval	30 th November 2023
Contract Award and Notification to Suppliers	4 th December 2023
Contract Start	1 st January 2024

4. BENEFITS (Quantifiable / Non-Quantifiable)

4.1 Outline benefits of preferred option

The provision of the HSCC Licensed e-Journals is a vital resource that the Authority have been providing since 2017, to ensure that healthcare professionals across NHS Wales have access to appropriate academic literature and training materials to support their education and training requirements.

There is a recognised need for a standardised approach to be provided to healthcare professionals to access up to date academic e-Journals in order to support their continuous professional development. The strategic intent is that in providing e-Journals to support the educational needs of healthcare professionals, will result in the delivery of the following key business objectives:

- Continuing to empower the NHS Wales Workforce in that it will have continued and improved access to electronic resources.
- Providing the workforce with current and relevant, high quality content e-Journals. This helps to ensure that they are well informed and more competent in evidenced-based decision making to treat patients, and plan and manage services according to consistent and equitable standards.
- Making information and evidence retrieval seamless, access easier and customisable and underpin a change in workforce work practices so as to increase staff satisfaction and efficiency and improve patient care through better use of time.
- Providing an opportunity for access to evidence in order to support the provision of information for patients via health professionals.
- Providing better evidence for clinical governance, research and development, and patient safety, so as to improve the quality and immediacy of service delivery and care for patients.
- Procured e-Journals will be accessible to the following: staff employed by NHS Wales, Welsh Government Library Knowledge and Analytical services staff, Healthcare Inspectorate Wales and Care Inspectorate Wales, the offices of the Chief Health Professionals of the Welsh Government, students, volunteers, retired NHS Wales employees and contractors, and Social Care staff.

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>All staff employed by NHS Wales, including those individually contracted to provide services to NHS Wales patients such as Social Care Workers, and those working directly with Health and Social Care departments such as the Welsh Government Library, would lose access to the majority of their HSCC Licensed e-Journals.</p> <p>The e-Journals are used extensively by dentists, doctors, pharmacists, optometrists and other healthcare professionals to support their education, learning and continuous professional development.</p> <p>Each individual Health Board and Trust would be required to undertake its own separate procurement process in order to gain access to the e-Journals. This could lead to the duplication of work and reduce the economies of scale for each organisation, potentially leading to additional and unforeseen costs to those organisations.</p>	<p>The specification could be shared with the appropriate Procurement Teams in order to reduce the time required to prepare the tender documentation.</p> <p>This approach would not provide the best value for money (as indicated in Section 5.1) and would not meet the required timescales.</p>

6. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contract	Excluding VAT £1,289,958.68	Including VAT £1,547,950.42
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)	Total (exc. VAT)	Total (inc. VAT)
BMJ Publishing Group Ltd	£57,720.00	£57,720.00	£69,264.00
Elsevier	£152,453.90	£152,453.90	£182,944.68
Mark Allen Healthcare	£78,489.00	£78,489.00	£94,186.80
Springer Nature	£392,876.00	£392,876.00	£471,451.20
Wiley	£129,765.78	£129,765.78	£155,718.94
Wolters Kluwer	£478,654.00	£478,654.00	£574,384.80
Overall Total	£1,289,958.68	£1,289,958.68	£1,547,950.42

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:	<div>09/11/2023</div> <div>X Julie Francis</div> <div>Julie Francis Head of Commercial Services Signed by: Julie Francis (JU000244)</div>
Date:	09/11/2023

7.1 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.

Lead Director Name:	Rhidian Hurle
Signature:	<div style="text-align: right;">21/11/2023</div> <div style="border-bottom: 1px solid black; display: flex; align-items: center;"> X  </div> <div style="margin-top: 5px;"> Rhidian Hurle Executive Medical Director / Chief Clinical Infor... Signed by: Wendy Presgrave </div>
Directorate:	Clinical Informatics
Date:	

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:	<div style="text-align: right;">21/11/2023</div> <div style="border-bottom: 1px solid black; display: flex; align-items: center;"> X  </div> <div style="margin-top: 5px;"> Claire Osmundsen-Little Executive Director of Finance & Business Assura... Signed by: Wendy Presgrave </div>
Directorate:	Finance and Business Assurance
Date:	

8. APPROVALS AND ASSURANCE RECEIVED

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

	Date of Meeting	Outcome

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 30th November 2023.

Chair of DHCW Board:	
Signature:	<div>X</div> <div>Chair of DHCW Board</div>
Date:	

Independent Member:	
Signature:	<div>X</div> <div>Independent Member</div>
Date:	

Chief Executive Officer:	Helen Thomas
Signature:	<div>X</div> <div>Helen Thomas Chief Executive Officer</div>
Date:	

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

INTEGRATED MEDIUM TERM PLAN UPDATE

Agenda Item	5.4
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Ruth Chapman, Assistant Director of Planning
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	For Noting
Recommendation	SHA Board is being asked to
<p>NOTE the Welsh Government Accountability Conditions for the IMTP 2023-26 and</p> <p>NOTE the progress developing the IMTP 2024-27.</p>	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>	ISO 9001
If more than one standard applies, please list below:	

<u>DUTY OF QUALITY ENABLER</u>	N/A
<u>DOMAIN OF QUALITY</u>	N/A
If more than one enabler / domain 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: This is not a policy but a planning document.	

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.

Section 2:

<p>RESEARCH AND INNOVATION IMPLICATION/IMPACT</p>	<p>No, there are no specific research and innovation implications relating to the activity outlined within this report.</p>
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2 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	19 Oct 2023	Noted
Management Board	16 Nov 2023	Noted

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	JET	Joint Executive Team

Tolley, Laura
23/11/2023 10:39:08

3 SITUATION/BACKGROUND

- 3.1 This document provides an update on Welsh Government accountability conditions for the current Integrated Medium-Term Plan (IMTP) 2023-26 and the progress made with developing the next IMTP 2024-27.

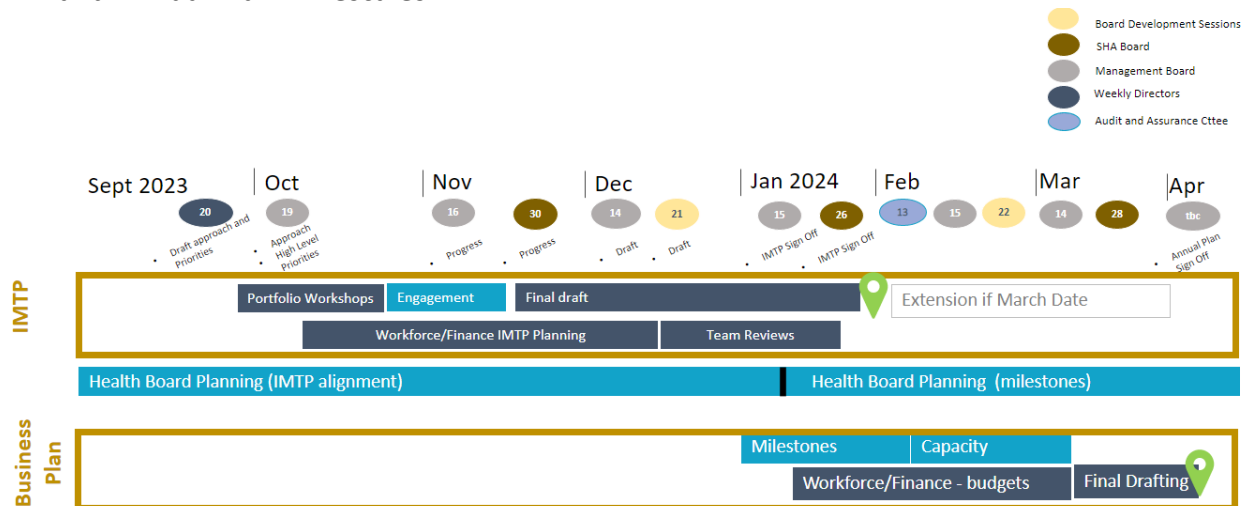
IMTP 2023-26

The current IMTP was submitted to Welsh Government on 31 March 2023. Welsh Government responded on 2 October 2023 with an acknowledgement letter noting specific accountability conditions. See Appendix for full details.

IMTP 2024-27

Next years' IMTP is in development. To date, the final submission date has not been confirmed and the Welsh Government Planning Framework has not been published. The plan below assumes a January 2024 submission date, but we anticipate that this may change.

IMTP and Annual Plan Timescales



Tolley, Laura
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 IMTP 2023-26

The Welsh Government Accountability letter generally referenced the following:

- DHCW will look to maximise operational delivery and digital capability.
- The plan demonstrated a balanced position for the organisation in-year.
- Any material changes to the Annual Plan element in-year will require notification to Welsh Government through an Accountable Officer letter.
- Close monitoring of financial risks will be needed including the delivery of the DHCW savings plan, energy costs and cyber security.
- Reporting must be submitted quarterly to provide an update on progress against the plan. The Minimum Data Set should be refreshed quarterly.
- The accountability conditions will form the agenda for the Joint Executive Team (JET) meetings. The half-year review meeting has been scheduled for 23 November 2023.
- DHCW escalation status remains at 'routine arrangements'.

The letter then sets out specific conditions around Finance and Efficiency, Governance and Engagement, Delivery, and Workforce. See Appendix for details.

4.2 IMTP 2024-27

- **Approach.** The overall approach to developing the IMTP was agreed at the October 2023 Management Board. This will largely be a 'roll forward / refresh'. We will maintain the condensed document, having previously revised this year to a shorter, cleaner format.
- **Strategic Priorities.** A Directors Strategy session was run on 4 October to consider 1) What definitely needs to be in the IMTP, 2) What will we stop or slow and 3) What would improve our efficiency and productivity.
- **Workshops.** All fourteen initial IMTP Portfolio workshops have been run in addition to an additional workshop for Mission 5. These workshops have looked at priorities, complexity, and funding and timelines have been drafted for the portfolios. These are being reviewed and enhanced as more information comes to light.
- **Existing themes.** The outputs looked at extending the existing work areas such as establishing product and platform roadmaps, implementing a replacement integration hub and further APIs, sharing of personal information and approaches for maternity and mental health data whilst enhancing clinical engagement and user centred design principles.
- **New Pipeline.** New possible pipeline work discussed included allied health professional digital solutions, respiratory health integrations, digital cellular pathology business case outcomes, staff digital identity strategy, and a lymphoedema system replacement. These are subject to national and local capacity assessments and availability of funding.

Tolley, Laura
23/11/2023 10:39:08

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no specific risks or matters for escalation at this stage. The IMTP 2024-27 will be shared further with the Board as it develops and presented for approval prior to formal submission.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
NOTE the Welsh Government Accountability Conditions for the IMTP 2023-26 and NOTE the progress developing the IMTP 2024-27.	

Tolley, Laura
23/11/2023 10:39:08

Appendix 1: Accountability Conditions

Finance and efficiency

1. Provide monthly reports to Welsh Government, outlining delivery against savings plans outlined in Accountable Officer letter, with clear remedial action of planned profile, and assurance is clearly provided to the DHCW Board with associated mitigations.
2. Ensure Benefit frameworks and methodology are established and ensure all business case proposals have a clear benefits case, benefits frameworks are in place, and delivery of benefits tracked.
3. Support the development of new funding models, strengthened analysis around allocative efficiency across portfolios, and national SLAs and services to inform national funding model for 23/24, this will include greater transparency around SLA costs for all partners.

Governance and Engagement

4. Develop an enhanced Portfolio management and governance framework, that aligns and is integrated to wider NHS System and governance development, to enable delivery and proportionate reporting to DHCW boards and Welsh Government and NHS Executive boards and teams.
5. Review SLA arrangements with health boards and associated services to ensure during year all Health boards understands detail of services being provided, or to be provided by DHCW nationally, with clear service catalogues for all health boards.

Delivery

6. Develop a clear plan and roadmap for integrated and interoperable National Architecture to enable a singular view of the patient across all ages and care settings, including children and young people – drawing together in single portfolio work on WICCS/WCP/WNCR and NDR, NHS App and Primary Care EPR developments, optimising architectural and deployment resource, and ensuring national architecture is open to all health boards to utilise to support local health and care planning and improved care, population health management and development of Clinical Data repositories.
7. Establish a digital diagnostics portfolio to optimise the use of resources across that portfolio's programmes.
8. DHCW to work closely with all NHS and Social Care partners with regard to overarching Information Governance Strategy and Toolkits, such that it supports effective and safe delivery at scale within Health and Social Care settings.
9. Evidence that your Board demonstrates System Leadership on key digital and data issues, in particular Cyber and Data Security is vital.
10. Complete the development of all priority functionality within the Cancer Information System required to deliver patient care.

Workforce

11. Strengthened the plan, in collaboration with HIEW, to develop digital skills and experience of NHS Wales DDaT workforce with clear measures to assess impact.

DIGITAL HEALTH AND CARE WALES

FINANCIAL REPORT FOR THE PERIOD ENDED 31st OCTOBER 2023

Agenda Item	5.5
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Claire Osmundsen-Little, Executive Director of Finance
Prepared By	Mark Cox, Associate Director of Finance
Presented By	Claire Osmundsen-Little, Executive Director of Finance

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
<p>RECEIVE and DISCUSS the contents of the financial report for October 31st, the forecast achievement of financial targets, the deployment of the Core Financial Improvement Exercise and the indicative financial challenges for 2024/25.</p>	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>DOMAIN OF QUALITY</u>	Efficient
If more than one enabler / domain 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: Individual Quality Impact Assessments will be carried out as part of the Financial Improvement exercise as appropriate.	

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.

Section 2:

RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.
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2 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	November 2023	Approved
Claire Osmundsen-Little	November 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
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	LIMS	Laboratory Information Management Solution
RISP	Radiology Informatics System Procurement	NIIAS	National Intelligent Integrated Audit Solution
DC2T	Data Centre 2 transfer	LA	Local Authority

Tolley, Laura
23/11/2023 10:39:08

3 SITUATION/BACKGROUND

3.1 Financial Performance

The purpose of this report is to present DHCW's financial performance and issues to October 31st 2023 and assess the key financial projections, risks and opportunities for 2023/24.

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. In terms of key Organisational 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
23/11/2023 10:39:08

4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Rising to the Financial Challenge

4.1.1 NHS Wales Financial Context

As reported within August reports, NHS Wales is facing significant financial challenges. These challenges are driven by significant underlying service pressures, legacy costs of COVID-19 yet to be mitigated, demand and inflationary growth alongside energy cost increases presenting significant financial pressures systemwide.

The Minister was clear that all organisations needed to identify actions to deliver the planned deficit position as a minimum and then identify actionable options to go further in improving that position.

Across Welsh Government in recent months, all Ministers and departments have been reviewing all budgets, with each area requiring a contribution towards the challenging financial position being faced across Government. The outcome of this exercise is an increase in funding to the Health & Social Services group of £425m, along with an increase in funding to Transport with an expectation that Health Boards will reduce their forecast overspend position by 10% resulting in a net targeted overspend position of £123m.

4.1.2 DHCW Financial Context

In response to the letter of 31/07/2023 from Judith Paget Director General of Health and Social Services/Chief Executive NHS Wales, requesting organisations to outline actions to support financial improvement in view of the overall financial position of Welsh NHS organisations in 2023/24, the DHCW Executive team undertook a detailed review of any non-committed spend items.

The outcome of the exercise identified £4.126m of cost savings/avoidance as candidates for Welsh Government consideration after an impact assessment has been carried out.

At the time of writing formal acceptance from Welsh Government has yet to be received however it has been agreed with Welsh Government finance leads to incorporate the impact within our accounts on the assumption that agreement will be forthcoming.

Tolley, Laura
23/11/2023 10:39:08

4.2.1 2023/24 Financial Performance Overview

DHCW has a high confidence of meeting its statutory financial targets and has identified opportunities to improve the end of year position as part of the returns. These will either crystallise or removed over the next quarter as funding risks are clarified.

4.2.2 Financial Performance Overview Period to October 31st

The performance highlights for the period to October against key finance measures are as follows:

1. **Revenue:** DHCW is reporting a revenue underspend of breakeven £0.132m for the period to October 31st.
2. **Capital:** Spend to October totals £10.662m against CRL of £19.061m. An underspend of £0.171m against period plan and a residual spend balance of £8.4m (44%) to be completed before year end.
3. **PSPP:** The target Public Sector Payment Policy (PSPP) target has been exceeded with 98% of non NHS invoices being paid within 30 days.
4. **Cash:** The increased cash balance of £8.136m as at October 31st is in readiness for anticipated significant capital invoices to be settled during November and early December.

4.2.3 Other Material Spend Details

- **Covid-19:** DHCW received £8.350m funding and the spend to date is £2.9m. The forecast is subject to the outcome of the Financial Improvement exercise and any subsequent recovery of funding.
- **Digital Priority Investment Fund:** A total of £35.5m in direct revenue funding is anticipated from Welsh Government with current spend of £17.5m and a remaining balance of £17m (49%) to be expensed during the remainder of the financial year.
- **Capital Requirement:** As part of the exercise reviewing capital funding requirement for the year, DHCW has identified a total of £0.972m available for repurposing for the following schemes:
 - WPAS Standardisation £0.264m
 - LIMS 2.0 £0.368m
 - Digital Maternity £0.240m and
 - RISP £0.100m

DHCW will liaise with programme boards and Welsh Government to finalise requirements.

Tolley, Laura
23/11/2023 10:39:08

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 Key Issues

- **Core Operations:** DHCW is reporting a revenue underspend of £0.132m for the period to October 31st with the savings plan currently being exceeded reflecting lower than planned recruitment and the procurement of supplementary third-party resource. The position is inclusive of a provision for core contribution to the NHS Financial Improvement exercise.
- **Core Vacancy Factor:** The vacancy factor target for the year has been exceeded by £1.262m (against a target of £1.585m). Whilst pay continues to track behind profiled spend due to recruitment reprofiling, this is significantly offset by increases in non-pay spend as DHCW continues to secure capacity via third party suppliers (£0.519m), initiation of accelerated programmes (such as Cloud Readiness activity) and the bridging financial support of datacentre migration activity costs and SIEM cyber security costs during quarter four.
- **2024/25 DHCW Financial Challenges:** As part of the 2024/25 financial planning process we will need to collectively identify opportunities to mitigate ongoing financial pressures such as:
 - Growth in services (SIEM, Choose Pharmacy, WASPI, NIIAS)
 - Standard Pressures (Pay, General Inflation)
 - Digital Inflation (representing sector specific cost pressures)
 - Cloud Transition/Product Approach
 - Ongoing programmes (Cancer etc)

The sustainable funding approach will provide a model more reflective of not only the service we currently provide but for the services we intend to provide in the future.

- **Digital Eyecare Programme Transition:** Discussion with Cardiff & Vale Health Board continues with DHCW awaiting additional documents to support the financial transfer and completion of the statement of current and non-current assets & liabilities however we have been assured the remaining items will be forwarded before 30/11/2023.
A key concern remains the future costs of the service after all technical assessments have been completed and a fully resourced plan attained. The lack of formal Service Level Agreements and the surety of Health Board funding commitments requires resolution. DHCW will continue to engage with Welsh Government in order to establish clarity and ensure that the service has a sustainable funding model.

Tolley, Laura
23/11/2023 10:39:08

- **Financial Risks:**
 - **General Digital Inflation:** The underlying digital price changes continue to be identified, quantified and managed.
- **Opportunities:**
 - **Sustainable Funding:** DHCW has engaged with both the finance delivery unit and Welsh Government digital leads during the month in order to accelerate the exercise with a target completion date of January. To support this endeavor we have commissioned HFMA to undertake a benchmarking and cost analysis review. The review will establish a clearer understanding of the investment needed to meet national and organisational digital transformation ambitions. In particular to benchmark DHCW's digital investment plans with other national and international health and care sectors and gain this clarity through the provision of comparative spending levels in other health sectors in domestic and international settings.
 - **The Microsoft VAT recovery exercise:** During the month the finance team has liaised with HMRC via our subject matter experts (Ernst & Young) and our dedicated Customer Compliance Manager. A further request for information has been received with a response confirming the "protected claim" values for 19/20 & 20/21. Whilst HMRC has assured Ernst & Young that a final response is imminent an emergency meeting has been requested by DHCW and is scheduled for 23/11/2023.
 - **Vacancy Management:** Further opportunities to reprofile planned recruitment may provide an opportunity to repurpose/reprioritise or further support the NHS Wales financial challenge.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
<p>RECEIVE and DISCUSS the contents of the financial report for October 31st, the forecast achievement of financial targets, the deployment of the Core Financial Improvement Exercise and the indicative financial challenges for 2024/25.</p>	

Tolley, Laura
23/11/2023 10:39:08



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SHA BOARD BRIEFING

**Finance Performance Report:
Period 31st October 2023**

Tolley Laura
23/11/2023 10:39:08

Claire Osmundsen-Little
November 2023

Introduction

NHS Wales Financial Challenge

- National Context
- DHCW Context

2023/24 Financial Performance

- Executive Summary
- Performance against Key Indicators
- Revenue Performance
 - Organisational Run Rate
 - Core Directorate Performance
 - Core Savings Performance
 - COVID Financial Update
 - Digital Priorities Investment Fund Financial Update
- Capital Programme

2024/25 Headline Financial Challenges

Risks & Opportunities

Tolley-Lau
23/11/2023 10:39:09

The purpose of this report is to present the NHS financial context and DHCWs financial position to date alongside key financial projections, risks and opportunities for the financial year. The report advises the Board of Financial Performance and issues for the current financial year to October 2023 and indicative pressure areas for 2024/25.

- The report sets out the financial position as at the end of October 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
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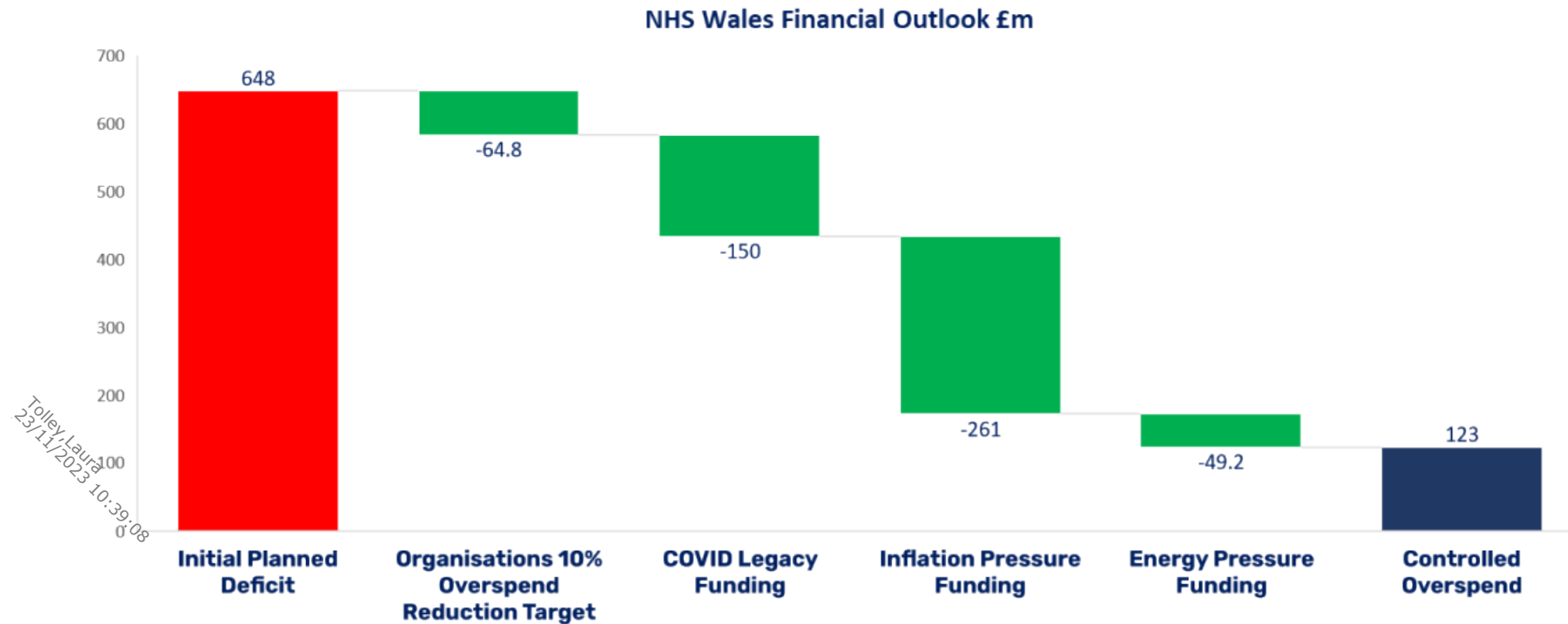
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NHS Wales Financial Challenge 2023/24

Tolley Laura
23/11/2023 10:39:08

NHS Wales - Financial Challenge

NHS Wales is facing significant financial challenge with a forecast deficit at mid year of £648m, primarily driven by Energy Cost Increases, Inflationary pressures, Emergency Care pressures & COVID Recovery. To address this the Welsh Government announced a range of actions to organisations including the following:



2023/24 DHCW Financial Challenge Response

- DHCW has constructed a targeted savings plan to achieve breakeven for this year totalling £4.2m (this incorporates recurrent savings of £2.4m and £1.8m being non recurrent vacancy related).
- To support the previously mentioned financial challenge all organisations forecasting breakeven were requested to maximise any opportunities for further savings to support the all Wales position. DHCW proposed an additional £0.7m from its core operations bringing its gross target to £4.9m
- Additionally we also identified £3.3m non-core allocations that may be used to support the all Wales financial position in DPIF, Primary Care and COVID areas.
- At mid-year we exceeded the profiled target allowing for additional investment and coverage of Datacentre Migration Costs, the plan will also allow us to meet 2023/24 financial commitments as a result of the impending SIEM re-procurement exercise.

Tolley, Laura
23/11/2023 10:39:08



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DHCW Financial Performance

Period to 31st October 2023

Tolley Laura
23/11/2023 10:39:08

FINANCE UPDATE | EXECUTIVE SUMMARY

Forecast Full Year Position: DHCW is forecasting achievement of all financial targets for the financial year.

Run Rate: The monthly spend run rate has been revised to reflect emerging developments in DPIF supplier milestones and provision for Welsh Government recovery of ring fenced funding to support the NHS Wales financial improvement exercise (presented within March spend figures).

Savings delivery: The revised Core savings target now totals £4.978m (inclusive of the recent £0.726m identified as part of the core contribution to the NHS Financial Improvement exercise) with the vacancy target being overachieved by £1.262m to period plan, offsetting non pay spend in securing 3rd party capacity (managed via our Strategic Resourcing Group) and the acceleration of key strategic deliverables (such as Cloud transition) and bridging support of the datacentre migration activity . All schemes are now RAG rated “Green” (high degree of confidence of delivery) with £2.4m being recurrent and available to offset the underlying position and emerging pressures.









Underlying Position: At the time of writing, DHCW brought forward an underlying deficit of £1.3m into its IMTP, as part of the 2024/25 financial planning process the revised position incorporating the impact of recurrent savings and any changes in cost base/pressures will form part of the refreshed assessment and inform financial sustainability discussions.

Cost Control: DHCW continues to look to strengthen its cost control environment with a review of its recruitment scrutiny panel effectiveness and Capital & Non Pay Delivery Group, Strategic resourcing Group and Exceptional Costs Forum essential to minimising in-year financial risks, minimise wastage, avoid unnecessary spend and any further upward drift in the underlying cost base.

2024/25 Financial Pressures: DHCW has identified a number of “unavoidable” pressures and pressures that may arise from pursuing particular “choices”. These will inform the financial plan and sustainability discussions with Welsh Government.

Risks: Alongside the identified general Digital Inflation risk, DHCW is in continual dialogue with Welsh Government representatives to support the broader immediate financial challenges facing NHS Wales and manage any impact upon funding allocations.

FINANCE UPDATE | 2023-24 SUMMARY PERFORMANCE AGAINST KEY INDICATORS

Indicator	Cumulative Performance	Forecast outlook	Comment
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.132m underspend decrease from £0.169m  Movement	Breakeven  Movement	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)	£0.171m underspend increase from £0.045m  Movement	Breakeven  Movement	The current capital funding envelope is £17.728m, DHCW is reporting a £10.662m 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)	98% No movement  Movement	95%  Movement	PSPP target achieved. Target – 95%, Actual 98%.
Cash Balances Appropriate balances to meet creditor requirements	£8.136m Increase from £4.82m  Movement	Positive Cash Balance  Movement	Cash balance on October 31st has increased in month by £3.3m. Cash balances will continue to be managed down to the end of year target of £2m.

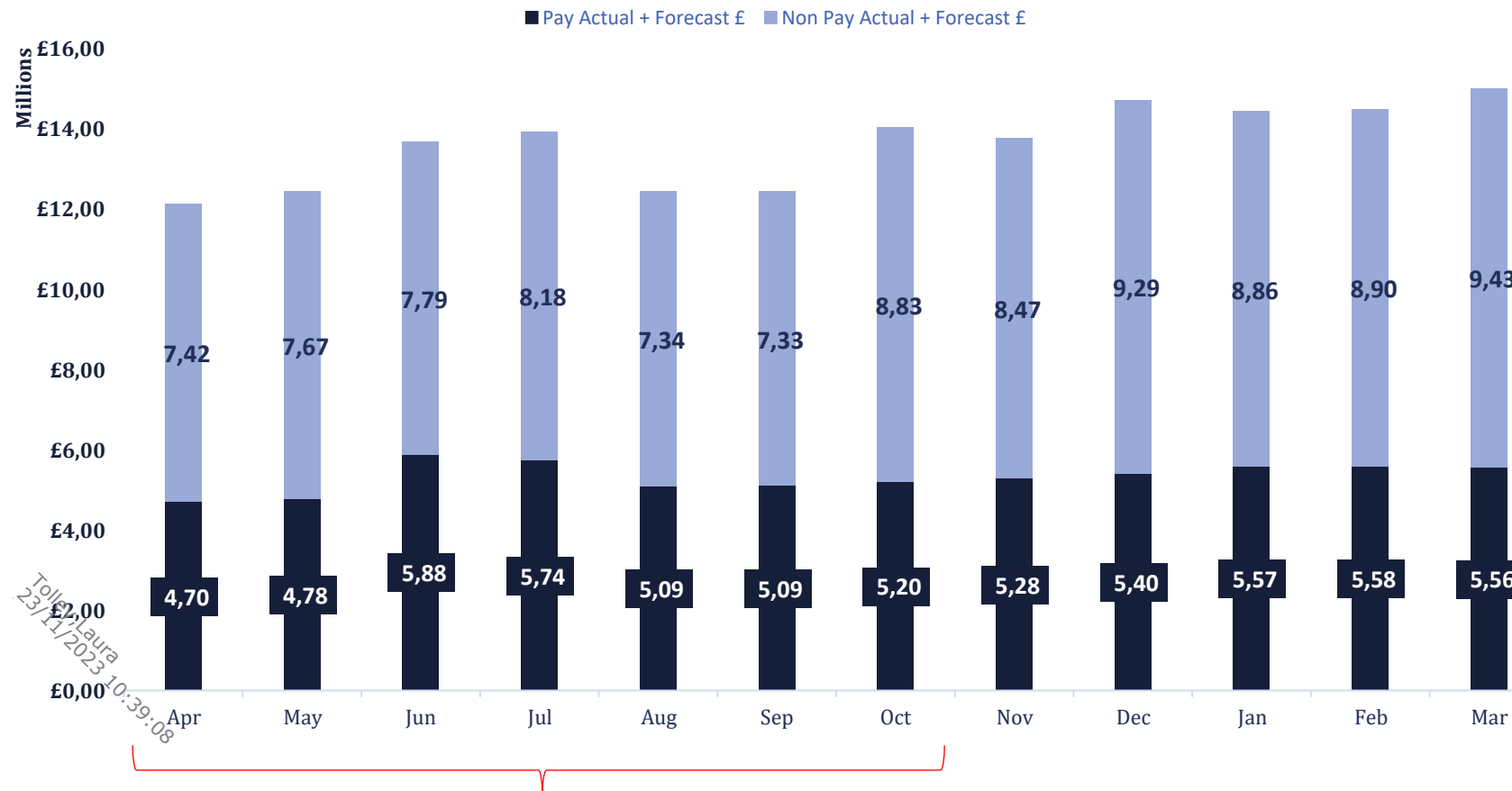
DHCW is reporting achievement against plan of all of the key financial indicators for the period and forecast compliance with all financial targets at year end.

Tolley, Laura
23/11/2023 10:39:16

Organisational Run Rate

The organisational run rate is given below showing the run rate for £163.4m of expenditure, the hand back of £1m Covid, £2.1m Digital has been factored into the run rate below. The increase in pay is reflecting the increase of WTE in Digital schemes by the end of the year.

Organisational Expenditure Run Rate



£91.04m spend to date

Increase in May

WCCIS disbursements to Local Authorities £0.5m

Increase in June

Employee 2022-23 back pay of £1.1m actioned.

Increase in July

DMTP deliverables with third party suppliers. DSPP £1.6m WP7 functionality & enhancement.

Increase July onwards

- Messaging contract in Operations increase £0.1m a month.
- Datacentre and 0365 increase each £0.15m.
- Pay award 5% paid in July – funded Welsh Government.

Increase in September

- Covid use of third party suppliers.
- DSPP £0.5m WP8 functionality & enhancement and DMTP £0.5m patient access development completion.

Increase October

- DSPP Work package 9 runs September to December £0.7m and LINC funding letters £0.5m.

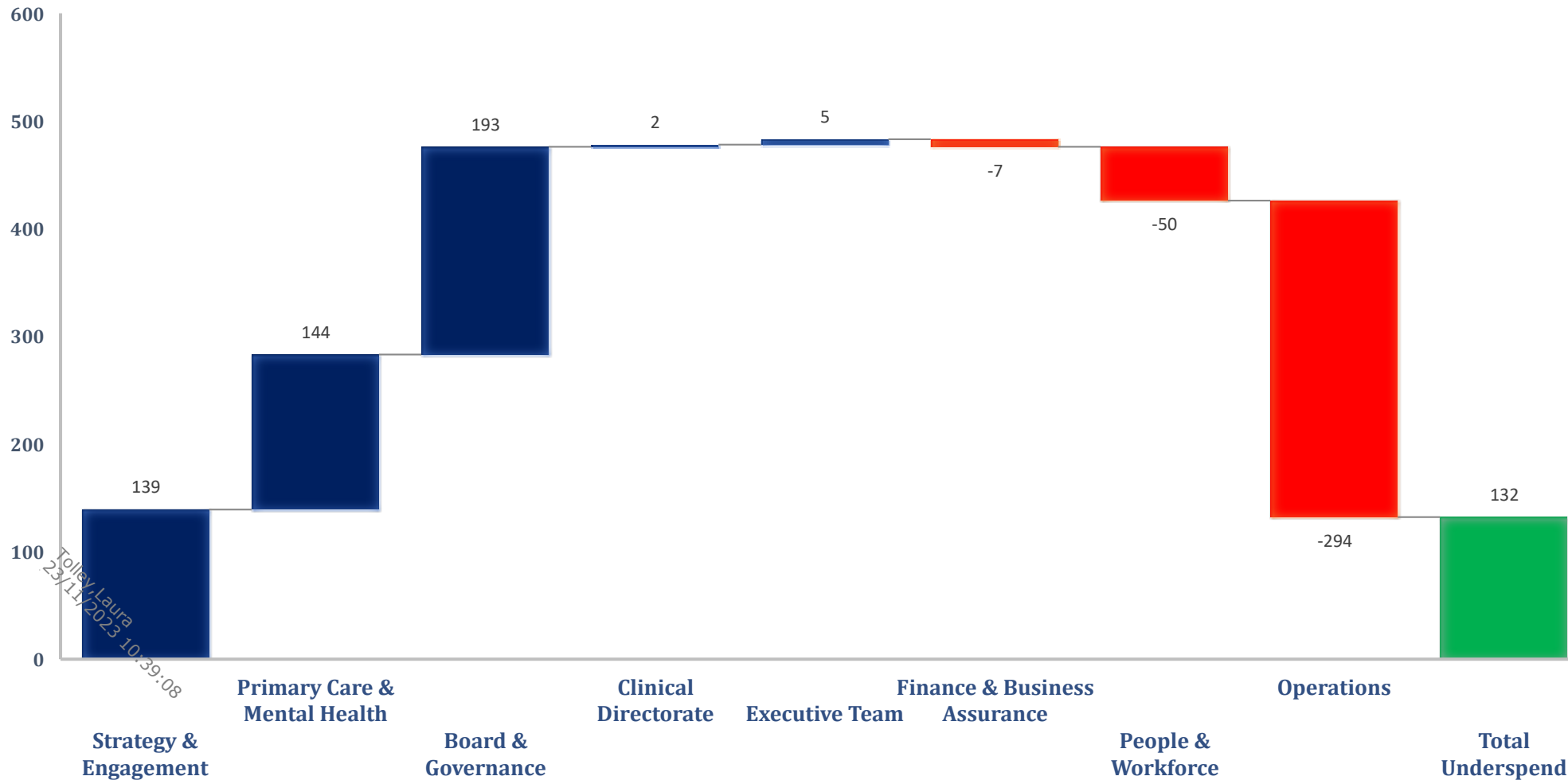
Increase March

- Maternity and Prescribing activity.

Directorate Performance

In October, DHCW is reporting a small revenue underspend of £0.132m.

Directorate Contributions to OCTOBER organisational performance £000's



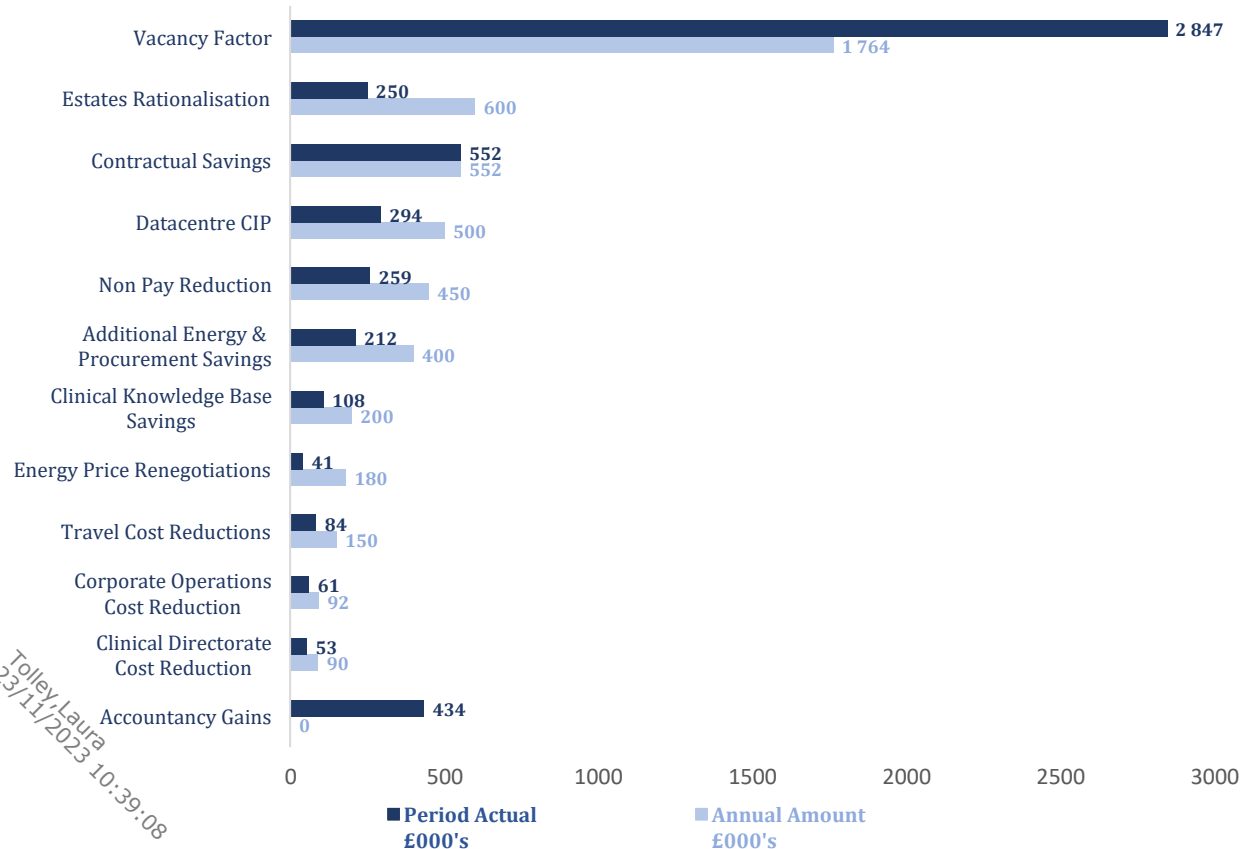
Operations: The directorate is reporting an overspend of £0.294m. This is driven by continuing pressures in the ICT directorate, however mitigating actions have been identified to address the continued achievements of the savings target for the year and recovery of the financial position.

People and Workforce: The overspend is due to approved additional resources to support the recruitment exercise.

2023/24 Financial Challenge Update

The savings performance target below is now £4.978m which includes the original £4.252m and an additional requirement of £0.726m arising from the NHS financial improvement exercise. The plan incorporates recurrent Savings of £2.4m.

2023/24 Savings Performance Against Plan (£000's)



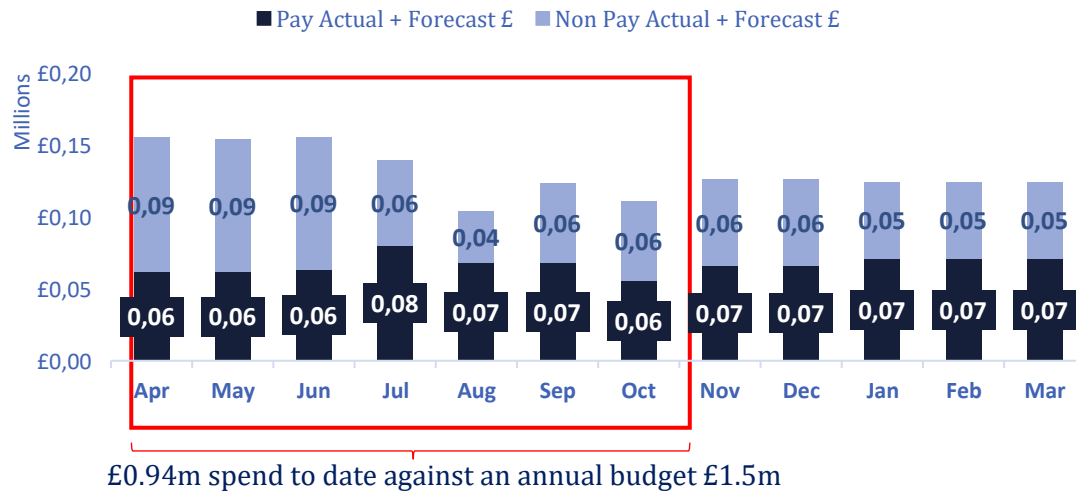
Scheme	Annual Amount £000's	Period Plan £000's	Period Actual £000's	Var (Over/ -Under) £000's	Residual Requirem ent £000's
Vacancy Factor	1,764	1,585	2,847	1262	179
Estates Rationalisation	600	100	250	150	350
Contractual Savings	552	552	552	0	0
Datacentre CIP	500	294	294	0	206
Non-Pay reduction	450	259	259	0	191
Accountancy Gains	0	0	434	434	0
Additional Energy and Procurement Savings	400	212	212	0	188
Clinical Knowledge Base Savings	200	108	108	0	92
Energy Price renegotiations	180	41	41	0	139
Travel Cost Reductions	150	84	84	0	66
Corporate Operations Cost Reduction	92	61	61	0	31
Clinical Directorate Cost Reduction	90	53	53	0	37
Total	4,978	3,349	5,195	1,846	1,479

The organisational vacancy factor target or the year totals £1.764m, increased by £0.464m from the financial challenges exercise. This has been overachieved by £1.262m to date. During the month DHCW have reviewed its creditor balances with Velindre NHS Trust, these have now been released to support DCT migration.

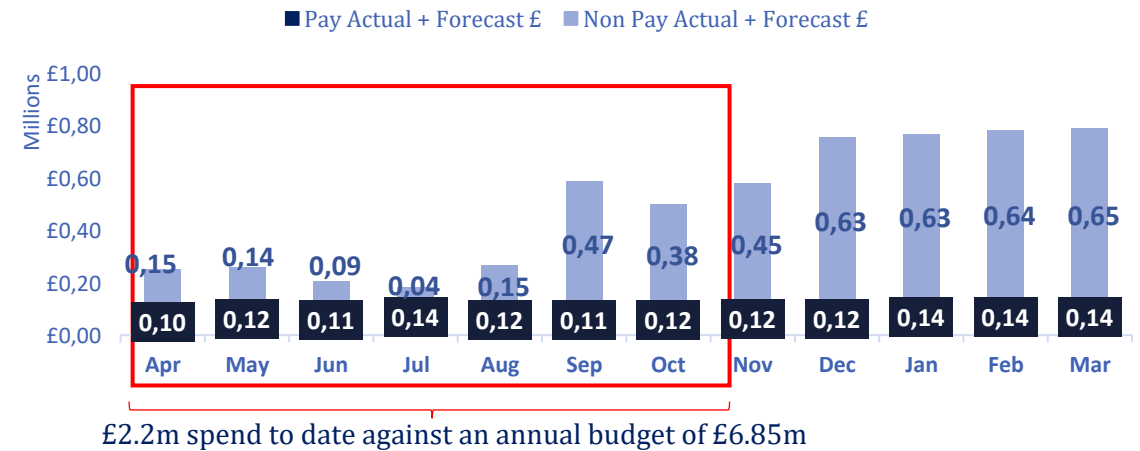
COVID Financial Performance

The run rate is given below for TTP and Vaccines. The use of contractors and third party is increasing the run rate from august onwards, offsetting the vacancies within COVID. The vaccines scheduling text/letter volumes significantly increased in October and will be monitored over the forthcoming quarter. The run rate has been adjusted for the £1m support to the NHS financial challenge to Welsh government.

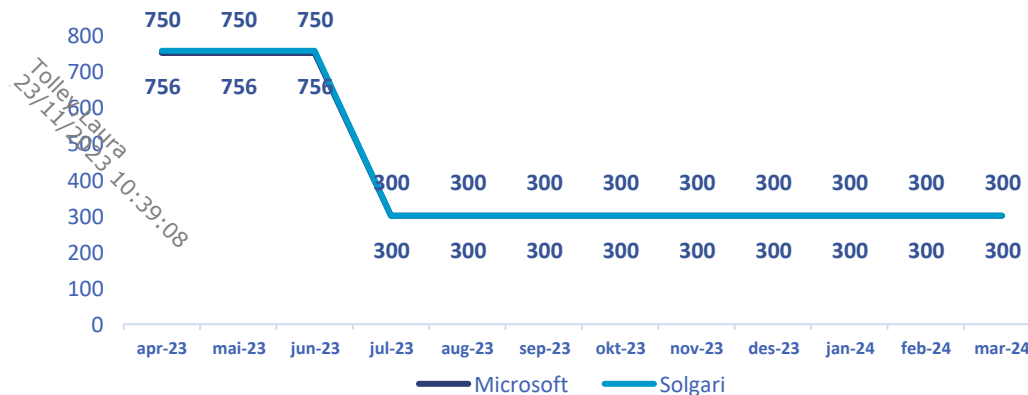
COVID TTP Run Rate £million



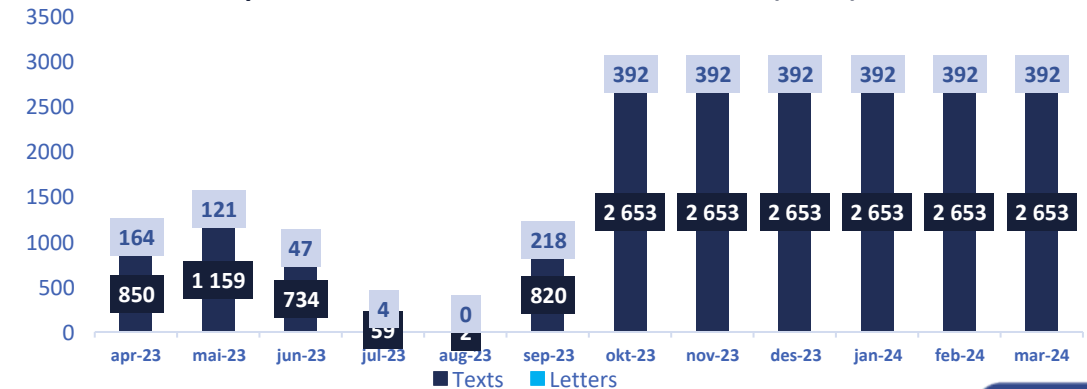
COVID Vaccine Run Rate £million



User Licence Volumes



Apr 2023 - Oct 2023 Text/Letter Volumes (000's)



Digital Priority Investment Fund

The organisation has recorded £18.436m cumulative revenue spend against DPIF schemes to October out of total funding of £36.405m.

Scheme	Annual Plan £000's	Period Actual Spend £000's	Residual Spend £000's	Residual Spend %
Approved (Direct)				
National Data Resource	7,875	3,403	4,472	57%
Digital Medicines Transformation Programme	7,135	3,222	3,913	55%
Digital Services For Patients & Public	5,377	3,120	2,257	42%
WCCIS - Priority Investment	3,841	2,979	862	22%
WPAS Acceleration	2,447	1,414	1,033	42%
CANISC - Clinical Functionality	2,060	1,175	885	43%
Digital Maternity Cymru: Scoping and Discovery	1,891	513	1,378	73%
LINC: Laboratory Information Network Cymru	1,818	1,095	723	40%
Digitilisation of Nursing	979	370	609	62%
Radiology Informatics System Procurement Programme	954	260	694	73%
Digital Business Change Network	525	202	323	62%
Business Change network and Benefits Realisation	412	241	171	42%
MSC Digital Skills for Health and Care Professions	234	0	234	100%
Digital Eyecare	0	79	-79	
Total Approved (Direct)	35,548	18,073	17,475	49%
Approved (Indirect)				
Cross Border Pathways	284	167	117	41%
Digital Intensive Care Unit	573	196	377	66%
Total Approved (Indirect and Direct)	36,405	18,436	17,969	49%

A residual funding total of £17,969m (49% of plan) remains to be spent prior to year.

The period performance presents an underspend of £0.3m (1%) against spend plans with a number of material variances.

Notes on variances of note:

- NDR - £0.2m underspend:** Inclusive of £0.7m hand back to WG. Material driver being recruitment lag (identified as an opportunity to support the NHS financial improvement exercise).
- DMTP - £0.03m underspend:** Material drivers being supplier delay activity.
- WCCIS Priority-£0.287m overspend:** Local Authority Quarter 2 charges impacting profile. Overspend is a result of extension of three contractors.
- Maternity £0.148m underspend:** Legal and commercial costs now expected to be pushed out as procurement delayed as well as other expected costs such as iPad data, integration and recruitment slippages.

Finance business partners will work with programme leads to agree areas where budget reprofiling is appropriate due to changes in planned activity.

Capital Performance

At the end of October, DHCW had a Capital Spend of £10.662m against the Annual Capital Resource Limit of £17.728m a period underspend against plan of £0.171m. The identified residual balance of £7.066m incorporating £0.972m proposed to be available for repurposing (subject to programme and Welsh Government approval).

Scheme	CRL Annual Forecast £000's	Period Plan £000's	Period Actual £000's	Under/- Overspend £000's	Residual Spend £000's
Discretionary					
Total Discretionary	2,614	1,492	1,471	21	1,143
Digital Priority Investment					
Digital Services for Patients & Public	980	833	833	0	148
Digital Medicines Transformation Portfolio	272	0	0	0	272
Radiology Information System Procurement (RISP)	783	182	132	50	651
Laboratory Information Management System (LIMS 2.0)	7,705	5,861	5,761	100	1,944
Digital Maternity Cymru	240	0	0	0	240
Digital Intensive Care Unit	4,707	2,465	2,465	0	2,242
Welsh Patient Administration System Standardisation (WPAS)	264	0	0	0	264
Digital Eyecare Programme	163	0	0	0	163
Total Digital Priority Investment	15,114	9,340	9,190	150	5,924
Total Capital Plan	17,728	10,833	10,662	171	7,066

- **Radiology Information System Procurement:** In line with the programme plan a total £1.353m funding has been transferred to Health Boards to support central hardware and licencing costs. Consequently the organisations capital resource limit has been reduced accordingly.
 - **Digital Services for Patients & Public:** A number of work packages have now been successfully delivered encompassing delivery of enhancements and increased functionality contributing to increased spend in this scheme.
 - **Laboratory Information Management Solution:** The initial solution supplier milestone of £5.6m was achieved in October.
 - **Capital Requirement:** As part of the exercise reviewing capital funding requirement for the year, DHCW has identified a total of £0.972m available for repurposing for the following schemes:
 - WPAS Standardisation £0.264m
 - LIMS 2.0 £0.368m
 - Digital Maternity £0.240m and
 - RISP £0.100m
- DHCW will liaise with programme boards and Welsh Government to finalise requirements.



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DHCW Financial Performance

Forward Look

Tolley Laura
23/11/2023 10:39:08

2024/2025 DHCW Financial Challenge

As part of the 2024/25 financial planning process we will need to collectively identify opportunities to mitigate ongoing financial pressures (both “unavoidable” & “choices”) such as:

Unavoidable Pressures



Service Growth.... At present there is no mechanism to keep funding at pace with growth (£1.9m) and whilst being experienced across the portfolio this is being particularly experienced within the Welsh Care Record Service (WCRS) and Choose Pharmacy.



Energy Costs.... DHCW continues to experience pressures due to energy cost increases, there have been initiatives to mitigate these but a pressure approaching £0.5m is anticipated for 2024/25.



Digital Inflation.... Sector specific cost increases and pressures. Current view of £1m identified as a consequence of changes in pricing models.



Cyber Security Improvements.... Costs of £0.8m to support the requirement for a strengthened Cyber Security posture.



Sustaining Key Digital products.... DHCW will continue to support and sustain key initiatives such as the cancer programme, National Data Resource & NHS App. Programme continuity remains a significant issue.



Sustaining Key Digital Core Services.... A number of services require funding (£0.4m) in order to provide a sustainable service, such as Integrated Intelligent Audit Solution – now a cloud recurrent service and Wales Accord on the Sharing of Personal Information (WASPI).

Service and Product Choices



Cloud & Product Adoption.... Requires a transition away from capital to revenue-based service models.



Digital Priority Investment Fund – Development Build & Implementation.... Reflecting additional investment currently without agreed funding (such as WCCIS and Eyecare).

External Research - HFMA

Through benchmarking and cost analysis, the exercise will establish a clearer understanding of the investment needed to meet national and organisational digital transformation ambitions. In particular to benchmark DHCW's digital investment plans with other national and international health and care sectors and gain this clarity through the provision of comparative spending levels in other health sectors in domestic and international settings.



Tolley, Laura
23/11/2023 10:39:08

Risks and Opportunities

Financial Risks:

- **General Digital Inflation & Contractual Energy Cost increases:** The underlying digital price pressures and energy prices continue to be identified, quantified and managed.

Financial Opportunities:

- **Sustainable Funding:** DHCW has engaged with both the finance delivery unit and Welsh Government digital leads during the month in order to accelerate the exercise with a target completion date of January. To support this endeavour, we have commissioned HFMA to undertake a benchmarking and cost analysis review. The review will establish a clearer understanding of the investment needed to meet national and organisational digital transformation ambitions. In particular to benchmark DHCW's digital investment plans with other national and international health and care sectors and gain this clarity through the provision of comparative spending levels in other health sectors in domestic and international settings.
- **Microsoft VAT Recovery:** Discussions continue with our VAT advisors and HMRC are ongoing with a meeting scheduled for 21/11/2023.
- **Vacancy Management:** Further opportunities to reprofile planned recruitment may provide an opportunity to repurpose/reprioritise or further support the NHS Wales financial challenge.

Tolley, Laura
23/11/2023 10:39:08

Recommendations

DHCW Board are requested to:

- Note the status of the NHS and DHCW Financial Challenge.
- Note the position to October 31st 2023 and forecast achievement of financial targets.
- Note the indicative financial challenges for 2024/25.

Tolley Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES

CORPORATE RISK REGISTER AND BOARD ASSURANCE DASHBOARD

Agenda Item	6.1
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Chris Darling, Board Secretary
Prepared By	Bethan Walters, Corporate Risk Manager
Presented By	Chris Darling, Board Secretary/Risk Owners

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
<p>NOTE the Risk and Board Assurance Framework Workplan.</p> <p>RECEIVE and DISCUSS the status of the Corporate Risk Register including changes since the last meeting.</p> <p>NOTE the Corporate risk trending analysis.</p> <p>NOTE the Board Assurance Dashboard.</p>	

Tolley, Laura
23/11/2023 10:39:08

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	Deliver high quality digital products and 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>DUTY OF QUALITY ENABLER</u>	Leadership
<u>DOMAIN OF QUALITY</u>	Effective
If more than one enabler / domain 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	
<u>QUALITY AND SAFETY</u> 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.
<u>LEGAL</u> IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
<u>FINANCIAL</u> IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
<u>WORKFORCE</u> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.

Section 2:

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.

2 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	07/11/2023	Discussed and verified
Management Board	16/11/2023	Discussed and verified

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	WICIS	Welsh Intensive Care Information Service
WASPI	Wales Accord on the Sharing of Personal Information	NDR	National Data Resource
SLA	Service Level Agreement	IMTP	Integrated Medium Term Plan
IRAT	Integration and Reference Team	ICU	Intensive Care Unit
ISD	Information Services Directorate	HBs	Health Boards
WG	Welsh Government	FDU	Finance Delivery Unit
SAIL	Secure Anonymised Information Linkage	CAPEX	Capital Expenditures
OPEX	Operating Expenditures	DU	Delivery Unit
WEDs	Weekly Executive Directors	OCP	Organisational Change Policy

Tolley, Laura
23/11/2023 10:39:08

3 SITUATION/BACKGROUND

3.1 The [DHCW Risk Management and Board Assurance Framework \(BAF\) Strategy](#) outlines the approach the organisation will take to managing risk and Board assurance.

3.2 The [Risk and BAF workplan for 2023/24](#) includes progress of activity tracked on the forward workplan.

3.3 Risk should be considered from the perspective of opportunities and threats, managing risks effectively can often lead to realizing opportunities. With health services under more pressure than ever there is a huge opportunity to use digital products and services to drive efficiencies and improve patient outcomes. DHCW intends to be at the forefront of this, trends and opportunities include:

- The growing importance of data
- Digital services driving service transformation
- Moving to Cloud services
- International technical and data standards
- Tackling a shortage of technology talent
- A shift from capital funding to a recurrent revenue based model
- Organisations shifting from programme to 'product' based delivery models
- Continuous agility in delivering digital services, modular components and mix and match
- Automation and Artificial Intelligence
- Open architecture where data exchange is facilitated between public and private sector providers
- The increasing need to ensure robust, secure and solid digital foundations to enable successful digital delivery
- Patient empowerment Apps

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

- 4.1 Board members are asked to consider both opportunity and threat based 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)'.
- 4.2 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.
- 4.3 In considering environmental and international factors members should note the [World Economic Forum Long Term Global Risks Landscape \(2023\) report](#). 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.
- 4.4 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.
- 4.5 The [HM Government National Risk Register](#) was published in August 2023, which includes a section on the cyber-attack: health and care system. Learning from this report will be subject to a future Board Development session.
- 4.6 [DHCW's Corporate Risk Register](#) currently has 22 risks on the Register, 14 of which are detailed at item 6.1i Appendix A. There are 8 Private risks, of which 5 are considered at every Digital Governance and Safety Committee and 3 are considered at Programmes Delivery Committee.

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4.7 Board members are asked to note the following changes to the Corporate Risk Register 6.1i Appendix A (new risks, risks removed and changes in risk scores) for the period 1 September 2023 to 31 October 2023:

NEW RISKS (2) 0 Private 2 Public

Risk Ref	Risk Title	Risk Description
DHCW0329	Choose Pharmacy - DHCW maintaining funding gap	IF a sustained and appropriate level of funding for the support and development of the Choose Pharmacy application is not established THEN DHCW will need to continue to cover the additional costs of £515k PA for the provisions of the service, which is the current shortfall between Welsh Government annual funding (£415k) and the costs associated with the Choose Pharmacy service (£930k) RESULTING IN DHCW bearing a significant cost pressure of £515k PA for the provisions of the Choose Pharmacy service.
DHCW0330	WCCIS Future Programme Funding	IF adequate funding is not available for Phase 2 for this year and future years THEN the progress and scope of activities will be severely compromised RESULTING in either a failure to deliver adequate scope of the project in the time necessary (by end of Advanced contract period) or slower progress on the full scope with and increased risk of running on out of support technology for longer periods beyond Jan 2026.

RISKS REMOVED (8) 3 PRIVATE 5 PUBLIC

Risk Ref	Risk Title	Risk Description	Statement
DHCW0328	**PRIVATE**	**PRIVATE**	Risk closed supplier confirmed delivery timelines
DHCW0327	Delays in Operationalising NDR Platform impacting Services which require NDR	IF there are delays to the new NDR data platform and architecture becoming operational as a live service THEN there will be delays to other services which are being designed and built to run on the NDR platform and architecture RESULTING IN additional costs, missed benefits and value opportunities, and erosion of stakeholder trust	Risk closed project specific plans will be agreed. NDR platform operationalized in August 2023.

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Risk Ref	Risk Title	Risk Description	Statement
DHCW0326	Insufficient commitment to build out functionality from the NHS Wales App	IF we are unable to find & collaborate with other Digital Programmes across Wales to support & build on NHS Wales App functionality. THEN funding maybe limited and stakeholder engagement will be decrease negatively impacting on development and improvement of the NHS Wales App, RESULTING IN the NHS Wales App functionality stagnating and this will potentially cause reputational damage to DSPP, DHCW, NHS Wales and Welsh Government.	Risk closed Mitigation implemented and being managed within the Programme
DHCW0259	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.	Control measure in place and oversight via the Strategic Resourcing Group, providing mitigation downgraded
DHCW0278	**PRIVATE**	**PRIVATE**	Downgraded and closed due to implementation on mitigating actions
DHCW0279	**PRIVATE**	**PRIVATE**	Downgraded and closed being managed under DHCW0317
DHCW0237	New requirements impact on resources 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 IMTP objectives and ultimately a delay in benefits being realised by the service.	Downgraded as new IMTP approach agreed including what can and can't be delivered within the resource envelope.
DHCW0292	High concentration of unfunded posts in infrastructure teams	IF DHCW are unable to secure revenue funding for the current positions which are not core funded, THEN there will be a reduction the engineering capacity available for Business-as-Usual activity and the major infrastructure developments identified in the IMTP and 1-year business plans, RESULTING IN a decline in service performance, increased costs and/or system failures.	Downgraded to Directorate level due to the mitigation actions in concern areas identified to date.

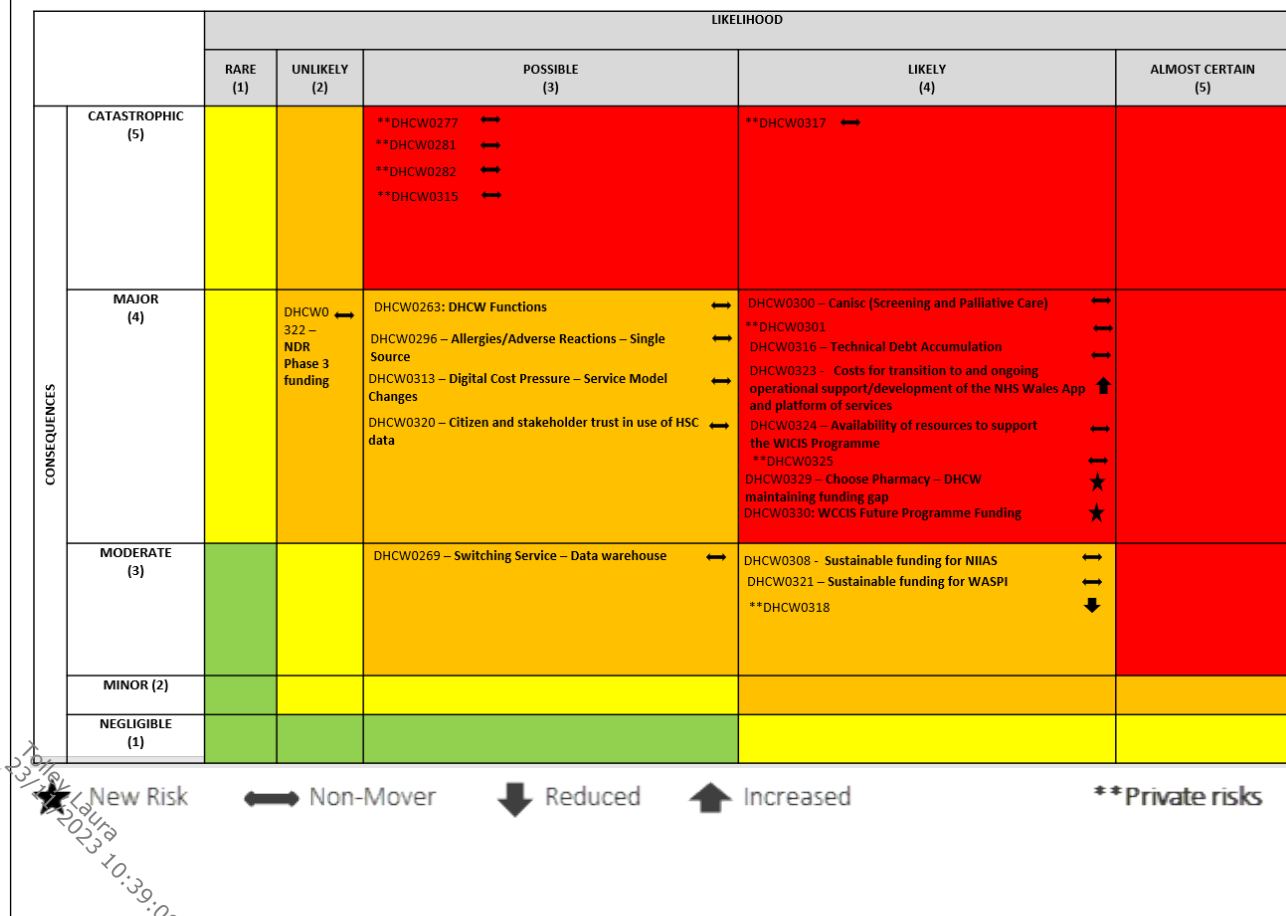
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RISKS WITH A CHANGE IN SCORE (2)

There were two changes in scores during the period:

Risk Ref	Risk Title	Risk Description	Statement
DHCW0323	Costs for transition to and ongoing operational support/development of the NHS Wales App and platform of services	IF additional funding is not allocated to DSPP/DHCW to support transition (including resource capacity to learn/upskill) nor to establish an operational application support model/team, THEN staff may need to be moved away from other services or the NHS Wales App switched off, RESULTING IN non-delivery of objectives and a delay in benefits being realised, as well as reputational damage.	Increase in score funding case to be prepared for submission to Welsh Government in December 23
DHCW0318	**PRIVATE**	**PRIVATE**	Decreased in score due to confirmed position

4.8 The Board are asked to consider the DHCW Corporate Risk Register Heatmap showing a summary of the DHCW risk profile. The key indicates movement since the last risk report.



Summary risks removed since last report:

RISK TITLE	POSITION REMOVED FROM
*DHCW0328	20 (Major x Almost certain)
DHCW0327 - NDR Platform	16 (Major x likely)
DHCW0326 - NHS Wales App	9 (Moderate x Possible)
DHCW0259 – Staff Vacancies	16 (Major x Likely)
*DHCW0278	15 (Catastrophic x possible)
*DHCW0279	15 (Catastrophic x possible)
DHCW0237 – New Requirements	12 (Moderate x Likely)
DHCW0292 – Infrastructure Unfunded posts	16 (Major x Likely)

- 4.9 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.
- 4.10 Item 6.1ii includes an [analysis of DHCW's corporate risk position](#) of the past twelve months, including risks that have not been fully mitigated over the last year.
- 4.11 Item 6.1iii includes the six-monthly [Board Assurance Report dashboard](#) update.

5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 5.1 The Board is asked to note the recent changes in the corporate risk profile, as a result of the escalation of two new risks, change in score of two risk and the removal of eight risks.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
<p>NOTE the Risk and Board Assurance Framework Workplan.</p> <p>RECEIVE and DISCUSS the status of the Corporate Risk Register including changes since the last meeting.</p> <p>NOTE the Corporate risk trending analysis.</p> <p>NOTE the Board Assurance Dashboard.</p>	

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DIGITAL HEALTH AND CARE WALES

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

Agenda Item	6.2
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Angela Hagget, Organisational Performance Lead
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
RECEIVE / DISCUSS the report as representative of the performance of the organisation for September - October 2023.	

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Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions 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>DUTY OF QUALITY ENABLER</u>	N/A
<u>DOMAIN OF QUALITY</u>	N/A
If more than one enabler / domain 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: Organisational performance reporting equally effects all. An EQIA is not applicable.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and development of transparent organisational performance reporting has a positive impact on quality.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below There is a duty to monitor, report on and improve performance.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective performance management not take place there could be financial implications.
WORKFORCE 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.
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.

Section 2: any key available in this section (4/4) use as appropriate where necessary.
Section 2:

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

2 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	16 Nov 2023	Noted

Acronyms			
DHCW	Digital Health and Care Wales	IT	Information Technology
IOPR	Integrated Organisational Performance Report	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	SLA	Service Level Agreements

3 SITUATION/BACKGROUND

3.1	This document provides a summary of the Digital Health and Care Wales (DHCW) Integrated Organisational Performance Report (IOPR) to the end of October 2023. A similar report is presented to the DHCW Management Board monthly; Management Board attendees present and discuss performance and resulting actions or risks. The Board IOPR is presented on a bi-monthly basis in arrears.
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4 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

4.1 Plan on a Page

The Plan on a Page shows the progress of our key IMTP commitments. Blue relates to funded items, yellow unfunded and grey are change controls. The border shows the funding position at the start of the financial year. Some expectations around funding have not materialised and have therefore changed to yellow 'unfunded'. (The cyber plan and new data centre move.) Other items have had funding approved for future years so have turned blue – the new radiology and digital medicines programmes.

In the period since the last report, the build of the minimum viable product of the Welsh Intensive Care Information System (WICIS) has been completed and has been delivered for user testing to the first go live site in the Grange University Hospital. The system will collect real-time information automatically from monitoring devices, pumps and respiratory equipment used for patient care. This will provide easy access to vital data and insights, giving frontline staff a quick and clear overview of the status of patients and devices across the ward.

The Radiology Informatics Solution Procurement (RISP) contract was awarded to the preferred supplier. Additionally, the first key milestone in the delivery of the new Laboratory Information Management System (LIMS) 2.0 has been achieved with the delivery of the base solution into the hosted environment.

Phase one of the Application Programme Interfaces (API) for the Electronic Prescribing and Medicines Administration (Secondary Care) have been made available to Health Boards and Trusts, as have demographics and terminology APIs for the Welsh Care Records Service (WCRS).

The Outline Business Case for Welsh Community Care Information System (WCCIS) phase 2 was submitted in June 2023 with recommended options for the future of the programme and its digital system. This was approved in September, and regional engagement workshops have since taken place across Wales.

Additionally, the Integrated Unscheduled Care Dashboard (ISCU) has been upgraded and is now available in Power BI. The ISCU contains up-to-date information on hospital admissions, A&E waiting times and bed occupancy.

4.2 Scorecard

The scorecard provides an 'at a glance' indicator of performance in four key areas, finance & workforce, governance & quality, operational service delivery, and engagement & feedback. Further indicators may be included, and existing ones amended, in response to strategy, planning, and performance requirements. There are eighteen indicators on the scorecard, fourteen are GREEN and the remainder are AMBER.

The details below highlight selected indicators from the scorecard:

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Operational Service Support (AMBER): Incidents resolved within the Service Level Agreement (SLA) target for Critical National Services are reported as AMBER, for September. Calls resolved by Desktop Support Services for both incidents and service requests are both reported as AMBER for October, this was due to an exercise to resolve old calls during the month.

There were eleven Major IT Incidents across September (2) and October (9). The two in September, affected nine services. The nine in October, affected 26 services. A chart has been added to the report showing the distribution of services affected by major incidents for the last six months. The most affected services are Welsh Clinical Portal (WCP) and the Welsh Patient Administration Service (WelshPAS).

We experienced an issue with our telephone systems for incoming phone calls from GP practices. The Service Desk has a non-geographic number as well as a Cardiff number and there were communication problems between the providers of the telephony service and the non-geographic number. GP practices were asked to contact us via our Cardiff number until the issues were resolved. DHCW have moved from a standard telephone service to a fully cloud contact center solution.

Three incidents related to local IT problems for Welsh Radiology Information Services. Two incidents in October and one in September were related to the Data Centre 2 Transition project, as a result we have paused changes related to this project whilst the work is replanned, and further investigations take place.

There was also an incident related to the Welsh Hospital Pharmacy Stock Management System (WHSPMS), which was related to the time change from British summer time to GMT.

Additionally, there are ongoing investigations with Microsoft regarding call quality issues with Microsoft Teams following the incident in October. We are monitoring call quality with our web content filtering solution, which has the capability to monitor end user experience.

The Service Desk abandoned call rates rose to 6% in September. The increase was a result of an incident related to a network issue and staff training. However, this significantly decreased to 1.3% in October. The main reason for this decrease is service improvement measures which have been put in place to improve cover during staff breaks. The customer satisfaction scores remain above target (93%), at 95%.

IT Service Availability in 2023-24 to dates is 99.986%

Quality Management System and Operational Service Delivery (AMBER): The rating relates to the review of documentation in a timely manner in both areas.

Audit Actions (AMBER): One action is not on target and is being monitored.

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5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no key risks / matters for escalation to Board / Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
RECEIVE / DISCUSS the report as representative of the performance of the organisation for September - October 2023.	

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GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT (IOPR)

Special Health Authority Board
September - October 2023

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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

- [Organisational Scorecard & Summaries](#)
- [Corporate Planning](#)
- [Financial Performance](#)
- [People and Organisational Development](#)
- [Commercial Services](#)
- [Operational Service Management](#)
- [Clinical Assurance and Information Governance](#)
- [Governance and Quality](#)
- [Engagement](#)

This report supports the requirements of Management review as defined in ISO:9901 and other related standards.

Scorecard

The **SCORECARD** presents a high-level view of the business areas which are monitored and presented in greater detail throughout this report. This month there are **five indicators which are AMBER**.

Amber Status

Audit Actions – There are 32 open actions with 15 on track for completion on the target date, 1 action requires an extension.

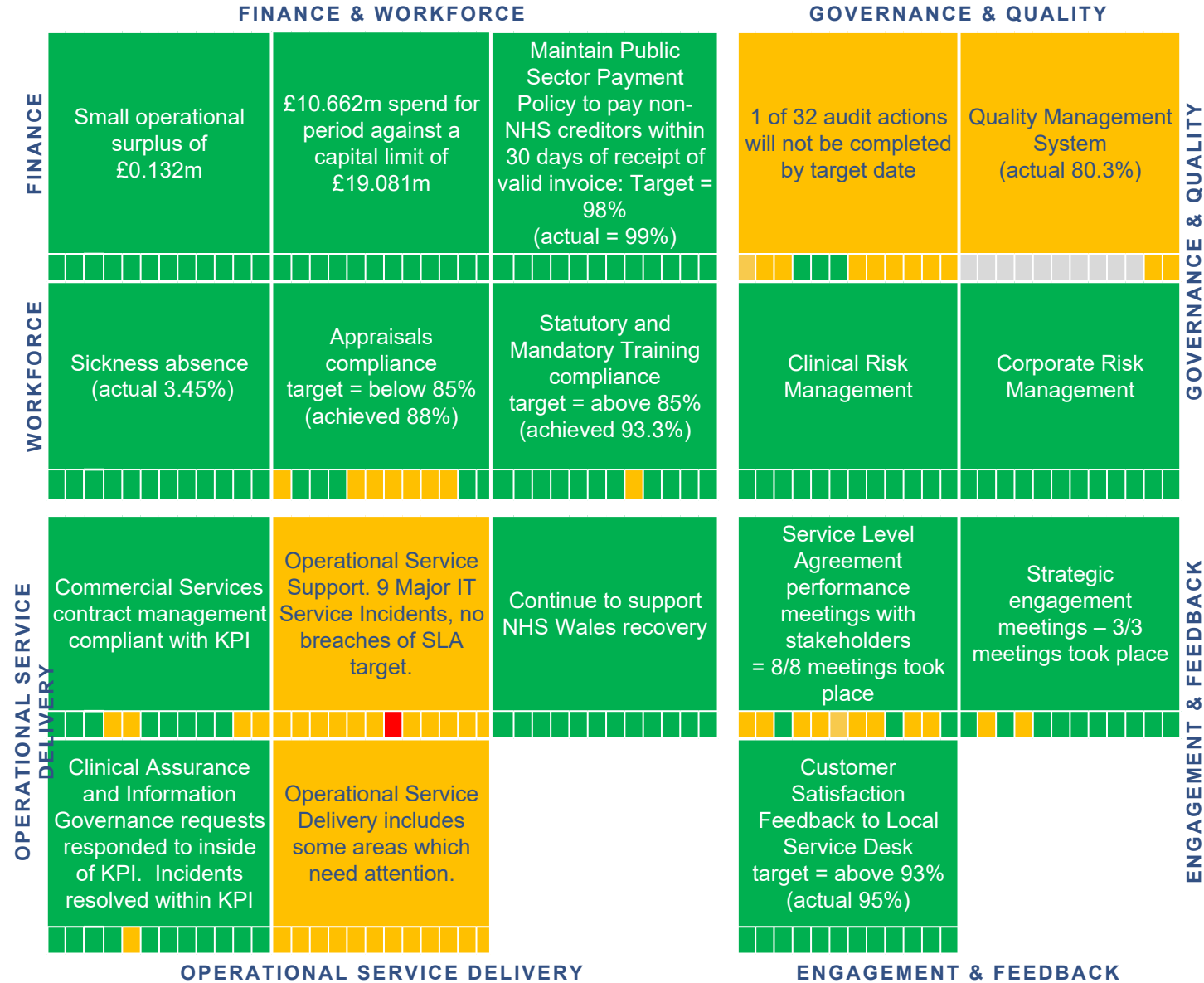
Quality Management System – Overall compliance has fallen to 80.3% from 88% last month. The progression within the Integrated Management System (IMS) has remained at 78% compliance with three directorates as outliers. The Quality team will be sending detailed reports to these Directorates.

Operational Service Support – There were two Major IT Incidents affecting 7 services in September (no SLA breaches) and nine in October affecting 26 services (no SLA breaches). IT Service Availability decreased to 99.973% from 99.986% year-to-date but remains above target (99.90%).

Operational Service Delivery – Resilience documentation domains are mainly red or amber and will be discussed at directorates Senior Leadership Team meetings. Additionally, there is continued work to deal with obsolescence across the architecture.

Green Status

Workforce – There is an increase in the PADRs, and S&M compliance evidenced with the upward trending over the past few months.



Previous 12 months RAG status are indicated in the smaller boxes right to left.

1. PROVIDE A PLATFORM for enabling digital transformation

- 1.1 Data Platform and References Services
- 1.2 Open Architecture and Interoperability
- 1.3 Protecting Patient Data
- 1.4 Sustainable and Secure Infrastructure

2. DELIVER high quality digital products and services

- 2.1 Public Health
- 2.2 Primary, Community and Mental Health
- 2.3 Planned Care
- 2.4 Urgent and Emergency Care
- 2.5 Diagnostics
- 2.6 Digital Medicines

3. EXPAND the digital health and care record and the use of digital to improve health and care

- 3.1 Health and Care Professions
- 3.2 Patients and the Public

4. DRIVE better value and outcomes through innovation

- 4.1 Research and Innovation
- 4.2 Value from Data

Our Approach: To focus our delivery on the challenges of our service partners, we have divided our work into Missions, Portfolios and Enablers. These reflect ministerial priorities and alignment with national programmes and describe our strategic objectives and outcomes.

5. BE the trusted strategic partner and a high quality, inclusive and ambitious organisation

- 5.1 People and Culture
- 5.2 Finance
- 5.3 Sustainability
- 5.4 Stakeholder Engagement
- 5.5 Quality and Safety
- 5.6 Governance, Performance and Assurance

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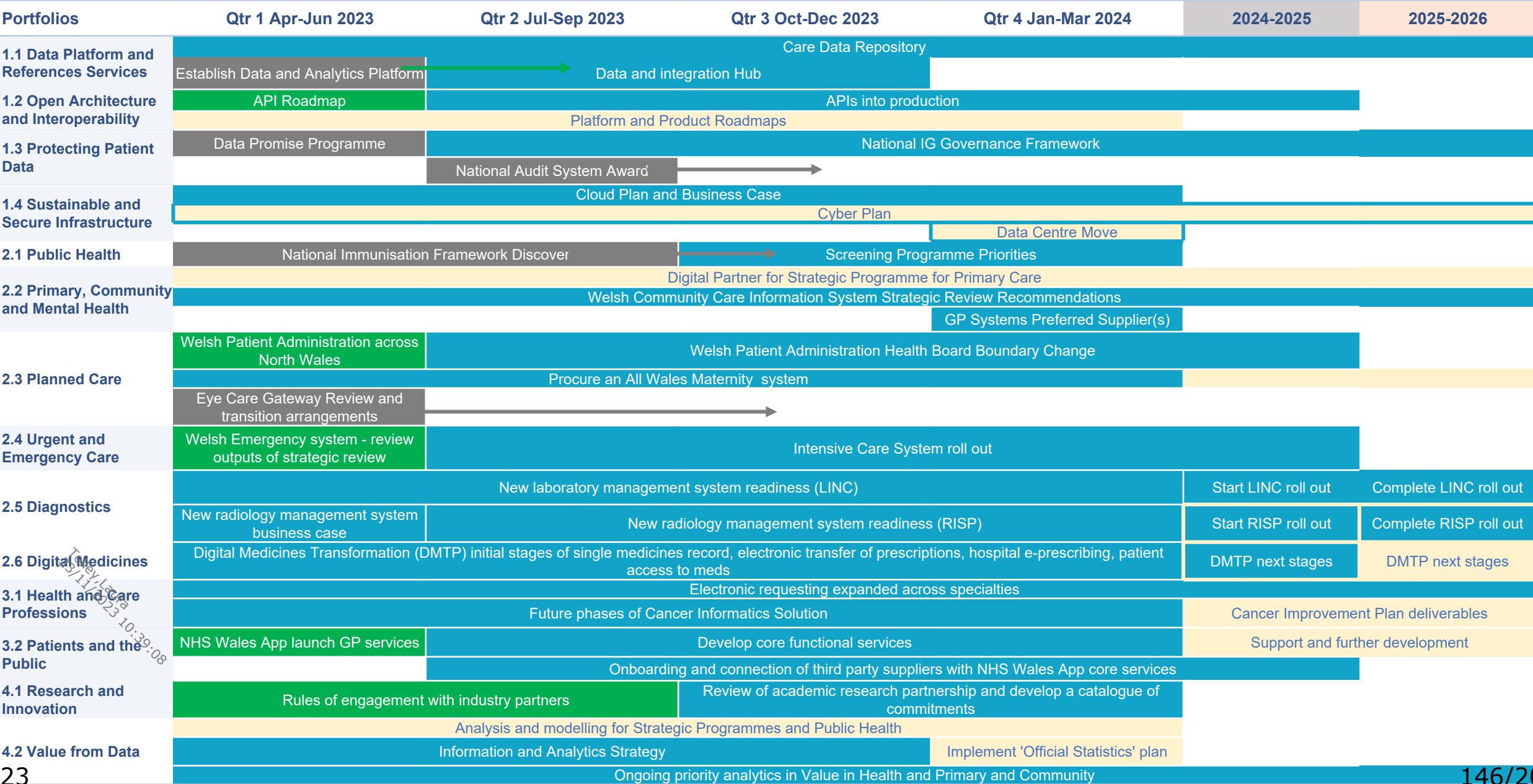
Plan On A Page

Key

Funded
Resource not confirmed
Change Control

Confidence in availability of funding or budget allocation
Limited confidence in funding or budget allocation

The border shows the position at the start of the year



Financial Management | Financial Highlights

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 £0.132m after applying the savings target profile.
- Capital – Current Spend of £10.662m against CRL of £19.081m.
- PSPP – DHCW have paid 98% of non-NHS invoices within 30 days.

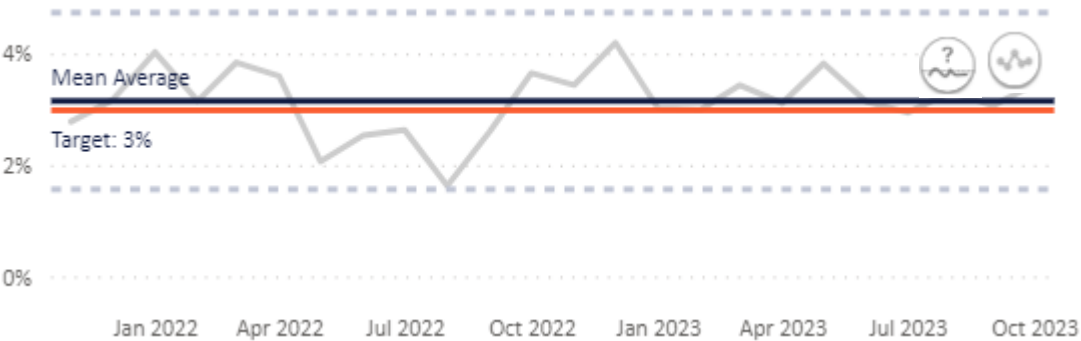
Summary:

- **Forecast:** DHCW is forecasting achievement of all financial targets, however focus continues upon recruitment and payroll run rates as this could materially impact the final position as pay underspend continues to exceed the planned vacancy factor, supplemental third-party capacity continues to be addressed via the strategic resourcing group.
- **Savings:** DHCW is currently forecasting achievement of the total revised savings core savings target of £4.978m (excluding £3.4m ring fenced candidates DPIF/Primary Care IM&T and COVID).
- **COVID:** The letters and texts have increased in month and will be monitored over the forthcoming quarter.
- **Capital** A deep dive has been completed for DPIF schemes with any potential underspend surfaced for further discussion regarding repurposing. An adjustment of £1.353m for RISP representing disbursements to health boards to support central hardware and licencing costs will be actioned by Welsh Government. The capital outlook for this year is now fixed with any consideration for repurposing of slippage to be submitted to Executive Directors.

INDICATOR	RESULT	SUMMARY
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)		Small operational surplus of £0.132m.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit CRL)		£10.662m spend for period against a capital limit of £19.081m
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 31/10/23 £8.136m

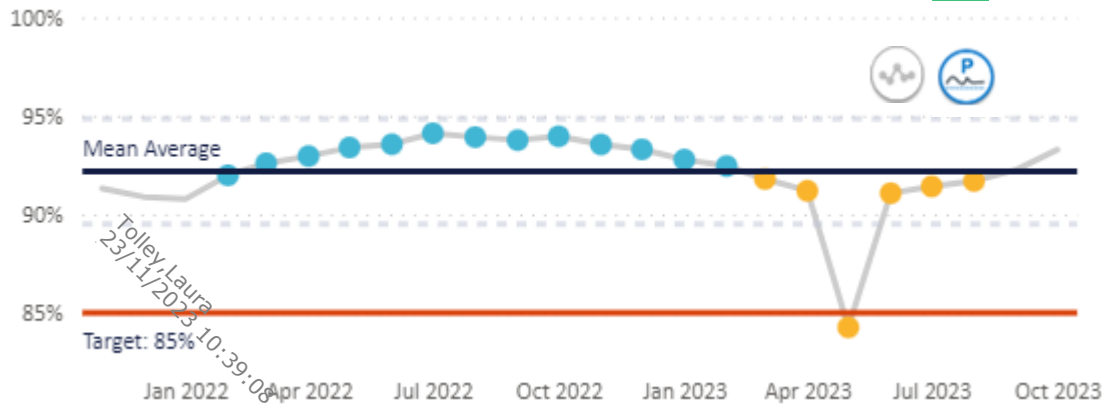
People & Organisational Development | Summary

Sickness Absence



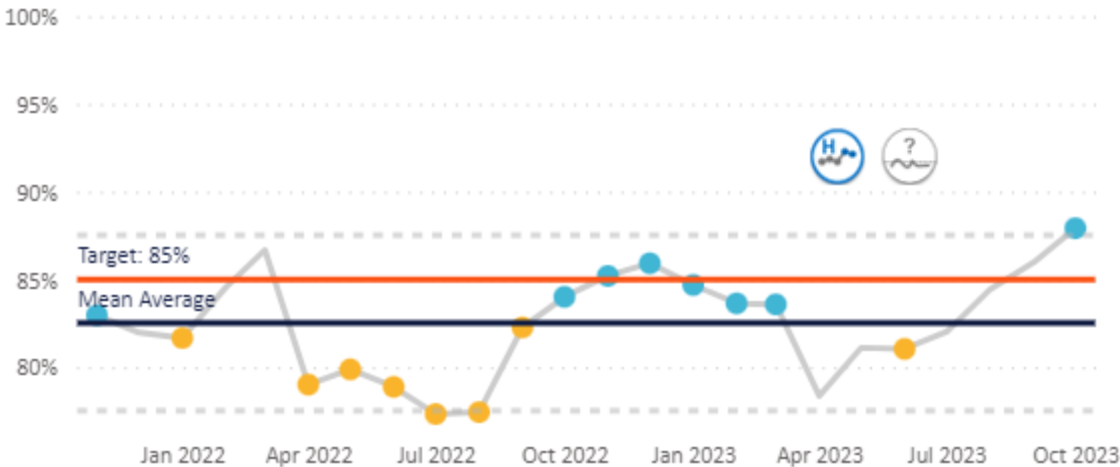
Overall sickness absence - 3.45%, which is an increase of 0.38% from last month.
Long term sickness - 1.75%, increased by 0.11% from last month.
Short term sickness - 1.71%, increased by 0.28% from last month.

Statutory and Mandatory Training



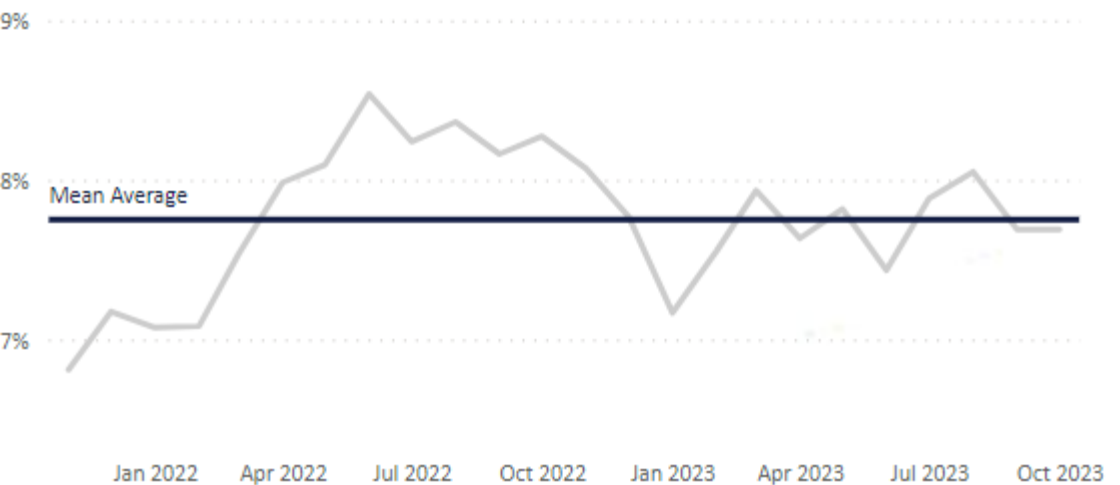
Statutory and Mandatory Training is 93.3% an increase of 1% from last month. is above the Welsh Government target of 85% for NHS Wales.

Appraisals



Appraisal completion rate is 88%, an increase of 2% since previous month. This is above the Welsh Government target of 85%.

Turnover



Turnover is 7.69%, has remained same from last month.

RAG KEY

VARIATIO



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

Average

Process Limits



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
Microsoft License Agreement Reseller (LAR)	All Wales	A contract to secure a sole supplier re-seller for all Microsoft Products and Services used across the NHS in Wales.	£300m	4+2	01/04/2023	March 2024	Renewal of the existing P159.06
Medicines Information Solution	All Wales	Provision of a central pharmacy database provided for/by the All-Wales Library Service.	£1.2m	2+1	01/09/2024	July 2024	In planning
Systematic Anti-Cancer Therapy (SACT) System	All Wales	An All-Wales agreement for the provision of an Anti-Cancer Therapy information management software solution as a managed service.	£5m	5+2	01/10/2024	September 2024	NEW: Procurement planning stage- defining a route to market
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. Currently drafting an OBC to secure funding. (being undertaken by external 3rd Party Inform Solutions

NIIAS has been removed, due to contract value.

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Operational Performance | Key Points to note

Incidents resolved within the Service Level Agreement (SLA) target for Critical National Services are reported as AMBER, for September. Calls resolved by Desktop Services for both incidents and service requests are both reported as AMBER for October, this was due to an exercise to resolve old calls during the month.

There were eleven Major IT Incidents across September (2) and October (9). The two in September, affected nine services. The nine in October, affected 26 services. A new graph has been added to the report showing the distribution of services affected by major incidents for the last six months. The most affected services are Welsh Clinical Portal (WCP) and the Welsh Patient Administration Service (WelshPAS) which impacted users who were unable to access these systems until the Incident was resolved. Investigations have been undertaken and lessons learnt have been implemented to mitigate against further occurrences. Service availability for the year to date remains above target at 99.986%.

The Service Desk abandoned call rates rose to 6% in September. The increase was a result of a Major IT Incident relating to PSBA, and issues with the Junior Doctors rotation during the month. However, this significantly decreased to 1.3% in October. The main reason for this decrease is service improvement measures which have been put in place to improve cover during staff breaks. The customer satisfaction scores remain above the average, at 95%.

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Operational Performance | Incident & Service Request Management - Overview

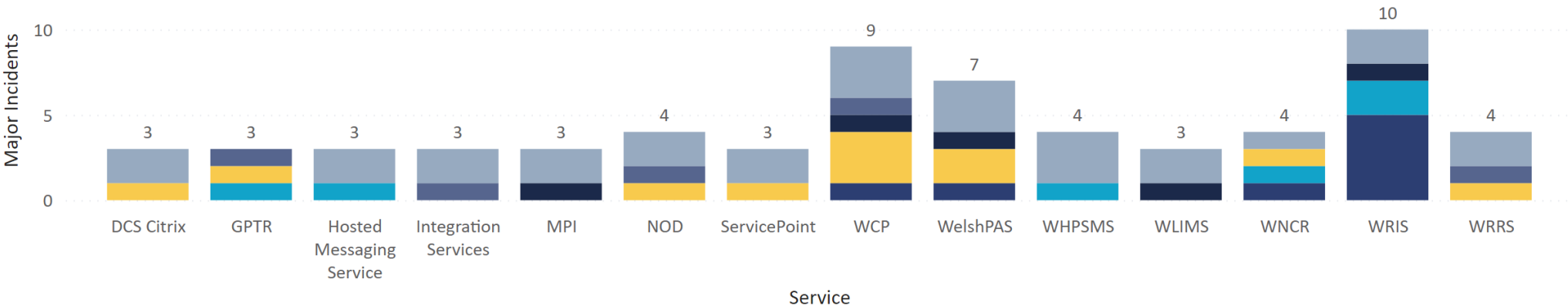
Performance Area	Metric	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sept-23	Oct-23
National Services - Critical (Excluding GP Services)	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	1110 (97%)	1378 (97%)	1115 (91%)	1156 (92%)	1079 (98%)	1449 (98%)	1321 (97%)	1221 (96%)	1310 (97%)	1174 (97%)	1265 (97%)	1315 (94%)	1264 (97%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	5401 (99%)	5688 (98%)	4860 (98%)	5089 (98%)	4855 (98%)	5048 (98%)	4566 (98%)	4980 (98%)	4916 (98%)	4924 (98%)	5254 (98%)	5223 (98%)	5387 (98%)
National Services - Standard	Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	438 (99%)	409 (96%)	298 (97%)	412 (94%)	675 (99%)	469 (99%)	314 (99%)	386 (100%)	367 (98%)	348 (99%)	407 (95%)	407 (99%)	458 (97%)
	Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	1648 (98%)	1600 (98%)	1280 (98%)	1401 (98%)	1407 (98%)	1388 (98%)	1047 (99%)	1211 (98%)	1203 (97%)	1178 (98%)	1397 (98%)	1248 (97%)	1401 (98%)
Desktop Support Service - Critical	Total Incidents Resolved (% resolved within timescale)	1291 (94%)	1195 (93%)	992 (94%)	1250 (96%)	1235 (95%)	1315 (94%)	1435 (95%)	1667 (94%)	1680 (94%)	1677 (96%)	1714 (96%)	1540 (96%)	1751 (94%)
	Total Service Requests Resolved (% resolved within timescale)	1056 (97%)	1053 (96%)	789 (94%)	840 (95%)	800 (96%)	1078 (94%)	989 (95%)	1166 (94%)	1034 (94%)	1091 (95%)	946 (94%)	980 (95%)	1123 (91%)

Performance Area	Metric	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sept-23	Oct-23
National GP Services - Critical	Calls Logged as Incidents (% resolved within timescale)	863 (99%)	949 (100%)	627 (98%)	765 (100%)	800 (99%)	1143 (100%)	1139 (99%)	970 (100%)	729 (99%)	742 (99%)	737 (99%)	863 (99%)	TBC
	Calls Logged as Service Requests (% resolved within timescale)	331 (99%)	308 (100%)	260 (98%)	382 (100%)	299 (100%)	573 (100%)	658 (100%)	615 (99%)	745 (100%)	649 (99%)	621 (100%)	438 (100%)	TBC

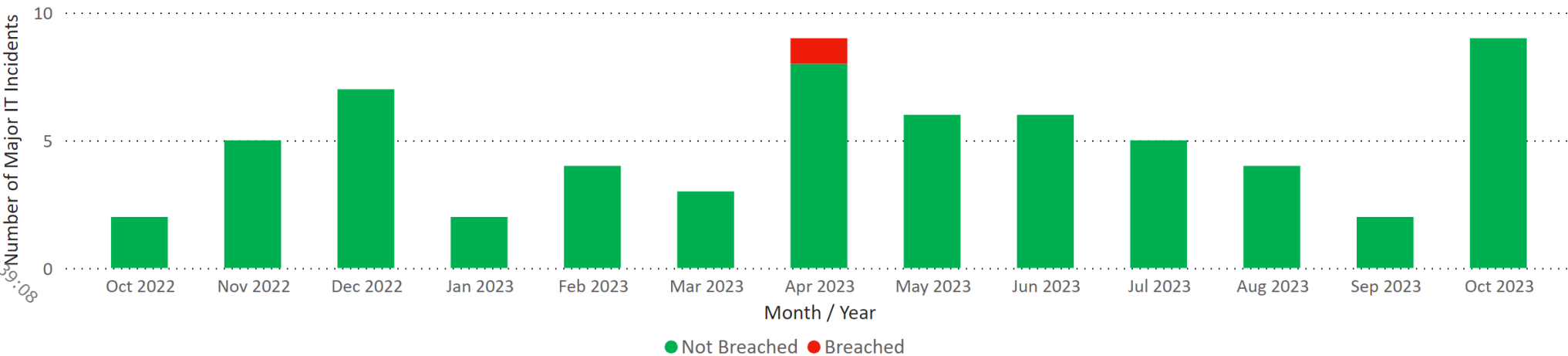
Desktop Support Service breached 95% target for Incidents and Service Requests as a result of the NWSSP IT dept closing a large number of stale calls from their team. As they share a partition with DHCW Client Services, this has caused a large spike in breaches for both Incidents and Service Requests

Major Incidents by Service in Last 6 Months

Year Month ● May 2023 ● June 2023 ● July 2023 ● August 2023 ● September 2023 ● October 2023



Major Incidents per Month



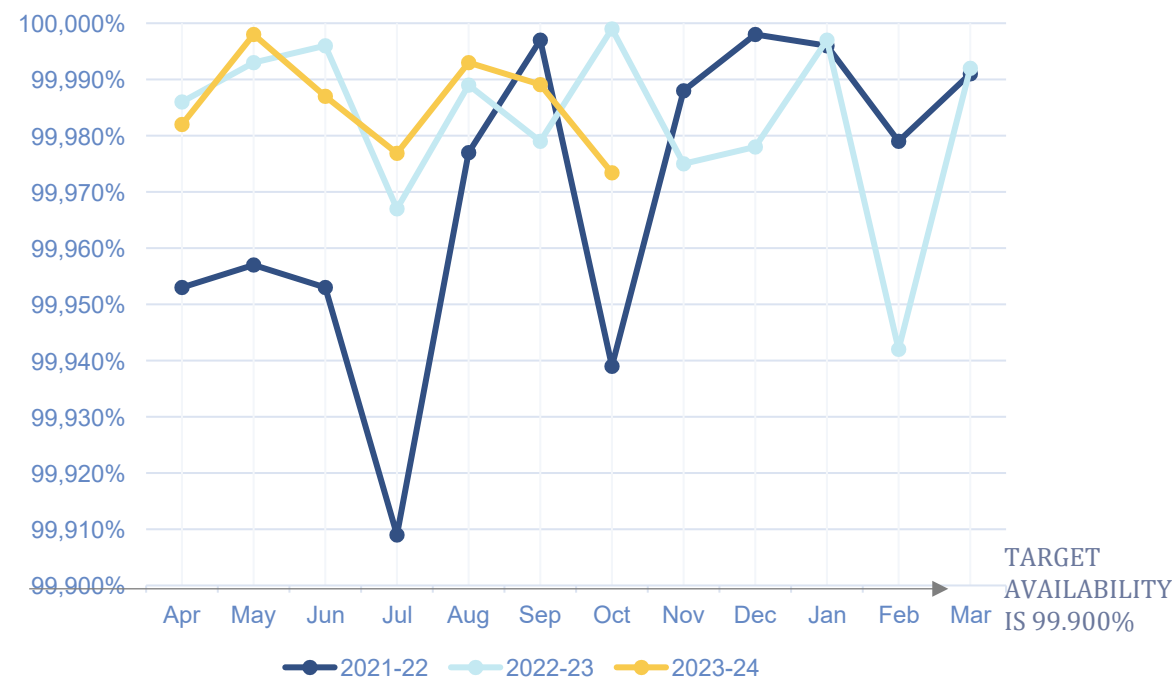
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IT Service Availability in October 2023
was 99.973%

with 9 MIs totalling 839 minutes of
disruption across 26 services

IT Service Availability in 2023-24 to date
is 99.986% with
31 MIs totalling 2982 minutes of
disruption across 37 Services

DHCW Service Availability Annual Comparison



Note: (a) from 1st May 2023 to 31st August, service availability figures do not include the outages of Welsh Radiology Information System (WRIS) which are reported in the Major IT Service Incidents as WRIS is not a service hosted by DHCW (they are hosted in local organisations). From September those not caused by locally supported infrastructure are included.
(b) From 1st June 2023 service availability figures include 50% of downtime for Major Incidents impacting service to users but where the service remained available.

Summary:

There are two active work streams developing DHCW's approach to IT Service Availability:

- Tracking the MIs reported to Management Board and Board through the IOPR – presenting and refining the current Availability calculation model based on MI reporting.
- Developing a Power BI dashboard based on MI reporting to present IT Service Availability data.

In future 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 and alternative data sources will be reviewed.

Service(s) Affected	Microsoft 365 Product Support (Office 365), Network Services			Service Level: Infrastructure Critical	P2	Incident Ref: 8707796 Problem Ref: 29348
Date/Time Logged	11/09/2023 09:26	Date/Time Resolved	11/09/2023 11:02	Time to resolution: 96 Minutes Incident did not breach the 8 hour SLA target		
Description	Users across NHS Wales reported that they had lost internet connectivity and access to the Microsoft Office 365 and some network related services. The outage coincided with a planned change working on the structured cabling on of our Data Centres, in preparation for the Data Centre 2 Transition (DC2T) Project. The root cause was related to scheduled cabling work conducted by 3rd party contractors.					

Service(s) Affected	National Operational Databases (NOD), Welsh Results Reports Service (WRRS), Gp Test Requesting (GPTR), Welsh Clinical Portal (WCP), Integration Services			Service Level: Clinical Critical	P2	Incident Ref: 8761554 Problem Ref: 29442
Date/Time Logged	27/09/2023 13:01	Date/Time Resolved	27/09/2023 13:39	Time to resolution: 28 Minutes Incident did not breach the 8 hour SLA target		
Description	Users across NHS Wales reported being unable to access results or send requests within WCP, GPTR was also reported as unavailable to send requests from Primary Care practices. It was discovered that the Welsh Results Reporting Service (WRRS) was unavailable for all health boards following a SQL migration/upgrade. Investigation found that following the migration, a record did not update as expected meaning that services were unable to connect. Furthermore, the service account did not match the original causing further issues with authentication. The permanent solution was to restart the cluster resource after updating the affected configuration. This resolved the authentication errors.					

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Service(s) affected	Networking outage affecting 23 services including: Welsh Patient Administration System (WelshPAS), Welsh Clinical Portal (WCP), Welsh Laboratory Management System (WLIMS)		Service Level: Clinical Critical	P2	Incident Ref: 8777568 Problem Ref: 29476
Date/Time Logged	04/10/2023 22:46	Date/Time Resolved	04/10/2023 23:02	Time to resolution: 16 mins Incident did not breach the 8 hour SLA target	
Description	Users in Swansea Bay University Health Board (SBU) reported that they had lost access to WelshPAS, WCP and WLIMS. This related to network enabling works for the Data Centre 2 transition project. Investigations discovered that a network change had caused network issues and so was rolled back. The DHCW Network Services team worked alongside our suppliers to identify the root cause which was remediated on the 24 th October. A lessons learnt report is being prepared that will be applied in future releases.				
Service(s) affected	Welsh Patient Administration System (WelshPAS) Welsh Nursing Care Record (WNCR) Welsh Clinical Portal (WCP)		Service Level: Clinical Critical	P2	Incident Ref: 8784819, 8784890, 8784894 Problem Ref: 29493
Date/Time Logged	09/10/2023 11:10	Date/Time Resolved	09/10/2023 11:17	Time to resolution: 7 mins Incident did not breach the 8 hour SLA target	
Description	Users in Betsi Cadwaladr University Health Board (BCU) reported being unable to access new sessions of WelshPAS and errors in WNCR. Active users logged in to WelshPAS reported errors when searching for patients. Investigations found that the connection to the BCU WelshPAS Database had been lost. The root cause of the issue is still under investigation, but it was discovered that a large number of database connections had been disconnected. Once these dropped connections were cleared, access to the database was restored. When the underlying PAS or integration with PAS fails, PAS based functionality in WCP becomes unavailable, i.e., patient search, patient lists, patient demographics and Patient Admin in SBU & Velindre Cancer Centre. Admissions, discharges and transfers (ADT) messaging would also be affected, so these would not be reflected in WCP. A pink banner is automatically displayed advising the user that WCP is read only, the impacts include a delay on requesting treatments, diagnostics and the creation of clinical documentation. WNCR experiences a full period of downtime as it is entirely dependent on the associated PAS to provide patient demographics and ward lists. Whilst the user can log into the application, they are unable to search for patients, view existing or create new assessments and experience a time out error.				
Service(s) affected	Welsh Radiology Information System (WRIS)^		Service Level: Clinical Critical	P1	Incident Ref: 8790067 Problem Ref: -
Date/Time Logged	11/10/2023 07:54	Date/Time Resolved	11/10/2023 08:08	Time to resolution: 14 mins Incident did not breach the 4 hour SLA target	
Description	Radiology users in Neville Hall Hospital ABUHB reported that they were unable to access WRIS following a planned maintenance outage (scheduled from 06:00 to 06:30). Investigations and found that the service was running very slowly, a restart was performed which restored access to users. The root cause was found to be the local IT planned outage (Including server restarts) continued past the scheduled end time of 06:30 until 08:00.				

Service(s) affected	Telephony*		Service Level: Infrastructure Critical	P2	Incident Ref: 8813869 Problem Ref: 29561
Date/Time Logged	20/10/2023 08:21	Date/Time Resolved	20/10/2023 10:01 Time to resolution: 100 mins Incident did not breach the 8 hour SLA target		
Description	DHCW Service Desk noticed that the Primary Care Service Desk telephone number (03332008048) was unavailable. Investigation identified that the number had been ported from Vodafone to 8x8. A problem record was created to document restoration steps, the number was ported back to Vodafone resolving the issues. The root cause was found to be Vodafone porting the number on the incorrect date. When the porting dates were changed from 29th September, the 8x8 Project Manager had rescheduled them for 20th October as a placeholder. The date of 3rd of November was agreed on and notification was sent to Vodafone, however they did not provide an acknowledgement.				
Service(s) affected	Welsh Radiology Information System (WRIS)^		Service Level: Clinical Critical	P1	Incident Ref: 8816513 Problem Ref: 24799
Date/Time Logged	22/10/2023 12:14	Date/Time Resolved	22/10/2023 12:35 Time to resolution: 21 mins Incident did not breach the 4 hour SLA target		
Description	Users in the University Hospital of Wales Cardiff and Vale University Health Board (CAV) reported being unable to log in to new WRIS sessions, Users connected to existing sessions were unaffected. This issue coincided with a planned upgrade to the PACS system within CAV, however no formal notice was given upgrade. Investigations a known error within the application was causing the issue. The established workaround to the problem was invoked which involves a restart of the web service which restored access to users. Shutting down the live service prior to commencing the upgrade would have avoided the issue				
Service(s) affected	Microsoft 365 Product Support (Teams)		Service Level: Clinical Critical	P2	Incident Ref: 8820614 Problem Ref: 29580
Date/Time Logged	24/10/2023 09:30	Date/Time Resolved	24/10/2023 11:15 Time to resolution: 115 mins Incident did not breach the 8 hour SLA target		
Description	Users in some NHS Wales organisations reported issues with video and audio quality in Microsoft Teams calls. The issues resolved themselves without DHCW making any changes. DHCW teams are continuing to investigate the root cause and are making networking changes to help mitigate any future reoccurrence.				

Service(s) affected	Networking outage affecting 23 services including: Welsh Patient Administration System (WelshPAS) Welsh Clinical Portal (WCP) Welsh Laboratory Management System (WLIMS)			Service Level: Clinical Critical	P2	Change Ref: 127923 Problem Ref:
Date/Time Logged	26/10/2023 23:15	Date/Time Resolved	26/10/2023 23:45	Time to resolution: 15 mins Incident did not breach the 8 hour SLA target		
Description	This incident related to network enabling works for the Data Centre 2 transition project. During testing of a change to remove restriction of four main routing elements between the old and new data centre networks, issues were encountered across multiple services. Investigations were undertaken by Network Services and the change was rolled back to restore service. The root cause has been determined and the work has been re-planned for a future date.					

Service(s) affected	Welsh Radiology Information System (WRIS)^			Service Level: Clinical Critical	P1	Incident Ref: 8830792 Problem Ref: -
Date/Time Logged	28/10/2023 11:16	Date/Time Resolved	28/10/2023 12:50	Time to resolution: 104 mins Incident did not breach the 4 hour SLA target		
Description	Users in Hywel Dda University Health Board (HDD) reported that they were unable to access WRIS. Initial investigations identified a potential network / server issue locally within the health board with three servers unavailable. Local IT were engaged, and the servers became available again, and following a restart of the WRIS services the system was accessible to users. The system was unavailable to HDD users for 104 minutes					

Service(s) affected	Welsh Hospital Pharmacy Stock Management System (WHPSMS)			Service Level: Clinical Critical	P2	Incident Ref: 8831055 Problem Ref: 29615
Date/Time Logged	29/10/2023 09:10	Date/Time Resolved	29/10/2023 10:15	Time to resolution: 65 mins Incident did not breach the 8 hour SLA target		
Description	Users across NHS Wales reported that some users were able to log on the Welsh Hospital Pharmacy Stock Management Service terminal, but after selecting a printer the terminal was not loading. Investigations identified that some of the application servers did not run their nightly startup scripts and as such the individual health board site folders were not created. Additionally, some servers had domain and network connectivity issues and were unable to run group policy scripts. This issue also occurred on the 30 th Oct 2023, but, because of proactive monitoring, was corrected before any services were impacted,Rerunning the startup scripts allowed the site folders to be created and users were able once again able to access the system.					

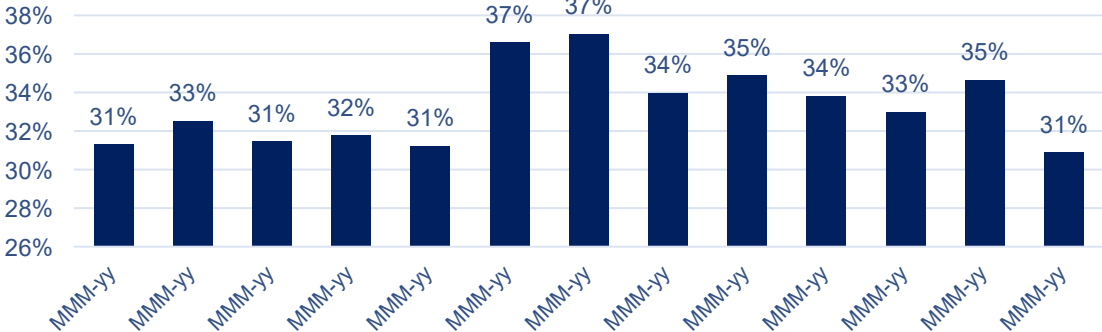
	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23
Total Number of calls logged	21152	21735	14617	17632	17505	19580	16077	17890	15805	17170	20335	20519	19230
% All Abandoned Calls (Threshold 4%)	7.1%	6.6%	5.3%	3.5%	7.5%	3.8%	4.2%	2.4%	2%	2.2%	4.6%	6%	1.3%
Average Speed of Answer (Seconds) (Target 30 sec)	11.5	12.5	13.5	10.0	19.0	11.5	6.0	8.5	7.5	7.5	10.5	16.1	7

Commentary:

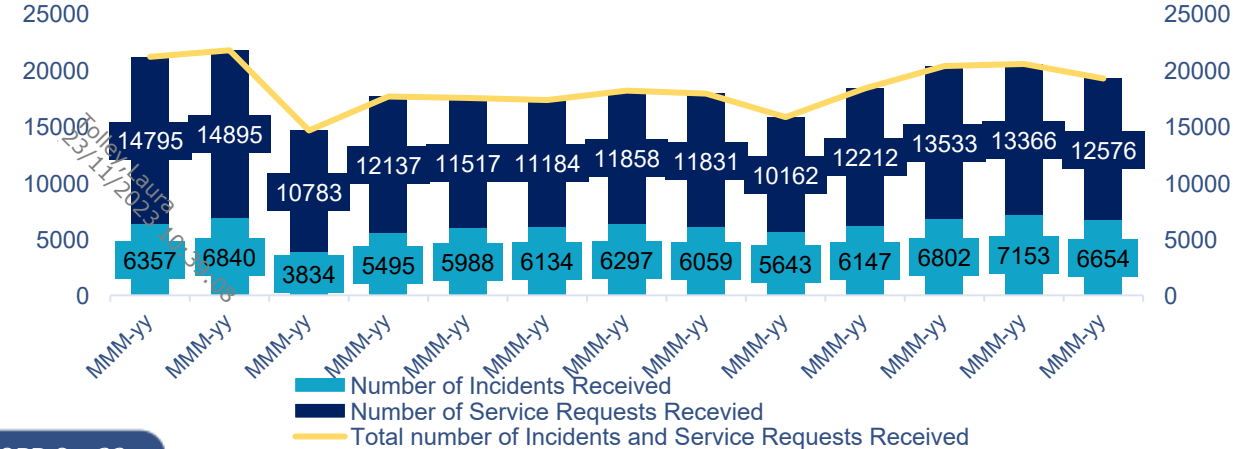
Overall, a good performance for the month. Email was again our most popular communication channel for customers to log calls, followed by calls escalated from Local Service Desks.

Our Abandoned Calls rate dropped to 1.3%. This decrease appears to be partly due to service improvement measures we have put in place related to improving staff cover during break times. However, it doesn't take in to account a telephony outage which occurred in October which took 100 minutes to resolve.

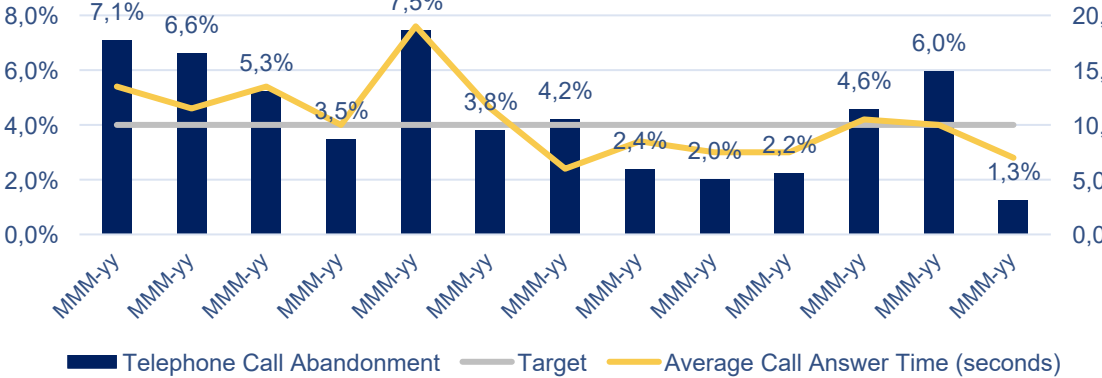
First Line Fix Rate



Incidents and Service Requests Received



Telephone Abandoned Calls



Clinical Incidents:

There is one incident investigation underway, two incidents were closed in September. There have been no new incidents logged since March 23.

Information Governance:

- In September 2023,
 - DHCW received 7 Freedom of Information (FOI) Act requests and 2 Subject Access Requests (SAR).
 - 5 FOIs and 1 SAR responded to in September 2023.
- In October 2023,
 - DHCW received 4 Freedom of Information (FOI) Act requests and 2 Subject Access Requests (SAR).
 - 3 FOIs and 3 SAR responded to in October 2023.
- All requests were responded to within the statutory timescales. A summary of the responses are provided on the next slide.

Response

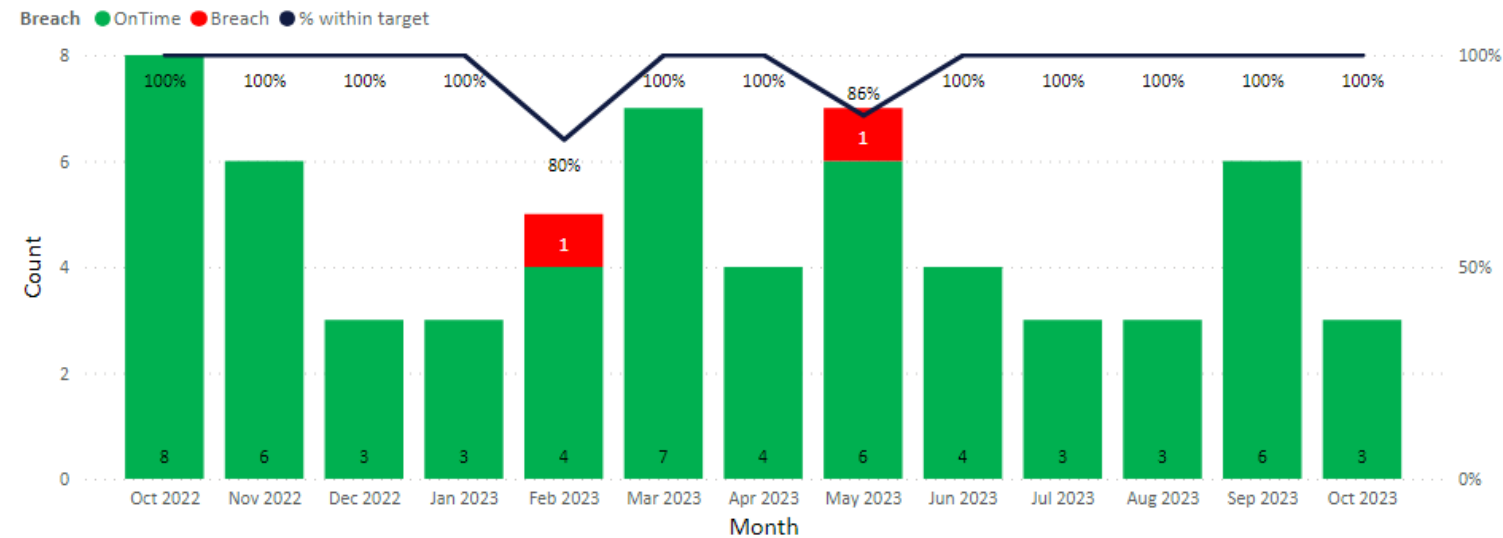


Diagram is for responses to Freedom of Information Act requests only.

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Number	RAG	Status
10	Green	Complete
15	Yellow	The action is on target for completion by the agreed date
0	Orange	The action is not on target for completion by the agreed date
0	Red	The implementation date has passed, and management action is not complete
7	Grey	Status not updated
32	Open Actions	

Following advice from Internal Audit, one action dependent on a third party is being managed via a separate log where it can be tracked.

At the end of September 2023, there were 25 open actions, 20 of which were recorded as complete, 4 on target for completion by the agreed deadline and 1 requiring an extension to target date.

However, during October 2023, the Audit & Assurance Committee received 4 further reports which contained a total of 27 recommendations. The Committee also agreed to close the 20 complete actions. This resulted in 32 actions remaining open.

Progress has been made against these recommendations with 10 actions being marked as complete, 15 marked as on target and 7 actions from People and Organisational Development yet to be updated.

Key Matters for Consideration of this Meeting

The following reports were received at the Audit & Assurance Committee on 17 October 2023:

- Board Assurance Framework – Substantial Assurance
- Hybrid Working – Substantial Assurance
- Stock Management – Reasonable Assurance
- Review of the General Medical Services (GMS) Digital Programme Board – Assurance Rating Not Applicable

This month has seen further progress with actions being completed bringing the total actioned to 10.

The Audit & Assurance Committee approved the extension of one private action which now has an agreed target date of October 2024.

Progress:

Strategic Engagement NHS Wales Partners

- Strategic engagement sessions held with WAST and first exec session held with NHS Exec.
- Follow up to ABUHB DHCW partnership workshop underway to improve collaborative working and similar session in development with PHW.
- Series of meetings with NHS Partners to understand challenges and opportunities, and plan focus for future exec and other sessions, including engagement and showcase series.
- The following meetings have been postponed:
 - PTHB – 4th October 2023
 - VUNHST – 10th November 2023

Engagement Events and Showcases

- DHCW Showcase and Engagement Series outline for 2024/25 drafted. Planning underway with NHS Wales partners.

Stakeholder intelligence

- Stakeholder review T&F Group established with representation across DHCW to define scope and focus to better understand stakeholder views, opportunities and challenges and provide benchmark data.
- Drafting ITT to commission organisation to support work with planned start in Q4.

Digital Inclusion

- DHCW Digital Inclusion Working Group ToR and membership drafted with first session scheduled 9th November.
- Digital Inclusion Charter Accreditation Action Plan drafted for review by Working Group prior to planned submission in November .

Other partnerships

- Formalising partnerships with Life Science Hub Wales and Bevan Commission. Agreement and joint plans with LSHW being finalised for approval by respective boards.

NHS Wales Strategic Engagement

Date	meetings: Organisation
13 th September 2023	Aneurin Bevan University Health Board
14 th September 2023	Cwm Taf Morgannwg Health Board
TBC	Hywel Dda University Health Board
4 th October 2023	Powys Teaching Health Board
12 th October 2023	NHS Executive
25 th October 2023	Welsh Ambulance Service Trust
17 th January 2024	Powys Teaching Health Board

Other Strategic Engagement Activities

Date	Organisation
1 st September 2023	DHCCB Meeting with Welsh Government
7 th September 2023	All Wales Digital Programme Leads Meeting
15 th September 2023	ABUHB Partnership Workshop
18 th /19 th September 2023	Four Nations Meeting
10 th October 2023	Tractivity Stakeholder Engagement Summit
11 th October 2023	LSHW/DHCW Partnership Meeting
12 th October 2023	Ministerial Visit
25 th October 2023	Catalyse 2023: Symposium (UWTSD)
7 th November 2023	Bevan Commission Partnership Meeting
4 th December 2023	PHW/DHCW Partnership Workshop
7 th December 2023	NHS All Wales Digital Programme Leads
15 th December 2023	Four Nations Meeting



Date	Organisation
5 th October 2023	Swansea Bay University Health Board (SBUHB)
11 th October 2023	Aneurin Bevan University Health Board (ABUHB)
18 th October 2023	NHS Wales Shared Services Partnership (NWSSP)
18 th October 2023	Cardiff & Vale University Health Board (CaVUHB)
20 th October 2023	Hywel Dda universtiy Health Board (HDUHB)
24 th October 2023	Cwm Taf Morgannwg University Health Board (CTMUHB)
26 th October 2023	NHS Wales Executive
26 th October 2023	Powys Teaching Health Board (PTHB)
7 th November 2023	Public Health Wales (PHW)
13 th November 2023	Welsh Ambulance Service Trust (WAST)
14 th November 2023	Velindre University NHS Trust (VUNHST)
17 th November 2023	Health Education and Improvement Wales (HEIW)
TBC	Betsi Cadwaladr University Health Board (BCUHB)

There were no meetings scheduled for September. Q2 SLA Review Meetings commenced from 05.10.2023

Tolley Laura
23/11/2023 10:39:08

Summary:

Customer Satisfaction levels remain above target at 95%.

Health Education Improvement Wales

Fast, efficient, friendly

Swansea Bay Health Board

Very efficient. Nothing too much trouble and a nice person

Digital Health and Care Wales

I was given the required attention and support needed

Public Health Wales

Service was prompt and my query was dealt with

W98007 – Practice 2 Fforestfach Medical Centre

Friendly, very helpful. Explained the process from start to finish

W95035 – Riversdale House

The lady was very cheerful and helpful

W91030 – St Georges Crescent Surgery

I can't believe how quickly my request has just been dealt with.an amazing service. Thank you so much



Engagement | Business Change Team - Feedback

"Thanks for the training- we have been using the WCP/WNCR for a couple of years now but I have learnt some new tricks so thank you" – National (WCP)

"I think this is really good and will be using it straightaway in clinics" – Cwm Taff (WCP - WISDM)

"This is much easier than I thought, I can see that the more I do the easier and quicker I will find it" – Cardiff & Vale (WNCR)

"Very good and always asked if need further info." – National (DSPP)

"Clear and concise explanations. I now have a clear understanding of what the app is like and how user friendly it is" – National (DSPP)

"I thought I knew the system fairly well but actually there was a lot that I wasn't aware of, and I found today's session very helpful to fill in some gaps." – Aneurin Bevan (WICIS)

"It's really straightforward, I'm not worried about using the iPad now" – Cardiff & Vale (WNCR)

"Thank you for attending our Primary Care Team meeting this morning and providing your excellent demonstration. I know the team will really benefit from being able to see how exactly everything looks and works within the App." – National (DSPP)

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DIGITAL HEALTH AND CARE WALES

HALF YEAR PERFORMANCE AGAINST PLAN

Agenda Item	6.3
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Name of Meeting	SHA Board
Date of Meeting	30 November 2023

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

Executive Sponsor	Ifan Evans, Executive Director of Strategy
Prepared By	Angela Hagget, Organisational Performance Lead
Presented By	Ifan Evans, Executive Director of Strategy

Purpose of the Report	To Receive/Discuss
Recommendation	SHA Board is being asked to
RECEIVE / DISCUSS the report as representative of the performance of the organisation.	

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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

Section 1: NB this section must be completed prior to submission

1 IMPACT ASSESSMENT

STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	N/A
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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:	

DUTY OF QUALITY ENABLER	N/A
DOMAIN OF QUALITY	N/A
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: Organisational performance reporting equally effects all. An EQIA is not applicable.	

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and development of transparent organisational performance reporting has a positive impact on quality.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below There is a duty to monitor, report on and improve performance.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective performance management not take place there could be financial implications.
WORKFORCE 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.
SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.

Section 2: any key available in this section (4/4) use as appropriate where necessary.
Section 2:

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

2 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	16 Nov 2023	Approved

Acronyms			
DHCW	Digital Health and Care Wales	IT	Information Technology
IOPR	Integrated Organisational Performance Report	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	SLA	Service Level Agreements
WPAS	Welsh Patient Administration System	BCU	Betsi Cadwaladr University
NDR	National Data Resource	NDAP	National Data and Analytics Platform
CDR	Care Data Repository	API	Application Programme Interfaces
WIS	Welsh Immunisation System	EPS	Electronic Transfer of Prescriptions
DMTP	Digital Medicines Transformation Portfolio	CYPriS	Children and Young Persons Integrated System

3 SITUATION/BACKGROUND

3.1	This document provides a summary of the Digital Health and Care Wales (DHCW) performance against the Integrated Medium-Term Plan (IMTP) at the mid-year point. A similar report is presented to the DHCW Management Board monthly where Management Board attendees present and discuss performance and resulting actions or risks. This report is presented to the SHA Board on a quarterly basis.
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Tolley, Laura
23/11/2023 10:39:08

- 4.1 There have been significant achievements in the last six months including the successful conclusion of the programme of work to replace separate versions of Welsh Patient Administration System (WPAS) in North Wales, bringing together all areas of the Betsi Cadwaladr University (BCU) Health Board into one single version of the WPAS. The WPAS manages more than 2.6 billion transactions, across NHS Wales, a year. Prior to the merger, if a patient were domiciled in BCU East, but needed treatment in Central or West, their information would have to be transferred to the appropriate system. Now patient information and interactions are easily accessible across the whole health board – saving time, increasing patient safety, and improving the patient experience.
- 4.2 The public beta version of the NHS Wales App was launched in April. Technical validation of GP system connections was completed in the summer, which has enabled accelerated onboarding of GPs since October. Two hundred practices have been connected in the last 8 weeks. The App allows patients to interact with their GP surgery, thereby improving patient accessibility and automating GP surgery tasks. The number of downloads and use of the App is now ramping up quickly.
- 4.3 Progress against the National Data Resource (NDR) includes:
The Data Platform went live early August 2023, consisting of a secure platform integrated with NHS Wales digital infrastructure which hosts the National Data and Analytics Platform (NDAP) and the Care Data Repository (CDR). These platforms are key enablers for delivering all-Wales data capabilities in a governed, secure, and ethical manner. The first data pipeline (national reference data set) has been implemented in readiness for the platform to be populated over time with health and care data from both local and national services in line with the NDR operational delivery framework.
- The NDR Programme successfully led a go-live of the Google Apigee API management product that will host and manage the API endpoints including logging and security. The first tranche of Application Programme Interfaces (APIs) has been delivered into production. The APIs and other open architecture engagement products will facilitate information sharing across organisational boundaries and enable health boards and partner organisations to access and contribute to the single patient record for the benefit of patients and citizens in Wales. Work is now focused on health board engagement on the use of this functionality.
- 4.4 The DMTP portfolio has made good progress on electronic transfer of prescriptions (EPS) completing a technical proof of concept in the summer and starting a service proof of concept last month, which included the first live end-to-end digital prescription in Wales. Health Boards are making good progress with their procurement of EPMA suppliers, using the national framework. The DMTP portfolio is working closely with the DSPP and NDR programmes on patient access and shared medicines record, and this is also progressing well.

Tolley, Laura
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- 4.5 As part of Covid-related activities, the Community Applications team completed a large and important piece of work to separate two systems – the Welsh Immunisation System (WIS) used to support vaccinations, and the Children and Young Persons Integrated System (CYPrIS) used to support the child health record. WIS and CYPrIS were working together as part of the response to COVID-19 and the need for a rapid nationwide immunisation programme. The separation of the systems is a key enabler for the ongoing development of digital within the vaccination transformation programme for Wales.
- 4.6 The Outline Business Case for WCCIS phase 2 was submitted in June 2023 with recommended options for the future of the programme and its digital system. This was approved in September, and regional engagement workshops have since taken place across Wales.
- 4.7 Also, during the period, a contract has been awarded to underpin our integration services, there has been a national release to our current radiology system, the new critical care system minimal viable product has been delivered for User Acceptance Testing, and a new Social Care Wales representative has joined the e-Library Service Board, developing this stakeholder partnership with new social care users.
- 4.8 Our Client Services has supported the establishment of the NHS Wales Executive and is continuing to provide IT support. The Microsoft 365 Centre of Excellence transitioned into live operation, enabling NHS Wales to maximise the value from its investment in Microsoft technologies and driving collaboration across the system.
- 4.9 We have experienced some challenges during the period:
- 4.10 Our response to the financial challenge has been to re-profile our recruitment, focusing resources onto strategic priorities and working with delivery partners where appropriate. We have filled some positions through temporary and commercial/contractual work packages, in order to manage the uncertain short- and medium-term funding outlook.
- 4.10 The Eye Care programme has been transferred to DHCW but we are still working through some of the technical, financial, and contractual details with colleagues in Cardiff & Vale University Health Board (C&V), aiming to provide an indicative revised plan by the end of November.
- 4.11 Recruitment in specialist areas such as cyber and cloud remains challenging.

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5 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

5.1 There are no key risks/matters for escalation to Board/Committee.

6 RECOMMENDATION

Recommendation	SHA Board is being asked to
RECEIVE / DISCUSS the report as representative of the performance of the organisation.	

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GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT (IOPR)

Half Year Performance Against IMTP Portfolios

Special Health Authority Board

Tolley Laura
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Mission 1

PROVIDE A
PLATFORM for
enabling
digital transformation

1.1 Data Platform and References Services

1.2 Open Architecture and Interoperability

1.3 Protecting Patient Data

1.4 Sustainable and Secure Infrastructure

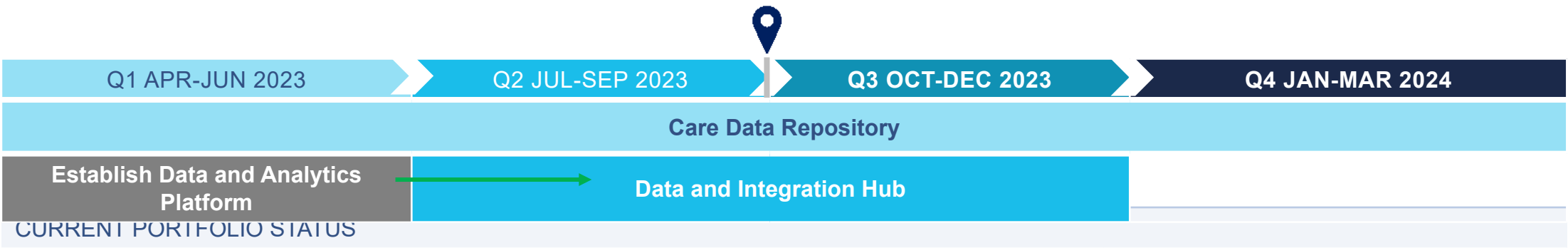
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MISSION 1: PROVIDE A PLATFORM for enabling digital transformation

PORTFOLIO 1.1:

DATA PLATFORM AND REFERENCES SERVICES:

We will **store** structured data in a Care Data Repository, **acquire** care data into a National Data and Analytics Platform and provide modern tools and technologies to support data driven insights and **build** a data and integration hub to allow data to move around securely and safely.



On the 1st of August 2023, The Data Platform Set-Up project successfully achieved completion of the National Data & Analytics Platform and the Care Data Repository, delivering the minimal viable products into production and the reference data pipeline was established.

DELIVERY:

National Data and Analytics (Google Cloud) Platform: The build of the Minimal Viable Product (MVP) is complete, and the assurance process was also completed in August 2023.
Care Data Repository (FHIR store): The build of the MVP and reference date pipeline, including assurance, is complete. The plan for delivery of **Data standards and Reference data** within the Digital Maternity Cymru system has been completed

RE-FORECASTED:

Build complete for Terminology Server: This milestone has been reforecast to Quarter 4 to align with Application Programme Interfaces (API) management.
Analytics Learning Programme Phase 4: Planning for launch has begun, awaiting recruitment of an Advanced Analytics Specialist.

SITUATIONS OF NOTE:

No situations of note in this reporting period.

IMPACT:

Data collected across lots of systems, in different care settings and organisations can be stored to enable a single view of an individual's health and care record. This can prevent repeating the same questions to patients in different settings about their medications, symptoms etc. Data is available across organisational and geographical boundaries to the right person at the right time to enable better care.

MISSION 1: PROVIDE A PLATFORM for enabling digital transformation

PORTFOLIO 1.2: OPEN ARCHITECTURE AND INTEROPERABILITY

We will continue with **extending** our architectural building blocks and Application Programming Interfaces (APIs) and **develop** our open architecture onboarding.



CURRENT PORTFOLIO STATUS:

The first tranche of Application Programme Interfaces (APIs) planned for quarter 2 have been delivered into production ready for beta, including Patient Demographic Query and Cross Referencing (PDQ/PIX), Reference Data (Terminology), Documents via Welsh Care Records Service (WCRS), Shared Medicines Record (SMR). API roadmap has been widely socialised, including having been shared externally across NHS Wales, with clear delivery commitments for the remainder of 2023-24. Delivery of API Management as an operational platform has been achieved. Engagement products planned for quarter 2 have been delivered including API catalogue and specifications, key provisioning and onboarding process. The Wales digital platform website has been developed ready for Minimum Viable Product (MVP) release. Product roadmaps completed for Electronic Test Requesting, Maternity and Patient Identity and Demographics and presented to Technical Design Assurance Group.

DELIVERY:

Delivery of the first tranche of APIs and open architecture engagement products will enable Health Boards and partner organisations to access and contribute to the single patient record for the benefit of patients and citizens in Wales. For example, facilitating regional sharing of Emergency Department summaries across organisational boundaries so that information follows the patient wherever they are cared for.

The Wales digital platform website will publicise the open architecture and provide easy access for application developers to the resources they need to develop innovative applications based on the single record.

IMPACT:

Providing a clear and proportionate process to allow organisations to access the open architecture in a safe, secure and compliant way.

Our architecture will become available to partners and our suppliers in a controlled, secure, rules-based approach.

SITUATIONS OF NOTE:

The Technical Design Authority (TDA) will be established with the first meeting in November 23. The TDA will lead on establishing architecture principles and steering the enterprise architecture.

Ongoing funding for CDE needs to be agreed.

MISSION 1: PROVIDE A PLATFORM for enabling digital transformation

PORTFOLIO 1.3: PROTECTING PATIENT DATA

DHCW plays a role in providing the Wales Accord for Sharing Personal Information (WASPI), the National Intelligent Integrated Audit Solution, providing Data Protection Officer advice to GPs and the Information Governance (IG) Toolkit, and advising on data publication to ensure compliance with information governance standards. We will develop and promote a National IG framework for Wales **to enable safe and secure sharing of patient information** - through assurance, advice, the Data Promise, public engagement, and codes of conduct.



CURRENT PORTFOLIO STATUS:

Milestones continue to be managed. Two milestones have been re-forecasted to Quarter 3, these relate to version 4 of the IG Toolkit and NIIAS re-procurement.

DELIVERY:

The **National Intelligent Integrated Audit Solution (NIIAS)** Single Tender Agreement has been published to market. The **Information Governance Strategy** which describes the IG Framework portfolio is in draft. There are decisions required to prioritise various components, some of which are already within this planning cycle.

IMPACT:

Patients can be assured their private data is protected.

SITUATIONS OF NOTE:

No situations of note in this reporting period.

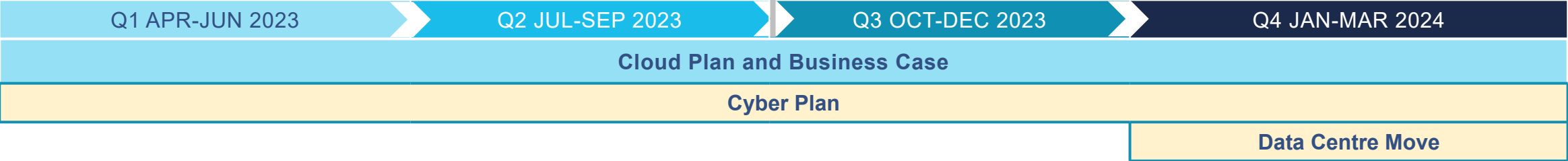
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MISSION 1: PROVIDE A PLATFORM for enabling digital transformation

PORTFOLIO 1.4: SUSTAINABLE AND SECURE INFRASTRUCTURE

DHCW provides an extensive national infrastructure across NHS Wales, including data centres, network infrastructure, cyber security services, end-user devices support and collaboration services.

- We will transition services to the cloud, subject to business case approval.
- We will replace and upgrade aging infrastructure.
- We will move into a new data centre.
- We will continue to monitor cyber security threats and implement the DHCW 3-Year Cyber Plan, subject We will to business case approval.



CURRENT PORTFOLIO STATUS:

Cloud Plan and Business Case: Work to develop a costed plan is underway. The work is focussing on areas which expect to see highest impact of supplier cost rises.
Cyber Plan: DHCW is only able to progress work which does not require additional funding. Options to fund the other elements are being explored.
Data Centre Move: The main areas of activity are installing a new network, moving existing WAN circuits to the new network and planning the data centre transition work.

DELIVERY:

Cloud Plan and Business Case: A high-level Cloud Economic case has been undertaken with a cloud partner. Workshops to support the development a cloud migration plan are underway
Cyber Plan: Progressing elements of the 3-year plan which do not require additional funding.
Data Centre Move: The Local Area Network build is progressing well. System failover tests (to alterative data centre) are almost complete with one remaining.

IMPACT:

This means confidence that systems are protected and available when needed.

SITUATIONS OF NOTE:

Funding position for the Data Centre Move (DC2T) and the Cyber Plan: Neither business case is being funded by Welsh Government. DHCW has identified the funds required for the Data Centre Move project, however, no mechanisms the remaining elements of the Cyber Plan have been identified. The primary focus is on securing funding for the replacement SIEM solution. Key cyber improvements have been removed from this year's plan due to lack of funding.
The migration of DHCW telephony onto the new Contact Centre solution has been delayed due to technical problems encountered with the supplier solution.
Data Centre Move (DC2T): The late handover of the new data hall by the new supplier has reduced the time for the installation and testing of the new network, ahead of the server moves in early January. There is a risk that the network build and testing will not be complete by the start of the planned server move dates in early January. This may result in the server move work slipping into the start of FY 24/25.

Mission 2

DELIVER high quality
digital products and
services

2.1 Public Health

2.2 Primary, Community and Mental Health

2.3 Planned Care

2.4 Urgent and Emergency Care

2.5 Diagnostics

2.6 Digital Medicines

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MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.1: PUBLIC HEALTH

- The Public Health strategy in Wales aims to improve health and well-being and reduce health inequalities, particularly in light of challenges such as aging populations, long-term conditions, wealth disparities, and emerging threats such as antimicrobial resistance and infectious diseases.
- We will continue to deliver any planned Covid-19 requirements as they arise through the Welsh Immunisation System (WIS)
 - We will undertake discovery work around digital options for the national Vaccine Transformation Programme.
 - We will support Public Health Wales screening service requirements



CURRENT PORTFOLIO STATUS:

A revised approach to the NIF Discovery presented to Vaccine Transformation Board on 28th September and Vaccination Oversight Board for final decision on 13th October. Welsh Government has written to Sam Hall to endorse the approach presented. We aim to onboard Kainos to start completing discovery this month with a final report due back end of February. An additional work package to prototype a solution to the cohort identification challenges already identified during discovery will also be kicked off for December (provider TBC).

DELIVERY:

Test Trace Protect (TTP); CRM licenses have been procured until June 2024. In addition, licenses have also procured completing milestone 4017.

Vaccines: The Milestone 4418 for the deployment of the new HPV Immunisation Programme changes has been made. This is the first standalone CYPrIS release on the upgraded Oracle platform, in addition Milestone 4419 for the migration from Team Foundation Server to GIT has been completed. This move modernises our working practices and development tooling on CYPrIS and will assist the team in finalising the remainder of the CYPrIS backlog for the end of this financial year.

Vaccines: Successful deployment of the WIS application for the Autumn Booster campaign made ahead of the start of the vaccination season, including a successful refresh of cohorts which has significantly improved data quality. This leveraged both the progress made on implementing test automation, and the new standalone WIS platform.

IMPACT:

Digital will support consistent, standardised data collection for scheduling appointments, recording activity, etc which in turn means earlier, faster diagnosis to improve survival outcomes.

SITUATIONS OF NOTE:

Newborn Hearing & Bloodspot Screening: A report detailing has been brought together. Public Health Wales have requested a full redevelopment of the product; however, this redevelopment will significantly exceed the SLA funding in place. The assessed options include are less resource intensive but will still require funding from Public Health Wales and may take up to 6 months to deliver due to the technical challenges of the product. External resources will be required to support this effort if agreed.

CYPrIS: Clarity on whether the Child Health discovery will begin is required, understanding if this will happen will be key to prioritisation of work within next IMTP cycle.

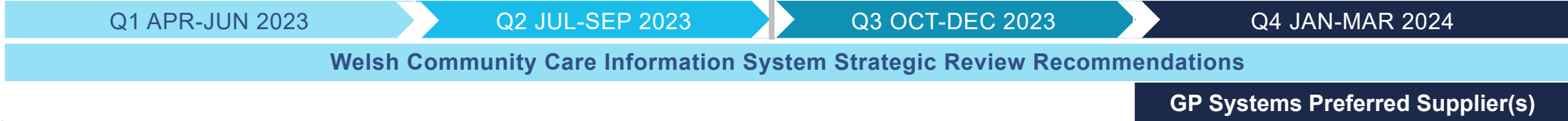
WIS: The beginning of work to upgrade the underlying .NET structure and migrate the software to become a web only application has now started. This is a key element of our modernisation strategy for our future Vaccine product.

MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.2: PRIMARY, COMMUNITY AND MENTAL HEALTH

The Strategic Programme for Primary Care, aims to provide people with access to seamless services delivered as close to home as possible, with a focus on community-based services and activities, building on local community clusters. DHCW manage the GP systems contract, and have built, procured or and/or programme managed systems for community pharmacists, dentists and community health, mental health and social care staff.

- We will integrate systems with the Welsh Community Care Information System (WCCIS)
- We will work on GP data standards
- We will continue to work on the GP systems call off contract



CURRENT PORTFOLIO STATUS:

Primary Care: GP Systems: The process by which practices will choose their next GP system has commenced and is on track. The initial set of supplier presentations to practices is complete with evaluations being undertaken. The outcome is due to be shared with suppliers in November.

WCCIS: Ongoing iterative improvements of the current platform continue to be challenging, though progress is being made. The supplier is aware of Phase 2 and this is making planning of future work difficult. Phase 2 work is being undertaken in tandem (market engagement and partner engagement) to recover time lost as Ministerial approval took longer than anticipated.

DELIVERY:

IMPACT:

Primary Care: The Primary Care Strategy has been published to DHCW Management Board and shared for feedback at a DHCW Board Development Day. The strategy sets out how Primary Care Services will organise itself to deliver digital products/services with improved value and benefits to end users and patients.

Supporting the Dental Reform agenda: Dental waiting lists requirements have been developed and agreed with Welsh Government. This will form the basis for a funded project to enable citizens of Wales to register online and for Health Boards to allocate them to an NHS dentist for routine services.

WCCIS: Market engagement underway. Regional meetings have been held with all partners. Version 2.15 has been released into the live environment and version 2.16 into the test environment.

Safe sharing of quality data between community health and social care nationally and the opportunities for analysis and insight into primary care trends and bottlenecks.

SITUATIONS OF NOTE:

Primary Care: Nothing to report.

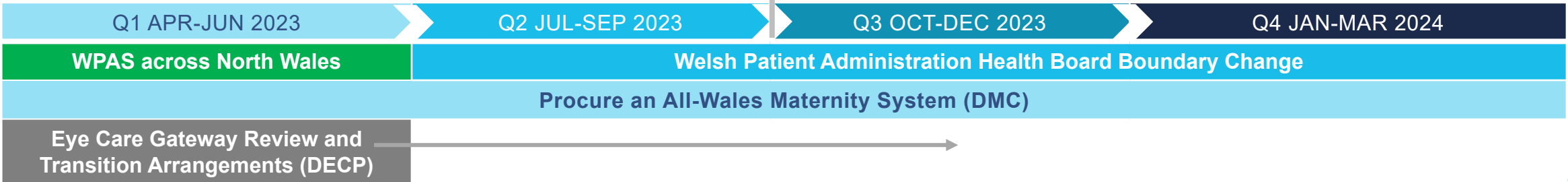
WCCIS: A regional meeting raised support for plans, and a lot of interest in a potential devolvement of responsibility for delivery of user applications. This may require some refinement of the strategic approach to implementation

MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.3: PLANNED CARE

The vision for planned care in Wales aims to better meet the clinical need of the patient from effective referral through to accessing appropriate treatment at the right time and place. DHCW plays a role in this by supporting the administration of patients along their journey of care, through systems such as our Welsh Patient Administration System and electronic prioritisation of referrals, plus standardisation of core datasets and provision of analysis and insight for service re-design.

- We will implement our Welsh Patient Administration System (WPAS) roadmap
- We will procure a national maternity system
- We will work with partners on an eyecare system
- We will join up data across the border with England



CURRENT PORTFOLIO STATUS:

The **Digital Maternity Cymru (DMC)** programme is required to develop an OBC prior to procurement and a revised programme plan is to be developed. 22 national services have been identified as impacted by the Welsh Patient Administration Health Board boundary change. An extension has been requested from WG to re-baseline the **Digital Eye Care Programme (DECP)** plan.

DELIVERY:

Digital Maternity Cymru (DMC): Governance arrangement have been established, recruitment is complete, Pre-procurement engagement has been undertaken. The strategy, vision and the target operating model (TOM) have been approved. **WPAS:** The first data migration is complete, and the data review has commenced. A DHCW governance board has been established. **Digital Eye Care Programme (DECP):** The Technical Infrastructure architect commenced support of migration from Cardiff and Vale University Health Board (C&V UHB). The first technical meetings have been held between C&V and DHCW, and meeting held with the supplier. Commercial documents were received from NHS Wales Shared Services Partnership (NWSSP) at the end August; however, a number of documents remain outstanding. DHCW Commercial Services are undertaking a review and assessment of those received.

IMPACT:

This means a better joined up view of care activity, including maternity and eye care. WPAS is now a single instance across North Wales which allows a common, consistent recording of patient administration data in secondary care. This is positive for patient safety and communication across the region.

SITUATIONS OF NOTE:

DMC: The development of the Outline Business Case had commenced and is expected to be complete by end of Nov '23. Health Board scrutiny and approval is scheduled to be completed during Quarters 3 and 4 in readiness for procurement. **WPAS:** The project scope is greater than WPAS and as such the project should be renamed to reflect the true nature of the task. **Digital Eye Care Programme (DECP):** The Programme remains highly problematic, with significant issues to overcome including funding and recruitment of programme and operational resource to support the work.

MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.4 URGENT AND EMERGENCY CARE

The Six Goals for Urgent and Emergency Care Programme has been prioritised by Welsh Government to gain an understanding of ‘what good looks like’ for patients accessing an Emergency Department. This requires the creation of a Welsh Emergency Care Data Set (WECDS) to agree care standards, a uniform approach to measuring activity and a nationally agreed model of care for emergency departments to enable optimisation of clinical outcomes and patient and staff experience. DHCW has been supporting the roll out of a system called the Welsh Emergency Department system.

- We will develop the Welsh Emergency Care Data Set
- We will work on the next steps for the Welsh Emergency Department System (WEDS)
- We will join up data with the Welsh Ambulance Service
- We will roll out an intensive care information system



CURRENT PORTFOLIO STATUS:

The **Welsh Intensive Care Information System (WICIS)** project is part way through validation testing and is projected to go live first at the Grange Hospital, Aneurin Bevan University Health Board (AB UHB), in November 2023. The second health board, which is scheduled to be Cwm Taf Morgannwg University Health Board (CTM UHB), indicate that they will not be ready. The **WEDS** project is undertaking commercial discussions with the supplier following Swansea Bay University Health Board’s (SB UHB) decision not to extend the roll out to Morriston Hospital. The future of WEDS project being discussed within the project but also within 6 Goals programme and by Directors of Digital. **111** activities are on hold whilst commercial discussions continue.

DELIVERY:	IMPACT:
<p>WICIS: Testing cycles are running to plan for the go live at the Grange Hospital.</p> <p>WEDS: Commercial discussions with the supplier have begun.</p> <p>WECDS: Scoping of the work package has been agreed with third party consultants.</p>	<p>Emergency care clinicians have access to the right information to help triage and direct patients to the right services. Intensive care clinicians will use less paper and have a better view of capacity and variation across Wales.</p>

SITUATIONS OF NOTE:

WEDS: There are active ongoing discussions between the HBs and the supplier regarding future of project.

WICIS: There is a funding shortfall, caused by changes principally in the Medication and Drug therapy module, this and LIMS integration have delayed the project. There are financial implications which the project has requested support from Welsh Government to address. The shortfall will occur in financial year 25/26.

111: 11 programme milestones are on hold until supplier issues are resolved.

Unscheduled Care dashboard replacement: Only 1 of 2 dashboards are currently funded. A breakdown of the costs has been given to the 6 Goals Programme.

MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.5: DIAGNOSTICS

The diagnostic services in Wales are facing challenges due to increasing demand, changes in clinical care, lack of standardisation and scarce expertise. NHS Wales aims to improve service efficiency and effectiveness by reconfiguring services and providing diagnosis closer to the patient. Digital technology is being used to realise improvements in service delivery, patient safety, communication, error rates, costs and use of data which in turn supports artificial intelligence.

- We will roll out the new laboratory information system, while dual running and planning to decommission the current services
- We will support the configuration and roll out of the new radiology system (RISP).
- We will support the development of the business case for Digital Cellular Pathology.
- We will continue to make available new diagnostics reports via our national repositories



CURRENT PORTFOLIO STATUS:

LIMS2.0: The discovery phase has concluded, and the project has moved into the mobilisation phase.
RISP: Revised implementation dates have been formally agreed and Master Service Agreement (MSA) has been executed.

DELIVERY:

LIMS2.0: Conclusion of the discovery phase and commencement of the mobilisation phase.
RISP: MSA executed, Public Health Wales (PHW), Velindre Care Centre (VCC), Powys Teaching Health Board (PTHB) and Betsi Cadwaladr University Health Board (BC UHB) have signed Local Deployment Orders.

IMPACT:

Better access to test results improving patient care and clinical safety. Improved information sharing across boundaries and solutions for storage and distribution of imaging

SITUATIONS OF NOTE:

LIMS2.0: The timescales are challenging and there is a need to minimize configuration changes. All deployment must be completed by August 2025. The impact of operational workload such as system changes, IRIS upgrade and Blood transfusion implementation may impact the LIMS2.0 timelines.
RISP: Revised timelines have been agreed which will result in significant additional costs for NHS Wales.
Technical design: Integration to DHCW products is incredibly complex and as such the design element takes significant effort and time which may impact delivery.
Technical delivery resource: This has been previously escalated; however, the resources are not yet in place. There is an agreement to recruit contractors as mitigation.

MISSION 2: DELIVER high quality digital products and services

PORTFOLIO 2.6: MEDICINES Pharmacy Delivering a Healthier Wales 2019, describes ‘A transformation which is required to maximise the health gain the citizens of Wales derive from their interactions with the pharmacy profession.’ This is coupled with a drive for greater value and finding cost-saving efficiencies.



A proposal has been submitted for potential revenue to be released or deferred for the financial year 2023/24. Additional capital funding has been allocated to DMTP to complete development and release of the NHS Wales App. A Fast Healthcare Interoperability Resources (FHIR) implementation guide published . 94% of required roles have commenced their role. 89% of health boards/trusts have received Secondary Care electronic Prescribing and Medicines Administration (ePMA) Programme pre-implementation funding letters. 22% of health boards/trusts have published their secondary care ePMA Invitation To Tenders (ITT) to market. Five community pharmacy system suppliers have applied for Community pharmacy system innovation funding (CPSIF) for Tier 1 (EPS Development), and three have applied for Tier 2 (Paperless Pharmacy processes) and Tier 3 (Integration with NHS Wales App via push notifications). Five suppliers have been granted Tier 1 funding, and 3 suppliers have been awarded funding for Tiers 2 and 3.

DELIVERY:	IMPACT:
<p>ePMA Programme: C&V and CTM UHBs have successfully concluded their standstill periods, C&V UHB are awaiting approval of their Business Case before awarding contract with supplier. AB and SB UHBs have published their Invitation To Tender (ITT). The Hospital Pharmacy stock control system software development specification (SRS) is undergoing final review. This SRS will request end to end integration between ePMAs and stock control system to send medicines orders and dispensed messages. A ITT Collaboration workshop has been held with Health Boards/Trusts to explore the opportunities for forming alliances for remaining ITTs to be published. WAST are finalising their funding request which is due to be shared with the programme in early October.</p> <p>EPS Programme: Functional and clinical testing of one GP system, community pharmacy patient medication record system and NWSSP has been completed ahead of the first of type testing in live environment, which is planned for November. The safety case and readiness report has been submitted for assurance ahead of live testing. Three further award letters have been issued as part of Community Pharmacy System Innovation Fund. Implementation planning for the national roll out is underway.</p> <p>SMR Project: A workshop has been held with the National Data Resource (NDR) which produced an agreed timeline for the persisted SMR, which ePMAs are dependent upon for going live. GP Medicines, GP allergies and discharge medicines APIs have been developed and tested internally. APIs are available for Beta testing. Medicines, allergies and intolerances data standards change notification updated to include a target date for legacy systems to comply with the standard.</p> <p>Patient Access Project: Push ready notification and nominate a Pharmacy designs were approved by the Primary Care EPS Programme Board in readiness for development. The push ready notification will inform a patient when their prescription is ready from their nominated community pharmacy. The nominate a pharmacy feature will enable patients to nominate a community pharmacy to receive their GP prescription digitally. The supplier has started development on these features as part of work package 9 and 10 – to be completed by end of March 2024.</p>	<p>Making the prescribing, dispensing and administration of medicines everywhere in Wales, easier, safer, more efficient and effective through digital. Enabling modernisation of medicines management, reducing dispensing errors and improving outcomes.</p>

SITUATIONS OF NOTE:

Delivery of Phase 1 national APIs and integrations and the SMR platform are an ePMA go live dependency. Delivery of persistent store SMR has moved from September 2023 to March 2024, this is a dependency for ePMA go live. A workshop with the NDR programme to agree a delivery plan has been held. A GP system supplier has confirmed that EPS functionality will only be available in one of their products. Assurance activities are not planned to commence until June summer 2024, delaying the rollout of EPS across Wales.

Mission 3

EXPAND the digital health and care record and the use of digital to improve health and care

3.1 Health and Care Professions

3.2 Patients and the Public

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MISSION 3: EXPAND the digital and care record and the use of digital to improve health and care

PORTFOLIO 3.1:
ENGAGING WITH
USERS: HEALTH
AND CARE
PROFESSIONALS

The Welsh Clinical Portal (WCP) shares, delivers and displays patient information from a number of sources with a single log-on, across health boards boundaries, together with key electronic tasks. It is the view through to millions of test results and clinical documents on an all-Wales basis.

- We will expand electronic test requesting.
- We will add new forms to our Nursing Care Record.
- We will develop future phases of the Cancer solution
- We will continue to work with NHS Wales partners as

delivered in the Welsh Clinical Portal.

costs of the Microsoft Centre of Excellence



CURRENT PORTFOLIO STATUS:

The Cancer Programme led Palliative Care features have been developed for implementation in Q3. Non radiology image hosting solution has been decided upon allowing progression of the Cancer Programme led Screening/Colposcopy features. Electronic requesting for Radiology has been extended to nearly all health boards, with fast adoption and to the first GP practices. Electronic requesting has been of Cardiology launched in the first and second health boards. Welsh GP referral based Faecal Immunochemical Test (FIT) process improvements demonstrated in Hywel Dda University Health Board (HDD UHB), for wider rollout. Welsh Nursing Care Record is now available across 80% of adult hospital wards in Wales. The GP Portal has been developed to allow GPs to access secondary care functionality and information at a patient level without needing to re-login.

DELIVERY:

Cancer: Migration from Canisc onto modern software solutions, with significantly wider clinical user base allowing for much wider exposure of health information as each patient presents in Wales. Improved information quality and speed for delivering radiology and cardiology requests to the relevant hospital departments, for booking. Configured referrals software to help improve business processes for faster patient FIT testing triggered from GP attendance. Digitisation of Nursing Notes has led to secure retention and exposure of the information for re-use.

E-Library: A new Social Care Wales representative has joined the e-Library Service Board, developing this stakeholder partnership with new social care users (rolled out in Jan 2023). A Power BI prototype for reporting on NHSW e-resource usage data (for databases initially) has been completed, which is intended to encompass all resources and be available to all stakeholders. Engagement activities to stimulate usage and confidence in the e-resources has been undertaken.

Microsoft 365 CoE: The Hosted Messaging Service refresh has delivered a 50% reduction in hosted mailboxes leading to significant cost savings. The refresh ensures the ongoing supportability and enables the removal of legacy systems. The M365 CoE email security review is complete, resulting in a recommendation to migrate to M365 core functionality. Targeting a cost saving in Oct 2024.

IMPACT:

More electronic data from other health boards and clinical colleagues ensures more informed decisions. The use of reference data is expected to save significant time and effort for patients referred from Primary Care to hospitals for radiology appointments. The Phlebotomy module will speed up workflow for the diagnostic requestor, phlebotomy service and laboratory. The cardiology form acts as a precursor to other 'ologies and 'oscopies with and without their own informational management systems able to receipt electronic orders. The M365 CoE helps to maximise benefits from significant investment in the all-Wales Microsoft agreement.

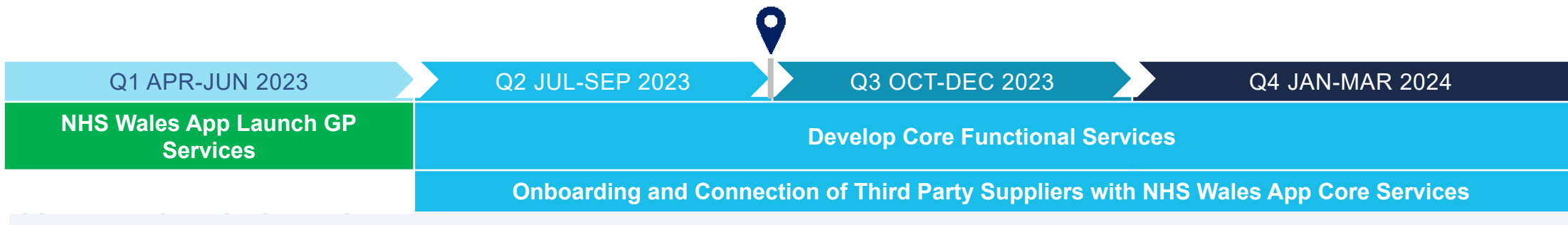
SITUATIONS OF NOTE:

An **e-Library** Service Board meeting was held to address stakeholder concerns around recent finance updates. GP system write-back remains of concern in terms of resource/funding and ownership. Hospital to Hospital (H2H) referrals for follow-up remains at risk due to WPAS interoperability (via API) to deliver the referral pathway creation and continuation capability. Cardiology requesting 'phase 3' to be pushed into 24/25, to focus on basic worklist functionality for other specialities. The last remaining feature of Palliative Care (Welsh Clinical Worklist Manager) moved from Q2 to Q3 to enable an additional development sprint and TDA assurance. Project delays as a result of the ongoing work required for the Google Cloud platform. Health Board implementations of MDT and Cancer Data sets for additional rumours on hold, due to the HBs ability to resource, concerns with the solution and a dependencies.

MISSION 3: EXPAND the digital and care record and the use of digital to improve health and care

PORTFOLIO 3.2: ENGAGING WITH USERS: PATIENTS AND THE PUBLIC

DHCW is establishing a core platform of digital services for patients in Wales, which will put digital at the heart of patient care. This will provide an online digital platform for citizens that allows them to take control of their own health and well-being, make informed choices about their own treatment and find the most appropriate service for their needs across all settings not just primary care.



Public Beta early adopter live testing and evaluation completed for 3 practices. The plan has been reviewed and confirmed for adoption of all of one suppliers' practices by mid-November 2023 (pending approval Q3). The scope of work package 9 has been confirmed and initiated.

DELIVERY:

Public Beta of the early adopter phase for one systems supplier is complete. Recommendations have been prepared to commence rapid deployment plan. Work Package 8 has been completed; including a (zero cost) change to cover delays to event management functions and subsequently Wellbeing Journal, Health Timeline, Personalised Feature Settings, Swansea Bay Patient Portal integration. This enabled development of features to support DSPP IMTP milestones for User Research activities. The scope of Work Package 9 has been approved, including Welsh Identity Verification Service technical design and DMTP requirements.

IMPACT:

Enabling enhanced communication and advice between patients and healthcare providers, increase efficiency and convenience, allow patients to give feedback on their care, and enable self-monitoring of health and sharing of data with clinicians. Empowering patients to better manage their health.

SITUATIONS OF NOTE:

The governance arrangements for NHS login use in Wales. DSPP programme is awaiting a new Programme Board Chair / SRO to be appointed by the Welsh Government. Programme governance is being supported by the Programme Board with DHCW's Executive Director of Digital Strategy temporarily chairing the Board. The Welsh Government have confirmed that there is no additional funding to support development of the Welsh language / user verification requests. The programme has prioritised available funds to support user verification. There is a shortfall in team capacity which has been mitigated by fixed term consultancy. Resourcing requirements under review in line with transition planning.

Tolerance
23/11/2023 10:39:08

Mission 4

DRIVE better value and outcomes through innovation

4.1 Research and Innovation

4.2 Value from Data

Tolley/Laura
23/11/2023 10:39:08

MISSION 4: DRIVE better value and outcomes through innovation

PORTFOLIO 4.1: RESEARCH AND INNOVATION

This portfolio focuses on supporting, adding value to and putting on a more secure footing established and new Research and Innovation (R&I) resources and programmes whilst taking forward an ambitious, expansive and clinically rich digital strategy for R&I. Working Research and Innovation across teams and with external R&I partners, we aim to help develop the knowledge, innovation and insight required for service improvement, transformation and better health outcomes. Our four strategic aims are described in the DHCW Strategy 2022/23 following requirements gathering, stakeholder engagement and strategy review.



CURRENT PORTFOLIO STATUS:

Funding has been secured and a secondment agreement with Welsh Government & Health and Care Research Wales (HCRW) to scope and develop a business case for the Find, Recruit and Follow-up service. DHCW is exploring national clinical research studies to identify support that can be offered, including supporting recruitment for Ascend Plus with HCRW, academic partner and commercial sponsor. Contributing to national and DHCW specific IP policy. Governance process in place to agree projects and ensure rules of engagement followed. The development of draft costing template, agreed at R&I Board. DHCW are continuing to monitor ongoing studies to understand value added and impact. Continuing to develop R&I culture through supporting proposals for nursing research fellowships and linking to Business Change. In addition, work ongoing to develop new SharePoint page for R&I. Supporting partnerships with academia and life sciences and representing R&I on various groups, including WIDI operational group, Innovation Leads and with Health and Care Research Wales.

DELIVERY:	IMPACT:
The development of the business case for Find-Recruit-Follow up service has commenced and scoping of Ascend Plus Trial as a pathway finder. DHCW are working with the Bevan Commission to explore supporting evaluation of exemplar projects and ongoing support to three exemplar projects and Fellow project which we are mentoring. Led by C&V UHB, DHCW, SAIL and Wales' Value in Health Team have been awarded funding from Blood Cancer UK to consider outcomes from blood cancer in Wales, linking with UK partners to better understand incidence, demographics and survival from blood cancer and factors affecting these. A review of applications for Cardiff University Impact Accelerator call and NDR Big Data Fund has been undertaken. DHCW has contributed to the Immersive Technology Special Interest Group and Wales Cancer Industry Forum. The R&I Board has commenced.	Processing, analysis and application of data to solve real health problems and ultimately derive value from that data.

SITUATIONS OF NOTE:

R&I funding is time limited and capacity within the team is limited. Additional resourcing to support long term delivery would be beneficial. Negotiating funding to secure additional resources.

MISSION 4: DRIVE better value and outcomes through innovation

PORTFOLIO 4.2: VALUE FROM DATA

This Portfolio focuses on the full life cycle of data from the acquisition of existing and future data, the analysis of data to provide intelligence for informed decision making, through to initiating actions that provide value through improvement in service delivery and population health. The initial focus will be on the development of the Information and Analytics Strategy which will inform both business as usual activities as well as ongoing and future development. Using safe, secure, sharing within current information governance requirements we will look to make available the wealth of data that is currently acquired to achieve this mission



CURRENT PORTFOLIO STATUS:

Work is ongoing on the Suspected Cancer Pathway (SCP) dashboard and Secondary Care Dashboard, both being published in October. Planning on implementing immunisation changes in support of the child health developments has been undertaken. DHCW are investigating the possibility of publishing ad hoc requests in support of the restructured layout of the Health Intelligence webpage (bilingual). The Health Intelligence team are exploring options for automating production of stand-alone spreadsheets in support of the Inpatients and Day Case Procedures Dashboard. The Value Based Health Care (VBHC) team are continuing work on the Irritable Bowel Disease, Spinal, Hip Arthroplasty and Vascular Dashboards. Data will be added to the existing Patient Reported Outcome Measures (PROMs) tables to feed dashboards and Welsh Clinical Portal visualisations. The primary care team are meeting with contract sub-groups to develop a workplan with confirmed timelines for developing PCIP reports in line with wider ongoing development to support the Cancer Informatics programme and the Vaccine/Covid programme. Detailed Plans for data storage solution and design options to be developed for integrated organisational performance report milestone. An updated draft of the Information and Analytics Strategy to be circulated for wider comment and feedback.

DELIVERY:	IMPACT:
Regarding the General Medical Practice Escalation Tool and following a successful pilot in C&V UHB, an additional report was made available in the Primary Care Information Portal for all Health Board areas, enabling them to identify any practices that have not updated their escalation levels for 30 days. The Health Intelligence team published Suspected Cancer Pathway, Annual APC and APC Quarterly dashboards, completed phase 1 of the vascular dashboard and presented the “Last Year of Life” Dashboard at NHS Wales Leadership Board Meeting, all benefitting DHCW, clinicians, HBs and WG. VBHC and DHCW R&I teams, have been involved in winning a bid to Blood Cancer UK to take the Myeloma Dashboard to the next stage and explore the data within Swansea University’s Secure Anonymised Information Linkage programme (SAIL). This deep dive into Myeloma statistics will look at comparison of survival between UK nations and will estimate the number of years of lives lost for adults in the UK who have been diagnosed with blood cancer. SAIL data will be used to analyse the impact of other co-morbidities on survival from blood cancer such as smoking and diabetes. Successful completion of Autumn covid booster campaign cohort update. Successful failover of a key server was undertaken as part of the Data Centre move project (DC2T) and future planned failover date agreed, ensuring compliance with DHCW wide DC2T migration plans and DR/resilience testing. DHCW was successful in first annual Digital Economy Act accreditation review, providing assurance that progress is being made to a mature state for the provision of a trusted third-party service to SAIL.	Data gets processed, analysed, communicated and applied to real health service problems, allowing informed decision making and actions to be taken which ultimately bring value.

SITUATIONS OF NOTE:

No situations of note in this reporting period.

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	30 November 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	17 October 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	Marian Wyn Jones, Independent Member and 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
23/11/2023 10:39:08

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

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	November 2023	Approved

Tolley, Laura
23/11/2023 10:39:08

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

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"> Programme and Scheme of Delegation Compliance Report. The Committee received an update on a non-compliance with DHCW's Standing Financial Instructions for the Welsh Community Care Information System Data Discovery Consultancy and were assured of the steps put in place to mitigate a recurrence such as raising the level of training and awareness. Due to concerns raised a request for an additional Internal Audit review of the Eyecare Digitisation Programme was made by the Committee Chair. The BAF Deep Dive discussion on sustainable funding, highlighted the
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Tolley, Laura
23/11/2023 10:39:08

	challenge of becoming a trusted strategic partner without a sustainable funding model, and with the current financial restrictions.
ASSURE	<ul style="list-style-type: none"> • Internal Audit Progress Report. The Committee received the Internal Audit Progress Plan and received assurance that the 2023/2024 audit plan would accommodate a review of the recently transitioned Eyecare Digitisation Programme. • Four Internal Audit reviews were received for assurance with two, UK General Data Protection Regulation receiving a <i>substantial</i> assurance and Stock Management receiving a <i>reasonable</i> assurance (considered in the private session). Two reviews were considered in the public session: Hybrid Working, which received a <i>substantial</i> assurance and Board Assurance Framework which also received a <i>substantial</i> assurance. • Audit Wales Committee Update. The Committee noted the update which included a report on the General Medical Services (GMS) Digital Programme Board. • Lessons Learned from Audit of Accounts and Annual Report Process. The Committee noted for assurance the 'Lessons Learned' action plan which had specifically looked at making improvements of how DHCW and Audit Wales worked together for the audit of accounts process for next year. • Corporate Risk Management. Members received assurance that work was ongoing on monitoring risks. A number of risks had been removed since the last meeting. The Committee received the Corporate Risk Trending Analysis for assurance and noted the risk movement demonstrated there were a similar number of risks escalated and deescalated during the 12-month period. • Board Assurance Framework Deep Dive Areas for Review. The Committee received an update on the Strategic Mission - Mission 5 with the presentation of two deep dives: Deep Dive – Finance Response to the Financial Challenge. Proposed savings had been identified of £4.1m for 2023/24. Feedback from Welsh Government was awaited. Digital Inclusion The Committee received an update to the work being undertaken by the Digital Inclusion team, which included making connections with community organisations and including Digital Champions onto the NHS app. • Welsh Language Report. The Committee were assured to note the progress being made on Welsh Language Compliance within the organisation and were pleased to note the recruitment of Welsh speakers into the organisation, however noted the challenge in assessing job descriptions for Welsh Language Skills. The Committee have requested a detailed update on this for the next Committee meeting in February 2024.
ADVISE	<ul style="list-style-type: none"> • Audit Action Tracker. The Committee were advised that progress was being made on the actions with 20 of 25 actions considered complete. • Standards of Behaviour Report. The Committee were pleased to note that 92% of band 8a and above of the workforce of DHCW had completed

Tolley Laura
23/07/2023 10:39:08

	<p>declarations with 8 offers of hospitality and sponsorship accepted during the period.</p> <ul style="list-style-type: none"> • Quality and Regulatory and Cyber Resilience Unit Compliance Update Report. The report was noted by the Committee and received assurance that DHCW were maintaining their position as leaders in quality across the NHS. • Local Counter Fraud Update. The Committee received the Local Counter Fraud update and were advised to note there were no new referrals in this quarter and one investigation was ongoing. • Decarbonisation, Estates and Compliance Report. The Committee received an update and were pleased to note the continued progress being made on the overall Estates Compliance score.
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PRIVATE SESSION

ALERT	No items to alert.
ASSURE	<ul style="list-style-type: none"> • Private Risk Register. The Committee received the Private Risk Register and noted the one private risk assigned to the Committee. • Internal Audit Reviews: UK General Data Protection Regulation and Stock Management Review Members were assured to note the <i>Substantial</i> Assurance rating for the UK General Data Protection Regulation and Reasonable Assurance for Stock Management.
ADVISE	<ul style="list-style-type: none"> • Audit Actions (Private). The Committee were advised of five actions and noted one was complete with the remaining four on target for completion. The Committee received a detailed report to consider a formal extension to an audit action completion date. After discussion, the Committee approved the extension to the audit action completion date. • Counter Fraud Progress Report. The Committee received an update on the work carried out by the Counter Fraud team for this period.

Delegated action taken by the committee:

The 2023/24 Internal Audit Programme to change to accommodate the additional Internal Audit – Eyecare Digitisation Programme.

Date of next committee meeting:

13 February 2024

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	30 November 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, Independent Member
Lead Executive Director	Rhidian Hurle, Executive Medical Director
Date of Last Meeting	2 November 2023
Prepared By	Julie Robinson, Corporate Governance Co-Ordinator
Presented By	Rowan Gardner, Chair of Committee

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

Tolley, Laura
23/11/2023 10:39:08

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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:	

<u>DUTY OF QUALITY ENABLER</u>	Information
<u>DOMAIN OF QUALITY</u>	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	November 2023	Approved

Tolley, Laura
23/11/2023 10:39:08

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"> Following the Committee risk trending analysis, the Committee supported the downgrading of the long standing risk, DHCW0237 – New requirements impact on resources and plan. Following extensive discussion, it was agreed the Information Governance risks, DHCW0320 – Citizen and stakeholder trust in uses of health and social care data and DHCW0263 – DHCW data functions would have a deep dive at the next Committee meeting.
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

	<ul style="list-style-type: none"> ○ Information Services Assurance Report ○ Research & Innovation Strategy Assurance Report <p>All assurance reports were of high quality and provided assurance to the Committee.</p> <ul style="list-style-type: none"> • The Committee noted the work DHCW is doing across the Health and Care system and the hand off points, which was illustrated through the Incident Review and Organisational Learning report. • The three Clinical Directorate Strategies were endorsed for submission to the Board. • The Committee approved the Intellectual Property Policy.
ADVISE	<ul style="list-style-type: none"> • The Corporate Risk Register – PUBLIC. The Committee discussed the active management of risks. • The Committee received along with the review of the Corporate Risk Register the Corporate Risk Trending Analysis and were pleased to note the dynamic way the risk register was used during the 12 month period of analysis. • The updated Digital Governance and Safety Committee Terms of Reference were received which included reference to the new Programme Delivery Board Committee which would have oversight of the Major National Digital Programmes and Projects. Additionally, it was noted that the members of the Committee had increased to three Independent Members plus the Chair.

PRIVATE SESSION

ALERT	<ul style="list-style-type: none"> • N/A
ASSURE	<ul style="list-style-type: none"> • Members were pleased to note that DHCW had received positive feedback for the Cyber Security training delivered to other NHS bodies. • The Corporate Risk Register was discussed, including cyber security risks and a deep dive into a private risk took place at the request of the Committee. • The Committee received the General Data Protection Review audit review which had received a Substantial assurance rating.
ADVISE	<ul style="list-style-type: none"> • The Committee received an update into the Covid Inquiry Update.

Delegated action taken by the committee:

The Committee endorsed the three Clinical Strategies:

- Information & Analytics
- Clinical Informatics and Business Change
- Information Governance

Tolley, Laura
23/11/2023 10:39:08

The Committee approved the Intellectual Property Policy.

Date of next committee meeting:

1 February 2024

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES ADVISORY GROUP CHAIR'S REPORT FOR BOARD

Date of Board Meeting	30 November 2023
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Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Advisory Group	Local Partnership Forum
Chair of Advisory Group	Andrew Fletcher, Associate Board Member for Trade Unions
Lead Executive Director	Sarah-Jane Taylor, Director of People and Organisational Development
Date of Last Meeting	5 September 2023
Prepared By	Alison Bedford, Corporate Governance Coordinator
Presented By	Andrew Fletcher, Associate Board Member for Trade Unions

Purpose of the Report	For Assurance
Recommendation	
The Board is being asked to: NOTE the content of the report for ASSURANCE .	

Tolley, Laura
23/11/2023 10:39:08

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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:	

<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
Advisory Group Chair	October 2023	Approved

Tolley, Laura
23/11/2023 10:39:08

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
LPF	Local Partnership Forum		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail here any areas of assurance that the Committee has received
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 one risk assigned to the forum. Strategic Workforce Planning. The Local Partnership Forum received the update and noted the key findings and recommendations. Workforce Performance Report. Sickness Absence has decreased by 0.20% last month to 2.94% this month. Appraisal completion rate - there was an increase of 1% in the numbers of appraisals completed in the last month.

Tolley, Laura
23/11/2023 10:39:08

	<p>Statutory and Mandatory training had decreased on last month (0.3%) to 91.4%.</p> <ul style="list-style-type: none"> • People & OD Update. The Local Partnership Forum received a presentation on the following: Care Provision/Staff Survey Results Overview/Staff Conference Awards/Leadership Programme Update/Health & Wellbeing Update. • Trade Union Update. The Local Partnership Forum received a verbal update on the issues of importance affecting Union Members in particular the need for good communications and the need to review and update the TU SharePoint page. A future Ten Talk will be scheduled. A Sub-Group is to be convened in partnership with Welsh Government in the Autumn to discuss the agreed non-pay elements that formed part of the pay negotiations. • Communications Strategy Engagement. The Local Partnership Forum received a verbal update on the Engagement Strategy and noted the update. • Equality, Diversity & Inclusion Update. The Local Partnership Forum received a verbal update on the EDI Network which is working very successfully and noted the update. • DHCW Estates Plan. The Local Partnership were pleased to note the progress being made against the Estates Plan. • Organisational Change. The Local Partnership Forum received a verbal update on the Organisational Change process within the Operations Directorate and noted the update.
ADVISE	<ul style="list-style-type: none"> • There were no items for the Board to be advised on.

Delegated action taken by the Advisory Group:
N/A

Date of next committee meeting:

5 December 2023

Tolley, Laura
23/11/2023 10:39:08

DIGITAL HEALTH AND CARE WALES COMMITTEE CHAIR'S REPORT FOR BOARD

Date of Board Meeting	09/11/2023
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Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Committee	Programmes Delivery Committee
Chair of Committee	Simon Jones, Chair
Lead Executive Director	Ifan Evans- Executive Director of Strategy
Date of Last Meeting	N/A
Prepared By	Skylar Green, Corporate Governance Co-ordinator
Presented By	Simon Jones, Chair

Purpose of the Report	For Assurance
Recommendation	
NOTE the content of the report for ASSURANCE.	

Tolley, Laura
23/11/2023 10:39:08

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STRATEGIC MISSION	All missions apply
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CORPORATE RISK (ref if appropriate)	DHCW0322 DHCW0324 DHCW0323
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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	November 2023	

Tolley, Laura
23/11/2023 10:39:08

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
	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
CAV	Cardiff and Vale University Health Board	NDR	National Data Resource
PDC	Programmes Delivery Committee	WCCIS	Welsh Community Care Information System
DSPP	Digital Services for Patients and the Pubic		

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

Tolley, Laura
23/11/2023 10:39:08

PUBLIC SESSION

ALERT	<ul style="list-style-type: none"> The Eye Care Programme remains in pause and reset stage, with feedback to Welsh Government planned for the end of November 2023. The Committee were advised, that the Audit & Assurance Committee had requested Internal Audit carry out an urgent review of the programme, this was being initiated by CAV and DHCW would be working closely with CAV on the outcome of the review and also next steps towards advancement. Sustainable funding was a noted concern for all programmes. The Committee agreed to hold a Committee Development Session to review and agree the scope of the programmes considered by the Committee.
ASSURE	<ul style="list-style-type: none"> The Committee received an update on DHCW Revised Governance arrangements and noted the Committee will provide assurance around all DHCW major programmes within the scope of the Committee. The Committee received a Programmes Overview report which currently had 11 identified programmes which classify as major. The dashboard showed the individual scoring on timeline, scope, resources, and an overall rating. An update on each programme was provided. The Programmes Delivery Committee received the WCCIS Report for assurance. The programme was currently heading into next phase of its work and the Programme were working to produce a draft full business case and procurement plan for Welsh Government approval by December 2023. The Programmes Delivery Committee received DSPP report for assurance. The programme was currently heading into year 3, expansion phase. It was noted that the number of App users has grown to 33,000. The funding from Welsh Government is available until March 2025 with a further business case in the process of development. The Programmes Delivery Committees received the NDR report for assurance. The Committee were advised the NDR Programme demonstrated a long-term commitment to continuously improve the interoperability of the health and social care digital architecture and was a fundamental requirement to enable a single digital health and social care record. The programme aspires to rapidly deliver insight and value through the linkage and re-use of data. The Committee were pleased to note the engagement with partner organisations, however noted the current financial position could impact the pace of delivery.
ADVISE	<ul style="list-style-type: none"> The Programmes Delivery Committee will have an oversight and scrutiny of corporate risk register related to the programmes.

Tolley, Laura
23/11/2023 10:39:08

PRIVATE SESSION

There was no private session of the Committee meeting on this occasion.

Delegated action taken by the committee:

The Committee approved the Terms of Reference and forward workplan.

Date of next committee meeting:

6 February 2024

Tolley, Laura
23/11/2023 10:39:08