

# Cyfarfod Cyhoeddus Y Pwyllgor Archwilio a Sicrwydd

Tue 07 April 2026, 09:30 - 12:00

## Agenda

### 09:30 - 09:30 1. MATERION RHAGARWEINIOL

0 min

#### 1.1 Croeso a chyflwyniadau

I'w Nodi Cadeirydd

#### 1.2 Ymddiheuriadau am Absenoldeb

I'w Nodi Cadeirydd

#### 1.3 Datganiadau o Fuddiant

I'w Nodi Cadeirydd

### 09:30 - 09:35 2. AGENDA GYDSYNIO

5 min

#### 2.1 Cofnodion heb eu cadarnhau o gyfarfodydd blaenorol

##### 2.1i Cyhoeddus 20 Ionawr 2026

I'w Chymeradwyo Cadeirydd

📄 2.1i 20012026 AA-MDA-PUBLIC DRAFTv1-en-cy-C.pdf (15 pages)

##### 2.1ii Preifat - crynodeb 20 Ionawr 2026

I'w Chymeradwyo Cadeirydd

📄 2.1ii 20012026 AA-MDA-PRIVATE DRAFT ABRIDGED-en-cy-C.pdf (5 pages)

#### 2.2 Adroddiad Sicrwydd Pwyllgor Partneriaeth Cydwasanaethau GIG Cymru

I'w Nodi Cyfarwyddwr Cyllid dros dro

📄 2.2 SSPC Assurance Report 14 November 2025.pdf (7 pages)

#### 2.3 Blaengynllun Gwaith

I'w Nodi Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.3 Forward Workplan.pdf (5 pages)

#### 2.4 Adroddiad Safonau Ymddygiad

I'w Nodi Pennaeth Llywodraethu Corfforaethol | Dirprwy Ysgrifennydd y Bwrdd

📄 2.4 Standards of Behaviour.pdf (4 pages)

#### 2.5 Cofrestr Sicrwydd Deddfwriaethol

I'w Nodi Pennaeth Cydymffurfiaeth Ansawdd a Rheoleiddio

📄 2.5 Legislative Assurance Register Report .pdf (6 pages)

## 2.6 Adroddiad Diweddarau Cydymffurfiaeth Ansawdd a Rheoleiddio

*I'w Nodi Pennaeth Cydymffurfiaeth Ansawdd a Rheoleiddio*

📄 2.6 DHCW AA Quality and Regulatory Update Report April 2026.pdf (9 pages)

## 2.7 Adroddiad Ystadau, Datgarboneiddio a Chydymffurfiaeth

*Er Sicrwydd Pennaeth Tîm Ystadau a Chydymffurfiaeth*

📄 2.7 Estates Decarbonisation and Compliance Report.pdf (8 pages)

## 09:35 - 09:40 3. BUSNES Y CYFARFOD

5 min

### 3.1 Cofnod Gweithredu

*I'w Nodi Cadeirydd*

📄 3.1 Action log.pdf (1 pages)

## 09:40 - 10:50 4. ARCHWILIO AC ATAL TWYLL

70 min

### 4.1 Adroddiad Cynnydd yr Archwiliad Mewnol

*I'w Nodi Archwilio Mewnol PCGC*

4.1i Drafft barn y Pennaeth Archwilio Mewnol

📄 4.1 Progress Report Audit Committee Cover Sheet April 2026 v3.pdf (5 pages)

### 4.2 Adroddiadau Adolygiad Archwilio Mewnol

*Er Sicrwydd Archwilio Mewnol PCGC*

- Parhad Gwasanaeth
- Gwaith dilynol ar yr Argymhellion Archwilio
- Ariannu Cynaliadwy

📄 4.2 DHCW Internal Audit Reports Audit Committee Cover Sheet April 2026 v3.pdf (5 pages)

### 4.3 Cynllun Gwaith Archwilio Mewnol drafft 26/27

*Ar Gyfer Derbynn / Trafod Archwilio Mewnol PCGC*

📄 4.3 DHCW Draft Internal Audit Plan 2026-27 Cover Paper.pdf (4 pages)

### 4.4 Diweddariad Pwyllgor Archwilio Cymru

*Er Sicrwydd Archwilio Cymru*

- Cynllun Archwilio Archwilio Cymru 2026/27

📄 4.4 DHCW Audit and Assurance Committee Update - April 2026.pdf (9 pages)

📄 4.4i Draft DHCW 2026 Audit Plan.pdf (24 pages)

### 4.5 Cofnodion Gweithredu Archwilio

*I'w Nodi Pennaeth Llywodraethu Corfforaethol | Dirprwy Ysgrifennydd y Bwrdd*

📄 4.5 Audit Action Log - Public.pdf (5 pages)

### 4.6 Adroddiad Diweddarau Atal Twyll Lleol

*I'w Nodi / Chymeradwyo Gwasanaethau Atal Twyll Caerdydd a'r Fro*

- Cynllun Gwaith Drafft y Gwasanaeth Atal Twyll Lleol 26/27

 4.6 Local Counter Fraud Q4 Progress Report - PUBLIC.pdf (4 pages)

**Egwyl – 10 munud**

**10:50 - 11:55 5. ADRODDIADAU LLYWODRAETHU**

65 min

**5.1 Diwylliant Staff - Adroddiad Diweddarau yr Adolygiad Ymgynghorol Lles 2025/26**

*I'w Nodi* *Cyfarwyddwr Pobl a Datblygu Sefydliadol*

 5.1 Staff Culture and Wellbeing Advisory Report March 2026 (003).pdf (9 pages)

**5.2 Diweddariad Cyllid a Chaffael**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

**5.2i. Adroddiad Archeb Prynu Gwerth Uchel a Chronnus**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2i. Audit Committee Report Cover Sheet - High Value Purchase Orders April 25-26 F-01.pdf (6 pages)

**5.2ii. Adroddiad Cydymffurfiaeth Caffael a Chynllun Dirprwyo**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2ii Procurement Rep cover paperdocx.pdf (5 pages)

**5.2iii. Colledion a Thaliadau Arbennig**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

**5.2iv. Cyfrifon Ariannol Blynyddol**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2iv Audit Committee - Annual Accounts Plan 25-26 Final Accounts Update.pdf (6 pages)

**5.2v Cynllun Tymor Canolig Integredig**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2v IMTP 2026-29 Final\_Remit.pdf (77 pages)

**5.2vi Llythyr Cylch Gwaith**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2vi DHCW Remit Letter - MA.JMHSC.2995.26.pdf (12 pages)

**5.2vii Ymateb y Swyddog Atebol i'r Llythyr Cylch Gwaith**

*I'w Nodi* *Cyfarwyddwr Cyllid dros dro*

 5.2vii HT to JT DHCW Accountability Officer Letter March 2026.pdf (7 pages)

**5.3 Archwiliad Dwfn i Fframwaith Sicrwydd y Bwrdd**


*I'w Thrafod* *Cyfarwyddwr Cyllid dros dro*

- Deddf Caffael

 5.3 DHCW-Board-and-Committee-Report\_Procurement Act\_Apr\_2026.pdf (4 pages)

**5.4 Adroddiad Risg Corfforaethol**

*I'w Thrafod*      *Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd*

 5.4 Corporate Risk Register - March 2026 AA.pdf (6 pages)

## **5.5 Adroddiad yr Iaith Gymraeg**

*I'w Nodi*      *Pennaeth Llywodraethu Corfforaethol | Dirprwy Ysgrifennydd y Bwrdd*

 5.5 DHCWWelshLanguageStandards\_AAReport (1).pdf (8 pages)

11:55 - 11:55

## **6. MATERION I GLOI**

0 min

### **6.1 Adroddiad o Uchafbwyntiau'r Pwyllgor i'r Bwrdd**

*I'w Thrafod*      *Cadeirydd*

### **6.2 Unrhyw Faterion Brys eraill**


*I'w Thrafod*      *Cadeirydd*

### **6.3 Dyddiad y cyfarfod nesaf: 14 Gorffennaf 2026**

*I'w Nodi*      *Cadeirydd*

## Pwyllgor Archwilio a Sicrwydd - CYHOEDDUS

COFNODION, PENDERFYNIADAU A CHAMAU I'W CYMRYD

 09:30 - 11:55

 20/01/2026

 MS Teams

Cadeirydd	Marian Wyn Jones
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Yn Bresennol (Aelodau)		Teitl	Sefydliad
Marian Wyn Jones (Cadeirydd)	MW- J	Aelod Annibynnol, Cadeirydd	Iechyd a Gofal Digidol Cymru (IGDC)
Alistair Klaas Neill	AKN	Aelod Annibynnol, Is- gadeirydd y Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru (IGDC)
Marilyn Bryan Jones	MB-J	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)
Yn Bresennol			
Julie Ash	JA	Pennaeth Ystadau a Chydymffurfiaeth	Iechyd a Gofal Digidol Cymru (IGDC)
Henry Bales	HB	Arbenigwr Atal Twyll Lleol Arweiniol	Caerdydd a'r Fro
Stephen Chaney	StC	Pennaeth Archwilio Mewnol	Archwilio Mewnol PCGC
Nathan Couch	NC	Arweinydd Archwilio Perfformiad	Archwilio Cymru
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol   Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)
Andrew Doughton	AD	Rheolwr Archwilio Perfformiad	Archwilio Cymru
Ifan Evans (ar gyfer eitem 4.2i a ii)	IE	Cyfarwyddwr Gweithredol Strategaeth	Iechyd a Gofal Digidol Cymru (IGDC)

Paul Evans	PE	Pennaeth Cydymffurfiaeth Ansawdd a Rheoleiddio	Iechyd a Gofal Digidol Cymru (IGDC)
Martyn Lewis (ar gyfer eitem 4.2ii)	ML	Arweinydd Archwilio	PCGC
Chris Moreton	CM	Dirprwy Gyfarwyddwr Cyllid a Sicrwydd Busnes	Iechyd a Gofal Digidol Cymru (IGDC)
Claire Osmundsen-Little	CO-L	Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru (IGDC)
Julie Robinson	JR	Cydlynnydd Llywodraethu Corfforaethol	Iechyd a Gofal Digidol Cymru (IGDC)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol   Dirprwy Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)
David Tomalin	DT	Archwilio	Archwilio Cymru
Siân Williams	SW	Pennaeth Gwasanaethau Ariannol ac Adrodd	Iechyd a Gofal Digidol Cymru (IGDC)

Ymddiheuriadau			
Mark Cox	MC	Cyfarwyddwr Cyswllt Cyllid	Iechyd a Gofal Digidol Cymru (IGDC)
Mike Whiteley	MW	Arweinydd Archwilio	Archwilio Cymru

Acronymau			
IGDC	Iechyd a Gofal Digidol Cymru	AS	Archwilio a Sicrwydd
AIA	Awdurdod Iechyd Arbennig	CBBD	Cronfa Fuddsoddi Blaenoriaethau Digidol
BAF	Fframwaith Sicrwydd y Bwrdd	PCGC	Partneriaeth Cydwasanaethau GIG Cymru
GDCC	Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd	PSPP	Perfformiad Talu'r Sector Cyhoeddus
DDaT	Digidol, Data a Thechnoleg		

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu
<b>1</b>	<b>MATERION RHAGARWEINIOL</b>		
1.1	<p><b>Croeso a Chyflwyniadau</b></p> <p>Croesawodd y Cadeirydd, Marian Wyn Jones, bawb i'r Pwyllgor Archwilio a Sicrwydd.</p> <p>Rhodddwyd croeso arbennig i'r rhai oedd yn bresennol ar gyfer eitemau penodol ar yr agenda.</p> <p>Cynhaliwyd y cyfarfod trwy Microsoft Teams ac atgoffwyd y rhai a oedd yn bresennol bod y cyfarfod yn cael ei recordio ac y byddai'n cael ei bostio ar wefan IGDC yn dilyn y cyfarfod.</p>	Nodwyd	Dim i'w nodi
1.2	<p><b>Ymddiheuriadau am Absenoldeb</b></p> <ul style="list-style-type: none"> <li>• Mark Cox, Cyfarwyddwr Cyswllt Cyllid</li> <li>• Mike Whiteley, Archwilio Cymru</li> </ul>	Nodwyd	Dim i'w nodi
1.3	<p><b>Datganiadau o Fuddiant</b></p> <p>Nid oedd unrhyw ddatganiadau o fuddiant i'w nodi.</p>	Nodwyd	Dim i'w nodi
<b>2</b>	<b>AGENDA GYDSYNIO - I'W CHYMERADWYO</b>		
2.1	<p><a href="#">Cofnodion heb eu cadarnhau o gyfarfod 07 Hydref 2025</a> – Cyhoeddus a Phreifat Cryno.</p> <p>Gellir gwyllo cyfarfod y Pwyllgor yn llawn isod neu drwy ddilyn y ddolen yn y teitl.</p>  <p>Penderfynodd y Pwyllgor:</p>	Cymeradwyd	Dim i'w nodi

	GYMERADWYO'R cofnodion fel cofnod cywir o'r drafodaeth a fyddai ar gael i'r cyhoedd.		
2.2	<b>Adroddiad Sicrwydd Pwyllgor Partneriaeth Cydwasanaethau GIG Cymru</b> Penderfynodd y Pwyllgor: NODI Adroddiad Sicrwydd Pwyllgor Partneriaeth Cydwasanaethau GIG Cymru	Nodwyd	Dim i'w nodi
2.3	<b>Blaengynllun Gwaith</b> Penderfynodd y Pwyllgor: NODI cynnwys Blaengynllun Gwaith y Pwyllgor.	Nodwyd	Dim i'w nodi
2.4	<b>Adroddiad Safonau Ymddygiad</b> Penderfynodd y Pwyllgor: NODI'R Adroddiad Safonau Ymddygiad.	Nodwyd	Dim i'w nodi
2.5	<b>Adroddiad Cylchlythyr Iechyd Cymru</b> Penderfynodd y Pwyllgor: NODI'R Adroddiad Cylchlythyr Iechyd Cymru	Nodwyd	Dim i'w Nodi
2.6	<b>Adroddiad Ymgynghori a Chymeradwyo Dogfennau</b> <ul style="list-style-type: none"> <li>○ Fframwaith DHCW-FRA-8 Dull Gwerth Cymdeithasol</li> <li>○ Strategaeth POD-STR-60 Strategaeth Pobl IGDC 2026-2030</li> <li>○ Polisi EC-POL-226 Pecynnau Amheus a Pholisi Bygythiadau Bom</li> <li>○ Polisi POD-POL-5 Polisi Gweithio Y Tu Allan i'r DU</li> <li>○ Polisi DHCW-POL-24 System Rheoli Integredig</li> </ul> Penderfynodd y Pwyllgor: GYMERADWYO'r pum dogfen a pholisi yn amodol ar ddiweddarau geiriad Polisi POD-PO-5 Gweithio Y Tu Allan i'r DU cyn ei gyhoeddi.	Cymeradwyd	Dim i'w Nodi
2.7	<b>Adroddiad yr Iaith Gymraeg</b> Penderfynodd y Pwyllgor: NODI er SICRWYDD Adroddiad yr Iaith Gymraeg.	Nodwyd er Sicrwydd	Dim i'w Nodi
2.8	<b>Adroddiad Diweddarau Cydymffurfiaeth Ansawdd a Rheoleiddio</b> Penderfynodd y Pwyllgor: NODI'R Adroddiad Diweddarau Cydymffurfiaeth	Nodwyd	Dim i'w Nodi

	Ansawdd a Rheoleiddio.		
2.9	<b>Adroddiad Ystadau, Datgarboneiddio a Chydymffurfiaeth</b> <b>Penderfynodd y Pwyllgor:</b> <b>NODI</b> ar gyfer <b>SICRWYDD</b> yr Adroddiad Ystadau, Datgarboneiddio a Chydymffurfiaeth	Nodwyd er Sicrwydd	Dim i'w nodi
2.10	<b>Adroddiad Blynyddol y Pwyllgor Archwilio a Sicrwydd</b> <b>Penderfynodd y Pwyllgor:</b> <b>GYMERADWYO</b> Adroddiad Blynyddol y Pwyllgor Archwilio a Sicrwydd i'w <b>GYMERADWYO</b> i Fwrdd AIA.	Cymeradwyd	Dim i'w nodi
2.11	<b>Hunan-asesiad o Effeithiolrwydd y Pwyllgor Archwilio a Sicrwydd</b> <b>Penderfynodd y Pwyllgor:</b> <b>NODI'R</b> Hunan-asesiad o Effeithiolrwydd y Pwyllgor Archwilio a Sicrwydd ar gyfer <b>SICRWYDD</b> .	Nodwyd er Sicrwydd	Dim i'w nodi
2.12	<b>Cylch Gorchwyl y Pwyllgor Archwilio a Sicrwydd</b> <b>Penderfynodd y Pwyllgor:</b> <b>GYMERADWYO</b> Cylch Gorchwyl y Pwyllgor Archwilio a Sicrwydd	Cymeradwyd	Dim i'w nodi
2.13	<b>Cylch Busnes y Pwyllgor Archwilio a Sicrwydd</b> <b>Penderfynodd y Pwyllgor:</b> <b>GYMERADWYO</b> Cylch Busnes y Pwyllgor Archwilio a Sicrwydd	Cymeradwyd	Dim i'w nodi
<b>RHAN 3 – BUSNES Y CYFARFOD</b>			
3.1	<b>Cofnod Gweithredu</b> Nododd y Pwyllgor fod dau gam gweithredu wedi'u cofnodi o'r cyfarfod diwethaf, roedd un wedi'i gwblhau a'r llall ar y gweill ac wedi'i drefnu i'w gwblhau erbyn cyfarfod mis Ebrill. <b>Penderfynodd y Pwyllgor:</b> <b>NODI</b> statws y Cofnod Gweithredu.	Nodwyd	Dim i'w nodi
<b>RHAN 4</b>	<b>ARCHWILIO AC ATAL TWYLL</b>		
4.1	<b>Adroddiad Cynnydd yr Archwiliad Mewnol</b> Cyflwynodd Stephen Chaney, Dirprwy Bennaeth	Er Sicrwydd	Dim i'w nodi

	<p>Archwilio Mewnol, Partneriaeth Gwasanaethau a Rennir GIG Cymru, yr Adroddiad Cynnydd Archwilio Mewnol. Nododd y Pwyllgor y cynnydd hyd yma gyda thri adolygiad yn cael eu cyflwyno.</p> <ul style="list-style-type: none"> <li>• Roedd y cynllun Archwilio wedi'i gwblhau i raddau helaeth ac roedd y tîm yn paratoi ar gyfer barn Pennaeth Archwilio.</li> <li>• Roedd proffil cyfartal o ran cyflawni drwy gydol y flwyddyn.</li> <li>• Parhaodd y dosbarthiad ar y trywydd iawn ac nid oedd angen uwchgyfeirio unrhyw broblemau.</li> </ul> <p>Nododd y Pwyllgor y cynnydd cadarnhaol a wnaed ar y cynllun Archwilio.</p> <p><b>Penderfynodd</b> y Pwyllgor:</p> <p><b>NODI'R</b> diweddariad Archwilio Mewnol er <b>SICRWYDD</b>.</p>		
4.2	<p><b>Adroddiad yr Adolygiad Archwilio Mewnol</b></p> <p>Darparodd StC drosolwg lefel uchel o'r tri adolygiad archwilio:</p> <p><b>Rheoli Rhaglenni</b></p> <p>Cafodd yr adolygiad sgôr Sicrwydd <i>Rhesymol</i>.</p> <p>Canolbwyntiodd yr adolygiad Rheoli Rhaglenni eleni ar brosiect Set Data Gofal Brys Cymru a Rhaglen Rhagnodi Electronig a Gweinyddu Meddyginiaethau Gofal Eilaidd (EPMA). Nodwyd, er bod sicrwydd rhesymol wedi'i ddarparu, fod heriau'n parhau o ran parhad cyllid ac ymgysylltu â rhanddeiliaid ar draws y system. Tynnwyd sylw at faterion ychwanegol yn ymwneud ag adnabod buddion a chysondeb mewn dogfennaeth prosiect.</p> <p>Ymatebodd Ifan Evans, Cyfarwyddwr Gweithredol Strategaeth (IE) ar ran IGDC. Croesawodd y canfyddiadau a disgrifiodd drefniadau llywodraethu rhaglenni cryfach y sefydliad, gan gynnwys gwelliannau o fewn y Swyddfa Rheoli Portffolio Digidol a'r Rhwydwaith Gwireddu Manteision. Cydnabu'r cymhlethdodau sy'n ymwneud â manteision rhaglenni, yn enwedig lle mae manteision yn cronni i fyrddau iechyd lleol yn hytrach na IGDC yn uniongyrchol. Myfyriodd ef a Claire Osmundsen Little, Cyfarwyddwr Gweithredol Cyllid (COL) ar yr uchelgais a rennir i ddatblygu fframwaith budd-daliadau cenedlaethol a'r angen am gysondeb ar draws y system.</p>	Er Sicrwydd	Dim i'w nodi

Archwiliodd y Pwyllgor sut y gallai IGDC fynegi manteision yn well i randdeiliaid allanol a sut y gallai ymgysylltiad Llywodraeth Cymru helpu i ddatrys rhwystrau i'r system.

### CaNISC

Cafodd yr adolygiad sgôr Sicrwydd *Rhesymol*.

Crynhodd Martyn Lewis (ML) Bartneriaeth Cydwasanaethau GIG Cymru y canfyddiadau, gan egluro bod yr archwiliad wedi cyflawni sgôr sicrwydd rhesymol. Roedd y risgiau sy'n gysylltiedig ag ymddeol y system etifeddol wedi'u rheoli'n dda i raddau helaeth. Fodd bynnag, roedd heriau cyfathrebu wedi achosi rhywfaint o anffodlonrwydd defnyddwyr, yn enwedig o ran y dull cynnyrch hyfyw lleiaf (MVP) a'r amserlen ar gyfer darparu swyddogaethau newydd.

Ymatebodd IE ar ran y tîm a phwysleisio pwysigrwydd datgomisiynu CaNISC yn llwyr – system sydd wedi'i graddio fel risg goch ers 2015. Esboniodd yr ymdrechion a wnaed i ymgysylltu â defnyddwyr, y gwaith sydd ar y gweill i ymgorffori swyddogaethau cancer sy'n weddill mewn systemau newydd a'r cynlluniau i gwblhau'r map ffordd data cancer.

### Rheoli Risg

Cafodd yr adolygiad sgôr Sicrwydd *Rhesymol*.

Cyflwynodd SC yr adolygiad Rheoli Risg, a oedd yn ystyried rheoli risg sefydliadol. Er bod y fframwaith yn parhau i fod yn gryf, roedd yr archwiliad wedi tynnu sylw at anghysondeb yn y defnydd ar draws timau - yn enwedig mewn perthynas â chofnodion DATIX, heneiddio risg a'r angen i gynyddu ymwybyddiaeth staff.

Croesawodd Laura Tolley, Pennaeth Llywodraethu/Dirprwy Ysgrifennydd y Bwrdd (LT) y canfyddiadau ac eglurodd fod camau gweithredu ar y gweill, gan gynnwys hyfforddiant risg gwell, cyfathrebu misol, sesiynau wedi'u targedu mewn timau arweinyddiaeth Cyfarwyddiaethau a'r newid arfaethedig i system risg newydd. Atgyfnerthodd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd, bwysigrwydd meithrin diwylliant lle mae her adeiladol yn cael ei hannog ar draws y sefydliad.

Cydnabu aelodau'r pwyllgor werth yr adolygiad a phwysleisiodd bwysigrwydd ymgorffori gallu rheoli risg, yn enwedig yng ngoleuni twf y sefydliad.

	<p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>DDERBYN</b> y tri adolygiad archwilio er <b>SICRWYDD</b>.</p>		
4.3	<p><b>Diweddariad Pwyllgor Archwilio Cymru</b></p> <p>Cyflwynodd Nathan Couch, Archwilio Cymru (CC) y diweddariad gan Archwilio Cymru a rhoddodd yr uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> <li>• Diweddariad archwilio cyfrifon – roedd y gwaith archwilio ar yr archwiliad blynyddol o gyfrifon ar y gweill.</li> <li>• Perfformiad – roedd yr Asesiad Strwythuredig bellach wedi'i gwblhau.</li> <li>• Adolygiad o Drawsnewid Digidol Lleol – gobeithiwyd cyflwyno'r adolygiad yn y cyfarfod ond oherwydd problemau capasiti bydd yr adroddiad yn cael ei ddrafftio ym mis Chwefror/Mawrth.</li> <li>• Llythyr cylch gwaith – roedd y gwaith maes wedi'i gwblhau.</li> </ul> <p>Tynnodd NC sylw at gyhoeddiadau perthnasol ac yn benodol podlediadau gan yr Archwilydd Cyffredinol yn archwilio trawsnewid digidol a heriau'r sector cyhoeddus, a gafodd sawl aelod o'r Pwyllgor yn ddefnyddiol.</p> <p>Myfyriodd COL ymhellach ar y cyhoeddiadau a'r podlediadau ac awgrymodd y dylai Archwilio Cymru fynychu sesiwn Datblygu'r Bwrdd ar 'Archwilio yn y Gofod Digidol' yn amodol ar argaeledd adnoddau yn Archwilio Cymru.</p> <p><b>CAMAU GWEITHREDU: 20260120-A01</b> LT i ystyried ychwanegu 'Archwilio yn y Gofod Digidol' ar gyfer sesiwn Datblygu'r Bwrdd yn y dyfodol.</p> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>DDERBYN</b> adroddiad Archwilio Cymru er <b>SICRWYDD</b>.</p>	Er Sicrwydd	<p><b>CAMAU GWEITHRE DU: 20260120 -A01</b></p>
4.4	<p><b>Adroddiad Archwilio Blynyddol 2025</b></p> <p>Cyflwynodd Andrew Doughton a David Tomalin o Archwilio Cymru uchafbwyntiau Adroddiad Archwilio Blynyddol 2025 Archwilio Cymru.</p> <ul style="list-style-type: none"> <li>• Roedd barn archwilio ddiamod</li> <li>• Trefniadau rheoli ariannol cryf</li> <li>• Canfyddiadau cadarnhaol yr Asesiad Strwythuredig a'r Adolygiad Ymgysylltu â</li> </ul>	Nodwyd	Dim i'w nodi

	<p>Rhanddeiliaid.</p> <p>Croesawodd y Pwyllgor yr adroddiad, gan nodi ei fod yn adlewyrchu cydweithio effeithiol rhwng IGDC ac Archwilio Cymru.</p> <p>Trafododd y Pwyllgor sut mae IGDC yn defnyddio ymgysylltu fel ffordd o alinio blaenoriaethau â rhanddeiliaid a'r ffordd orau o wneud y defnydd gorau o unedau allweddol o negeseuon. Mae IGDC yn gweithio'n galed gyda'r tîm Cyfathrebu a'r Gweithredwyr i alinio'r negeseuon hynny.</p> <p><b>Penderfynodd</b> y Pwyllgor:</p> <p><b>DDERBYN</b> yr Adroddiad Archwilio Blynyddol 2025 er SICRWYDD</p>		
4.5	<p><b>Traciwr Camau Gweithredu Archwilio</b></p> <p>Cyflwynodd Laura Tolley (LT), Pennaeth Llywodraethu Corfforaethol, y Traciwr Camau Gweithredu Archwilio.</p> <p>Roedd y Cofnod Camau Gweithredu Archwilio yn cynnwys cyfanswm o 44 o gamau gweithredu agored yn dilyn derbyn tri adolygiad yng nghyfarfod diwethaf y Pwyllgor. Nodwyd bod pump o'r rhain yn cael eu hystyried yn gyflawn a bod 38 ar y trywydd iawn i'w cwblhau, roedd un cam gweithredu yn hwyr gyda chais i ymestyn y cam gweithredu archwilio wedi'i gynnwys yn yr adroddiad. Darparwyd y cefndir i'r rheswm dros yr estyniad gofynnol.</p> <p><b>Themâu Archwilio Blynyddol</b></p> <p>Nododd y Pwyllgor nifer yr archwiliadau, eang eu natur, a gynhaliwyd yn 2025/26. O'r rhain nodwyd nifer o themâu/meysydd:-</p> <ul style="list-style-type: none"> <li>• Yr angen i gryfhau adrodd, gan sicrhau ansawdd a chywirdeb gwybodaeth a data.</li> <li>• Yr angen i wella cynllunio, cyflawni a rheoli terfynau amser er mwyn sicrhau bod amserlenni priodol yn cael eu bodloni.</li> <li>• Pwysigrwydd canolbwyntio ar Bobl a Datblygu Sefydliadol, gan gydnabod yr adroddiad Sicrwydd Cyfyngedig ar gyfer Prosesau Recriwtio a'r nifer uchel o gamau gweithredu yn yr archwiliad ymgynghorol Diwylliant Staff (Llesiant).</li> </ul> <p>Trafododd y Pwyllgor yr her o gael dyddiadau realistig ar gyfer rhai camau gweithredu. Mae IGDC yn ymgysylltu â PCGC ac arweinwyr Archwilio i gytuno ar</p>	Nodwyd	Dim i'w nodi



	<p>ddyddiadau y gellir eu bodloni'n realistig.</p> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>NODI'R</b> Log Camau Gweithredu Archwilio;  <b>GYMERADWYO'r</b> estyniad i'r camau archwilio a ofynnwyd amdanynt yn 4.5;  <b>NODI</b> Themâu Archwilio Blynyddol 2025-26.</p>		
4.6	<p><b>Adroddiad Diweddar Atal Twyll Lleol</b></p> <p>Derbyniodd y Pwyllgor yr Adroddiad Diweddar Atal Twyll Lleol ar gyfer chwarter 3.</p> <p>Tynnodd Henry Bales, Pennaeth Atal Twyll, sylw at y gwaith a wnaed yn ystod y cyfnod:</p> <ul style="list-style-type: none"> <li>• Roedd y cyfnod wedi bod yn arbennig o brysur oherwydd Wythnos Ymwybyddiaeth o Dwyll Ryngwladol.</li> <li>• Roedd cyfraddau cwblhau E-ddysgu uchel yn gyson ar draws IGDC ac roedd hyn yn rhoi sicrwydd bod gweithgaredd allweddol atal twyll wedi bod yn hynod effeithiol.</li> <li>• Atgyfeiriadau ac ymchwiliadau - pedwar atgyfeiriad newydd gydag un a aeth i gael ei ymchwilio a'i benderfynu. Roedd gwaith gyda'r tîm Seiberddiogelwch wedi sicrhau bod negeseuon e-bost gan gontractwyr amheus wedi'u hatal.</li> </ul> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>NODI'R</b> Adroddiad Cynnydd Atal Gwrth-dwyll</p>	Nodwyd	Dim i'w nodi
<b>RHA N 5</b>	<b>ADRODDIADAU LLYWODRAETHU</b>		
5.1	<p><b>Dull Uwchraddio IGDC</b></p> <p>Rhoddodd Chris Darling, Cyfarwyddwr Materion Corfforaethol / Ysgrifennydd y Bwrdd, y wybodaeth ddiweddaraf am Ddull Uwchgyfeirio IGDC ar gyfer rheoli uwchgyfeirio lefel 3 yn ymwneud â chyflenwi rhaglenni digidol mawr. Tynnwyd sylw at y camau a gymerwyd:</p> <ul style="list-style-type: none"> <li>• Cytunwyd ar fframwaith uwchgyfeirio gyda Llywodraeth Cymru a gweithiwyd drwy ofynion y fframwaith.</li> <li>• Penodwyd Uwch Swyddog Cyfrifol (SRO).</li> <li>• Cynhaliwyd nifer o sesiynau Datblygu'r</li> </ul>	I'w Nodi	Dim i'w nodi

	<p>Bwrdd.</p> <ul style="list-style-type: none"> <li>• Roedd y Pwyllgor Cyflawni Rhaglenni wedi cynyddu cyflymder y cyfarfodydd i ddarparu goruchwyliaeth.</li> <li>• Roedd trydydd maes y fframwaith yn cynnwys datblygu cynllun gwella monitro gwell a oedd wedi'i gymeradwyo</li> <li>• Roedd ymgysylltu rheolaidd â Llywodraeth Cymru ac ymgysylltu sylweddol â staff wedi digwydd ers yr uwchgyfeirio ym mis Mawrth 2025.</li> </ul> <p>Roedd IGDC yn dal mewn cyfnod o uwchgyfeirio heb unrhyw newid yn y lefel ac yn edrych ar y cam nesaf. Cydnabu CD y ffocws parhaus sydd ei angen a'r angen i fynd i'r afael â chanfyddiadau o ddarpariaeth ar draws y system ehangach.</p> <p><b>Penderfynodd y Pwyllgor:</b> <b>NODI Dull Uwchgyfeirio IGDC</b></p>		
5.2	<p><b>Cyfarfod Atebolrwydd Cyhoeddus IGDC</b></p> <p>Cyflwynodd CD yr adroddiad a thynnodd sylw at y canlynol:</p> <ul style="list-style-type: none"> <li>• Cadarnhaodd Ysgrifennydd y Cabinet dros lechyd a gofal cymdeithasol ei fwriad i gynnal cyfarfodydd atebolrwydd cyhoeddus gyda phob corff GIG yn ystod blwyddyn ariannol 2025/26 ym mis Hydref 2025, er mwyn darparu mwy o dryloywder mewn trefniadau atebolrwydd ar draws GIG Cymru.</li> <li>• Cynhaliwyd Cyfarfodydd Atebolrwydd Cyhoeddus ar gyfer Byrddau lechyd rhwng mis Hydref a mis Rhagfyr 2025, gyda chyrrff cenedlaethol y GIG yn digwydd yn ystod mis Ionawr a mis Chwefror 2026.</li> <li>• Cefnogir y cyfarfodydd hyn gan bapur tystiolaeth a gyflwynir gan gorff y GIG i Lywodraeth Cymru o leiaf ddeng niwrnod gwaith cyn y cyfarfod. Bydd agenda a phhecyn data yn cael eu dosbarthu cyn pob cyfarfod.</li> <li>• Roedd IGDC i fod i gynnal eu Cyfarfod Atebolrwydd Cyhoeddus ar 5 Mawrth 2026, fodd bynnag, mae hyn wedi'i symud i 29 Ionawr 2026.</li> <li>• Mae agendâu pwrpasol ar gyfer cyrrff cenedlaethol y GIG yn cael eu datblygu gan</li> </ul>	Er Sicrwydd	Dim i'w nodi

	<p>Lywodraeth Cymru. Mae IGDC wedi cael cadarnhad o'u hagenda.</p> <ul style="list-style-type: none"> <li>• Roedd y pecyn tystiolaeth wedi'i gwblhau a'i gyflwyno.</li> </ul> <p>Penderfynodd y Pwyllgor:</p> <p><b>NODI'R</b> diweddariad ar Gyfarfod Atebolrwydd Cyhoeddus IGDC ar gyfer <b>SICRWYDD</b>.</p>		
5.3	<p><b>Diweddariad Cyllid a Chaffael</b></p> <p>Rhoddodd Claire Osmundsen-Little, Cyfarwyddwr Gweithredol Cyllid (COL) grynodedb byr o'r diweddariad cyllid cyn gwahodd cydweithwyr i gyflwyno uchafbwyntiau'r sleidiau:-</p> <p><b>i. Adroddiad Archeb Prynu Gwerth Uchel a Chronnus</b></p> <p>Cyflwynodd Sian Williams, Pennaeth Gwasanaethau Ariannol ac Adrodd (SW) y Gorchymyn Prynu Gwerth Uchel a'r Adroddiad Cronnus ar gyfer archebion sy'n fwy na'r trothwy o £750k i'r Pwyllgor. Tynnwyd sylw at y prif orchmynion:</p> <p><b>ii. Adroddiad Cydymffurfiaeth Caffael a Chynllun Dirprwyo</b></p> <p>Cyflwynodd Chris Moreton, Dirprwy Gyfarwyddwr Cyllid (CM), uchafbwyntiau'r Adroddiad Cydymffurfio â Chynllun Caffael a Dirprwyo. Cyflwynwyd y prif uchafbwyntiau:</p> <ul style="list-style-type: none"> <li>• 1 x Cam Gweithredu Tendr Sengl – cyfanswm y gwerth £77,000.00 heb TAW</li> <li>• 1 x Gweithred Dyfynbris Sengl - cyfanswm y gwerth £18,634.00 heb TAW</li> <li>• 3 x Hysbysiad Rheoli Newid - cyfanswm gwerth £1,751,678.00 heb TAW</li> </ul> <p><b>iii. Colledion a Thaliadau Arbennig</b></p> <p>Cadarnhawyd nad oedd unrhyw golledion na thaliadau arbennig i'w hadrodd yn y cyfarfod hwn.</p> <p><b>iv. Cynaliadwyedd Ariannol a diweddariad Cyllideb 2026-27</b></p> <p>Cyflwynodd COL yr adroddiad a nododd y cynnydd wrth ddrafftio'r Cynllun Ariannol i gefnogi cynhyrchu Cynllun Tymor Canolig Integredig 2026-2029 a ariennir yn gynaliadwy a'r dirprwyo a'r defnydd arfaethedig o gyllidebau gweithredol i gefnogi</p>	Nodwyd	Dim i'w nodi

	<p>rheolaeth ariannol. Dyma'r uchafbwyntiau:</p> <ul style="list-style-type: none"> <li>• Roedd y llythyr Cylch Gwaith yn dal i fod yn aros amdani ynghyd â dyraniadau ariannol, a oedd yn cyfyngu ar allu IGDC i gadarnhau ei sefyllfa ariannol yn y dyfodol.</li> <li>• Yr amserlenni tynn ar gyfer ymateb i Lywodraeth Cymru ar ôl i ddyraniadau gael eu cyhoeddi.</li> <li>• Y pwysau chwyddiant, yn enwedig o amgylch costau gweithlu digidol ac arbenigol.</li> </ul> <p>Trafododd y Pwyllgor yr heriau o beidio â derbyn y Llythyr Cylch Gwaith mewn modd amserol. Cadarnhaodd COL nad oedd IGDC ar eu pennau eu hunain o ran cael eglurder ynghylch cyllid yn y dyfodol ac roeddent yn rhannu trafodaethau'n rheolaidd â Chyfarwyddwyr Cyllid eraill fel bod cysondeb wrth osod y gyllideb.</p> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>NODI</b> er <b>SICRWYDD</b> y Diweddariad Cyllid a Chaffael</p>		
5.4	<p><b>Fframwaith Sicrwydd y Bwrdd – Ymchwiliad Dwfn – Economi Sylfaenol</b></p> <p>Cyflwynodd Chris Moreton, Dirprwy Gyfarwyddwr Cyllid (CM), Ymchwiliad Dwfn i'r Economi Sylfaenol fel rhan o adrodd Fframwaith Sicrwydd y Bwrdd a darparodd yr uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> <li>• Roedd gwerth cymdeithasol, caffael, datblygu'r gweithlu, cynaliadwyedd amgylcheddol a gwaith partneriaeth yn cael eu hymgorffori yn strategaeth sefydliadol o dan Ddeddf Llesiant Cenedlaethau'r Dyfodol.</li> <li>• Darparwyd enghreifftiau o waith gwirfoddoli, gwerth cymdeithasol sy'n gysylltiedig â chaffael, gwireddu ystadau a chynhwysiant digidol ochr yn ochr â model sy'n dod i'r amlwg ar gyfer mesur gwerth ac effaith.</li> </ul> <p>Trafododd y Pwyllgor y cyflwyniad, gan nodi pwysigrwydd manteisio ar ffynonellau data clinigol h.y. mae llawer o'r data yn nwylo byrddau iechyd ac nid oes gan IGDC fynediad awtomatig iddo. Nododd COL ei fod yn fenter newydd i IGDC o ran sut y gosodwyd y safonau ar gyfer caffael a hefyd sut mae'n ymgysylltu ac yn edrych ar ffyrdd arloesol i fyrrdau iechyd gyfrannu at y fframwaith ac at Ddeddf Llesiant Cenedlaethau'r Dyfodol. Roedd gwaith yn parhau gyda'r timau caffael i ddeall sut</p>	Nodwyd	Dim i'w nodi


	<p>maen nhw'n rhoi hyn ar waith ac yn ei ddefnyddio yn ein fframwaith ni.</p> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>NODI'R</b> gwaith Plymio Dwfn i'r Economi Sylfaenol</p>		
5.5	<p><b>Y Gofrestr Risg Gorfforaethol</b></p> <p>Rhoddodd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd, ddiweddariad ar y Gofrestr Risg Gorfforaethol:</p> <p>Mae gan y Gofrestr Risg Gorfforaethol 17 risg ar y gofrestr, a neilltuwyd pedwar risg i'r Pwyllgor:-</p> <ul style="list-style-type: none"> <li>• <b>DHCW0331</b> – Cyllid Adnoddau Tymor Sefydlog – roedd disgwyl am y dyraniad CBBB. Roedd sioe deithiol gan Gyfarwyddwr Pobl a Datblygu Sefydliadol ar waith. Mynd i'r afael â'r risg, gan ganolbwyntio ar ofynion sgiliau ac anghenion gallu yn y dyfodol dros y tair blynedd nesaf. Ar hyn o bryd, mae'r proffil ariannu ar gyfer blwyddyn, gyda thrafodaethau parhaus gyda Llywodraeth Cymru ynghylch cyllid yn y dyfodol.</li> <li>• <b>IGDC0337</b> – Model Cyllido Datblygu a Gwasanaethau Digidol Cynaliadwy – mae'r tîm cyllid yn bwrw ymlaen â cham nesaf ail-wneud cytundeb lefel gwasanaeth (CLG) i sicrhau sylfaen gyllido gynaliadwy. Gwneud cynnydd o ran cael cyllid cynaliadwy.</li> <li>• <b>IGDC0346</b> – Gweithredu Adolygiad Llywodraethu DDaT. Mae Bwrdd Cyflawni DDaT wedi cynnal dau gyfarfod. Bydd y risg yn parhau ar y gofrestr nes bod yr is-strwythur llywodraethu newydd ar waith a bod hyder mewn rolau a chyfrifoldebau clir ar draws y dirwedd ddigidol genedlaethol.</li> <li>• <b>IGDC0351</b> Newidiadau yn y dirwedd wleidyddol yng Nghymru Wedi datblygu meysydd blaenoriaeth ac mae'r rhain yn gyson yn y dyfodol. Unwaith y bydd yr etholiadau wedi'u cynnal ym mis Mai, dylid dileu'r risg hon.</li> </ul> <p>Ychwanegwyd nifer o risgiau newydd at y Gofrestr Risg Gorfforaethol gydag un <b>IGDC0351</b> wedi'i aseinio i'r Pwyllgor hwn ac mae nifer o risgiau wedi'u dad-ddwysáu neu eu dileu yn dilyn lliniaru neu gau (e.e. Strategaeth Rheoli Dogfennau IGDC0207 ar gyfer y Pwyllgor hwn).</p> <p>Nododd y Pwyllgor fod pob risg, ac yn enwedig</p>	Trafodwyd	Dim i'w nodi



	<p>risgiau parhaus, yn cael eu hadolygu gan y Pwyllgor perthnasol i asesu a oedd angen camau gweithredu pellach.</p> <p><b>Penderfynodd y Pwyllgor:</b></p> <p><b>DRAFOD y Gofrestr Risg Gorfforaethol</b></p>		
<b>RHA N 6</b>	<b>MATERION I GLOI</b>		
6.1	<p><b>Adroddiad Crynhoi Cynnydd y Pwyllgor i'r Bwrdd</b></p> <p>Bydd y Cadeirydd yn gweithio gyda Llywodraethu Corfforaethol.</p> <ul style="list-style-type: none"><li>• Materion a phwyntiau allweddol a drafodwyd.</li></ul>	Trafodwyd	Dim i'w nodi
6.2	<p><b>Unrhyw Faterion Brys eraill</b></p> <p>Ni chodwyd unrhyw faterion brys eraill i'w nodi.</p>	Nodwyd	Dim i'w nodi
6.3	<p><b>Dyddiad ac Amser y Cyfarfod Nesaf:</b></p> <ul style="list-style-type: none"><li>• 07 Ebrill 2026</li></ul>	Nodwyd	Dim i'w nodi

## Pwyllgor Archwilio a Sicrwydd – PREIFAT – CRYNODEB

COFNODION, PENDERFYNIADAU A CHAMAU I'W CYMRYD

 12:15 – 13:15

 20/01/2026

 MS Teams

Cadeirydd	Marian Wyn Jones
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Yn Bresennol (Aelodau)		Teitl	Sefydliad
Marian Wyn Jones (Cadeirydd)	MW- J	Aelod Annibynnol, Cadeirydd	Iechyd a Gofal Digidol Cymru (IGDC)
Alistair Klaas Neill	AKN	Aelod Annibynnol, Is- gadeirydd y Pwyllgor Archwilio a Sicrwydd	Iechyd a Gofal Digidol Cymru (IGDC)
Marilyn Bryan Jones	MB-J	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)
Yn bresennol			
Henry Bales	HB	Pennaeth Atal Twyll	Gwrth-dwyll Caerdydd a'r Fro
Stephen Chaney	StC	Pennaeth Archwilio Mewnol	Archwilio Mewnol PCGC
Nathan Couch	NC	Arweinydd Archwilio Perfformiad	Archwilio Cymru
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol / Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)
Kathryn Frith (ar gyfer eitem 3.4)	KF	Pennaeth Gwasanaethau Pobl	Iechyd a Gofal Digidol Cymru (IGDC)
Claire Osmundsen- Little	COL	Cyfarwyddwr Gweithredol Cyllid	Iechyd a Gofal Digidol Cymru (IGDC)
Martyn Lewis	ML	Archwilio Mewnol	Archwilio Mewnol PCGC
Julie Robinson	JR	Cydlynnydd Llywodraethu	Iechyd a Gofal Digidol

		Corfforaethol	Cymru (IGDC)
Andrew Strong	AS	Arweinydd Archwilio	Archwilio Cymru
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol / Dirprwy Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)
David Tomalin	DT	Arweinydd Archwilio	Archwilio Cymru
Siân Williams	SW	Pennaeth Gwasanaethau Ariannol ac Adrodd	Iechyd a Gofal Digidol Cymru (IGDC)

Ymddiheuriadau			
Mark Cox	MC	Cyfarwyddwr Cyswilt Cyllid	Iechyd a Gofal Digidol Cymru (IGDC)

Acronymau			
Iechyd a Gofal Digidol Cymru (IGDC)	Iechyd a Gofal Digidol Cymru	AS	Archwilio a Sicrwydd
AIA	Awdurdod Iechyd Arbennig	NFI	Menter Twyll Genedlaethol
BAF	Fframwaith Sicrwydd y Bwrdd	PCGC	Partneriaeth Cydwasanaethau GIG Cymru
CRU	Uned Seibergadernid		

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu
<b>1</b>	<b>MATERION RHAGARWEINIOL</b>		
1.1	<p><b>Croeso a Chyflwyniadau</b></p> <p>Croesawodd y Cadeirydd, Marian Wyn Jones, bawb i'r Pwyllgor Archwilio a Sicrwydd preifat.</p> <p>Rhodddwyd croeso arbennig i'r rhai oedd yn bresennol ar gyfer eitemau penodol ar yr agenda.</p>	Nodwyd	Dim i'w nodi

1.2	<b>Ymddiheuriadau am Absenoldeb</b> Cafwyd ymddiheuriadau gan: Mark Cox, Cyfarwyddwr Cyswllt Cyllid	Nodwyd	Dim i'w nodi
1.3	<b>Datganiadau o Fuddiant</b> Nid oedd unrhyw ddatganiadau o fuddiant i'w nodi.	Nodwyd	Dim i'w nodi
<b>RHAN 2 – AGENDA GYDSYNIO</b>			
2.1	<b>Cofnodion Preifat heb eu cadarnhau o'r cyfarfod blaenorol ar 7 Hydref 2025</b> Penderfynodd y Pwyllgor: <b>GYMERADWYO'R</b> cofnodion fel cofnod cywir o drafodaeth.	Cymeradwywyd	Dim i'w Nodi
2.2	<b>Cofnod Gweithredu</b> Nododd y Pwyllgor fod dau gam gweithredu wedi'u cofnodi o'r cyfarfod diwethaf, a bod y ddau ohonynt wedi'u cwblhau. Penderfynodd y Pwyllgor: <b>NODI</b> statws y Cofnod Gweithredu.	Nodwyd	Dim i'w nodi
2.3	<b>Taliad Diswyddo</b> Penderfynodd y Pwyllgor: <b>NODI'R</b> Adroddiad Taliad Diswyddo	Nodwyd	Dim i'w nodi
2.4	<b>Taliad TAW</b> Penderfynodd y Pwyllgor: <b>NODI'R</b> Adroddiad Taliad TAW	Nodwyd	Dim i'w nodi
<b>RHAN 3 ARCHWILIO A RISG LLYWODRAETHU</b>			
3.1	<b>Diweddariad Cyllid</b> Cyflwynodd Claire Osmundsen Little, Cyfarwyddwr Gweithredol Cyllid, y diweddariad cyllid ar ddwy eitem <b>i) Adnewyddu Contract Microsoft</b>  <b>ii) System Wybodaeth Gofal Dwys Cymru</b>  Cydnabu'r Pwyllgor y pwysau ychwanegol heb ei ariannu o ystyried nad oedd disgwyl i gyllidebau ehangach nad ydynt yn gysylltiedig â chyflogau	Trafodwyd	Dim i'w nodi



	<p>IGDC gynyddu.</p> <p><b>Penderfynodd y Pwyllgor:</b> <b>NODI'R</b> Diweddariad Cyllid.</p>		
3.2	<p><b>Adroddiad Systemau TG y GIG a Gynhelir yn Genedlaethol IGDC 24-25</b></p> <p>Cyflwynodd Andrew Strong, Archwilio Cymru, yr Adroddiad Systemau TG GIG a Gynhelir yn Genedlaethol 24-25.</p> <p>Trafododd y Pwyllgor yr adroddiad a roddodd sicrwydd iddynt yn y maes gwaith hwn.</p> <p><b>Penderfynodd y Pwyllgor:</b> <b>NODI</b> Adroddiad Systemau TG y GIG a Gynhelir yn Genedlaethol IGDC 24-25 er <b>SICRWYDD</b></p>	Nodwyd	Dim i'w nodi
3.3	<p><b>Y Gwasanaeth Atal Twyll</b></p> <p>Rhoddodd Henry Bales, Pennaeth Gwrth-dwyll (HB) y wybodaeth ddiweddaraf am weithgareddau diweddar y Tîm Gwrth-dwyll:-</p> <ul style="list-style-type: none"> <li>• Dadansoddiad manwl o ymchwiliadau / Menter Twyll Genedlaethol.</li> <li>• Roedd adroddiadau risg uchel taliadau dyblyg y Fenter Twyll Genedlaethol wedi cael eu hadolygu gan y Bartneriaeth Gwasanaethau Cymorth Cenedlaethol (NWSSP) ac ni chanfuwyd unrhyw broblemau.</li> </ul> <p>Yn ogystal, fel cais gan aelodau'r Pwyllgor i dynnu sylw at bwysigrwydd dysgu gwersi o'r achosion hyn er mwyn gwella arferion yn y dyfodol, cafodd hyn ei gynnwys yn yr adroddiad.</p> <p>Roedd y Pwyllgor o'r farn bod yr adroddiad yn ddefnyddiol a lle gellid bwrw ymlaen â syniadau i dynhau'r meysydd lle gallai twyll ddigwydd.</p> <p><b>Penderfynodd y Pwyllgor:</b> <b>NODI'R</b> diweddariad Gwrth-dwyll a'r Mewnwelediadau i'r Gwersi a Ddysgwyd.</p>	Nodwyd	
3.4	<p><b>Cynnydd ar Gynllun Gweithredu Prosesau Recriwtio</b></p> <p>Cyflwynodd Kathryn Frith, Pennaeth Gwasanaethau Pobl, yr adroddiad a ofynnwyd</p>	Er Sicrwydd	Dim i'w nodi



	<p>amdano gan y Pwyllgor fel cam gweithredu o'r Archwiliad Prosesau Recriwtio a oedd wedi derbyn Sicrwydd Cyfyngedig.</p> <p><b>Penderfynodd</b> y Pwyllgor:</p> <p><b>NODI'R</b> cynnydd ar Gynllun Gweithredu Prosesau Recriwtio er <b>SICRWYDD</b></p>		
3.5	<p><b>Adroddiad Codi Pryderon</b></p> <p>Cyflwynodd Laura Tolley, Dirprwy Ysgrifennydd y Bwrdd/Pennaeth Llywodraethu Corfforaethol yr Adroddiad Codi Pryderon gyda Helen Thomas, Prif Swyddog Gweithredol (HT) yn ymuno i gefnogi'r drafodaeth.</p> <p><b>Penderfynodd</b> y Pwyllgor:</p> <p><b>NODI'R</b> Adroddiad Codi Pryderon er <b>SICRWYDD</b></p>	Er Sicrwydd	Dim i'w nodi
<b>RHAN 4</b>	<b>MATERION I GLOI</b>		
4.1	<p><b>Adroddiad Crynhoi Cynnydd y Pwyllgor i'r Bwrdd</b></p> <p>Byddai'r eitemau oedd i dynnu sylw'r Bwrdd atynt yn cael eu trafod y tu allan i'r cyfarfod oherwydd cyfyngiadau amser.</p>	Trafodwyd	Dim i'w nodi
4.2	<p><b>Unrhyw Faterion Brys eraill</b></p> <p>Ni chodwyd unrhyw faterion brys eraill i'w nodi.</p>	Nodwyd	Dim i'w nodi
4.3	<p><b>Dyddiad ac Amser y Cyfarfod Nesaf:</b></p> <ul style="list-style-type: none"><li>• 7 Ebrill 2026</li></ul>	Nodwyd	Dim i'w nodi



**ASSURANCE REPORT  
NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE**

<b>Reporting Committee</b>	<b>Shared Services Partnership Committee</b>
<b>Chaired by</b>	Professor Tracy Myhill OBE, NWSSP Chair
<b>Lead Executive</b>	Neil Frow OBE, Managing Director, NWSSP
<b>Author and Contact Details</b>	Roxann Davies, Corporate Services Manager and James Quance, Assistant Director of Corporate Services
<b>Date of Meeting</b>	14 November 2025
<b>Summary of key matters including achievements and progress considered by the Committee and any related decisions made</b>	
<p><b>Chair’s Report</b> - The Chair updated the Committee on activities since the last meeting, in addition to routine duties, approvals, and providing support to NWSSP, which included:</p> <ul style="list-style-type: none"> <li>• <b>Autumn Development Day</b> - Attended and contributed to the Autumn Committee Development Day and expressed appreciation to those who attended the worthwhile event.</li> <li>• <b>Chairs’ Meeting</b> - Participated in the October Chairs’ meeting, which included an introduction and discussion with the new Director General Health Social Care and Early Years, Jacqueline Totterdale.</li> <li>• <b>Engagement with NHS Leadership</b> - Met with the new Chair of Velindre University NHS Trust, Sara Mosley, on multiple occasions for introductory discussions.</li> <li>• <b>NHS Confederation Event</b> - Attended the NHS Confederation Dinner, engaging with colleagues and stakeholders.</li> <li>• <b>NWSSP Audit Committee</b> - Attended the NWSSP Audit Committee meeting held on 7 November 2025.</li> </ul> <p>The Committee <b>NOTED</b> the Chair’s Report.</p>	
<p><b>Managing Director Update</b> - The Managing Director presented his report, which included the following updates:</p> <ul style="list-style-type: none"> <li>• <b>Chair Tenure</b> - NF was pleased to report that TM has agreed to continue as Chair of the Committee for a further twelve months. The Welsh Government Governance and Accountability Review outcome is still awaited, and current arrangements remain in place under the Director General’s direction.</li> <li>• <b>Welsh Risk Pool</b> – Discussions are ongoing with Welsh Government and Chief Executive Officers (CEOs) regarding financial pressures and high-value cases, with a course of action agreed for further engagement. A presentation was delivered to CEOs by AR and Mark Harris (Director of Legal &amp; Risk Services and Welsh Risk Pool). Excluding the Welsh Risk Pool, NWSSP is forecasting a positive financial position and expects to achieve break-even, with potential financial distribution back to organisations.</li> <li>• <b>Transforming Access to Medicines Programme (TrAMS)</b> - The IP5 Radiopharmacy build is nearing completion of construction phase, with production</li> </ul>	

anticipated from April 2026. The South East Hub Full Business Case (FBC) is in development following agreement on scope, with detailed design work underway. Alternative sites are being considered for West Wales, and discussions with Betsi Cadwaladr University Health Board (BCUHB) on the North Wales Hub have been positive, with additional project management support planned. NF also praised the successful Medicines and Healthcare products Regulatory Agency (MHRA) inspection at IP5 for Pharmacy services.

- **Vaccination Programmes** - Vaccination programmes continue successfully, with nearly one million influenza vaccines delivered and 400,000 COVID doses distributed. NF commended the teams for their ongoing efforts.
- **Other Matters** - The overarching report highlighted progress made in Laundry Services, Primary Care and Medical Examiner Services, as well as Personal Protective Equipment, Accommodation and Decarbonisation. Senior Leadership events and Awards and Recognition were summarised, with NF confirming that he attended the More Than Just Words event, promoting Welsh language initiatives. Further, NF congratulated the NWSSP Payroll Services Team on winning the Shared Services Forum UK Future Vision Award for Team of the Year. NF was also pleased to confirm retention of NWSSP's organisational accreditation to the Cabinet Office's Customer Service Excellence standard, for a third consecutive year.

The Committee **NOTED** and **DISCUSSED** the Managing Director's Report.

## Presentation

**2026-2029 Integrated Medium-Term Plan (IMTP) Progress Update** - The Committee received an update on the development of the NWSSP IMTP for 2026–2029.

As a statutory requirement, the IMTP will be produced in line with Welsh Government guidance and financial allocations, which are expected by the end of November 2025. The plan remains iterative and shaped by Cabinet Secretary current priorities, including waiting lists, patient flow, women's health, prevention, community services and digital transformation. NWSSP's role is to support Health Boards in delivering their plans and ensure alignment through divisional objectives.

The planning process builds on previous work and reflects Welsh Government priorities. Divisional plans have been submitted and are undergoing scrutiny for financial viability and resource capacity. The aim is to present a draft IMTP to the Committee in January 2026, with final delivery by March 2026. A refreshed Digital Strategy is also being developed by the new Chief Digital Officer.

A successful Committee Development Day in October 2025 informed the direction of travel, and ongoing quarterly reviews with organisations are reinforcing alignment and identifying local priorities. Staff engagement remains central, with divisional plans developed from the bottom up and input sought from the Local Partnership Forum, the Equality, Diversity & Inclusion Group and Peer Networks. Five emerging themes have been identified, insofar as digital transformation and innovation, workforce development and culture, operational efficiency, sustainability and decarbonisation, and partnership engagement. The Committee was advised that timelines are on track and that the team is working to deliver a robust plan by March 2026.

The Committee **NOTED** the update and endorsed the approach to IMTP development, recognising the strong engagement process and alignment with National priorities.

## Items for Approval

**NWSSP Strategy Map Refresh for 2026-2029** - The Committee received the Strategy Map for approval and were informed that it was reviewed following the Committee Development Day to ensure alignment with current and future organisational priorities. Feedback from Committee Members and staff informed refinements to strategic objectives and outcomes. The mission statement, "*Delivering Value, Innovation and Excellence through Partnership,*" was confirmed as fit for purpose. Strategic objectives have been updated reflect emerging priorities, including a new objective, Our Partners, focussing on partnership and co-production across NHS Wales. Updated outcome definitions will strengthen performance reporting and provide a clear framework for NWSSP's contribution to NHS Wales priorities, underpinning the next IMTP cycle.

The Committee **APPROVED** the NWSSP Strategy Map Refresh for 2026-2029.

**Extension to the Service Level Agreement (SLA) for the Services supporting the National Influenza Immunisation Programme** – The Committee received an update that the current flu vaccination programme is 97% complete, equating to 885,000 vaccines delivered to approximately 1,800 sites across Wales. Welsh Government has requested NWSSP to run the same programme for 2026–27. The Committee received a proposal to extend to the existing SLA to enable this, noting that a purchase order would need to be signed by Velindre University NHS Trust within the next few weeks to secure manufacturing slots. The supply contract has already been extended for 12 months within the existing contract terms.

The Committee **APPROVED** the extension to the SLA for the services supporting the National Influenza Immunisation Programme and the procurement of next seasons vaccine. Further, the Committee **NOTED** Velindre's position to note the item.

**Revised Stockholding Requirements for Personal Protective Equipment (PPE) and Hygiene Consumable Products** – The Committee received the revised stockholding requirements, for approval. The proposed extension formalises Welsh Government's direction, via the Cabinet Secretary, for NWSSP to maintain a national stockpile of PPE and hygiene consumables. NWSSP is sourcing PPE nationally and internationally and has commenced deliveries to achieve the mandated stock levels. These levels are based on demand during the peak of the second COVID wave, with a minimum of 12 weeks' stock in hand for each product. Certain items, such as aprons, gloves, and Type IIR masks, are now considered business as usual and that NWSSP will rotate stock to minimise expiry-related write-offs.

The Committee **APPROVED** the Revised Stockholding Requirements for Personal Protective Equipment (PPE) and Hygiene Consumable Products, as set out in the Change Control Notice.

**Fleet Modernisation and Optimisation Programme Business Case (PBC)** – The Committee received the PBC for approval, which enables progression to the next stage of governance, which involves noting by the Velindre Trust Board. The PBC sets out a 10-year fleet replacement strategy split into two five-year programmes. NWSSP currently operates 306 vehicles, of which 198 are owned and 108 leased; 40 vehicles are fully electric, while 266 are diesel or petrol. The fleet covers approximately 4 million miles annually across NHS Wales services. The first five-year phase proposes replacing 124 vehicles, with the strategy considering cost, carbon reduction, air quality improvements, and noise reduction. An optimisation review will run in parallel to assess fleet mix, routing, load capacity, and specialist requirements such as cold-chain capability for vaccination

programmes. Annual business justification cases will follow to procure vehicles in line with the approved programme.

The Committee **APPROVED** the Fleet Modernisation and Optimisation Programme Business Case.

**Service Level Agreement (SLA) for the Provision of Commercial Medicines Contracting relating to Specialised Medicines** – The Committee received the SLA for approval, which was designed to formalise the collaborative arrangements between the Medicines Value Unit (MVU) and the NHS Wales Joint Commissioning Committee (NWJCC) for specialised medicines contracting, for a two-year term. The SLA introduces a structured governance framework to clarify roles, responsibilities, timelines and deliverables.

The Committee **APPROVED** the SLA for the Provision of Commercial Medicines Contracting relating to Specialised Medicines.

**Local Partnership Forum and Sub-Groups Terms of Reference** – The Committee received the updated Terms of Reference for the Local Partnership Forum and its sub-groups, for approval. The refresh includes strengthened provisions around speaking up safely and a restructured approach to recruitment and retention, with the former sub-group now renamed as the Attraction and Retention Sub-group. A dedicated sub-group for policy review has also been introduced to ensure systematic oversight of workforce policies. The revisions received positive feedback and endorsement from the Local Partnership Forum.

The Committee **APPROVED** the Local Partnership Forum and Sub-Groups Terms of Reference.

**Locum Hub Wales Contract Briefing Report** – The Committee received the Locum Hub Wales contract, for approval. The proposal is to extend the contract for two years on a 1+1 basis, allowing time for a full review of the scheme’s scope before considering any recommissioning. There is no funding risk, as the programme is fully funded by Welsh Government with direct allocation to NWSSP. Due to the cumulative value of the extension, Velindre Trust Board approval will be required under the Scheme of Delegation.

The Committee **APPROVED** the contract extension for GP Locum Hub Wales, on a 1+1 basis.

### **Items for Noting and Discussion**

**Future NHS Workforce Solution - Electronic Staff Record (ESR) Transformation Programme** – The Committee received an update on the new NHS Workforce Solution, noting that the programme has moved from planning to mobilisation, at a significant pace.

The award of the £1.2 billion contract to Infosys to deliver the replacement for the ESR system and outlined key activities underway, including identification of early adopters and design workshops. Governance arrangements will involve NWSSP working with NHS Business Services Authority (NHSBSA) and Infosys to ensure a consistent approach, with reporting through this Committee, the NHSBSA Transformation Board, and Welsh Government. A programme management structure and overarching steering group will be established, supported by task-and-finish groups focused on readiness and business change. Funding discussions with Welsh Government are ongoing to address increased costs under the new contract. ESR audits will commence in January 2026, with formal action plans for organisations to ensure foundational readiness. Additional work includes

developing an executive briefing pack for Boards to support local communications. NWSSP will work with Welsh Government to confirm IMTP planning assumptions on costings and fundings arrangements to NHS organisations. Regular updates will be provided to the Committee and through peer-groups.

The Committee **NOTED** the update provided in relation to the Future NHS Workforce Solution – ESR Transformation Programme.

**NWSSP Duty of Quality (DoQ) Update** – The Committee was informed that NWSSP has successfully achieved re-accreditation for Customer Service Excellence for the third consecutive year across the organisation. The 'always on' reporting mechanism continues and staff engagement remains a key feature, to ensure updates are accessible and meaningful. The Committee receives DoQ updates on a six-monthly basis, with an Annual Report submitted for approval and subsequently published as a separate chapter in the Velindre Trust's Duty of Quality update.

The Committee **NOTED** the NWSSP Duty of Quality Update.

### **Finance, Performance, People, Programme and Governance Updates**

**Finance Report** – The Committee noted the financial position as at 30 September 2025, confirming a year-to-date surplus of £3.1m, driven by vacancies and underspend in health protection allocation. The forecast remains for a breakeven position by year-end, supported by continued review of expenditure and identification of savings opportunities. Capital expenditure to date stands at £1.9m against an annual limit of £9.4m, with successful funding secured for the next phase of work on the South East Wales TrAMS Full Business Case and further bids submitted for digital and estates schemes. Payment performance and new KPIs remain strong, with improvements noted in invoice processing. The Welsh Risk Pool forecast has risen sharply, creating significant financial pressure across NHS Wales and posing ongoing volatility that will impact next year's planning cycle.

**People and Organisational Development Report** – The Committee received the latest workforce update to 31 October 2025, which highlighted stable sickness absence trends, turnover has reduced, and compliance for mandatory training and PADRs is among the highest in NHS Wales. Progress continues on recruitment, retention, wellbeing, and diversity initiatives, including the launch of the Equality Diversity and Inclusion dashboard and promotion of the Work in Confidence platform. Preparations are underway for the NHS Wales staff survey and recognition awards. NWSSP also achieved national recognition at the ENEI Awards, receiving Highly Commended for Wellbeing and Belonging at Work.

**Performance Information Report** – The Committee received the report detailing the Key Performance Indicators (KPIs) from June to September 2025. The report confirmed that the majority of KPIs were met in September, with continued delivery against stretch targets and NWSSP having generated £58 million in professional influence benefits as at 30 September 2025. A review of performance targets is underway as part of IMTP development. There were no areas of concern to be brought to the Committee's attention.

**Outcome Measures Report** – The Committee received the report focused on outcomes aligned to NWSSP's strategic objectives across services, people and value. NWSSP continues to demonstrate progress in evidencing impact and the overarching report detailed high levels of customer satisfaction, strong employee engagement, and positive impact across procurement, decarbonisation and foundational economy, with 44% of procurement spend retained within Wales.

**Integrated Medium-Term Plan (IMTP) Quarter 2 of 2025-26 Update Report** – The Committee received the latest update in respect of progress made against NWSSP’s IMTP. The overarching report confirmed that 85% of objectives are on track, with targeted actions in place for off-track items. Performance remains stable, with 104 actions on track and six completed. Areas of challenge are being supported or deferred, where necessary.

**Transformation Management Office (TMO) Update Report** – The Committee received an update on the work of the TMO. The overarching report summarised the breadth of transformation activity across NWSSP and national programmes, indicating a stable position with 18 projects, 2 programmes and 5 initiatives currently being tracked. Of which, 2 are red, 7 are amber and 16 are green-rated projects. Overall, the portfolio demonstrates consistent delivery momentum across a diverse range of transformation and service improvement programmes, with 92% of projects rated green or amber and several nearing completion.

**NWSSP Corporate Risk Register** – The Committee received the latest Risk Register update, which was reported as stable and continues to be scrutinised regularly at each Senior Leadership Group meeting. The latest position identifies 17 risks for action, comprising six red, 11 amber and one yellow-rated risk. In addition, four risks are recorded for monitoring, including one amber and three yellow. The overarching report also outlines six emerging risks currently under consideration. Internal Audit has recently provided reasonable assurance on risk management processes.

**NWSSP Management Letter 2024-25** – The Committee received the Management Letter for 2024-25, which was prepared by Audit Wales and considered by the NWSSP Audit Committee on 7 November 2025. Positive assurance was provided to NHS external audit teams on the activities of NWSSP for accounts opinion purpose with no recommendations made, for the third consecutive year. Appreciation was expressed to the Finance team and all divisions for their contribution in achieving this outcome. Committee Members acknowledged the significance of this outcome and welcomed the assurance provided.

**Nationally Hosted NHS IT Systems Report 2024-25** – The Committee received the report prepared by Audit Wales, which was considered by the NWSSP Audit Committee on 7 November 2025. The report is positive and highlights the complexity of digital systems across NHS Wales and the need for continuous annual improvements. It notes close collaboration with Digital Health and Care Wales (DHCW) and a systems-based approach, emphasising the importance of maintaining robust controls, given ongoing cyber security risks. Audit actions will be addressed and monitored through the NWSSP Audit Committee and NWSSP Senior Leadership Group. Committee Members welcomed the assurance provided, noting it gives confidence to both the Committee and the NWSSP Audit Committee. Progress on IT key controls was commended, particularly given the backdrop of cyber threats.

The Committee **DISCUSSED** and **NOTED** the above Reports.

## **Part B - Private**

The Committee received the NHS Wales Energy Sourcing Decision for 2026/27 and **APPROVED** the Welsh Energy Group’s proposal in respect of the All Wales electricity source, to remain with Zero Carbon for Business.

In addition, the Committee received the Draft Welsh Energy Group Minutes of the meeting held on 3 November 2025, for information.

<b>Matters requiring Board/Committee level consideration and/or approval</b>	
The Board is asked to <b>NOTE</b> the work of the Shared Services Partnership Committee.	
<b>Date of next meeting</b>	Tuesday 22 January 2026, 10.00am to 12.00pm

# IECHYD A GOFAL DIGIDOL CYMRU

## DIGITAL HEALTH AND CARE WALES

### FORWARD WORKPLAN

Eitem ar yr Agenda: Agenda Item:	2.3
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Robinson, Corporate Governance Coordinator
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs   Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	The Corporate Risk log is presented at every meeting for oversight and scrutiny
<b>ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	Information
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling, Director of Corporate Affairs/Board Secretary	March 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Audit and Assurance Committee have a Cycle of 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 Committee are reviewing and receiving all relevant matters in a timely fashion.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The Forward Workplan has been updated to include the following items to be presented at the 07 April 2026 meeting:

Item
Accountability Report
Action log
Annual Financial Accounts (verbal update within finance update)
Audit & Assurance Committee Update
Audit Enquiries Q&A (if required)
Audit Recommendations Tracker
Audit Wales Audit Plan 2026/27
Audit Wales Committee Update
Audit Wales Review Reports (as relevant)
Board Assurance Dashboard - Deep Dive
Committee Highlight Report to SHA Board
Corporate Risk register
Corporate Risk register - Private Risks
Counter Fraud Draft Work plan 26/27
Counter Fraud Private Risks
Decarbonisation and Estates Compliance Report
Declarations of interest
Finance update - highlight report
Forward Work Programme
Legislative Assurance Register
Local Counter Fraud Update
Losses & Special Payments Report
Minutes
NWSSP Annual Internal Audit Plan 26/27
NWSSP Assurance Report
NWSSP Internal Audit Progress Report
NWSSP Internal Audit Review Reports
Policy Report approval of policies
Procurements & Scheme of Delegation Report
Quality and Regulatory Compliance
Recruitment Processes - update
Staff Culture & Wellbeing review. An action plan with clear timelines to be brought back to the January Committee

#### 4.2 Additional items identified for the 14 July 2026 meeting are:

Item	Executive Lead
Action log	Director of Corporate Affairs/Board Secretary
Annual Quality Plan	Executive Director of Finance
Annual Quality Report	Executive Director of Finance
Audit & Assurance Committee Update	Audit Wales
Audit Recommendations Tracker	Director of Corporate Affairs/Board Secretary
Audit Wales Committee Update	Audit Wales
Audit Wales Review Reports (as relevant)	Audit Wales
Board Assurance Dashboard - Deep Dive	Director of Corporate Affairs/Board Secretary
Committee Highlight Report to SHA Board	Chair
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Counter Fraud Annual Report	Head of Local Counter Fraud
Counter Fraud Annual Self Review	Head of Local Counter Fraud
Counter Fraud Private Risks	Head of Internal Audit
Decarbonisation and Estates Compliance Report	Executive Director of Finance
Declarations of interest	Chair
Finance update - highlight report	Executive Director of Finance
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Local Counter Fraud Update	Head of Local Counter Fraud
Losses & Special Payments Report	Executive Director of Finance
Minutes	Chair
NWSSP Assurance Report	Executive Director of Finance
NWSSP Head of Internal Audit Opinion and Annual Report 25/26	Head of Internal Audit
NWSSP Internal Audit Progress Report	Head of Internal Audit
NWSSP Internal Audit Review Reports	Head of Internal Audit
Policy Report approval of policies	Executive Director of Finance
Procurements & Scheme of Delegation Report	Executive Director of Finance
Quality and Regulatory Compliance	Executive Director of Finance
Recruitment Processes - update	Director of People & OD
Standards of Behaviour Report	Director of Corporate Affairs/Board Secretary
Welcome and Introductions	Chair
Welsh Health Circular Report	Director of Corporate Affairs/Board Secretary

4.3 The Board has requested additional horizon scanning is undertaken across all Committees to ensure appropriate governance process is followed and the Board is receiving the appropriate levels of assurance from the Committee activity. The Corporate Governance team will support the Executive Director of Finance as Executive lead for the Committee to identify items for the forward workplan on a continued basis.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

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

## 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the report.	

# IECHYD A GOFAL DIGIDOL CYMRU

## DIGITAL HEALTH AND CARE WALES

### STANDARDS OF BEHAVIOUR REPORT

Eitem ar yr Agenda: Agenda Item:	2.4
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Laura Tolley, Deputy Board Secretary   Head of Corporate Governance
Cyflwynwyd gan: Presented By:	Laura Tolley, Deputy Board Secretary   Head of Corporate Governance

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the Standards of Behaviour Report.	



## 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Leadership
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling, Director of Corporate Affairs   Board Secretary	March 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SoB	Standards of Behaviour	DoI	Declaration of Interest



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 In accordance with the requirements of the DHCW’s [Standing Orders](#) and [Standards of Behaviour Policy](#), a report is required to be received by the Audit & Assurance Committee as a standing agenda item, which details the Declarations of Interest, Gifts, Honoraria, Hospitality and Sponsorship activities.
- 3.2 All declarations of interest are reviewed and checked by the Corporate Governance team and any queries are addressed prior to entry on the [register](#).
- 3.3 In line with other NHS Trusts, Health Boards and Special Health Authorities, DHCW have agreed to operate a 3-year declaration of interest form. However, [DHCW Board members](#) will be required to complete an annual declaration of interest form.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 As of 31/03/2026, 94% of band 8a and above declarations of interest have been received and captured on the [Declarations of Interest Register](#). In addition, 34% of staff banded 2-7 have also been received and captured on the register.
- 4.2 In line with the SOB Policy requirement, an escalation process is in place to address if staff banded 8a and above have been requested to complete a declaration form, but it has not yet been submitted.
- 4.3 Further work is ongoing between the Corporate Governance team and People & Organisational Development to ensure a declaration of interest form is mandatory and completed on appointment.
- 4.4 The Committee are asked to note the [Gifts, Hospitality, Honoraria and Sponsorship Register](#) and note since the last meeting there have been no declarations submitted.

### 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Work is ongoing to actively promote the Standards of Behaviour Policy and Declarations of Interest, Hospitality, Honoraria and Sponsorship across the organisation.

### 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the Standards of Behaviour Report.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES LEGISLATIVE ASSURANCE FRAMEWORK REGISTER REPORT

Eitem ar yr Agenda: Agenda Item:	2.5
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Alex Lawrence – QMS Manager
Cyflwynwyd gan: Presented By:	Paul Evans, Head of Quality Assurance & Regulatory Compliance

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE:</b> Legislative Assurance Framework Register.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	DHCW is responsible for complying with legislation applicable to us, the Legislation Register is a tool to document, monitor and confirm assurance to various legislations, Acts, regulations and standard.
<b>ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	As below.
<b><u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Resilient Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	Information
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	Safe
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: This report does not require an EQIA.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	Yes, please see detail below There is an increased quality and safety within the organisation due to compliance with legislation.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	Yes, please see detail below Non-compliance with legislation may have a legal impact on the organisation.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below Non-compliance with legislation may have a financial impact on the organisation.
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	Yes, please see detail below A number of pieces of legislation have an impact on how the workforce within the organisation operates.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	Yes, please detail below Compliance with legislation promotes consideration of socio economic duties.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Paul Evans, Head of Quality Assurance and Regulatory Compliance	17/03/2026	Approved
Michelle Sell, Director of Programmes and Engagement	18/03/2026	Approved
Ifan Evans, Executive Director of Strategy	18/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority



DG&S	Digital Governance and Safety Committee	A&A	Audit & Assurance Committee
POL	Policy	POD	People and Organisational Development
AW	All Wales	APD	Applications Design
COMMS	Communications	LAF	Legislative Assurance Framework
LAR	Legislative Assurance Register	IMS	Integrated Management System

### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 DHCW is responsible for complying with legislation that is applicable to the Special Health Authority. The parameters for the applicability are not just those limited to us as a public healthcare organisation, but include discipline specific areas of work such as the Network and Information Systems Regulations etc.
- 3.2 The [Legislative Assurance Framework](#) forms part of the overall governance assurance framework, the requirements of which are outlined in the DHCW Standing Orders to address the legal, regulatory, and contractual requirements of DHCW. This compliance assessment also supports the achievement and maintenance of the ISO and BS accreditations held by the organisation.
- 3.3 There is a legislation register as part of the management of quality standards, acts and regulations within DHCW in-line with ISO 14001:2015 Environmental Management Systems, ISO 27001:2022 Information Security, Cybersecurity and Privacy Protection & ISO 22301:2019 Societal Security Business Continuity Management Systems standards requirements.
- 3.4 The [Legislative Assurance Register](#) is maintained by the Quality Assurance and Regulatory Compliance team and is reviewed by the IMS Assurance Group on a monthly basis. The IMS Assurance Group escalate any revisions, amendments or new legislation that present material impact to regulatory compliance and / or site operations to the Quality and Regulatory Group.
- 3.5 The Quality and Regulatory Group review the Legislative Assurance Register monthly, and review legislation for relevance to the organisation, in addition to undertaking horizon scanning in each of the identified areas of legislation.
- 3.6 Updates to the legislation register are managed via the Change Control module in iPassport. Requested changes are submitted via a fillable form and reviewed by the Quality Standards and Regulatory Compliance team weekly.



## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 Committee members are asked to note the following changes to the Legislative Assurance Framework Register as a whole since the last report.
- 4.2 The Legislative Assurance Register is currently being developed into a Microsoft Power App. Additional data including 'Why' the piece of Legislation is applicable to the Organisation and the key Organisational controls in place to meet the key requirements are being added. Therefore, ongoing work is being conducted to the register. Once the project is complete this shall enable better control, automation and auditability.

### New (3)

Reference	Legislation Name	Executive Lead
CC-EC-1	The Town and Country Planning Regulations 2025	Chris Darling
CC-EC-3	H&S Management System Guide 2013	Chris Darling
CC-EC-5	The Conservation of Habitats and Species Regulations 2017	Chris Darling

### Amendments (0)

Reference	Legislation Name	Executive Lead	Statement
N/A			

### Removed (2)

Reference	Legislation Name	Executive Lead	Statement
CC-EC-2	ISO45001 Occupational Health and Safety Management 2015	Chris Darling	DHCW do not align or are not certificated to this standard.
CC-EC-4	Environmental Permitting Regulations 2016	Chris Darling	"Ordinary office spaces in England and Wales do not automatically need an Environmental Permit under the Environmental Permitting (England and Wales) Regulations – unless the office is carrying out specific activities that are regulated because they could harm the environment (e.g.,



			emissions to air, discharges to water, waste operations, etc.).”
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## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

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

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE:</b> Legislative Assurance Framework Register.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES QUALITY ASSURANCE & REGULATORY COMPLIANCE REPORT

Eitem ar yr Agenda: Agenda Item:	2.6
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Paul Evans, Head of Quality Assurance and Regulatory Compliance
Cyflwynwyd gan: Presented By:	Paul Evans, Head of Quality Assurance and Regulatory Compliance

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	Be the trusted strategic partner and a high quality, inclusive and ambitious organisation
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Whole Systems Approach
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	Yes, please see detail below  Duty of Quality implications throughout this report
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Michelle Sell, Director of Programmes and Engagement	18/03/2026	Reviewed
Ifan Evans, Executive Director of Strategy	18/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
ISO	International Standards Organisation	QI	Quality Improvement
SaMD	Software as a Medical Device	SLT	Senior Leadership team
MDR	Medical Devices Regulations	MHRA	Medicines and Healthcare Products Regulatory Agency

## 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

### Introduction

The following report summarises the key activities for quality performance in relation to

- External Audit performance
- Internal quality performance against the annual quality plan
- Legislation changes and requirements

### 3.1 External Audits

Four (4) external transfer audits were conducted over January to March 2026:

- **ISO 9001:2015 – Quality Management Systems**
  - Type: Recertification
  - Outcome: 2 Minor Non-Compliances, 1 Opportunity for Improvement.
- **ISO 14001:2015 – Environmental Management Systems**
  - Type: Recertification
  - Outcome: 2 Minor Non-Compliances.
- **ISO 20000-1:2018 - Information Technology Service Management**
  - Type: Transfer
  - Outcome: Successful
- **ISO 27001:2022 - Information Security Management Systems**
  - Type: Transfer
  - Outcome: Successful

**Note:** These audits related to the transfer of existing certificates to the incumbent certification provider.

### 3.2 Internal Quality Performance

#### Milestones

The Quality Assurance and Regulatory Compliance team have completed two IMTP milestones during Quarter Four. These were

- Completion of all actions to align with UK Medical Devices Regulations requirements
- Development of the Quality Improvement plan for DHCW for 2026/27

#### Non-Compliance Management

Significant improvements have been made since the last reporting period. Open findings within agreed target dates have increased from 75% to 93%, reflecting strengthened non-compliance management arrangements and closer working with auditees to address issues in a timely manner.

Longstanding overdue Major NCs and incidents are now being migrating to DATIX.

#### Document Management Strategy (DMS) & iPassport

The Organisation continues to manage documentation effectively through iPassport. The current document compliance rate stands at 95%, alongside a continued increase in the number of controlled documents held within the system. This reflects sustained

improvement in document control and the timely review of documents as they become due.

### **Quality Improvement Framework**

The Quality Improvement Framework is on track against the project plan and our objectives for 2025/26 with the development and continued roll-out of the 5 Minute Improvement initiative across DHCW.

## **3.3 Legislation**

### **Medical Devices**

Since June 2025, the UK Medical Devices Regulations 2002 have included enhanced post-market surveillance requirements under Part 4A, strengthening obligations for manufacturers and organisations placing medical devices on the Great Britain market to monitor safety, performance, and incidents throughout the device lifecycle. DHCW procedures and governance controls have been implemented to support compliance with these regulatory requirements. QA&RC continue to represent DHCW at the All-Wales MDR group to keep abreast of changes.

### **Duty of Quality**

Following approval and publication of the Annual Quality Report in both Welsh and English, work is now underway to develop content for the next Annual Quality Report, with a focus on generating more forward-looking and embedded quality assurance evidence.

The Quality Framework has now been approved, with pilot Organisational Team Quality Plans underway. These plans embed the 12 standards of the Duty of Quality, enabling the organisation to systematically track and demonstrate how quality is embedded across all areas of work.

### **Legislation Assurance Register**

Updates to the Legislative Register continue to be managed successfully via iPassport, with the Quality team undertaking monthly reviews through established governance arrangements to maintain compliance with standards requiring a current Legislative Register.

## **4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION**

### **Update**

#### **4.1 External Audits**

One (1) surveillance audit due in June 2026:

- ISO 27001:2022 - Information Security Management Systems

#### **4.2 Internal Quality Performance**

##### **Milestones**

The Quality Assurance and Regulatory Compliance IMTP milestones for Quarter Four are complete.



## Non-Compliance Management

Significant improvements have been made to DHCW's open non-compliances, with the majority of directorates now performing well. A small number of hotspots remain, where the Quality team is working closely with Non-Compliance owners/teams to sustain momentum and drive further improvement.

Building on this progress, the team will continue to refine approaches to corrective action scheduling, working collaboratively with auditees and Non-Compliance owners to agree more practical target dates and identify potential blockers earlier in the process.

## Document Management Strategy (DMS) & iPassport

The document migration project has now been fully completed, with all directorates operating within the agreed categorised Document Management Strategy (DMS). Controlled document management is embedded as business as usual, demonstrating consistent application of the DMS structure and effective organisational control of documentation.

As a result of the successful completion of the programme and the transition to business-as-usual arrangements, the associated corporate risk (ID 14200) has been closed.

## Quality Improvement Framework

- We continue to deliver the 5 Minute Improvement training and encourage staff members to submit their improvement ideas. We have delivered this training to 233 people so far across the organisation and have been delivering team specific sessions. 98% of our attendees say they are satisfied with the content of this course and feedback remains positive regarding the course content and delivery.
- The Fundamentals of Quality Improvement workshop has been delivered to 74 people so far with 100% of our attendees saying they are satisfied with the content of this course. This workshop is now being offered bi-monthly instead of monthly, however some sessions have been cancelled due to limited numbers.
- Our improvement dashboard remains active so that everyone at DHCW can submit, share and celebrate the improvements across directorates. We have had 56 ideas submitted so far. These submissions are automatically considered for the '5-Minute Improvement of the Month Award'.
- The QI team have been actively involved with several Kaizen Events, including events for our end-to-end WIAG process at DHCW, the DHCW recruitment process, and data sharing governance processes. The team have engaged with stakeholders in these areas and the processes for each area have been mapped to identify issues and potential solutions. We have a future Kaizen even planned for the on-call rotas and emergency planning process.
- Communication pieces have been published internally to highlight the 5-Minute Improvement initiative and the importance of registering improvement ideas. Communications have also been published to demonstrate the value of Kaizen Events

and seeking candidates for further events.

- The 'What Matters to You' initiative has been piloted with the Finance & Business Assurance Senior Leadership Team, Estates & Compliance team, EDI Network and Quality team. Appropriate Next Steps are now under consideration.

## 4.3 Legislation

### Medical Devices

We are continuing to keep abreast of MHRA guidance and communications in regard to the new UK Medical Device Regulation compliances. The Quality team is maintaining communication and working closely with the MHRA, not only to keep up to date with progress but being directly involved defining guidance that will be published regarding SaMD via Trusted Advisor Groups.

We are maintaining attendance at the 'all Wales MDR group' to act upon guidance when available.

Members of the Quality team are contributing to the Medical Device Showcase events and contributing to the All Wales maturity rating regarding SaMD. Output is reported to Welsh Government.

The DHCW SaMD has been developed to closely align with DHCW's presently established processes to support standardisation and consistency. We are currently working closely with DHCW colleagues to establish 'quality agreements' to ensure the approach aligns with the organisations shift to product led digital services.

We are currently working with the WECDS project team to manage DHCW's first Medical Device, Manchester Triage System (MTS). The project team are engaging well with the quality team to successfully register MTS with the MHRA and place on the market. This project enables us to test and amend our processes to continually improve and better our compliance with lessons learned.

We are also currently exploring the potential of developing clinical calculators for use within NHS Wales. There have been expressions of interest and engagement from multiple Health Boards and we have started to document the purpose and scope of User Requirement Specifications (URS).

Any services identified as a Medical Device will follow UK 2002 legislation until the new UK Medical Device regulations come into force.

### Duty of Quality

Work is now underway on this year's Annual Quality Report, evidence of where the Organisation meets the Duty of Quality standards has been captured and builds on the publication of the previous report.

### Legislation Assurance Register

Full LAR details are captured in agenda item 2.6.

Recent updates to the Legislative Assurance Register (LAR) reflect ongoing compliance efforts. The latest review introduced three (3) new legislative requirements and requests, zero (0) amendments, and two (2) requested removals as no current alignment to standard. These changes were captured through the iPassport system and validated during governance meetings, reinforcing the organisation's commitment to maintaining a current and robust Legislative Register in line with regulatory standards.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

### Summary

The period reflects continued strengthening of quality performance, with key programmes now embedded as business as usual and clear improvements demonstrated across audit, non-compliance management, and document control. Focus has now shifted to sustaining this progress and enhancing forward-looking quality assurance through the implementation of the DHCW Quality Framework and associated reporting arrangements.

### Forward Plan for Next Quarter

#### 5.1.1 External Audit

One (1) surveillance audit due in June 2026:

- ISO 27001:2022 - Information Security Management Systems

#### 5.1.2 Quality Performance

- External ISO transfer audits were completed across multiple standards, with successful outcomes overall and only a small number of Minor Non-Compliances identified.
- Significant improvements have been made in non-compliance management, with the majority of directorates now performing well and open findings within target dates increasing to 93%; targeted support continues for a small number of hotspot areas.
- Controlled document management is embedded as business as usual through iPassport, with a 95% compliance rate; the document migration programme is complete, and the associated corporate risk has been closed.
- The Quality Improvement Framework is approved and being implemented, with ongoing delivery of improvement initiatives, training, and staff engagement activities.
- DHCW Annual Quality Plan for 2026/27 has been approved by Management board.
- The Annual Quality Report has been published, and work is underway on this year's report, supported by pilot Organisational Team Quality Plans embedding the 12 Duty of Quality standards to strengthen forward-looking assurance and evidence of quality in practice.

#### 5.3 Legislation Actions

- Continue maintaining communication with MHRA and other stakeholders regarding new UK Medical Device regulations.
- Continue preparations for compliance with new UK Medical Device regulations.



- Continue to deliver MTS via MHRA registration.
- Continue to explore potential of DHCW manufacturing clinical calculators (SaMD)
- Re-design of the Always On Quality Reporting process.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES ESTATES, DECARBONISATION AND COMPLIANCE UPDATE

Eitem ar yr Agenda: Agenda Item:	2.7
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Ash, Head of Estates and Compliance
Cyflwynwyd gan: Presented By:	Julie Ash, Head of Estates and Compliance

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the Estates, Decarbonisation and Compliance Report for <b>ASSURANCE</b> .	



## 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL</b> <b>STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol)</b> <b>CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD</b> (cyf, os yw'n briodol) <b>QUALITY IMPACT ASSESSMENT</b> (ref if appropriate)	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u></b> <b><u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u></b> <b><u>DHCW QUALITY STANDARDS</u></b>	ISO 14001 - Environmental Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u></b> <b><u>DUTY OF QUALITY ENABLER</u></b>	Whole Systems Approach
<b><u>PARTH ANSAWDD</u></b> <b><u>DOMAIN OF QUALITY</u></b>	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u></b> <b><u>GYDRADDOLDEB</u></b> <b><u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Ddim yn berthnasol Statement: Not required	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	Yes, please see detail below Measures are in place at all sites to ensure the environments are safe
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	Yes, please see detail below Compliance with legislation and lease arrangements
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below Proposals will be costed and ongoing savings identified as part of the DHCW Savings Plan
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	Yes, please see detail below Any changes to the estate with impact for staff will be subject to consultation
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	Yes, please detail below Social impacts on health are embedded in the broader environment and shaped by complex relationships between economic systems and social structures.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling, Director of Corporate Affairs/Board Secretary	17 March 2026	Approved
Audit and Assurance Committee	7 April 2026	

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
SLA	Service Level Agreement	NHS	National Health Service
NWSSP-SES	NHS Wales Shared Services Partnership Specialist Estates Services	EFPMs	Estates and Facilities Performance Management System



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 Digital Health and Care Wales (DHCW) have 4 leased offices across Wales and have a presence at two other sites under Service Level Agreement (SLA) arrangements. We have a three-year Estates Plan for 2025–28 which is published. Our leased sites are:

- Ty Glan-yr-Afon, Cardiff
- Bocam Park, Pencoed
- Media Point, Mold
- Technium 2, Swansea

Sites occupied under SLA (re-charge arrangements) are:

- National Imaging Academy, Pencoed (Cwm Taf Morgannwg University Health Board)
- Cwmbran House, Pontypool (Velindre University NHS Trust)

3.2 This report provides an update on estates and sustainability within Digital Health and Care Wales and includes the following:

- Estates Development Update
- Decarbonisation & Adaptation Update (including Climate Action Partnership (CAP) Decarbonisation Return for the period November 2025 to March 2026 and Adaptation Qualitative Return 2025/26)
- DHCW Estates and Compliance Report for February 2026

3.3 Digital Health & Care Wales form part of the Welsh Government Community of Experts on Climate Change and attend regular meetings of this forum. DHCW are also active members on other All Wales forums focused on Climate Change, such as Transport & Procurement Project Board, the Approach to Healthcare Project Board, the Buildings, Estates, Land Use and Property Project Board, the Welsh Health Estates Forum and other sub-groups within this structure.

3.4 The Reporting regime for Decarbonisation and Adaptation has been reviewed in light of the new Delivery Plan. DHCW have been involved in discussions which include the new Climate Action Partnership (CAP) reporting regime.

3.5 The annual emissions return is due every year at the beginning of September. Estates and Facilities Performance Management System (EFPMS) Returns are completed on an annual basis. Work will commence shortly on collection of EFPMS data for 2025/26.

3.6 Digital Health & Care Wales (DHCW) has a number of Groups in place which manage activities covered within this report:

- Decarbonisation and Energy Working Group
- Environmental Awareness Group
- Safety, Health and Environmental (SHE) Group
- Water Safety Group
- Estates Development Group

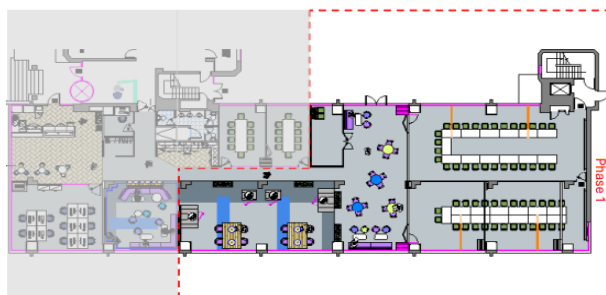
## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

### 4.1 Estates Development

The DHCW Estates Plan 2025-28 reflects DHCW's future focus on estates modernisation and optimisation.

The current focus is on the development of a Digital Futures Space on the Ground Floor of the building to provide a collaborative space with facilities for Conferencing, User Centered Design and Digital Inclusion. This is a really exciting opportunity, and a lot of work has been ongoing in the background to set up a suitable support model. Accessibility has now been improved with the installation of a ramp.

Development of the Digital Futures Space was split into two phases, Phase 1 (outlined by a dotted line in the picture below) was completed and temporarily opened for use. This consisted of the Conferencing Facility, Mingle Zone, Storage facility and Touchdown area.



Phase 2 (which commenced in November 2025, and was completed by March 2026) includes:

- **Hospitality and Kitchen Area:** full refit with new ceiling, lighting, commercial kitchen facilities, seating area electrics, and decorative finishes.
- **Corporate/Accessible Working Area:** creation of secure and accessible flexible workspace including glazed partitions, modern lighting, ceiling systems, and data/power access.
- **Digital Inclusion Lounge:** enhancements to walls, lighting, ceiling, power/data, and finishes to support community and digital training events.
- **Security and Cloakroom Areas:** improved layout and infrastructure for better functionality, access control, and user experience.
- **Universal Toilet Facilities:** high-quality accessible WC refurbishments including intelligent lighting, radiant heating, IPS panelling, integrated hand-washing systems, and upgraded partitions.
- **Additional Fire Exit capacity:** to enable full use of the Conferencing Facility

It is planned to launch the new Digital Space in June 2026.

In addition to the Ground Floor development at Ty Glan-yr-Afon, there have been further improvements in terms of refurbishment of the First Floor, improvements to the Innovation Area and Board Room and installation of new improved Electric Vehicle Charging facilities.

At Bocam Park, improvements have included:

- Installation of shower facilities
- Refurbishment of kitchen facilities
- Decoration and new furniture
- Model office set-up on the Ground Floor

Other planned improvements across the Estate include:

- Working with NWSSP to acquire additional desk space in Cwmbran House
- Working with NWSSP to improve meeting facilities in Cwmbran House
- Installation of a small meeting room within the existing Madoc Room area at Technium 2
- Refurbishment of the 2<sup>nd</sup> Floor at Ty Glan-yr-Afon

In Technium 2, we will be reducing the number of units occupied from 5 to 2 and will retain the Madoc Room. A Project Team was established to manage this work, which included some changes to be made under Licence. DHCW have been working with NHS Wales Shared Services Partnership Specialist Estates Services (NWSSP-SES) to secure a new lease for the reduced space from 1 April 2026.

#### 4.2 Decarbonisation Performance against Baseline Year

The table below provides a summary of DHCWs Gross emissions targets and performance during Q1-Q3 2025/26 vs the same period in 2019/2020 (our baseline year). The figures confirm that we are well ahead of the 2025 and 2030 targets.

Emissions	Performance Q1-Q3 25-26 vs Q1-Q3 Baseline (19/20):	Operational Carbon Footprint Q1-Q3 2025-26:	Q1-Q3 Carbon Footprint per m2:	Q1-Q3 Carbon Footprint per person:
<b>Gross</b>	<b>-53%</b>	<b>963 tCO2e</b>	<b>0.171 tCO2e</b>	<b>0.775 tCO2e</b>
<b>Net</b>	<b>-66%</b>	<b>620 tCO2e</b>	<b>0.11 tCO2e</b>	<b>0.499 tCO2e</b>

Progress continues to be good in this area. The Gross Emissions figure includes both operational and supply chain emissions.

DHCW are aware of the need to understand, and advise on, the impact of digital on carbon emissions, work continues in this area.

As required by Welsh Government, we have completed our [Adaptation Qualitative Return \(covering the period November 2025 to March 2026\)](#) and [Climate Action Partnership Decarbonisation Strategic Delivery Plan Return for 2025/26](#), both of which were approved by Management Board on 12<sup>th</sup> March 2026 in readiness for submission on target during April 2026.

### 4.3 Compliance Update

The latest [Estates and Compliance Report for February 2026](#) is attached. DHCW (via its predecessor organisation, the NHS Wales Informatics Service) has held ISO 14001 Environmental Management System certification since 2014.

ISO 14001 EMS Assurance Rating	Substantial Assurance / Good Control
--------------------------------	--------------------------------------

Overall compliance of plant systems and equipment is at 97%, significantly above the target of 90%.



Internal Planned Preventative Maintenance (PPM) remains at 100%, well ahead of target and reflects the focus being given to this area:

<table border="1"> <tr><th>Tŷ Glan-Yr-Afon</th><th>% Complete</th></tr> <tr><td>Total Inspections</td><td>51</td></tr> <tr><td>Total Complete</td><td>51</td></tr> <tr><td></td><td>100%</td></tr> </table>		Tŷ Glan-Yr-Afon	% Complete	Total Inspections	51	Total Complete	51		100%	<table border="1"> <tr><th>DHCW</th><th>% Complete</th></tr> <tr><td>Total Inspections</td><td>174</td></tr> <tr><td>Total Complete</td><td>174</td></tr> <tr><td></td><td>100%</td></tr> </table>		DHCW	% Complete	Total Inspections	174	Total Complete	174		100%
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Bocam	% Complete																		
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## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 There is a big focus on Estates Development currently, specifically completion and subsequent launch of the Ground Floor Digital Space at Ty Glan-yr-Afon. We are further rationalizing our estate in April 2026 by reducing our footprint at Technium 2. Plans are in place for modernisation at Bocam Park.
- 5.2 Decarbonisation focus remains strong, and we continue to see great progress. The NHS Wales Decarbonisation Strategic Delivery Plan (SDP) has undergone a refresh, and a new reporting regime has been brought in. DHCW's Adaptation Qualitative Return and Climate Action Plan Decarbonisation Strategic Delivery Plan Return were both approved by Management Board on 12<sup>th</sup> March 2026 and submitted on time.
- 5.3 Compliance figures are at 97% and Planned Preventative Maintenance are at 100% for February, the detail can be found in the latest monthly Estates and Compliance Report which is attached.

## 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the Estates, Decarbonisation and Compliance Report for <b>ASSURANCE</b> .	

Reference	Date of Meeting	Action/Decision Detail	Action Lead	Due Date	Status/Outcome Narrative	Status	Revised Action	Revised due date	Session Type	Item Type	Path
20260120-A01	20/01/2026	LT to consider adding 'Audit in the Digital Space' for a future Board Development session.	Laura Tolley (DHCW - Deputy Board Secretary / Head of Corporate Governance)	03/03/2026	This will be considered in the 26-27 Board Development forward work plan.	Complete			Public	Item	sites/DHC_CG/Lists/Audit Action Log

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES INTERNAL AUDIT PROGRESS REPORT NWSSP AUDIT AND ASSURANCE SERVICES

Eitem ar yr Agenda: Agenda Item:	4.1
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Stephen Chaney, Head of Internal Audit
Cyflwynwyd gan: Presented By:	Stephen Chaney, Head of Internal Audit

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<p><b>NOTE</b> the Internal Audit Progress Report.  <b>APPROVE</b> the deferral of LIMS 2.0 due to the progress still required.  <b>NOTE / APPROVE</b> the provision of an advisory report for the Welsh Intensive Care Information Programme.  <b>NOTE</b> the draft 2025/26 Head of Internal Audit Opinion.</p>	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
N/A		

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

## 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 This document sets out a summary of the progress of the [Internal Audit Plan for 2025/26](#) for Digital Health and Care Wales (DHCW), detailing the final assurance rating and a summary of recommendation priorities for the internal audit reports:



- Service Continuity Planning (reasonable assurance), with seven medium priority recommendations raised.
- Sustainable Funding (DPIF Funding) (reasonable assurance), with two medium priority recommendations raised.
- Cyber Security (reasonable assurance), with one high and one medium priority recommendations raised.
- Follow-up of Audit Recommendations (no opinion provided).

3.2 As we sought to commence the planning phase of our LIMS 2.0 audit work, there is still ongoing dialogue with NHS Wales organisations to progress the LIMS programme. At this stage, we are still unable to proceed with the work and therefore are requesting the Committee to approve a deferral of the audit into the 2026/27 Internal Audit Plan (which has already been included within the draft plan).

3.3 We also completed our review of the Welsh Intensive Care Information Programme. However, our conclusions and key findings relate to matters outside of DHCW's control. For example, some actions are dependent upon participating health boards. As these are risks / matters relating to external organisations, we have not provided assurance for these areas. We have raised key findings, with priority ratings assigned. However, we have not provided an overall assurance rating for this review. Consequently, we are asking the Committee to note / approve this change in approach for this review.

3.4 I have also included the [2025/26 Draft Head of Internal Audit Opinion](#), which is based on the volume of completed reasonable assurance audit reports. Until all remaining audit work is finalised, this is subject to amendment, but at this stage, my proposed opinion for 2025/26 is reasonable assurance.

## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The Committee is asked to:

**Note** the Audit Progress Report.

**Approve** the deferral of LIMS 2.0 due to the progress still required.

**Note / approve** the provision of an advisory report for the Welsh Intensive Care Information Programme.

**Note** the draft 2025/26 Head of Internal Audit Opinion.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no matters for escalation to the Committee, other than referenced above.



## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:  
Recommendation:

The Committee is being asked to

**NOTE** the Internal Audit Progress Report.

**APPROVE** the deferral of LIMS 2.0 due to the progress still required.

**NOTE / APPROVE** the provision of an advisory report for the Welsh Intensive Care Information Programme.

**NOTE** the draft 2025/26 Head of Internal Audit Opinion.

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES INTERNAL AUDIT REPORTS NWSSP AUDIT AND ASSURANCE SERVICES

Eitem ar yr Agenda: Agenda Item:	4.2
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Stephen Chaney, Head of Internal Audit
Cyflwynwyd gan: Presented By:	Stephen Chaney, Head of Internal Audit

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
<b>RECEIVE</b> the internal audit reports for <b>ASSURANCE</b> and <b>NOTING</b> .	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENabler</u></b>	N/A
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below There may be actions, as outlined within the Sustainable Funding (DPIF Funding) Internal Audit report.
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
N/A		

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

## 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The following reports are included:

[Service Continuity Planning \(reasonable\)](#)

We raised seven medium priority matters arising.

#### [Follow-up of Audit Recommendations \(not rated / advisory\)](#)

There were no specific matters raised, but rather two opportunities for improvement.

#### [Sustainable Funding \(DPIF Funding\) \(reasonable\)](#)

We raised two medium priority matters arising.

## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 A summary of the key findings is provided below:

### [Service Continuity Planning \(reasonable\)](#)

The audit concluded reasonable assurance over DHCW's service continuity planning, with core processes generally operating as intended but requiring several improvements to strengthen resilience. While business continuity plans are in place, up to date, and supported by established governance and training arrangements, the review identified weaknesses including inconsistent business impact assessments, unclear distinction between business and IT service continuity, limited training uptake, overdue and inconsistently recorded business continuity plan testing.

### [Follow-up of Audit Recommendations \(not rated / advisory\)](#)

This review found that the Audit Recommendation Tracker (the 'Tracker') was operated as intended. We also tested a sample of recommendations that were identified as closed (as at the end of October 2025) and reviewed the associated evidence to determine if this was appropriate. We did not find any issues. However, we raised enhancements to strengthen the arrangements for ensuring actions are only marked as closed, when appropriate to do so and to ensure that there is a consistent approach to record keeping with each action (e.g. recording of narrative).

### [Sustainable Funding \(DPIF Funding\) \(reasonable\)](#)

The audit concluded reasonable assurance over DHCW's management of the transition from the former DPIF funding model to the new National Priorities Fund, noting strong governance, multi-year outcome-based funding arrangements, and robust financial monitoring processes. While most milestones linked to Welsh Government funding were achieved or appropriately re-baselined, a small number remain unreconciled between the IMTP and remit letter, creating a residual risk of future funding challenge. Budgetary controls were generally sound; however, budget accountability letters had not been



issued to programme budget holders for formal acceptance of their budget totals, although we did observe some examples of email acceptance.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Any matters for escalation to the Board (other relevant committees) to be determined by the Committee following considerations of the reports.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
RECEIVE the internal audit reports for <b>ASSURANCE</b> and <b>NOTING</b> .	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES DRAFT INTERNAL AUDIT PLAN 2026/27 NWSSP AUDIT & ASSURANCE SERVICES

Eitem ar yr Agenda: Agenda Item:	4.3
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Stephen Chaney, Head of Internal Audit
Cyflwynwyd gan: Presented By:	Stephen Chaney, Head of Internal Audit

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	The Committee is being asked to
<b>RECEIVE</b> and <b>DISCUSS</b> the Draft 2026/27 Internal Audit Plan, prior to approval of the final version. Any updates / changes will be incorporated and presented as the final version for approval at the next available Audit and Assurance Committee.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: All standards may apply, due to the nature of the planned audits.	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: Multiple standards may apply due to the scope of our audit work.	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: All enablers / domains may apply due to the nature of the assurance work completed.	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Executive Team Members	March 2026	DISCUSSED

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 This document sets out the proposed [Internal Audit Plan for 2026/27](#) (the 'Plan') for DHCW, by detailing the audits to be undertaken on **page 8**. It also contains the Internal Audit Charter which defines the over-arching purpose, authority and responsibility of Internal Audit and the key performance indicators for the service. It has been developed and agreed with the Senior Leadership Team.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The Committee is asked to receive and discuss the proposed Internal Audit Plan 2026/27 for the year. A final version for approval will be submitted following the receipt of all queries and updates etc.

4.2 The Plan has been drafted based on key risks facing DHCW, Welsh Government priorities, previous audit work completed and other key risk themes.

### 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 The Committee provides assurance to the Board that an appropriate Internal Audit programme is in place for the year. The Internal Audit Plan is developed by determining and analysing key areas of risk within DHCW.

### 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
<b>RECEIVE</b> and <b>DISCUSS</b> the Draft 2026/27 Internal Audit Plan, prior to approval of the final version. Any updates / changes will be incorporated and presented as the final version for approval at the next available Audit and Assurance Committee.	

# Digital Health and Care Wales – Audit and Assurance Committee Update

Date issued: April 2026



# Contents

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For further information, or if you require any of our publications in an alternative format and/or language, please contact us by telephone on 029 2032 0500, or email [info@audit.wales](mailto:info@audit.wales).

We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

# Introduction

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This document provides the Audit and Assurance Committee with an update on our current and planned accounts and performance audit work at Digital Health and Care Wales. We presented our most recent Audit Plan to the committee in April 2025.

We also provide additional information on:

- other relevant examinations and studies published by the Auditor General; and
- relevant corporate documents published by Audit Wales (e.g., fee schemes, annual plans, annual reports), as well as details of any consultations underway.

# Accounts audit update

## Audit of the 2025-26 Annual Report and Accounts

- **Executive Lead:** Executive Director of Finance and Business Assurance
- **Focus of the work:** To provide an audit opinion on the SHA's 25-26 Annual Report and Accounts.
- **Status:** In Progress
- **Expected committee date:** June 2026

# Performance audit update

## Structured assessment 2024 - deep dive review of investment in digital systems

- **Executive Lead:** Chief Executive Officer
- **Focus of the work:** This work will examine digital arrangements, with a particular focus on how NHS bodies are investing in digital technologies, solutions, and capabilities to support the workforce, transform patient care, meet demand, and improve productivity and efficiency.
- **Status:** Fieldwork
- **Expected committee date:** July 2026

## Remit Letter Review (Local Work)

- **Executive Lead:** Executive Director of Strategy
- **Focus of the work:** This work will examine how effectively DHCW is responding to the strategic and operational demands set out in its 2025–26 remit letter.
- **Status:** Fieldwork
- **Expected committee date:** July 2026

## Structured assessment 2025 - deep dive review of the arrangements to manage estates

- **Executive Lead:** Director of Corporate Affairs / Board Secretary
- **Focus of the work:** This work will examine the effectiveness of corporate arrangements to manage the SHA's estate with a particular focus on how NHS bodies are prioritising resources to meet strategic priorities whilst also ensuring the current estate remains fit for purpose.
- **Status:** Fieldwork
- **Expected committee date:** July 2026

## Other relevant publications

Since the last committee update, the Auditor General has published other relevant outputs which have relevance to the NHS. These are set out below.

<a href="#"><u>Private Finance - Public Impact (Examining decision-making for the new Velindre Cancer Centre)</u></a>	February 2026
---	---------------

<a href="#"><u>Checking the patients. Results from a pilot data matching exercise on GP patient lists</u></a>	January 2026
---	--------------

Since the last committee update, Audit Wales has also published the following corporate documents.

<a href="#"><u>Fee Scheme 2026-27   Audit Wales</u></a>	January 2026
---	--------------

## Further information

Audit Wales has a range of other information to support the scrutiny of Welsh public bodies and to continue to improve the services provided to the people of Wales.

Visit our [website](#) to find:



Our [publications](#) which cover our audit work at public bodies.



Information on our upcoming work and forward work programme for [performance audit](#).



[Data tools](#) to help you better understand public spending trends.



Details of our [Good Practice](#) work and events including the sharing of emerging practice and insights from our audit work.



Our [newsletter](#) which provides you with regular updates on our public service audit work, good practice, and events.



Audit Wales

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Website: [www.audit.wales](http://www.audit.wales)

We welcome correspondence and telephone calls in Welsh and English.

Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.



# Digital Health & Care Wales – Audit Plan 2026

Date issued: March 2026

Document reference: 5235A2026

This document is a draft version pending further discussions with the audited and inspected body. Information may not yet have been fully verified and should not be widely distributed.



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This document has been prepared as part of work performed in accordance with statutory functions.

The Auditor General, Wales Audit Office and staff of the Wales Audit Office accept no liability in respect of any reliance or other use of this document by any member, director, officer or other employee in their individual capacity, or any use by any third party.

For further information, or if you require any of our publications in an alternative format and/or language, please contact us by telephone on 029 2032 0500, or email [info@audit.wales](mailto:info@audit.wales).

We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

# Introduction



**Adrian Crompton**

Auditor General for  
Wales

I am pleased to share my 2026 Audit Plan. The Plan sets out how I will undertake your audit.

My audit team has developed the Plan following a structured and risk-based planning process, which will remain ongoing throughout the audit. My [Code of Audit Practice](#) provides further detail on how my audit and certain other functions are to be carried out by my auditors.

At the core of all our work is our commitment to maintaining the highest standards of professional integrity, objectivity, independence and audit quality. Our three

lines of assurance model (page 22) sets out how we will ensure those standards of quality are met. Our latest annual [audit quality report](#) provides more information about our audit quality arrangements.


My audit team will work constructively with your staff to understand the issues you are facing, ensure the audit process operates as smoothly as possible, and provide valuable insights about any areas for improvement.

My local performance audit work programme, as outlined in this Plan, sits alongside other [national audit work](#) that may include coverage of your organisation. Local performance audit work may also inform wider national reporting.


Should you have any questions about your audit my audit team will be happy to discuss them with you. They will also keep you regularly updated as work progresses.

# Our aims and ambitions


## Our purpose



Assure people that public money is being managed well




Explain how that money is being spent




Inspire the public sector to improve


## Our vision




Fully exploiting our unique perspective, expertise and depth of insight



Strengthening our position as an authoritative, trusted and independent voice




Increasing our visibility, influence, and relevance




Being a model organisation for the public sector in Wales and beyond


## Our areas of focus



A strategic, dynamic, and high-quality audit programme



A targeted and impactful approach to communications and influencing



A culture and operating model that enables us to thrive

You can find out more about Audit Wales in our [Annual Plan 2025-26](#) and [Our Strategy 2022-27](#).

# Financial audit work

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## Audit of financial statements

I am required to issue a report on your financial statements which includes an opinion on their 'truth and fairness', their proper preparation in accordance with accounting standards and legal requirements, and the regularity of income and expenditure and the proper preparation of key elements of your Accountability and Performance Report. I lay them before the Senedd together with any report that I make on them.

I will also report by exception on a number of matters which are set out in more detail in our [Statement of Responsibilities](#).

I am also required to certify a return to the Welsh Government which provides information about the SHA to support preparation of the Whole of Government Accounts.

There have been no limitations imposed on me in planning the scope of this audit.

## Financial statements materiality

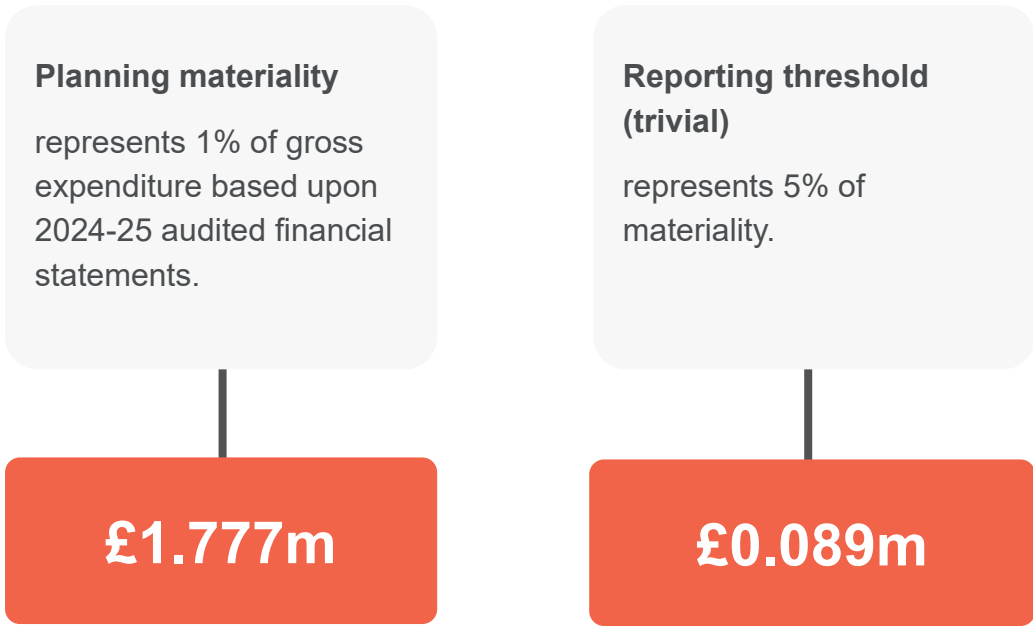
I do not seek to obtain absolute assurance on the truth and fairness of the financial statements and related notes but adopt a concept of materiality. My aim is to identify material and correct misstatements, that is, those that might result in a reader of the accounts being misled. Materiality applies not only to financial misstatements, but also to disclosure requirements and adherence to the applicable accounting framework and law.

I set planning materiality to:

- Determine the level of misstatement that could cause the user of the accounts to be misled;
- Assist in the scoping of our audit approach and resultant audit tests;
- Determine sample sizes;
- Assess the effect of known and likely misstatements in the financial statements; and

- Report to those charged with governance any unadjusted misstatements above a trivial level, our reporting threshold.

The levels at which I judge such misstatements to be material is set out below.



There are some areas of the accounts that may be of more importance to the user of the accounts, and we have set a lower materiality level for these:



My audit team will assess materiality levels throughout the audit.

## Significant financial statements risks

Significant risks are identified risks of material misstatement for which the assessment of inherent risk is close to the upper end of the spectrum of inherent risk or those which are to be treated as a significant risk in accordance with the requirements of other International Standard on Auditing (ISAs). The ISAs require us to focus more attention on these significant risks.

### Risk of management override

The risk of management override of controls is present in all entities. Due to the unpredictable way in which such override could occur, it is viewed as a significant risk [ISA 240.32-33].

#### Our planned response

My audit team will:

- test the appropriateness of journal entries and other adjustments made in preparing the financial statements;
- review accounting estimates for bias; and
- evaluate the rationale for any significant transactions outside the normal course of business.

### Risk of fraud in expenditure recognition

There is a risk of material misstatement due to fraud in expenditure recognition and as such is treated as a significant risk [Practice Note 10].

#### Our planned response

My audit team will:

- substantively test all material areas of pay and non-pay expenditure;
- test the appropriateness of accruals made at the year-end;
- focus testing on areas of the financial statements which could contain reporting bias; and

- perform focussed cut-off testing on post year-end payments to ensure expenditure was appropriately accrued.

## Other areas of focus

I set out below other identified risks of material misstatement which, although not determined to be significant risks as above, I would like to bring to your attention.

### Remuneration report disclosures

Even though there are no significant changes in senior officers or Board members to capture in the remuneration report for 2025-26, remuneration paid to senior officers and board members continues to be of high interest and is material by nature.

Therefore, there is a risk that even low value errors in the disclosure could result a material misstatement.

### Our planned response

My audit team will:

- understand the movements in the Board members and senior management team during 2025-26;
- ensure that remuneration disclosed is consistent with supporting evidence;
- ensure that amounts paid are consistent with those approved by the Board and are in accordance with Welsh Government pay rates; and
- ensure that disclosures are complete based on the team's knowledge and are prepared in accordance with requirements.

## Related party disclosures

The financial statements must disclose any related party relationships along with the transactions and balances between the SHA and the other body/party.

The Authority has many relationships that could be considered a related party. Many are well known for example, Welsh Government as funder.

However, where related party relationships arise via individual officer or member relationships, there is likely to be less transparency regarding these relationships. These transactions are of high interest and are considered to be material by their nature.

There is a risk of material misstatement due to incomplete or inaccurate disclosures, even where these are of relatively low value.

### Our planned response

My audit team will:

- review management’s process for identifying related party relationships and associated transactions and balances;
- undertake procedures to confirm the completeness of related party relationships; and
- ensure disclosures are complete, accurate, consistent with evidence and are in accordance with requirements.

## Provisions and contingent liabilities - VAT

At 31 March 2025, the SHA recognised a material provision for the probable repayment of previously reclaimed VAT to HMRC, alongside a contingent liability disclosure relating to potential repayments due to other Welsh NHS bodies if the VAT is ultimately not repayable to HMRC.

During 2025-26, HMRC issued several “Notices of assessment of VAT and default interest due” covering periods up to 31 December 2021. These assessments state that the VAT reclaimed is ineligible and request repayment of the VAT plus default interest. We understand that these assessments do not constitute a final HMRC ruling on the underlying VAT treatment.

Following specialist advice, the SHA intends to undertake the following actions before year-end:

- make ‘without prejudice’ payments for the assessments received to date; and
- disclose and repay VAT reclaimed in later periods to prevent further interest accruing.

The SHA will need to estimate and provide for interest payable for periods after 31 December 2021. The level of judgement and estimation uncertainty involved increases the risk of material misstatement.

### **Our planned response**

My audit team will:

- review HMRC correspondence, including all assessments received to date, to evaluate the status and implications of HMRC’s position;
- assess the expert advice obtained by the SHA, including qualifications, independence and the suitability of the advice for informing management’s estimation approach;
- review correspondence from Welsh Government around the payment(s), whether they constitute special payments and that appropriate approval was obtained, if required;
- test management’s estimation process for the calculation of the year-end provision for the interest payable;
- ensure that disclosures are in accordance with the FReM and Welsh Government’s Manual for Accounts.

### **Failure of first financial duty**

There is a risk that you will fail to meet your first financial duty to break even over a one-year period. This is considered separately for the revenue and capital resource allocations.

The revenue position at month 10 shows a year-to-date surplus of £177,000 and is forecasting to break even at year-end. The capital position at month 9 shows year-to-date expenditure of £7,565,000 against a capital resource limit of £12,821,000.

Where you fail this financial duty, we will place a substantive report on the financial statements highlighting the failure and qualify your regularity opinion.

## Our planned response

My audit team will:

- focus testing on areas of the financial statements which could contain reporting bias; and
- perform focussed cut-off testing on post year-end payments to ensure revenue and capital expenditure was appropriately accrued.

## Welsh Government escalation level 3 - enhanced monitoring

Following an assessment against the NHS Wales oversight and escalation framework in February 2025 by Welsh Government, the SHAs was escalated to, and has subsequently remained at, level 3 for performance and outcomes related to major programmes.

As such programmes generate significant asset balances for the SHA, any changes to those programmes may mean that asset balances are overstated. My audit team completed a comprehensive review of the extant major projects as part of the audit last year and did not identify any issues.

This assessment will need to be updated as part of this year's audit for existing projects and any new major projects commencing during the year.

## Our planned response

My audit team will:

- review the continuing accounting treatment of existing programmes transferred into the SHA and consider new projects in year;
- test the recognition of asset costs in relation to the delivery of programmes; and
- consider the SHAs assessment of the need for potential for any accelerated depreciation or impairment of previously recognised programme costs.

## Financial statements audit timetable

Below is a timetable showing the key stages of the audit and our key audit deliverables that we will provide to you.

### Exhibit 1: Financial statements audit timetable

<p><b>Planning</b></p> <p><b>January to February 2026</b></p>	<ul style="list-style-type: none"> <li>Planning meeting</li> <li>High level risk assessment procedures</li> <li>Fraud risk assessment</li> <li>Accounting estimates planning</li> <li>IT environment risk assessment</li> <li>Indicative audit fee</li> <li>Draft Audit Plan</li> </ul>
<p><b>Interim</b></p> <p><b>March 2026</b></p>	<ul style="list-style-type: none"> <li>Information flows</li> <li>Detailed risk assessment procedures</li> <li>IT controls review</li> <li>Develop testing strategy</li> <li>Early sample testing</li> </ul>
<p><b>Fieldwork</b></p> <p><b>May to June 2026</b></p>	<ul style="list-style-type: none"> <li>Update risk assessment</li> <li>Audit of financial statements to include narrative report and annual governance statement</li> <li>Complete audit testing</li> <li>Evaluate audit findings</li> <li>Audit closure meeting</li> </ul>
<p><b>Reporting</b></p> <p><b>June 2026</b></p>	<ul style="list-style-type: none"> <li>Audit of Accounts Report</li> <li>Recommendations for improvement</li> <li>Present findings to those charged with governance</li> <li>Auditor General certification</li> <li>Submission of accounts to Welsh Government</li> <li>Laying of accounts with Senedd Cymru</li> <li>Annual audit summary</li> <li>Post project learning</li> </ul>








# Performance audit work

## Proper arrangements

As set out in the Code of Audit Practice, I must satisfy myself that the SHA has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources ('value for money'), and conclude accordingly.

I do this by undertaking an appropriate programme of performance audit work each year. I base my work programme on an assessment of risks of the SHA and the wider NHS in Wales not having the proper arrangements in place, with the work typically focusing on the areas of greatest risk.

In designing the programme, my auditors must have considered corporate and service level arrangements, including:

-  Strategic planning
-  Financial planning
-  Performance and risk management
-  Workforce planning
-  Asset management
-  Collaborative working
-  Overall governance.

My auditors will also have taken account of relevant work that is being undertaken or planned by other audit, regulatory and inspection bodies at the SHA.

I conduct my performance audit work using the [ISSAI 3000 standard](#) developed by the International Organisation of Supreme Audit Institutions (INTOSAI). INTOSAI is a global umbrella organisation for the performance audit community. It is a non-governmental organisation with special consultative status with the Economic and Social Council (ECOSOC) of the United Nations.

## Well-being of future generations

Section 15 of the Well-being of Future Generations (Wales) Act 2015 (the Act) requires me to carry out examinations of public bodies for the purposes of assessing the extent to which a body has acted in accordance with the sustainable development principle when setting well-being objectives and taking steps to meet those objectives.

The **Sustainable development principle** is defined as acting in a manner...

...which seeks to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.'

To do this, they must take account of the '**five ways of working**'.



Long-term



Prevention



Integration



Collaboration



Involvement

I must carry out these examinations at each public body covered by the Act at least once during a specified period.

These could be stand-alone examinations as part of my performance audit programme. However, where relevant and appropriate to do so, my auditors will integrate the work required into other planned performance audit work for the SHA. My auditors will continue to engage closely with the Office of the Future Generations Commissioner for Wales to help coordinate our respective activities.

## Planned performance audit work

I set out below details of my planned performance audit work.

## Structured Assessment

### Scope of the work

Structured assessment will continue to form a key part of the work my audit teams do at each NHS body to examine the existence of proper arrangements for the efficient, effective, and economical use of resources.

My 2026 structured assessment work will review the following areas:

- Board and committee cohesion and effectiveness.
- Corporate systems of assurance.
- Corporate planning arrangements; and
- Corporate financial planning and management arrangements.

My structured assessment work will also include a review of the arrangements that are in place to track progress against previous audit recommendations. This allows the audit team to obtain assurance that the necessary progress is being made in addressing areas for improvement identified in previous audit work. It also enables us to more explicitly measure the impact our work is having.

### Indicative timescales

Fieldwork to commence between June and August 2026 and reporting by the end of December 2026.

## Local project work – Well-being of Future Generations

### Scope of the work

The SHA became a body listed under Well-being of Future Generations (Wales) Act in June 2024. To meet the Auditor General for Wales's duties, the local performance audit work will examine how the Trust applied the sustainable development principle in its review of its Well-being Objectives. The audit will also consider how the SHA is embedding the sustainable development principles in its work. We will agree the exact scope of the work with the SHA, but this may include reviewing its arrangements to deliver its social value approach and its work on the foundational economy.

Please note that should other issues emerge which require audit examination I reserve the right to amend my programme of local project work accordingly.

### **Indicative timescales**

We will discuss and agree the timing of the work with the SHA.

### **Timing of Performance Audit Work**

My team will work with officers in the SHA to arrange exact timescales for the individual projects and progress will be communicated regularly through our Audit and Assurance Committee update. My auditors aim to substantially complete the performance audit work set out in this plan by the end of March 2027.

# Audit fee

In January 2026 we published our [2026-27 Fee Scheme](#) following approval by the Senedd Finance Committee which details the average increase to fee rates of 5.3%. The actual fee that any individual audited body will pay depends not just on our fee rates but on the quantum of work and the skill mix required.

Based on those skill mix requirements, my estimated audit fee for 2026 is an increase of 5.3% on my actual 2025 fee.

**Your estimated total audit fee: £215,272**

Planning will be ongoing, and changes to my programme of audit work, and therefore my fee, may be required if any key new risks emerge. I shall make no changes without my auditors first discussing them with the Executive Director of Finance and Business Assurance. **Exhibit 2** sets out a further breakdown of your estimated audit fee.

## I base my audit fee on the following assumptions:

- The agreed audit deliverables set out the expected working paper requirements to support the financial statements and include timescales and responsibilities.
- The audit requirements of my individual performance audit projects are met by the audited body, or suitable alternative arrangements are put in place that satisfy the needs of my audit team.
- No matters of significance, other than as summarised in this plan, are identified during the audit.

**Exhibit 2: Breakdown of my estimated audit fee for 2026 (and 2025 for comparison)**

<b>Estimated fee for 2026 (£)<sup>1</sup></b>		<b>Actual fee for 2025 (£)</b>	
<b>Audit of financial statements<sup>2</sup></b>	<b>Performance audit work<sup>3</sup></b>	<b>Audit of financial statements</b>	<b>Performance audit work</b>
£116,859	£98,413	£110,929	£93,471
<b>Total fee: £215,272</b>		<b>Total fee: £204,400</b>	

<sup>1</sup> The fees shown in this document are exclusive of VAT.

<sup>2</sup> Payable November 2025 to October 2026

# Audit team

My audit team will continue to work and engage remotely using technology, but some on-site audit work will resume where it is appropriate to do so.

Audited bodies have a responsibility to ensure the safety and wellbeing of Audit Wales staff when they are on your premises.

The main members of my team, together with their contact details, are summarised in **Exhibit 3**.

## Exhibit 3: My local audit team

<b>Engagement Director</b>	Dave Thomas <a href="mailto:dave.thomas@audit.wales">dave.thomas@audit.wales</a>	
	<b>Financial Audit</b>	<b>Performance Audit</b>
<b>Engagement Lead</b>	Kate Havard <a href="mailto:kate.havard@audit.wales">kate.havard@audit.wales</a>	Dave Thomas <a href="mailto:dave.thomas@audit.wales">dave.thomas@audit.wales</a>
<b>Audit Manager</b>	Mike Whiteley <a href="mailto:mike.whiteley@audit.wales">mike.whiteley@audit.wales</a>	Andrew Doughton <a href="mailto:andrew.doughton@audit.wales">andrew.doughton@audit.wales</a>
<b>Audit Lead</b>	David Tomalin <a href="mailto:david.tomalin@audit.wales">david.tomalin@audit.wales</a>	Nathan Couch <a href="mailto:nathan.couch@audit.wales">nathan.couch@audit.wales</a>

There is one potential conflict of interest that I need to bring to your attention. DHCW’s Programme Lead for Urgent and Emergency Care is the sister-in-law of Dave Thomas, the Audit Wales Engagement Director for DHCW. I confirm the necessary provisions are in place to safeguard auditor independence in respect of this.

I am not aware of any other potential conflicts of interest that I need to bring to your attention.

# Audit quality

Our commitment to audit quality in Audit Wales is absolute. We believe that audit quality is about getting things right first time.

We use a three lines of assurance model to demonstrate how we achieve this. We have established an Audit Quality Committee to co-ordinate and oversee those arrangements. We subject our work to independent scrutiny by the Institute of Chartered Accountants in England and Wales and our Chair of the Board, acts as a link to our Board on audit quality. For more information see our [Audit Quality Annual Report](#).



## Our People

- Selection of right team
- Use of specialists
- Supervisions and review



## Arrangements for achieving audit quality

### Selection of right team

- Audit platform
- Ethics
- Guidance
- Culture
- Learning and development
- Leadership
- Technical support



## Independent assurance

- EQRs
- Themed reviews
- Cold reviews
- Root cause analysis
- Peer review
- Audit Quality Committee
- External monitoring

## Further Information

Audit Wales has a range of resources to support the scrutiny of Welsh public bodies, and to support them in continuing to improve the services they provide to the people of Wales.

Visit our [website](#) to find:



Our [publications](#) which cover our audit work at public bodies.



Information on our upcoming work and forward work programme for [performance audit](#).



[Data tools](#) to help you better understand public spending trends



Details of our [Good Practice](#) work and events including the sharing of emerging practice and insights from our audit work.



Our [newsletter](#) which provides you with regular updates on our public service audit work, good practice, and events.



Audit Wales

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Website: [www.audit.wales](http://www.audit.wales)

We welcome correspondence and telephone calls in Welsh and English.

Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.



# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES AUDIT ACTION LOG

Eitem ar yr Agenda: Agenda Item:	4.5
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Laura Tolley, Deputy Board Secretary   Head of Corporate Governance
Cyflwynwyd gan: Presented By:	Laura Tolley, Deputy Board Secretary   Head of Corporate Governance

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the Audit Action Log.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Information
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	Yes, please see detail below Audit findings contribute towards the improvement of processes and procedures leading to better quality services.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Darling, Director of Corporate Affairs   Board Secretary	March 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

## 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 This report details the current position with respect to audit recommendations that have been made, including:

- Recommendations that have been completed during the period;
- Recommendations scheduled for completion with a target date;
- Recommendations that are overdue; and
- Recommendations that are anticipated not to meet target dates.

3.2 The audit recommendation analysis outlines progress being made and illustrates the ongoing movement and change of status.

## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The Audit Tracker Dashboard shows the current reported status against recommendations received and the analysis shows all recommendations giving the current status of each recommendation which remained open at the last Committee meeting, and also those presented in report form to the Committee since the last meeting.

4.2 Following advice from Internal Audit, actions dependent on a third party are managed via a separate log for tracking.

4.3 The Committee received 3 reports at the last meeting (listed below) which contained a total of 10 new actions. These have been added to the Audit Action Log, which now contains a total of 47 open actions.

- Programme Management
- CaNISC
- Risk Management

4.4 The status of the 44 open actions is shown below.



Number of Actions by Status



4.5 The Committee are requested to note the completion of the following 8 actions:

Audit Title	Audit Action Reference
DHC-2526-01 Risk Management Audit - FINAL	DHC-2526-01 Risk Management A3
DHC-2526-01 Risk Management Audit FINAL	DHC-2526-01 Risk Management A1
DHC-2526-01 Risk Management Audit FINAL	DHC-2526-01 Risk Management A2
Mission Five – Staff Development Review Final Internal Audit Report 2024/25	DHC-2425-07 Rec 2
Mission Five – Staff Development Review Final Internal Audit Report 2024/25	DHC-2425-07 Rec 3
Recruitment Processes	DHC-2425-14 Rec 2
Recruitment Processes	DHC-2425-14 Rec 7
Recruitment Processes	DHC-2425-14 Rec 8

4.6 The remaining 39 actions are reported as on track for completion by the target date.

4.7 Since the last Committee meeting, NWSSP Internal Audit Services has undertaken a Follow Up of Priority Recommendations Advisory Report (included at agenda item 4.2). The follow-up review found that evidence for sampled recommendations was appropriate, and the Audit Tracker was largely accurate. The report identified two opportunities to strengthen evidence-based closure and ensure greater consistency in reporting, these will be taken forward by the Corporate Governance team.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 Progress has been made over the period with a total of 8 actions completed. Progress against remaining actions will continue to be monitored by the Corporate Governance team in conjunction with Leads on a regular basis.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:  
Recommendation:

The Committee is being asked to

NOTE the Audit Action Log.

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES LOCAL COUNTER FRAUD UPDATE REPORT

Eitem ar yr Agenda: Agenda Item:	4.6
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Moreton, Acting Director of Finance
Paratowyd gan: Prepared By:	Henry Bales, Counter Fraud Manager
Cyflwynwyd gan: Presented By:	Henry Bales, Counter Fraud Manager

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the contents of the report that relate to the Counter Fraud work carried out in Quarter 4 of the financial year 2025/26 and <b>APPROVE</b> the 2026-2027 Workplan.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Resilient Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Moreton	23/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
LCFS	Local Counter Fraud Specialist	CFA	Counter Fraud Authority
CFS	Counter Fraud Service Wales	CPS	Crown Prosecution Service
NFI	National Fraud Initiative		

### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 [Quarterly reports](#) are required to appraise the Audit and Assurance Committee and provide assurance that the organisation has a robust Counter Fraud Bribery and Corruption provision.
- 3.2 The NHS Counter Fraud Authority requires that an [Annual work plan](#) is created in relation to the counter fraud work to be carried out by counter fraud teams for their organisations. The workplan must align with Government Functional Standard GovS 013: Counter Fraud. This plan adheres to that principle and provides an overview of the areas of work that will be carried out on behalf of the organisation for 2026-2027

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The progress made in the Counter Fraud Provision for DHCW during Quarter 4 of the 2025/26 financial period.
- 4.2 Summary of fraud alerts and intelligence in period.
- 4.3 Summary of progress with the National Fraud Initiative.
- 4.4 Summary of referrals and investigations.
- 4.5 The plan is aligned and mapped to the NHS Wales Fighting Fraud Strategy and Government Functional Standards.

### 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

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

### 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the contents of the report that relate to the Counter Fraud work carried out in Quarter 4 of the financial year 2025/26 and <b>APPROVE</b> the 2026-2027 Work Plan.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES STAFF CULTURE – WELLBEING ADVISORY REVIEW 2025/26 UPDATE REPORT

Eitem ar yr Agenda: Agenda Item:	5.1
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Samantha Morgan, Director of People and Organisational Development
Paratowyd gan: Prepared By:	Lenisha Wright, Equality, Diversity, Inclusion and Wellbeing Lead
Cyflwynwyd gan: Presented By:	Samantha Morgan, Director of People and Organisational Development

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the findings of the review and the action plan for <b>ASSURANCE</b> .	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	Not applicable
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	Not applicable
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A More Equal Wales
<p>Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:</p> <ul style="list-style-type: none"> <li>• A Resilient Wales</li> <li>• A Healthier Wales</li> <li>• A Wales of Cohesive Communities</li> <li>• A Wales of Vibrant Culture and Thriving Welsh Language</li> </ul>	
<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	BS 76000 - Valuing People Standard
<p>Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 30415:2021 Diversity and Inclusion Standard</p>	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	Workforce
<b><u>PARTH ANSAWDD DOMAIN OF QUALITY</u></b>	Equitable
<p>Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A</p>	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
<p>Datganiad: Statement: N/A</p>	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below Actions and risks under consideration in the advisory report, may have financial impact.
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	Yes, please see detail below The work undertaken to meet the objectives outlined in the action plan will impact people.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	Yes, please detail below It is likely that due to intersectionality, including socio economic reasons, meeting these objectives which impact people, will have a positive impact.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	Yes, please see detail below

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Anna Evans, People and OD Directorate Manager	23/03/2026	Slight amends and approved
Samantha Morgan, Director of People and OD	23/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
NWSSP	NHS Wales Shared Services Partnership	POD	People and Organisational Development
SMART	Specific, Measurable, Achievable, Realistic, and	HWB	Health and Wellbeing

	Timely		
EDI	Equality, Diversity and Inclusion	GDaD	Government Digital and Data Profession Capability
MHFA	Mental Health First Aiders	SEP	Strategic Equality Plan
WRES	Workforce Race Equality Standard	MyLMS	My Learning Management System
SEP	Strategic Equality Plan		

### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 In December 2025, a report was drafted to present a summary of the key findings, outcomes and next steps following the Staff Culture and Wellbeing Advisory Review, undertaken by NHS Wales Shared Services Partnership (NWSSP) in July 2025. It was discussed that quarterly feedback reports will be presented thereafter, to provide ongoing updates on progress against actions identified, based on the recommendations outlined in the advisory review. [Appendix 1 Staff Culture and Wellbeing Audit Report WEDs December 2025](#)
- 3.2 Findings in the review report noted a range of positive achievements such as, open dialogue embedded across the organisation, reinforced by Executive site visits and visible leadership presence. Staff expressed clear appreciation for the flexibility offered through hybrid and adaptive working arrangements. These initiatives continue to progress and reflect, ongoing dedication of teams, and leaders across the organisation, supported by active involvement from both the EDI and Health and Wellbeing Networks. In response to the recommendations highlighted in the audit report by NWSSP, an audit action plan was developed to ensure these actions are captured, monitored and progressed in a structured and transparent way. [Appendix 2 Audit Action Plan](#)
- 3.3 This report is the first quarterly update for the period January to March 2026 and provides an overview of progress made against the areas identified for improvement in the Staff Culture and Wellbeing Advisory Review report. [Appendix 3 Staff Culture and Wellbeing Audit Report \\_NWSSP](#) It reflects ongoing work to strengthen wellbeing governance, improve organisational processes, enhance use of data, and ensure delivery of culture and wellbeing objectives. The updates demonstrate that actions remain on track, with several initiatives already implemented or scheduled for delivery during Quarter 1 of 2026.



## 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

Following the development of the action plan, the organisation undertook to put measures in place to address identified matters toward continual improvement, de-escalate risks, and prioritise the delivery of the agreed actions. The positive actions undertaken during the quarter (ending 31 March 2026), in response to matters for management considerations is summarised in Tables 1 to 4 below. The progress outlined below against each of the objectives, reflects the continued efforts across the organisation to strengthen initiatives for staff culture and wellbeing. In addition to the status updates included in the tables below, more detail can be found on the Action Tracker, a working document with ongoing updates recorded on a regular basis.

### 4.1 Objective 1 - An organisational wellbeing plan is in place with SMART objectives; supported by a governance framework to oversee arrangements, which forms part of the wider national and local requirements.

Areas Reviewed	Actions	Status Update
Wellbeing - Review of documentation	<ul style="list-style-type: none"> <li>Develop Specific, Measurable, Achievable, Realistic, and Timely (SMART) objectives</li> <li>The Behavioural Framework should be linked to appraisals and organisational values.</li> </ul>	<ul style="list-style-type: none"> <li>An annual Health and Wellbeing Plan was developed during quarter 4 (2025) through input and consultation with DHCW people. The plan will be implemented in quarter 1 (2026).</li> <li>Generic EDI performance objectives were developed in 2025 for Independent Members and will be expanded to include generic performance objectives for staff across the organisation in the coming financial year.</li> <li>Work is underway with the development of the Behavioural Framework as part of the MyLMS system for implementation in quarter 1, which includes a review of the appraisal form to incorporate organisational values and the Behavioural Framework. This work also builds on the Standards of Behaviour Policy published on SharePoint.</li> </ul>

Table 1: Objective 1

### 4.2 Objective 2 - A robust programme of preventative and proactive initiatives, linked with organisational and workforce objectives, to promote ongoing wellbeing, and to deliver



the overall strategy.

### 4.3

Areas Reviewed	Actions	Status Update
<ul style="list-style-type: none"> <li>Funding Model, Workforce Mix, Cost &amp; Resources</li> <li>Stress Management</li> <li>Working Environment</li> <li>Exit Interviews</li> </ul>	<ul style="list-style-type: none"> <li>A review of the current funding model with Welsh Government to support longer-term workforce strategies and succession planning.</li> <li>Costs associated with staff wellbeing initiatives should be formally monitored.</li> <li>Process for exit interviews to be strengthened.</li> </ul>	<ul style="list-style-type: none"> <li>The funding model and reliance on funding for matters such as fixed term contracts, is owned by the wider organisation requiring input from Welsh Government. POD participates and contributes to these discussions, but it is outside the remit of POD to have any direct influence on funding and change to the funding model.</li> <li>With the implementation of the Annual Health and Wellbeing plan, a request for budget for initiatives has been requested and will undergo review for potential approval in quarter 1 (2026).</li> <li>Management training is in place to guide managers to assess stress and monitor sickness absence. As part of the new ways of working approach, roles and responsibilities to record, monitor and effectively address sickness absence, including stress related sickness was communicated in quarter 4 at senior leadership groups by POD Business Partners.</li> <li>Estates have undertaken an assessment of DHCW building sites to support inclusive and accessible working environments. Pulse surveys are used to gather feedback from staff on working environments. Instant messaging through an online Booking App as well as a dedicated estates email, allows for a quick response to staff needs and requirements.</li> <li>The Exit Interview process will be reviewed in quarter 1 to identify ways to strengthen the analysis of exit data.</li> </ul>

Table 2: Objective 2

**4.4 Objective 3** – Staff feedback and other evaluation methods are utilised to identify improvements, strengths and weaknesses. Risks are adequate, actions identified and progress monitored.

Areas Reviewed	Actions	Status Update
<ul style="list-style-type: none"> <li>Ownership and Accountability</li> <li>Data Recording</li> </ul>	<ul style="list-style-type: none"> <li>Directorates should take ownership of specific wellbeing challenges with their staff, and this should be assessed by the People and OD Team.</li> <li>Expand data records to include capturing of remote working and provision for reasonable adjustments.</li> </ul>	<ul style="list-style-type: none"> <li>Directorate reviews are conducted bi-annually across the organisation, providing assurance that performance is being monitored and that actions are being effectively managed by leadership in each directorate.</li> <li>Staff survey actions are prioritised and updates are included through routine Directorate Review reporting.</li> <li>A desk-top booking app has been created by the Estates team which is being utilised to capture remote working. Requirements for special equipment including desks and chairs are recorded and will be reviewed in the next quarter.</li> </ul>

Table 3: Objective 3

**4.5 Objective 4** – Wellbeing support and training are in place that meets staff needs, including any accessibility barriers.

Areas Reviewed	Actions	Status Update
<ul style="list-style-type: none"> <li>Budget Allocation</li> <li>Supporting Mechanism</li> <li>Training</li> <li>Confidentiality</li> </ul>	<ul style="list-style-type: none"> <li>Assign a flexible central budget within POD for staff development.</li> <li>Consider contractual arrangements outside the service to secure access for additional support such as a psychologist for staff with wellbeing needs.</li> <li>Implement targeted training e.g. neurodiversity awareness.</li> <li>Establish clear</li> </ul>	<ul style="list-style-type: none"> <li>Proposed budget has been submitted along with the Annual EDI Plan and Annual HWB Plan.</li> <li>Improved resourcing with the appointment of the Wellbeing and Equality Officer and the EDI and Wellbeing Apprentice.</li> <li>Budget was allocated for Neurodiversity Awareness Training, launched in quarter 3 at the Senior Leadership Day, with awareness sessions rolled out in quarter 4 to all staff.</li> <li>Support mechanisms are in place through including an Employee</li> </ul>



	<p>communication across POD and relevant departments such as Estates to ensure confidentiality is maintained.</p> <ul style="list-style-type: none"> <li>• Only 3 Welsh Language MHFAs.</li> </ul>	<p>Assistance Programme Vivup, MHFAs, Wellbeing online awareness sessions and the support of the HWB Network Champions. This will continue in the new year with the implementation of the Annual HWB Plan.</p> <ul style="list-style-type: none"> <li>• Budget has been allocated for MHFA training, and with its implementation, there will be a focus on Welsh Language speakers.</li> </ul>
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Table 4: Objective 4

#### 4.6 Next Steps

At the Audit and Assurance committee meeting held on 7 October 2025, the Staff Culture and Wellbeing Advisory Review Report was discussed and noted. It was agreed that all recommendations from the audit will be captured in the DHCW audit action log for ongoing monitoring and assurance and shared at the Audit Committee meeting on 7 April 2026.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

The actions progressing based on the recommendations from the Staff Culture and Advisory Review, are implemented and monitored alongside other audits highlighted in Table 5.

Audit / Action Plans	Scope / Purpose	Status
BS 76000 Valuing People and ISO 30415 Diversity and Inclusion Audit – December 2025	Audit of EDI and HWB strategy, frameworks, policies, procedures and practices.	Progressing with actions to address observations and minor non-conformities identified in the December 2025 audit report, monitored in IPassport.
Recruitment Audit	Audit of all recruitment and resourcing, policies, processes and application in practice. Risk and compliance were also included.	Actions will be identified in response to the recruitment audit report concluded in quarter 1 (2026).
Anti-racist Wales Audit Actions	Audit undertaken as part of the WRES.	Actions and reporting alongside WRES actions – are ongoing. Welsh Government advised that there will be the introduction of the Workforce Equality Standard, extending beyond Race, in 2026.



Workforce Race Equality Standard (WRES) Action Plan	An analysis of data and information to address race inequality in line with the commitment to be an Anti-racist Wales by 2030.	WRES Data for the period ending 31 March 2026 have been submitted for analysis to HEIW.
Policy Assurance Assessment – SEP	An assessment by Welsh Government of achievement against objectives in the DHCW SEP, along with LGBTQ+ and other action plans.	A new Template called the Maturity Matrix will be completed and submitted to Welsh Government for the period ending 31 March 2026.
Staff Survey Actions	68.8% participation in 2025 NHS Wales Staff Survey, increased from 62.3% in 2024.	Survey results will be analysed and shared in quarter 1.

Table 5: Related Audits and Action Plans

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the findings of the review and the action plan for <b>ASSURANCE</b> .	

# IECHYD A GOFAL DIGIDOL CYMRU

## DIGITAL HEALTH AND CARE WALES

### HIGH VALUE ORDERS REPORT

Eitem ar yr Agenda: Agenda Item:	5.2i
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Moreton, Acting Director of Finance
Paratowyd gan: Prepared By:	Joel Griffiths, Systems Accountant
Cyflwynwyd gan: Presented By:	Sian Williams, Head of Financial Services and Reporting

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the High Value Orders report to March 23rd 2026.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Chris Moreton	24/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
VAT	Value Added Tax	DSPP	Delivering Services to Patients and the Public
IHUB	Integration Hub	WLIMS	Welsh Laboratory Information Management System
PCMH	Primary Care and Mental Health		



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The purpose of this report is to provide the Audit & Assurance Committee with an update in relation to high value purchase orders over £0.750m (excluding VAT) raised and issued to suppliers over the stated period. The relevance of the £0.750m threshold is that this is consistent with the scheme of delegation financial limits for All Wales Digital Contracts & Agreements (detailed within Schedule 1 page 56 of the organisations Standing Orders). As previously reported, due to the sensitive nature of the transactions, exact order amounts are not detailed within the public portion of this report in order to minimise any possible fraud activity.
- 3.2 The report also details instances where cumulative order values to suppliers have amounted to over £0.750m during the financial year.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 During the period 1<sup>st</sup> January 2026 – 23<sup>rd</sup> March 2026 there were 2 high value orders of more than £0.750m raised.
- 4.2 The details of all orders raised year to date and individual governance approval is presented within [Appendix A](#) – High Value Purchase Order Tracker. An extract is detailed within table 1.
- 4.3 Table 1 High Value Orders (reclassified extract) 1st January 2026 – 23rd March 2026

Ref	Area	Supplier	Service/Good Detail	Date Order Raised
A15	Operations	PHOENIX SOFTWARE LTD	Storage backup	28/01/2026
A16	GP Systems Maintenance Support	Egton Medical Information Systems Ltd (EMIS HEALTH)	GP Systems Maintenance Support	06/02/2026

- 4.4 The details of suppliers whose cumulative orders for the year have also reached the £0.750m threshold are also presented within this report and itemised further in [Appendix B](#) and within Table 2 of this report. [Appendix C](#) represents the cumulative high value spend by supplier.
- 4.5 Table 2: Cumulative Supplier Orders reaching £0.750m for during 1st January 2026 – 23rd March 2026

Ref	Area	Supplier	Service/Good Detail	Number of Orders
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B9	Cloud & Technical Architecture	Channel 3 Consulting LTD	Cloud Organisational Change Consultancy & Technical Architecture Consultancy	3
B10	Cloud & PCMH	TPX Impact Ltd	Third party support for Cloud & PCMH	19

4.6 For completeness and because of the potential for overlap in Appendix A and B the details of suppliers where spend has exceeded £0.750m are also presented within this report and itemised further in table 3 of this report. The table is a year-to-date position as of the 23rd March 2026.

**4.7 Table 3: Suppliers with Spend of over £0.750m for the period of 17<sup>th</sup> March 2025 – 23rd March 2026.**

Ref	Area	Supplier	Amount £
C1	All Wales Licence Provision	Trustmarque Solutions Ltd	>£0.750m
C2	Data Centre Services	Computacenter (UK) Ltd	>£0.750m
C3	Professional Fees	Kainos Software Ltd	>£0.750m
C4	GP Systems Maintenance Support	HP INC UK Ltd	>£0.750m
C5	GP Systems Maintenance Support	Egton Medical Information Systems Ltd (EMIS Health)	>£0.750m
C6	Various	NHS England	>£0.750m
C7	Lease car	Northumbria HC NHS Trust	>£0.750m
C8	Covid	Department For Science Innovation And Technology	>£0.750m
C9	GP Systems Maintenance Support	OneAdvanced Ltd	>£0.750m
C10	GP PSBA & Cloud	British Telecommunications PLC	>£0.750m
C11	WLIMS	Intersystems Corporation	>£0.750m
C12	Computer Hardware Purchases	Dell Computer Corporation Ltd	>£0.750m
C13	Computer Hardware Purchases	CDW Ltd	>£0.750m
C14	Cloud & Technical Architecture	Channel 3 Consulting Ltd	>£0.750m
C15	Operations	Phoenix Software Ltd	>£0.750m
C16	Cloud & PCMH	TPX impact Ltd	>£0.750m
<b>Grand Total High Value Purchase Orders</b>			<b>£81.786m</b>



## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks or matters for escalation.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the High Value Orders report to March 23rd 2026.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES PROCUREMENT AND SCHEME OF DELEGATION COMPLIANCE REPORT

Eitem ar yr Agenda: Agenda Item:	5.2ii
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Moreton, Interim Director of Finance
Paratowyd gan: Prepared By:	Julie Williams, Senior IT Category and Contracts Manager
Cyflwynwyd gan: Presented By:	Chris Moreton, Interim Director of Finance

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL</b> <b>STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL</b> (cyf, os yw'n briodol) <b>CORPORATE RISK</b> (ref if appropriate)	N/A
<b>ASESIAID O'R EFFAITH AR ANSAWDD</b> (cyf, os yw'n briodol) <b>QUALITY IMPACT ASSESSMENT</b> (ref if appropriate)	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u></b> <b><u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u></b> <b><u>DHCW QUALITY STANDARDS</u></b>	ISO 20000 - IT Service Management Systems
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 27001 ISO 9001 BS 10008	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u></b> <b><u>DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD</u></b> <b><u>DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u></b> <b><u>GYDRADDOLDEB</u></b> <b><u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	Yes, please see detail below The contracts within the report are legally binding and there could be legal implications arising from activity
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	Yes, please see detail below All contracts have been awarded in line with the SHA Governance and the Public Contracts Regulations 2015 or Procurement Act 2023
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below There are financial implications from single tenders and potentially change notices.
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Laura Panes/ Rachel Stirrup	17/03/2026	Approved
Chris Moreton	23/03/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	STA	Single Tender Action
PCR	Public Contracts Regulations	SFI	Standing Financial Instructions



CCN	Change Control Notice	MOU	Memorandum of Understanding
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### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The purpose of this report is to provide the Audit and Assurance Committee with an update in relation to procurement activity undertaken during the period 1<sup>st</sup> January 2026 to 28<sup>th</sup> February 2026 and in accordance with reference 1.2 (Schedule 2.1 Procurement and Contracting for Goods and Services) of the standing Financial Instructions.

3.2 An explanation of the reasons, circumstances and details of any further action taken is also included.

SFI Reference	Description	Items
12.9.4	Free of Charge Services	0
12.11.5	Procurement Thresholds	0
12.13	Single Quotation Actions	2
12.13	Single Tender Actions	2
12.13	Single Tenders for consideration following a call for Competition under PCR2015.	0
12.17	Contract Extensions: Award of additional funding outside the terms of the contract either in relation to additional value or term (executed via Contract Change Note (CCN) or Variation of Terms)	3

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The Committee is required to note the following DHCW activity as set out in 5.2ii [Appendix A](#):

- 2 x Single Tender Action (STA) – Total Value of £203,865.66 ex VAT
- 2 x Single Quotation Action (SQA) – Total Value of £36,320.00 ex VAT
- 3 x Change Control Notice (CCN)– Total Value of £712,848.13 ex VAT

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

### 5.1 PRJ-1307 eMental Health International Collaborative (eMHIC) annual Strategic Partner Membership Fees:

Commercial Services were notified on 15 December 2025 of a requirement where services had already commenced in October 2025. Upon notification, Commercial Services moved immediately to address the position, implementing a retrospective Single Quotation Action (SQA) to ensure the arrangement was formally captured and controlled, and logging the requirement in the Commercial Pipeline to ensure timely re-procurement activity.

Retrospective engagement increases governance and assurance risk and is not an acceptable standard practice; therefore, Commercial Services have reinforced the requirement for early Commercial engagement and captured corrective actions to prevent recurrence. In parallel, the service lead has been formally advised and supported on the requirement to engage Commercial Services in advance of commencement for all procurement activity, and to follow the approved process to maintain compliance and governance.

### 5.2 P879 Agile Product Delivery Partner Framework Agreement

The existing Framework Agreement P879 permits DHCW to call off discrete packages of work via a direct award process. Under this framework, each work package must be fully scoped in advance, issued to the contractor (Kainos), formally responded to, reviewed, and approved prior to the commencement of delivery.

In the case of Work Package "Delivery Increment 11 (DI11)", this process was not followed. The work package documentation was signed retrospectively, after delivery had already commenced. This exposed DHCW to potential operational, financial and contractual risk.

DI11 was subject to ongoing delays and dependencies on internal and external third parties, which resulted in the scope of Kainos' work being repeatedly revised. Delivery commenced on 19 January 2026, however the final Work Package was not formally agreed and signed until 25 February 2026. The total value of the work package was £359,200 (excluding VAT).

Commercial Services have met with the Contract Owner to discuss the implications of the non-compliant process and have received assurances that all future work will be subject to the appropriate formal call-off and approval process, in line with the contractual framework and Standing Financial Instructions. The issue has been escalated and discussed with the responsible Deputy Director.

## 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the report	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES ANNUAL ACCOUNTS UPDATE 25-26

Eitem ar yr Agenda: Agenda Item:	5.2iv
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Moreton, Interim Director of Finance
Paratowyd gan: Prepared By:	Sian Williams, Head of Financial Services & Reporting
Cyflwynwyd gan: Presented By:	Sian Williams, Head of Financial Services & Reporting

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the progress update to delivering DHCW's 2025/26 Annual Accounts.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	N/A
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Sian Williams	20/03/26	Reviewed
Chris Moreton	23/03/26	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
MFA	Manual For Accounts	IFRS	International Financial Reporting Standards
LHBs	Local Health Boards	FReM	Government Financial Reporting Manual
SLT	Senior Leadership Team		



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 This paper sets out the background to the accounts closure process for 2025/26, highlighting the key financial and technical issues that need to be considered. The successful production of the accounts will ensure DHCW meets its statutory reporting requirements for the year.
- 3.2 NHS Wales bodies are statutorily obliged to prepare an annual report and accounts in compliance with the determination and directions given by Welsh Ministers. To support this process, Welsh Government prepare a Manual for Accounts (MfA) setting out the accounting principles and directions that must be followed based on the Government Financial Reporting Manual (FReM) prepared by HM Treasury. DHCW is required to apply the principles prescribed in the MfA and FReM to reflect its individual circumstances.
- 3.3 The annual accounts in 2025/26 will be the fifth set of accounts produced by DHCW. The closure plan has been applied successfully since DHCW was formed and has been subject to minor refinements over this period to reflect improvements identified within the team and through audit recommendations. However, there are a small number of items that may impact upon the accounts or the closure process and will require further consideration.
- 3.4 [Appendix A](#) presents a summary of the accounts closure plan for the 2025/26 financial year with associated issues for consideration by the Audit and Assurance Committee. The following areas have been identified as requiring additional consideration as part of the 2025/26 accounts closure process and are included for note. Where these issues have an all-NHS Wales impact, they will be discussed at the All-Wales Technical Accounting Group meetings to ensure a consistent approach is applied. DHCW will also liaise with Audit Wales and seek advice from their technical team where appropriate.
- 3.5 DHCW have received the Audit Wales deliverables requirement. This has been incorporated into the final DHCW detailed closure plan.  
The closure plan includes:
- A detailed timetable identifying deadlines and named responsible officers for all required tasks throughout the closure process. This timetable is reviewed daily from February until the final submission date in June.
  - A detailed closing pack for use within the finance team setting out the key deadlines and processes to be followed for the main areas of the accounts. This ensures that the rules are understood and applied consistently across the various services.
  - Communication posted to all DHCW staff, so they are aware of their roles and deadlines within the closure process.
  - Regular meeting of the finance team to discuss progress against the plan.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 **Senior Engagement:** A preliminary meeting with Audit Wales has taken place on

January 16<sup>th</sup> and monthly thereafter, to discuss the touchpoints required through the 2025-26 DHCW Audit and surface key local issues.

- 4.2 **Wider Engagement:** Audit Wales also met with the broader DHCW finance team on the 24<sup>th</sup> March to provide awareness not only of the audit process and outputs but requirements and expectations.
- 4.3 **Interim Audit:** It has been common practice for Audit Wales to carry out an interim audit prior to year-end to support their main work that starts once the accounts are complete. Whilst much of the interim audit is focused on planning there are often specific pieces of work completed and early transaction testing that reduces the workload in the busier periods of May and June. This year a number of interim audits are underway which will help in meeting the overall deadlines of the audit of the accounts. Audit Wales have access to the finance system which should also reduce the burden on the financial accounts team.
- 4.4 **Remuneration Report:** The single total remuneration report salary is reported after adjustment for salary sacrifice, and salary sacrifice is reported as a benefit. A footnote should be included to report gross salary before salary sacrifice adjustments.
- 4.5 **Audit of 2024/25 Accounts:** During the audit of the 2024/25 accounts Audit Wales made observations & recommendations. DHCW conducted a post project learning meeting on 17<sup>th</sup> September 2025 to pick up and discuss any issues to improve the audit. The recommendations and actions completed are set out below:

**Recommendation 1: Appropriate authorisation of changes to senior officers' remuneration Action Completed** – DHCW are ensuring that all matters of senior officer remuneration are formally approved through the Remuneration and Terms of Service Committee, and that Welsh Government approval is sought in cases where remuneration exceeds the relevant salary band range.

**Recommendation 2: Employees missing incremental awards** – Controls are established to prevent future, similar instances in which employees miss their incremental uplift. **Action Completed** – Managers are being sent reminders, upcoming pay progressions are presented at SLT. A report is taken from payroll to check if any have not been actioned and discussed with management on the status of these. There is also a toolkit in place.

**Recommendation 3: Allocation of asset costs between data sites** – Recommendation that the fixed asset register is updated and that future asset costs are split between sites as precisely as possible. **Action Completed** – Ram has been updated for this and a site split is undertaken as part of additions upload.

**Recommendation 4: Car Lease Prepayment spreadsheet formula** – Recommendation to update the formula used by a day to ensure full prepayment period is captured. **Action Completed** – Formula has been updated to consider the additional day.

**Recommendation 5: MRI (Previously RAM) Asset Register** – Super user access to RAM is monitored frequently for all users. The Authority should consider access on short-term basis where needed for specific tasks, with only key officers retaining super user access on a permanent basis. **Action Completed** – User access has been kept to a

minimum with only 4 active users throughout the year and a quarterly review is in place.

#### 4.6 Key Deadlines

DHCW will continue to work with Audit Wales to support completion of the Audit in line in shorter timescales if possible. Although final sign-off cannot take place until any all-Wales issues are considered and resolved.

### 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 DHCW have agreed with Audit Wales an accelerated target for completion of the final accounts and subsequent audit exercise with proposed key committee dates and leads as follows:

- 1/5/26 Draft accounts and financial returns sent to Welsh Government & Audit Wales. - **Head of Financial Services & Reporting**
  - 7/5/26 Audit and Assurance Committee to review draft annual accounts - **Interim Director of Finance.**
  - 8/5/26 Annual Report and associate schedules sent to Welsh Government & Audit Wales. - **Head of Financial Services & Reporting**
  - 25/6/26 Audit and Assurance Committee to review proposed final annual accounts - **Interim Director of Finance.**
  - 25/6/26 Board to review and approve annual report and accounts - **Interim Director of Finance & Chief Executive.**
  - 30/6/26 Signed final version of annual report and accounts submitted to Welsh Government - **Audit Wales.**
  - 31/7/26\* - Annual General Meeting to take place.
- \*Dates to be confirmed.

### 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the progress update to delivering DHCW's 2025/26 Annual Accounts.	



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Digital Health  
and Care Wales

# Integrated Medium Term Plan

2026-29



# Message from the CEO

## Foreword



Helen Thomas (CEO)



Ruth Glazzard (Chair)

Digital Health and Care Wales (DHCW) put people at the heart of what we do, working to the highest standards to deliver quality and make digital a force for good in health and care. We work in partnership with NHS Wales colleagues and other key stakeholders to provide national digital and data services which support the delivery of health and care in Wales.

As with other health systems, the NHS in Wales faces complex and ever-changing challenges. Improving health and reducing inequalities against a backdrop of unprecedented demands is not an easy task, but the opportunities to transform health and care are also significant.

Therefore, we are pleased to present our refreshed Integrated Medium Term Plan (IMTP) for 2026-29 which demonstrates our ambition to deliver high quality systems and services and drive transformation across NHS Wales. Over the next three years, we will need to navigate a rapidly changing landscape and embrace innovation and collaboration to ensure we remain resilient and responsive. Our plan, which has been developed with our partners, outlines our key priorities and milestones for achieving this and how we will align our work to national objectives.

Modern health and care services depend on good digital tools, data and information. We currently work with more than 100 live services and deliver major national digital transformation programmes to support this. Our IMTP demonstrates how we will continue to deliver systems and programmes that modernise services, streamline processes and harness technology to improve outcomes. Our focus will be on collaborating with partners to create digital and data services that are adaptable and future-proof.

A key piece of work will be the establishment of a National Digital Architecture which will enable us to work as one across Wales. It will improve care using whole digital records and improve services using whole digital pathways, making technology work for everyone, using intelligence and good design.

Advanced analytics will play a critical role in enabling preventative strategies, thereby aligning with broader objectives to improve population health. Additionally, the use of data-driven insights enhances value-based care delivery, contributing to the long-term sustainability of health and care services for the citizens of Wales.

Last year we saw our escalation status increase to Enhanced Monitoring in relation to major programmes. We have made good progress against the delivery of our milestones for escalation, and we will continue to work closely with Welsh Government and our partners to build on our improvement plans and embrace the opportunities that this offers us.

We aim to develop our staff, embrace change and support continuous innovation and improvement. By nurturing a positive culture, we will empower teams to innovate and collaborate effectively.

We know there is much more to do to fully exploit the opportunities that digital can offer in health and care. As an ambitious organisation, our plan, combined with the skills of our workforce, sets out a clear pathway from missions to activity to ensure digital and data supports citizens to receive better care and effectively manage their own health and wellbeing.

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## Introduction

- [Executive Summary](#)
- [Our Role](#)
- [Business as Usual](#)
- [Our Organisational Strategy](#)

## How we developed our plan

- [Strategic Context](#)
- [Ministerial Priorities](#)
- [Planning Approach](#)
- [Risk Management](#)
- [Plan on a Page](#)

## National Digital Architecture

## Mission 1 PROVIDE a platform for enabling digital transformation

- [1.1 Integrated Data Platform](#)
- [1.2 Sharing Data Safely](#)
- [1.3 Sustainable Infrastructure](#)
- [1.4 Cyber Security and Resilience](#)

## Mission 2 DELIVER high quality digital products and services for health and care professionals

- [2.1 Prevention and Public Health](#)
- [2.2 Primary Care](#)
- [2.3 Community and Mental Health](#)
- [2.4 Planned Care](#)
- [2.5 Urgent and Emergency Care](#)
- [2.6 Diagnostics](#)
- [2.7 Medicines](#)

## Mission 3 DELIVER high quality digital products and services for patients and the public

- [3.1 Patient Facing Products and Services](#)

## Mission 4 DRIVE better value and outcomes through innovation

- [4.1. Research, Innovation and Knowledge Management](#)
- [4.2 Value from Data](#)
- [4.3 AI and Emerging Technologies](#)

## Mission 5 BE the trusted partner and a high performing and inclusive organisation

- [5.1 Our People and Culture](#)
- [5.2 Stakeholder Engagement and Partnerships](#)

## Financial Management

## Legal and Statutory Obligations

- [Well-being of Future Generations Act](#)



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Digital Health  
and Care Wales

# Introduction

# Executive Summary

2026/27 will be a critical year to complete a number of major complex implementations, and drive greater value from existing systems. We will also open up new areas of discovery and co-design to provide world leading digital services, empowering people to live healthier lives

## Strategic Context

**Health Service Challenges.** NHS Wales continues to operate in an extremely challenging environment. Embracing digital adoption can support and drive the NHS transformation needed.

**Digital Technology Opportunities.** The digital landscape is moving fast and has its own challenges: growing cyber threats, supply chain issues, variable digital resource availability and affordability, and tackling legacy technology. With that however comes significant opportunities with data availability and workflow, Artificial Intelligence and automation.

**Value from Data.** That is why our plan has a strong focus on how digital and data can help manage the significant pressure on healthcare services and improve outcomes - but recognising the dependency on good underlying base data.

## Digital Architecture

DHCW is defining the national digital architecture to enable Wales to work as one. This IMTP strengthens our digital and data standards and invests in the right infrastructure, giving us better tools, smoother data flow, stronger security and faster innovation. Digital development will be simpler, more consistent and more resilient.

## Delivering Platforms, Products and Services

We run 100+ live digital services in various health and care settings and provide platforms for national and local systems to connect to the national digital architecture. New services such as the NHS Wales App will transition to full operational service in 2026.

This period will continue our work to tackle legacy and unsupported systems through decommissioning, re-platforming and rolling out modern replacement solutions. We have also transitioned to a new target operating model with organisational restructuring and 'product' operating models embedded throughout.

We will continue our shift to **Cloud computing** and providing cloud platform management, infrastructure services and cyber security services for NHS Wales.

## Data and Analytics

We will lead on collecting and storing data and harnessing the power of data for improving patient care.

## Digital Transformation

The **National Data Resource** is now delivering the health and care data and analytics capability in a live cloud platform, supporting data-driven insights and improving patient outcomes. Our focus during this period is continuing the move into business as usual operations, acquiring more data into the platform and API management services so partners and suppliers can connect more easily to the national architecture to share data.

We will continue the delivery of **Digital Medicines** across Wales, completing the roll out of primary care electronic transfer of prescriptions to GP practices and community pharmacies. We continue work on a shared record of medicines and help co-ordinate lessons and dependencies in secondary care e-prescribing local projects.

We will transition our new **Diagnostics** systems into service and retire / decommission the legacy systems. We will support the new Community by Design approach in community and mental health services through the Connecting Care Programme and ensure ongoing provision of **primary care** services with the final roll out of a common GP system through the GP system migration programme.

We will continue to expand the use and content of the digital health and care record in emergency and planned care settings, particularly through the **Welsh Clinical Portal** and **Welsh Nursing Care Record**.

## Working in the Open

Our plan sets out how we will make progress against the DHCW long term Strategy 2024-2030.

We are committed to working **openly** and transparently, aligning our missions and portfolios to Ministerial priorities and the IMTP Framework.

We have described our **digital pressures** and **risks** and we have identified areas where funding/resources are not yet fully confirmed. We are addressing our escalation requirements and are working to improve governance, programme design and national delivery with partners.

# Our Role

**Digital Health and Care Wales** was established as a new Special Health Authority on 01 April 2021. Our statutory functions are to:

- design, develop and deliver digital platforms, systems and services
- support others in the design, development and delivery of digital platforms, systems and services
- support the development and implementation of common standards for digital platforms, systems and services
- advise and assist the Welsh Ministers in relation to the security of digital platforms, systems and services
- support the development of the digital workforce

## We deliver 100+ national programmes, products and services, and :

- Manage the Microsoft 365 tenancy of 130,000 licences in NHS Wales.
- Provide a fully managed PC support service to 18,000 users across NHS Wales, including GP Practices and national organisations.
- Lead the professional development of the digital workforce for NHS Wales.
- Lead and support the national procurement of major new systems
- Lead the development of national business cases including benefits frameworks for new national digital initiatives.
- Advise Welsh Government and partner organisations on strategic planning, and support policy development.

**To note:** The majority of other NHS organisations (eg Health Boards and Trusts) manage their own infrastructure and connectivity to our systems.

## We deliver national architecture, platforms and programmes.

The national digital architecture and National Data Resource will transform data availability and use across health and social care

### Collect data

Collect data relating to every care event, through the many digital systems used across NHS Wales. This includes patient care in primary, secondary and community and mental health settings, patients' homes, pharmacies and emergency care.

### Store data

Provide modern cloud infrastructure which guarantees safe and secure storage of health and care data. This includes a single source of truth which can hold data in one place, enhancing privacy and security.

### Share data

Ensure the safe and legal sharing of data along care pathways supporting better patient outcomes. This also includes information dashboards, reporting and statistics which support effective planning and improve how health and care services are delivered.

# Where we Support the Delivery of Health and Care Services

## HOSPITALS

In hospitals and clinics we provide a national patient administration system – essential for appointment booking, admission, discharge and more. Our systems receive and prioritise referrals from GPs and provide referral analytics, supporting outpatient modernisation. Our Welsh Clinical Portal and Welsh Nursing Care Record are used to record and access data from millions of documents and test reports across all Wales including cancer and diabetes data entry forms and workflow.

## PRIMARY AND COMMUNITY

We provide digital vaccination, child health and health screening solutions used in community settings. We manage the contract for GP systems, provide desktop services and data analytics to all GPs and we run systems for community pharmacists and dentists.

## AT HOME

We run the NHS Wales App to provide enhanced communication between patients and healthcare providers. This includes appointment booking, repeat prescriptions and waiting list information with new features added regularly.

## PHARMACIES

Our Welsh Clinical Portal and community pharmacy system, Choose Pharmacy share medicines information between hospitals and local pharmacies. We run a medicines stock management system. Our digital medicines work is focused on integration with hospital e-prescribing systems, the transfer of prescriptions from GPs to community pharmacies and a national shared medicines record.

## URGENT AND EMERGENCY CARE

We will support emergency departments and minor injury units with a digital module to record the Welsh Emergency Care Dataset. We have worked on the plan to roll out a system for intensive care.



## OUR FOUNDATIONS

We provide a national infrastructure of data centres, networking and cloud computing. We provide national repositories of health data, protect against cyber threats, protect privacy, and we join up national and local systems so data is available where needed.

## DIAGNOSTICS DEPARTMENTS

We run a national laboratory information management system and support health boards to implement radiology systems. Clinicians use the Welsh Clinical Portal to order millions of tests.

# Business as Usual

A substantial part of DHCW's work falls under 'Business as Usual' (BAU), encompassing the maintenance of 100+ essential services that operate around the clock. These services are critical for users, ensuring seamless input and access to vital clinical and administrative information for safe and effective patient treatment.

**Context.** There are constantly increasing demands on our current services as users see the benefits of digital solutions. We have more users, who access more frequently 24/7, and who want to see more connections made between our systems. We have an increasingly complex technical landscape with opportunities for more automation and efficiency which may be constrained by technical debt that needs updating.

There is a need to transform into structures and sustainable funding approaches that enable continuous improvement of all digital services in line with industry best practice and reducing risk and driving value. The move to a 'product approach' and a shift to cloud native applications is starting to provide faster, agile environments to realise value quickly.

**Ongoing running and maintenance** aims for availability targets of 99.9%. Work includes security patching, management of service backups, disaster recovery planning, planned and unplanned changes, minor configuration management, daily service checks and ensuring our people are trained to constantly be up to speed with developments in digital.

Business as usual activities are undertaken by specialised technical teams and supported by enablers such as service management, the service desk, finance, people and organisational development and specialist commercial teams.

**Service incidents** occur within all systems, the vast majority being situations that have a minimal effect on service delivery, causing little disruption, but still often requiring logging, diagnosis and rectification. Occasionally IT service incidents have a greater effect on wider groups of users, and these are dealt with through our major IT service incident process and are reported to our Board, as well as being included in our IT service availability management report. We learn our lessons from incidents through our Incident Review and Learning Group.

Where we experience repeat incidents, or where we can see a potential trend of incidents, we deal with these through our problem management process.

**Service Improvement.** We deal with numerous **new service requests** from our partners across Wales, often to enable greater functionality or to transform a manual process to a digital service. Changes originate from Service Management / Product Boards, Project Boards, NHS Wales organisations, Welsh Government and more. Other improvements include architectural component upgrades, major configuration management and technical risk mitigations.

**Service re-platforming and de-commissioning.** 2026-29 will see significant work to address technical debt and decommissioning any unsupported systems or systems due for replacement. This includes Windows 2012 and 2016, our integration service and our clinical communications system sending referrals to secondary care. Any suppliers unexpectedly exiting the market is a key consideration especially in terms of immediate and also long term data retention.

Data feeds from legacy systems will increasingly move to the national data resource platform, such as from our data warehouses, and GP audit tooling. We will also in the 3 years see our reports and documents services being decommissioned and to start planning for audit tooling, diagnostics and community system decommissioning as they get replaced by new systems.

## Operations / Programmes Split

IMTP Portfolios are a mixture of operations and new programmes/projects. Approximately 80% of our resources are committed to operational services. This split varies per portfolio.



# Our Organisational Strategy

The DHCW Organisational Strategy covers 2024-2030 and captures our role in the future Welsh health and care system. Our strategy has the same 5 Missions as our IMTP, and within these are 20 strategic objectives.

## Our Vision

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

## Our Purpose

To make digital a force for good in health and care

## Our Principles

PRINCIPLE

1

Put people first

PRINCIPLE

2

Simplify everything we do

PRINCIPLE

3

Design for more data, more digital

PRINCIPLE

4

Find more value

PRINCIPLE

5

Learn from the past, embrace the future

1

### Provide a platform for enabling digital transformation

- Move all our data stores and services to the NDR platform to create a single national clinical data repository
- Redesign our applications and services to a clean architecture which is secure by design and is based on open standards
- Extend data standards and data components to social care and other partners
- Establish an all-Wales framework for sharing health and social care data
- Move all our live services to the cloud and close our datacentres

2

### Deliver high quality digital products and services for health and care professionals

- All prescribing and medicines management in Wales is digitally enabled
- All our digital health systems and major social care systems flow data to and from the NDR platform
- Our core health services are consolidated into a single all-Wales electronic health record application
- Our core social care services are consolidated into a single all-Wales electronic social care record application
- A comprehensive single digital health and care record is used across all settings throughout Wales
- Users report a top-quartile satisfaction for our products and services

3

### Deliver high quality digital products and services for patients and the public

- The NHS Wales App is used regularly by over a million people

4

### Drive better values and outcomes through innovation

- An NDR secure data environment which provides access for research while protecting privacy
- A national information and data insights service which demonstrates net benefit and value
- Deploy AI and automation, safely and ethically, to deliver year-on-year productivity improvements across NHS Wales

5

### Be the trusted partner and a high performing, inclusive organisation

- An academy approach to developing people through talent and leadership development programmes, aligned to Digital and Data Profession Capability Framework
- A secure, long term financially stable position
- At least a 34% lower carbon footprint with a clear route to achieving net-zero
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects
- Top-quartile staff and stakeholder engagement

# Missions and Portfolios

Our 5 Missions are divided into portfolios – designed to meet our strategic objectives. There are 15 delivery portfolios and 2 enabling portfolios.

Our strategy covers 6 years and our IMTP covers three years and is supported by a detailed annual business plan.

## **Mission 1 PROVIDE a platform for enabling digital transformation**

- 1.1 Integrated Data Platform
- 1.2 Sharing Data Safely
- 1.3 Sustainable Infrastructure
- 1.4 Cyber Security and Resilience

## **Mission 2 DELIVER high quality digital products and services for health and care professionals**

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

## **Mission 3 DELIVER high quality digital products and services for patients and the public**

- 3.1 Patient Facing Products and Services

## **Mission 4 DRIVE better value and outcomes through innovation**

- 4.1. Research, Innovation and Knowledge Management
- 4.2 Value from Data
- 4.3 AI and Emerging technologies

## **Mission 5 BE the trusted partner and a high performing and inclusive organisation**

- 5.1 People and Culture
- 5.2 Partnerships and Engagement

# Missions > Deliverables > Outcomes

Our Missions and Portfolios are supported by delivery plans – the priorities are shown below. These deliver value and beneficial outcomes for patients and the wider NHS.

## Missions



## Delivery Priorities



## Value and Outcomes

1. **PROVIDE** a platform for enabling digital transformation
2. **DELIVER** high quality digital products and services for health and care professionals
3. **DELIVER** high quality digital products and services for patients and the public
4. **DRIVE** better value and outcomes through innovation
5. **BE** the trusted partner and a high performing and inclusive organisation

Portfolios

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Care Data Repository</li> <li>• National Data Analytics Platform</li> <li>• National Collaboration Platform</li> <li>• AI Clinical Coding</li> <li>• API catalogue</li> <li>• Results and documents to Cloud</li> <li>• Integration Service</li> </ul>  | <ul style="list-style-type: none"> <li>• Master Patient Index</li> <li>• Terminology Service</li> <li>• Data Standards</li> <li>• Shared Medicines Record</li> <li>• Information Governance Framework</li> <li>• Cloud Transition</li> <li>• Cyber compliance and operations</li> </ul>                                  |
| <ul style="list-style-type: none"> <li>• Prevention – Vaccines and Screening</li> <li>• Primary, Community, Mental Health data</li> <li>• Community Pharmacy</li> <li>• Emergency Care dataset module</li> <li>• Intensive Care</li> <li>• Single Record -patient administration, test requesting, cancer, diabetes and palliative care</li> </ul> | <ul style="list-style-type: none"> <li>• Eye Care Referrals</li> <li>• Nursing Care Record</li> <li>• Laboratory Management</li> <li>• Radiology Management</li> <li>• Welsh Point of Care Testing</li> <li>• Cardiac PACs</li> <li>• Pharmacy Stock Control</li> <li>• Prescription Transfer / E-prescribing</li> </ul> |
| <ul style="list-style-type: none"> <li>• NHS Wales App</li> <li>• Dental Access Portal</li> </ul>  |  |
| <ul style="list-style-type: none"> <li>• Research and Innovation Strategy</li> <li>• Academic Partnerships</li> <li>• Industry Partnerships</li> <li>• NHS Wales e-library</li> </ul>  | <ul style="list-style-type: none"> <li>• Open Access Service</li> <li>• Analytics Service eg for Strategic Programmes</li> <li>• Official Statistics</li> <li>• Artificial Intelligence</li> </ul>   |
| <ul style="list-style-type: none"> <li>• People and culture programmes</li> <li>• Welsh language delivery</li> <li>• Digital Inclusion</li> </ul>  | <ul style="list-style-type: none"> <li>• Stakeholder partnerships</li> <li>• Clinical informatics framework</li> </ul>   |

Benefits

- Health system transformation** and efficiency is increased as sustainable digital services support service re-design, save time and introduce standard data and processes.
- Patient Safety** is increased as manual processes and paper are removed and more data is available for clinicians to make informed decisions and see a reduction in errors.
- Positive health outcomes** are seen as a result of increased availability of data and analysis and joined up data across health board boundaries and settings.
- Health system costs** decrease where digital supports automation, care closer to home and patient empowerment.
- Patient experience** improves when patients can interact with health professionals digitally and have greater visibility of their healthcare journey.
- Health Prevention** improves as digital and data provides valuable evidence for screening and vaccination service planning.



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Digital Health  
and Care Wales

# How we developed our plan

# Strategic Context

**Welsh Government Digital Strategy.** The 'Digital and Data Strategy for Health and Social Care in Wales 2023' has the following strategic aims:

- **Aim 1:** Transform digital skills and partnerships, through developing workforce skills and confidence plus partnership working to benefit the economy
- **Aim 2:** Build digital platforms fit for Wales, through data, collaboration and digital infrastructure and connectivity
- **Aim 3:** Make services digital first, through user-centred services, and maximising digital inclusion

DHCW plays a key role, together with all NHS Wales organisations, in delivering the strategy, eg developing a national digital platform, implementing a national data resource, establishing a national digital and data governance framework, investing in digital and data infrastructure, standards and interoperability, and supporting digital and data innovation and research. We will support more joined up care delivery in communities.

The **Well-being of Future Generations (WFGA) Act 2015** is central to our approach towards long-term planning within DHCW. Our wellbeing objectives are designed to address the key challenges of achieving wellbeing goals in a digital world. See also our [Social Value Delivery Model](#).

The refreshed **A Healthier Wales** action plan in 2024 includes the following digital actions:

1. **Deploy systems** to standardise care pathways, improve productivity, and support decision-making.
2. **Boost digital and data maturity** to meet international standards, eg in cyber, data sharing and clinical safety.
3. **Establish a National Enterprise Architecture** to underpin health and care transformation.
4. **Ensure deployment of key digital capabilities** like diagnostic systems, the Wales NHS App, and electronic prescribing.
5. **Use data, insight, and analytics** safely and securely to improve health and wellbeing outcomes.

The **Ministerial Advisory Group** report on NHS Wales Performance and Productivity (2025) addressed key digital issues such as the need for a national roadmap and progress on a Wales data sharing policy

**Other relevant legislation** includes the Health and Social Care (Quality and Engagement) (Wales) Act 2020 and Duty of Quality and Duty of Candor 2023, the Social Partnership and Public Procurement (Wales) Act 2023, and the Health Service Procurement Act 2024. Compliance will be required with new legislation updating the Medical Devices Regulations 2002 (as amended).

**DHCW's Organisational Strategy 2024** sets the organisation's ambitions up to 2030 listing 20 strategic objectives under 5 missions. Our IMTP portfolios deliver these objectives, aligning with pressing health and digital challenges and trends through DHCW's value streams of collecting, storing, sharing and analysing data to support positive health and wellbeing outcomes.

The **NHS Wales Women's Health Plan 2025-35** outlines the NHS Wales approach to improving the health outcomes for women. Our solutions will support data-driven decision making and drive equality in women's healthcare. Our Chief Executive Helen Thomas is Chair of the National Strategic Clinical Network for Womens' Health Leadership Group.

**Health Trends.** The health service in Wales is facing challenges such as an ageing population, lifestyle changes, and public expectations. These have been compounded by long waiting lists and staff shortages.

On Health trends, Wales contributed one of the largest datasets to the OECD PaRIS Study, enabling international benchmarking of patient-reported outcomes for adults aged 45+ with chronic conditions. Findings highlight that better self-management confidence and shared decision-making are strongly linked to improved well-being and reduced emergency admissions.

**Digital Trends.** We are seeing the following shifts and needs:

- Growing importance of data
- Transition to cloud services
- Enhancing cybersecurity against rising threats
- The expansion of Artificial Intelligence
- Adoption of international technical and data standards
- Addressing technology talent shortages
- Cost optimisation amid digital inflation and funding challenges and the shift from capital to recurrent revenue models
- Continuous agility and modular components in digital services
- Automation, particularly in testing
- Open architecture promoting data exchange
- Integration of patient empowerment apps
- See also Science Evidence Advice (SEA) – *The NHS in 10 years+*. Innovation, technology and AI.



# Delivery against Ministerial Priorities 2025- 2026

Priorities	2025-2028 Plans	2025-2028 Delivery
<p><b>Timely Access to Care</b> – waiting lists and handovers</p>	<ul style="list-style-type: none"> <li>• New diagnostic systems implementations</li> <li>• Welsh Clinical Portal enhancements such as digital waiting list card, operation note and outpatient outcome form – reducing administrative workload and managing waiting lists</li> <li>• Welsh Nursing Record extended to paediatrics</li> <li>• Planned and Emergency Care dataset definition, data entry and application to services</li> </ul>	<ul style="list-style-type: none"> <li>• New national laboratory information management system (LIMS2.0) live in Cellular pathology and andrology across Wales. Further disciplines in final stages. New radiology/PACS System live in five organisations. Both programmes have faced delays but under close scrutiny.</li> <li>• Welsh Clinical Portal (WCP) enhancements have been built and support care transfers and management of waiting lists.</li> <li>• Welsh Nursing Care Record paediatrics replanned to 2026</li> <li>• DHCW leading emergency care dataset collection and reporting. Dataset and NDR datastore complete. Urgent and Emergency Care App built and in test.</li> </ul>
<p><b>Population health and prevention</b> – diabetes and vaccination targets</p>	<ul style="list-style-type: none"> <li>• NHS App extra features to help patient self care</li> <li>• Supporting digital requirements of the Vaccination Programme Wales</li> <li>• Further platform enhancement of diabetes digital solution</li> </ul>	<ul style="list-style-type: none"> <li>• NHS App now displays new outpatient appointments, 250,000 hospital appointments have been notified to users.</li> <li>• Welsh Immunisation System (WIS) now supports all winter respiratory vaccination journeys (COVID-19, flu, RSV) end-to-end and supports new childhood immunisation schedules from Jan 2026</li> <li>• Diabetes system rebuild options drafted</li> </ul>
<p><b>Building Community Capacity</b> – delayed in hospital, access to GPs, Pharmacist prescribers, dental access, community capacity</p>	<ul style="list-style-type: none"> <li>• Further roll out of medicines solutions</li> <li>• Connecting Care- integrated care record business case</li> <li>• Establish a framework for procuring community health products</li> <li>• GP system migrations</li> </ul>	<ul style="list-style-type: none"> <li>• Significant progress in Electronic Prescription Service roll out</li> <li>• Integrated Care business case being drafted plus substantial discovery work</li> <li>• DHCW is supporting health boards procurement (community health)</li> <li>• GP Systems migrations accelerated and completion due early 2026/27</li> </ul>
<p><b>Mental Health</b> – assessments and interventions</p>	<ul style="list-style-type: none"> <li>• Mental health, community and social care digital and data designs</li> <li>• A framework for procuring community health products</li> </ul>	<ul style="list-style-type: none"> <li>• Delivery plan aligned to Mental Health and Well-being strategy being drafted for review end Mar 2026</li> <li>• Community framework (see above)</li> </ul>
<p><b>Women’s Health</b> – health hubs</p>	<ul style="list-style-type: none"> <li>• Maternity data set support. Connecting Care – sharing data with health visitors; perinatal mental health; analytics for women’s services improvement, NHS Wales App – carer access, personalised care plans</li> </ul>	<ul style="list-style-type: none"> <li>• Maternity Data Recording Standard published Oct 2025. A Reporting standard has been developed and is being assessed by health boards</li> <li>• Caregiver access authorisation (NHS Wales App) to be introduced during 2026</li> <li>• Delivered women’s health website and developing women’s health data stds</li> </ul>
<p><b>Digital Priorities</b> as outlined in IMTP Technical Guidance 2025-28</p>	<ul style="list-style-type: none"> <li>• Initial target architecture model defined with health boards. Unsupported systems being prioritised and starting to be phased out. Further cyber safeguards and enhancement underway. Key digital standards published. AI use case catalogue created and pilots underway. Foundational data flows into the National Data Resource operational; incremental onboarding underway. Electronic requesting activity scaled up at additional sites and technical constraints being resolved</li> </ul>	
<p><b>Ministerial Advisory Group on Accountability</b></p>	<ul style="list-style-type: none"> <li>• National dataset to track treat in turn progress – underpinning modernisation of outpatient datasets work underway</li> <li>• Progress national systems in remit letter – see routine reporting</li> <li>• National Target Digital Architecture leadership – see above</li> </ul>	

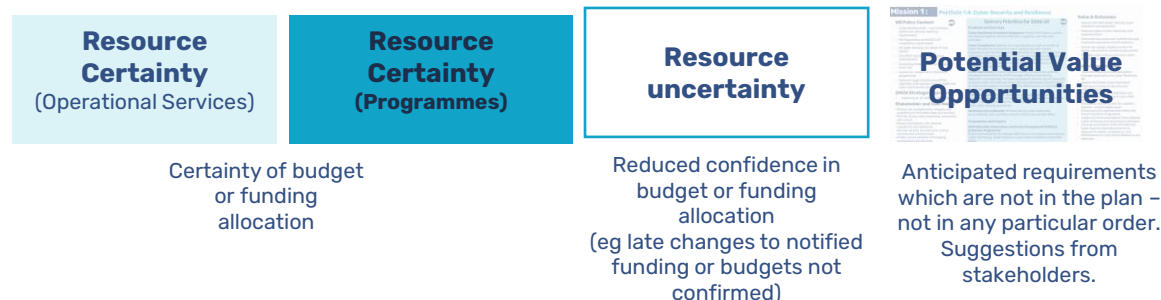
# Ministerial Priorities 2026-2029

Priorities	2026-2029 Plans	NHS Wales Planning Framework						
Timely Access to Care – reducing waiting times, patient communication, improve patient flow	<ul style="list-style-type: none"> <li>New <b>diagnostic systems</b> implementations will speed up test turnaround and reduce delays in pathways</li> <li>Expansion of electronic <b>test requesting</b> and results reporting across primary and secondary care will help cut errors and workflow delays.</li> <li>Expansion of digital <b>referrals</b>, replacing paper/email will enable smoother patient transitions between services.</li> <li>Our work on outpatient modernisation <b>datasets</b> will support reduced waiting times and better flow management</li> <li>We further develop appointment notifications and waiting list visibility in the <b>NHS Wales App</b> to reduce DNAs and keep patients informed.</li> <li>We will help with waiting list management and <b>operational intelligence</b> by building waiting list dashboards and reports</li> <li><b>Emergency care</b> module and digital handover solutions to reduce delays and improve clinical readiness</li> <li>Our <b>medicines</b> deliverables will improve medicines turnaround, safety and pathway efficiency</li> </ul>							
Population health and prevention – supporting vaccines, obesity and diabetes prevention and becoming a Marmot nation	<ul style="list-style-type: none"> <li>Expansion of the Welsh <b>Immunisation</b> System including migration of school-age vaccines and provide digital services for <b>screening</b> programmes</li> <li>Enhancing the <b>Diabetes</b> solution</li> <li>Leveraging clinical and population data to generate actionable insights that <b>reduce inequalities</b> and support <b>prevention</b> strategies</li> <li>Consider any <b>weight management</b> digital requirements as they arise</li> </ul>							
Community by design – integrated services in the community and primary care	<ul style="list-style-type: none"> <li>Collaborate on developing a service design and a digital and data plan to support service transformation across community and primary care settings. The <b>Connecting Care</b> programme will support the replacement of the Care Director system. Work on an Integrated Care Record View will support integrated patient pathways. Our <b>Choose Pharmacy</b> system is being redeveloped – the public have further choice on where to access care in the community</li> </ul>							
Mental Health Access – seamless, person centred care	<ul style="list-style-type: none"> <li>Collaborate with the Strategic Programme for Mental Health and Welsh Government on the delivery of the <b>Mental Health</b> Digital and Data plan.</li> </ul>							
Women’s Health – health hubs	<ul style="list-style-type: none"> <li>Support the ongoing development of <b>the Women’s Health</b> Hubs, expanding provision of information via the website and developing approaches for better data linkages – Women’s Health Network</li> </ul>							
Quality and Safety – addressing unwarranted clinical variation. Cancer, circulatory diseases, diabetes and end of life care quality	<ul style="list-style-type: none"> <li>Expand the speciality healthcare functionality to optimise secondary healthcare operations across cancer, diabetes and palliative care.</li> <li>Deliver new cancer data set forms aligned to audit and clinical network requirements</li> <li>Cancer dashboard development</li> </ul>							
Digital Priorities as outlined in additional Planning Technical Guidance 2026-29 and the Refreshed Healthier Wales actions	<p>Mandatory digital strategy alignment with national architecture. <i>See Portfolio 1.1 Integrated Data Platform</i> Cardiac PACs – <i>See 2.6 Diagnostics</i>, Systemic Anti Cancer Treatment – <i>See 2.7 Medicines</i></p> <p>Mandatory cyber-security standards (CAF), IG training ≥85%.</p> <p>Mandatory phasing out of legacy systems.</p> <p>Mandatory adoption of national digital programmes and AI-supported coding.</p> <p>Requirement for 2-year assessment against NHS R&amp;D Framework.</p> <p>Mandatory inclusion of R&amp;D in IMTPs consistent with national standards</p>	<table border="1"> <thead> <tr> <th colspan="2">Enablers</th> </tr> </thead> <tbody> <tr> <td><b>System Leadership and Transparency</b> – wellbeing, streamline reporting, innovation, regional solutions</td> <td><b>Cross Government Priorities</b> – decarbonisation, anti racism, Welsh Language, WBFGA, Value Based Care</td> </tr> <tr> <td><b>Improving Value, Optimising Outcomes</b> Eradicate unsupported systems and devices and ensure a clear cyber response plan for the organisation</td> <td><b>Financial Framework</b> – within existing resources, savings for non core, GMS investment, Value and Sustainability Board recommendations, estates rationalisation</td> </tr> </tbody> </table>	Enablers		<b>System Leadership and Transparency</b> – wellbeing, streamline reporting, innovation, regional solutions	<b>Cross Government Priorities</b> – decarbonisation, anti racism, Welsh Language, WBFGA, Value Based Care	<b>Improving Value, Optimising Outcomes</b> Eradicate unsupported systems and devices and ensure a clear cyber response plan for the organisation	<b>Financial Framework</b> – within existing resources, savings for non core, GMS investment, Value and Sustainability Board recommendations, estates rationalisation
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# Planning Approach

## Principles

- The plan aligns with the Planning Framework, Ministerial Priorities and the [Well-being of Future Generations Act](#).
- Year 2 and Year 3 are indicative.
- Delivery timelines are colour coded depending on level of certainty and maturity.



- Any addition of new delivery commitments into the plan require additional or reallocated funding / budget. Future pipeline items may consume DHCW resource ahead of a firm position.
- New delivery commitments are expected to progress in terms of detailed planning and certainty as they move from future pipeline through to the plan and are subject to a feasibility assessment.
- Capacity is forecast and constraints assessed across the organisation as part of the DHCW planning process taking into account factors such as business as usual, recruitment timelines and absence.
- This plan has considered priorities from partner organisations such as Welsh Government, strategic programmes, national organisations, Health Boards and Trusts gathered from regular planning meetings, peer groups and new service requests during the year.
- Other organisational plans follow the same planning timeline as DHCW so confirmed detailed requirements may not have been available at time of drafting. We manage alignment of plans during the year as part of our strategic engagement.

## Changes to our Plan

**Change process.** The DHCW plan lists our known deliverables heading into a new year. It must however, be flexible enough to consider new requirements during the year. Changes can be driven by external factors, such as funding availability, new policy requirements, delivery partner capacity, and in year efficiency opportunities. Our planning and change control process manages these changes, and tracks complex resource interdependencies between teams across our organisation.

In a typical year our delivery milestones can increase by 15% in number. Some can be accommodated but typically we would de-prioritise other activities which may sit underneath the IMTP.

**Balancing Product and Project.** It is a challenge to ensure operational improvements are not bumped back in the priority list. We have to balance the agile, user-centred approach favoured by our teams and the more directive, milestone-driven requirements from stakeholders.

We have robust internal and external governance such as our Planning and Performance Management Group and external programme boards who are closely involved in any revision of milestones and assessing the impact of changes on quality and delivery.

## Escalation level and Remit Letter

On 11 March 2025, DHCW's escalation status changed from [Level 1 – Routine Monitoring, to Level 3 – Enhanced Monitoring](#). The increased escalation relates specifically to the delivery of major programmes, under the 'performance and outcomes' domain of the NHS Oversight, Assurance, Escalation and Intervention Framework. DHCW have worked closely with Welsh Government to confirm the arrangements for de-escalation via an agreed [Escalation Framework](#) and associated Enhanced Monitoring Improvement Plan to be monitored to inform the future escalation status.

This IMTP sets out how DHCW will meet the requirements set out in the DHCW Remit Letter, issued by Welsh Government.

# Risk Management

## Risk Themes

**Cyber.** Optimising our protection against cyber attacks is critical to ensure continued availability and delivery of our digital solutions. Otherwise optimum, safe and timely patient care is at risk. See Portfolio 1.4 for further details.

**Suppliers.** We are reliant on supplier capacity to support key systems over the course of this plan. We need to be confident that delivery timescales are not at risk, and suppliers are focussed on an NHS Wales roadmap and requirements. Supplier financial viability is a key risk, as is non compliance with national standards. Local contracts may be more attractive to health boards but less attractive to the market and interoperability.

**Digital Inflation.** Increased costs from suppliers of digital services could potentially impact on the organisation's ability to balance finances. This is running higher than general inflation.

**Sustainable Funding.** Major projects digital funding uncertainty may impact on delivery of new systems and ongoing operational services. There can be uncertainty about future service level agreement income from other NHS organisations, including the transition of major programmes from Welsh Government digital priority investments into business as usual.

**Resourcing.** There is a risk of not filling vacancies in a timely manner and losing key resources due to funding uncertainty. Some digital skills are in short supply and posts can be difficult to fill.

**Legacy issues.** There is still legacy infrastructure which needs upgrading across the estate. Any focus away from this means new systems could sit on sub-optimal infrastructure which could delay roll out and presents a risk to delivery of our services.

**Complex Interdependencies.** The integrations between digital systems in health and social care are extremely complex. This can result in unexpected delays which may be difficult to mitigate, for example, when systems are provided by third parties.

**Information Governance.** Without a legal gateway that is fully transparent for the use of identifiable Welsh resident information, DHCW Programmes such as the NDR, will not be able to derive the full benefits of their assigned responsibilities to collect, process and disseminate information for service improvement, innovation and research.

**Rapid and Responsible Use of AI.** The pace at which AI technologies are evolving is unprecedented, particularly large language models and Generative AI. In a health and care context this presents challenges as well as opportunities. Enthusiastic adoption of new AI must be balanced against safety, security and ethical concerns.

**Major National Digital Programmes** - A number of DHCW led national programmes have not progressed as intended. This is reflected in DHCW's escalation status for delivery of major programmes. All programmes are collaborative with stakeholder representation at programme board level, and joint assurance, but there are different authority and approval arrangements, usually reflecting the contractual and/or funding position within each programme. As a result of this, DHCW, working with partners, have developed a programme typology approach to major programmes, to help define programmes and learn lessons from what has worked well and what has not in an NHS Wales context.

## Risk Processes

DHCW's approach to risk management is set out in the **Risk Management and Board Assurance Framework Strategy**, which establishes how risks are identified, evaluated, escalated and monitored across the organisation.

All Directorates, services and projects have risk registers. Significant or cross-cutting risks are escalated to the **Corporate Risk Register**. Corporate risks may have organisation-wide, reputational or strategic impact. The risk log considers impact and likelihood with mitigations.

DHCW's Risk Management Group meets monthly to oversee organisational risk, aligned with the responsibilities of the DHCW Board, its committees and strategic risk owners. The Board ensures effective **governance, scrutiny and challenge** across all areas of activity. Programme delivery risks in particular may be escalated to our Programme Delivery Committee for additional consideration.

The **Board Assurance Framework** provides the Board with a structured method for understanding the principal risks that could impact delivery of DHCW's strategic objectives. The Board sub-Committees deep dive into areas of the Board Assurance Framework throughout the year.

On an annual basis the Board review DHCW's **risk appetite** and tolerance to risk, in pursuit of DHCW's strategic missions. This is summarised in a risk appetite statement.

# Portfolios

# Plan on a Page 2026-29

	QTR1	QTR 2	QTR 3	QTR 4
1.1 Integrated Data Platform	Diagnostics data into the Care Data Repository / Analytics migrations			
	Build redesigned terminology service / Launch beta national data collaboration platform / AI enabled Clinical Coding			
	National Digital Architecture documents and results developments / new integration service flows			
1.2 Sharing Data Safely	WASPI Code of conduct for public services - implementation		National Audit Tool replacement roll out	
1.3 Sustainable Infrastructure	Migrate services to the Cloud , reduce datacentre footprint and end of life infrastructure / New M365 enterprise agreement			
1.4 Cyber Security and Resilience	Cyber Resilience Bill plan	AI Monitoring and Assurance Framework / national incident response exercise		Advanced cyber analytics and automation
2.1 Prevention and Public Health	Discovery - school age vaccines into Welsh Immunisation System		Supporting screening services and public health partners	
2.2 Primary Care	Dental dashboards	Eyecare referrals rolled out	Choose Pharmacy re-platform go-live	GP analytics MVP (all practices)
	GP system migration complete	Discovery - electronic transfer of GP records cross border		
2.3 Community and Mental Health	Support delivery of Digital and Data Plans (Mental Health and Community by Design) / Support health boards with Connecting Care plans			
	Respond to outcome of Integrated Care Record case		MVP Community operational data set	Start exit from current community system
2.4 Planned Care	Planned care data sets / extend hospital initiated referrals / expand cancer, diabetes, palliative care functionality			
	Paediatric nursing care record launch / New requirements : perioperative, e-consent			
2.5 Urgent and Emergency Care	Emergency care app roll out and emergency care data set development / implement intensive care system			
		Explore use of hospital initiated referrals from urgent care settings		
2.6 Diagnostics	Support remaining new radiology system go lives and exit legacy system	Welsh Point of Care start procurement	Handover new laboratory system to service / decommission legacy system	
	Discovery , business case and procurement of national Cardiac PACS solution			
2.7 Digital Medicines	Electronic prescription service rollouts / Connect health board e-prescribing and medicines admin systems to national architecture / options for meds stock control			
3.1 Patient Facing Products and Services	Complete priority NHS Wales App functionality such as hospital referrals, appts, documents and tests. Discovery of new items / Platform performance and scalability.			Reach 350k monthly distinct users of NHS Wales App
4.1 Research, Innovation and Knowledge Management	Delivering the refreshed R&I strategy / Increase usage and collections of E-Library / Increase DHCW authored Open Access publications			
4.2 Value from Data	Transition data to National Data Analytics Platform / Strategic programmes, DHCW products and clinical networks analytics / Official statistics publications			
4.3 AI and emerging technology	AI opportunities throughout all portfolios		Improving AI capability and skills	AI Governance and Assurance Framework
5.1 Our People and Culture	Workforce Planning	Digital Learning Portal	Support growth of Digital profession in Wales	Culture Roadmap delivery
5.2 Stakeholder Engagement and Partnerships		Strengthen public voice to provide feedback on products	DHCW Engagement Strategy 2026-29 launch (including stakeholder review learning)	Digital inclusion Playbook / embed user centred design



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# National Digital Architecture

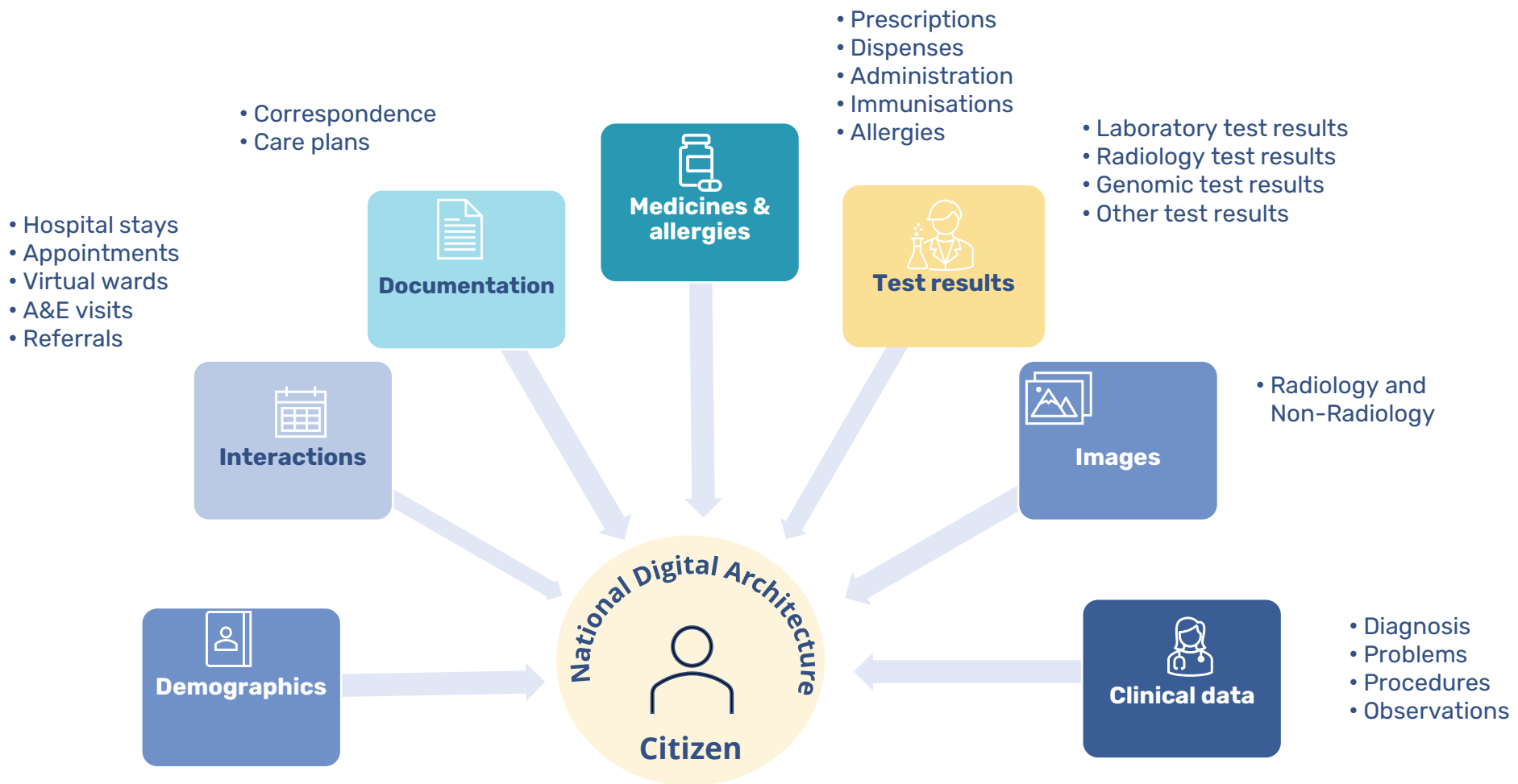
# National Digital Architecture: Working as One across Wales

Welsh Government has commissioned DHCW to develop a national digital architecture for health and social care in Wales. The architecture will be a whole system design for how digital and data services will work together as one across health and social care in Wales.

The National Digital Architecture Vision statement is to improve care using whole digital records, and improve services using whole digital pathways, making technology work for everyone using intelligence and good design.

In 2025, an assessment of our current architecture took place together with a target state architecture description and roadmap to get there.

A strategic investment plan is nearing completion and will provide a framework under which individual components are prioritised and business cases developed. It will act as a position paper, with costings, sequencing, dependencies together with opportunities for other NHS organisations being hooked up to the new architecture.






## How data domains support joined-up care



# National Digital Architecture: So what?

## Key Themes

The National Digital Architecture will deliver different benefits for different users – see the key themes below.

	①	②	③	④	⑤
Users	Better digital tools	Better data flow	Better digital performance	Better security & reliance	Faster innovation & change
 <p><b>Citizen</b></p>	<b>Consistent digital services</b> wherever you access care.	Your <b>information follows you</b> , so you don't have to repeat your story.	<b>Faster, smoother journeys</b> with fewer delays and repeats.	Confidence that your <b>data is safe and protected.</b>	Access to <b>modern, digital-first services.</b>
 <p><b>Staff</b></p>	<b>Reliable digital tools</b> that work the same across locations.	<b>Accurate, real-time information</b> available when and where it's needed.	<b>More time for patient care</b> and less time on outdated processes.	<b>Dependable, secure systems</b> that minimise disruption.	Ability to <b>adopt new tools and ways of working</b> more quickly.
 <p><b>Leaders</b></p>	A <b>simpler, modern digital estate</b> that supports change.	<b>Better insight</b> to plan and make informed decisions.	<b>Savings reinvested</b> into frontline services and innovation.	A <b>strong national cyber posture</b> and reduced risk.	<b>Faster scaling of innovation</b> across the system.
	Modern, consistent digital services that are easier for citizens and staff to use.	More joined up services, right information, right place, right time.	Faster, smoother journeys with fewer delays, repeats, and outdated processes.	Trusted digital where data is protected and systems stay dependable.	A system that can adopt new tools and digital-first services more quickly.

# National Digital Architecture : Conceptual Architecture

This conceptual architecture illustrates how national digital platforms, data layers and applications work together to enable secure, interoperable and user-centred health and care services across Wales.

## Users



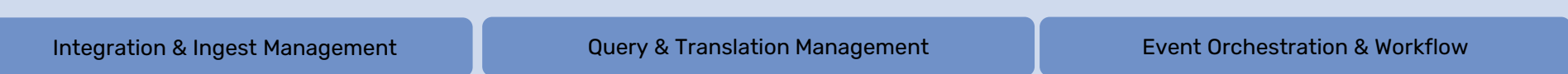
## Business Layer



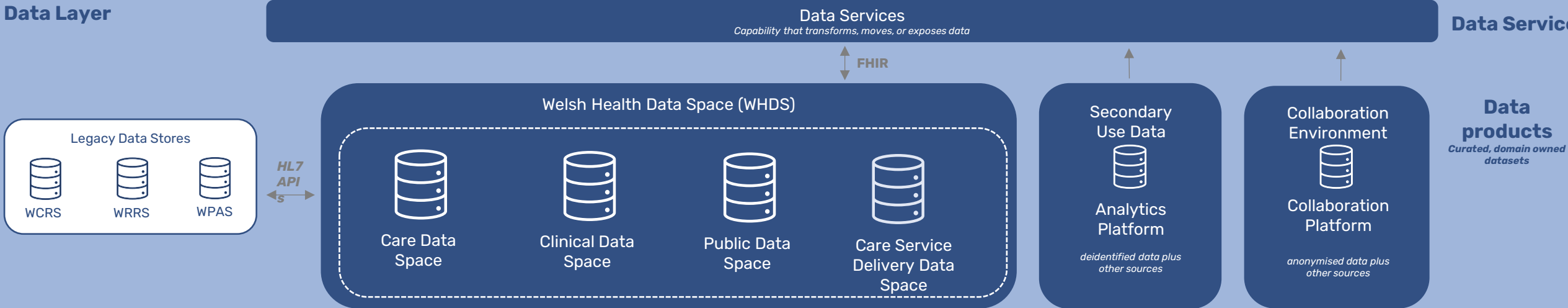
## Application Layer



## Logic Layer



## Data Layer



## Technology Layer



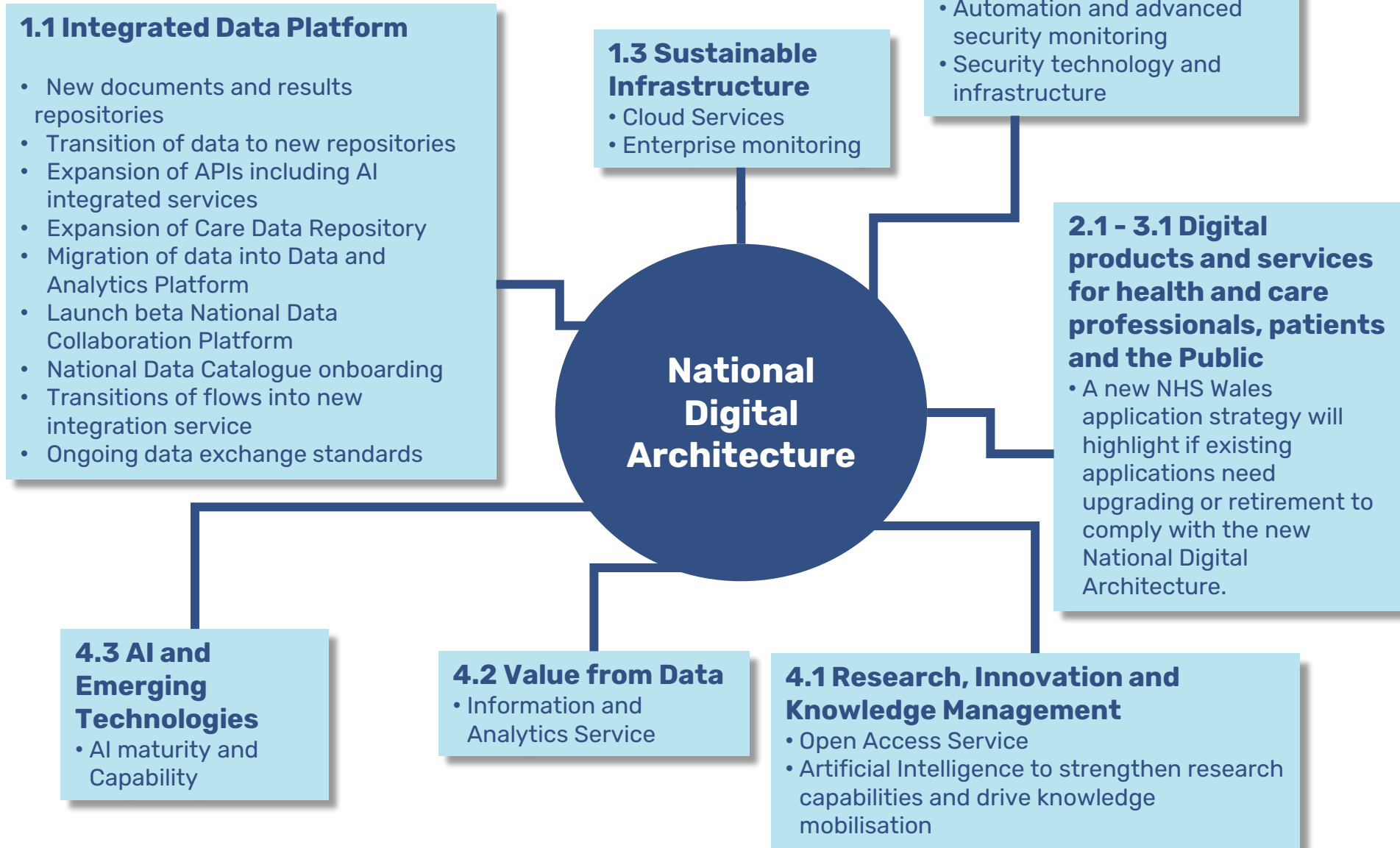
# National Digital Architecture Mapping

The National Digital Architecture (NDA) extends across all of the DHCW portfolios.

In Mission 1 - the NDA Technology Layer drives our future infrastructure and cyber work. The Data and Logic Layers illustrates what's needed for our future data stores and how data is integrated across settings and systems.

In Mission 2 and 3 - the NDA Application Layer sets the rules which our applications must follow.

Mission 4 is all about driving better value from data and will rely on the Analytics Platform in the NDA Technology Layer to deliver those secondary uses of data.





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Digital Health  
and Care Wales

# Mission 1

**PROVIDE a platform for  
enabling  
digital transformation**

1.1 Integrated Data Platform

1.2 Sharing Data Safely

1.3 Sustainable Infrastructure

1.4 Cyber Security

### WG Policy Context



Welsh Government and NHS Wales strategies consistently mandate a move to a single, standards-based national data foundation to enable integrated care, improve system efficiency and support data-driven decision making.

**Key strategic drivers** include: A Healthier Wales (2018), the National Data Resource Data Strategy (2022), WG Digital and Data Strategy for Wales (2023) and DHCW Organisational Strategy (2024-2030)

### DHCW Strategic Objectives

- Redesign our applications and services to a clean architecture which is secure by design and based on open standards

### Stakeholder and User Needs

Patients, professionals and system leaders need:

- Seamless, person-centred care across organisational boundaries
- A trusted, single view of integrated health and care records at the point of care
- Reliable, near-real-time data to manage demand, capacity, workforce and resources
- Secure, governed access to high-quality, standardised national data
- Clear national vs local data stewardship and accountability
- A robust, scalable national data architecture with secure, well-defined interfaces
- Easy access to integrated datasets without parallel warehousing

### Delivery Priorities for 2026-29



A national, cloud-based data platform with shared services, written to once, and reused many times.

#### Core platform capabilities

- **Care Data Repository (CDR):** expand content and access to the integrated health and care data including diagnostics, documents, referrals, encounters, medicines, pathways and images.
- **National Data and Analytics Platform (NDAP):** lead on migration of national and local data warehouses and adoption of advanced analytics capabilities
- **National Data Collaboration Platform:** launch a beta platform to support and enable operational and collaborative projects requiring secure access to privacy-managed, sensitive and real-time data
- **National Data Catalogue:** complete population of a single catalogue providing transparency, provenance, governance and discoverability of national datasets.
- **Clinical Coding:** AI-enabled improvement of completeness, timeliness and accuracy of clinical coding.

#### Foundational data services

- **Core Services API Catalogue:** expand and operationalise the catalogue to enable appropriate access to priority data (including optometry referrals) and deliver a user-driven roadmap that supports future AI capabilities.
- **Master Patient Index:** upgrade the solution which consolidates all patient identifiers in Wales.
- **Welsh Reference Data and Terminology Services:** improve performance and scalability of the technical, strategic solution
- **Data standards and conformance at source:** driving use of data standards across digital products in use across Wales and reporting conformance.
- **Data Exchange Standards (FHIR):** driving use of standards-based product and health and care record interoperability
- **Welsh Care Records Service (WCRS):** migrate the data within the repository hosting digitised patient documents, including clinical histories compiled from services across Wales to a modern cloud platform.
- **Welsh Results Reporting Service (WRRS):** migrate the data within the repository hosting diagnostic results, including Pathology, Radiology, Cardiology and Endoscopy, generated across Wales, to a modern cloud platform.
- **Integration Service:** modernise and reduce cost of the product processing high-volumes of messages between digital products and to the Care Data Repository.

### Value and Outcomes

- Safer, higher-quality care through consistent, up-to-date information irrespective of the source in Wales
- Better clinical and operational decision-making, including through use of AI for clinical coding for diagnosis and procedures.
- Earlier intervention and proactive management
- Improved planning and allocation of resources
- Faster, safer research and innovation
- Reduced technical debt and supplier lock-in
- Reuse at scale and cost reduction: data written once and reused across care delivery, planning, improvement and research
- Accelerated innovation and modular procurement: standard platforms, APIs and data exchange enable new services to plug into national capabilities
- Stronger system integration and access management: consistent national architecture improves security, governance and user experience.

### Potential Value Opportunities

- Acceleration of care data repository adoption by expediting the development and adoption of interoperability standards

1.1 Integrated Data Platform						
Key: *NDA = National Digital Architecture	Annual Plan				IMTP	
	QTR 1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Core Platform Capabilities</b>						
<b>Care Data Repository</b> (* NDA)	Continue to make diagnostics available in the Care Data Repository to consume via APIs				Deliver phase 5 National Data Resource programme plan	
	Maintain Care Data Repository and support consumer onboarding					
	Maintain Shared Medicines Record development and supplier onboarding					
<b>National Data and Analytics Platform</b> (* NDA)	Continue to enable and support partner migrations of local data warehouses and analytics capabilities				Progress subsequent wave(s) of health board / trust migrations into NDAP	Complete subsequent wave(s) of health board / trust migrations into NDAP
<b>National Data Collaboration Platform</b> (* NDA)	Design, test and launch the beta national data collaboration platform				Continuous improvement of national data collaboration platform – <i>See Portfolio 4.1</i>	
<b>National Data Catalogue</b> (*NDA)	Support onboarding and maintenance of data stewardship					
	Enable and support self-service capabilities					
<b>Clinical Coding</b>	Complete development / procurement of AI enabled solution				Implement solution in initial organisation(s)	Implementations in further organisations
<b>Foundational Data Services</b>						
<b>Core Services API Catalogue</b> (* NDA)	Complete public beta phase for optometry e-Referrals messaging technology			Develop roadmap for further services	Extend referrals capability to further services	
	Continue expanding the catalogue with additional services based on ongoing needs assessments and feedback including integration of AI capabilities.				Deliver phase 5 National Data Resource programme plan	
<b>Master Patient Index</b>	MPI service fully migrated to new servers, with upgraded software to version 12.0, implementation complete					
<b>Welsh Reference and Data Terminology Service</b>	Complete the build, testing and assurance of the redesigned national terminology service			Develop a plan to migrate existing systems to redesigned national terminology service	Establish and support migration to new national terminology platform	Continue to support migration to new national terminology platform
<b>Data Standards</b>	Support the Welsh Patient Administration Service (WPAS) and integration services teams to implement core reference data standards, and to apply mapping to maintain data integrity during data exchange					
<b>Data Exchange Standards</b> (*NDA)	Ongoing development, testing and publication of FHIR resources to enable ongoing population of the care data repository to enable a single record				Ongoing development, testing and publication of FHIR resources to enable ongoing population of the care data repository to enable a single record	
<b>Welsh Care Records Service</b> (*NDA)	Expand the content of the health and care record with documents across specialities in line with health board requests and NHS Wales priorities					
	Developing new capability to store and retrieve documents in line with national digital architecture		New capability available to store and retrieve documents	Commence transition to the new document repository	Continue transition to the new document repository	
<b>Welsh Results Service</b> (*NDA)	Expand the content of the health and care record with result reports across specialities in line with health board requests and NHS Wales priorities, eg genomics, cardiology					
	Data streaming of results to CDR				Continue transition to the new results repository <b><i>See NDA</i></b>	
<b>Integration Service</b> (*NDA)	Continue transition of flows to the new integration service				Continue transition of flows to the new integration service	

### WG Policy Context



- Information sharing for patient care and information intelligence
- UK General Data Protection Regulations 2018 and Common Law Duty of Confidence requires a strong protection of privacy
- A Healthier Wales 2019 – patient empowerment and data in safe hands
- Digital and Data Strategy for Health and Social Care in Wales 2023
- The Data (Use and Access) Act 2025
- Supporting Welsh Government with Article 36(4) consultation requirement

### DHCW Strategic Objectives

- Move data stores and services to the NDR platform to create a single national clinical data repository
- Establish an all-Wales framework for sharing health and social care data
- A comprehensive single digital health and care record is used across all settings throughout Wales
- The NHS Wales App is used regularly by over a million people
- Deploy AI and automation, safely and ethically

### Stakeholder and User Needs

- Understanding of data use
- Transparency when informing the public
- Engaging the public in wider uses of health and social care data

### Delivery Priorities for 2026-29



#### Products and Services

- **Information Governance Service:** Lead the development and strengthening of an Information Governance compliance framework for the health and care system in Wales including advice and development of privacy enhancing technologies (PET) - giving confidence that data is used lawfully, safely and ethically.

#### Programmes and Projects

- **Wales Accord on the Sharing of Personal Information:** Publish a code of conduct for public services accredited by the Information Commissioners Office and set up a monitoring body to enable the strengthening of standards of information sharing in the public sector - the first ICO code in the UK public sector.
- **Policy and Governance:** provide expert advice to Government and other stakeholders, to support establishment of a legal and policy framework for data sharing across health and care in Wales which will underpin digital transformation.
- **Information Sharing Gateway:** Develop a digital tool where Data Protection assets are recorded digitally, such as data protection impact assessments, information sharing templates and agreements - to introduce efficiencies and digitise a manually intensive process.
- **Information Governance Training:** Collaborate to develop the existing national IG training provision to enhance and improve staff's understanding of information governance responsibilities across Wales. Provision opportunities to also create professional standards for Information Governance.
- **Clinical Risk Management Standards and Digital Patient Safety:** Lead on the approach for Wales to be included in the current DCB standards and develop a network for all Wales Clinical Safety Officers responsible for Digital Patient Safety.

### Value and Outcomes

Safe and equitable access to data at the point of care means:

- Increasing confidence within services and with the public that confidential patient data is protected and shared for care
- Increasing confidence that partners and providers of healthcare services comply with privacy requirements through the provision of an IG assurance framework. (Our national audit tool has resulted in more data shared from primary care to other settings.)
- Creating a safe and ethical Information Governance Framework which advances the strategic aim for developing a Single Patient Record

### Potential Value Opportunities

- Supporting emerging Ministerial priorities
- Consideration of a national data protection impact assessment WASPI template
- Increasing trust on the use of health and social care data

# 1.2 Sharing Data Safely

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29	
<b>Information Governance Service</b>	IG services include advice and tools such as: - <b>Primary Care Information Governance Support</b> - Supporting Primary Care Services with relevant IG Support and Guidance. - <b>Data Protection Officer Service</b> - Maintain and improve the DPO Service for subscribers extending to fully operational optometry service. - <b>Information Governance Toolkit</b> - maintaining the toolkit for use by organisations that want access to patient data in order to deliver efficient health and care services, extend toolkit to support any other NHS contracted service providers. - <b>Wales Accord for Sharing Personal Information (WASPI)</b> - Providing a framework of information sharing principles and standard templates to help public service providers in Wales document their information sharing arrangements. - <b>Standards Compliance (BS10008)</b> - Legal admissibility and retention of electronic information. - <b>National Intelligent Integrated Audit Solution</b> - Monitoring access to national applications and repositories. - <b>Support</b> DHCW to deliver its responsibilities for <b>data acquisition, data warehousing and information services</b> while seeking opportunities to rationalise and streamline governance and assurance processes. - <b>Statutory governance and compliance</b> - Continue 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.						
	Extending Data Protection Officer Service to Optometry						
	<b>Statutory Governance and Compliance</b> - Review of current processes to account for the introduction of the Data (Use and Access) Bill				<b>Information Governance Toolkit</b> - Future platform developments delivered to increase user base		
	Contract award for replacement to <b>National Audit Tool</b>		Implement replacement to National Audit Tool				
<b>Wales Accord on the Sharing of Personal Information</b>	National IG Framework – Formal approval of the Code of Conduct Monitoring Body arrangements	Phased Implementation go live for the WASPI UK GDPR Code of Conduct for Information Sharing Protocols		WASPI UK GDPR Code of Conduct for Information Sharing Protocols to be operational across Wales			
<b>Information Sharing Gateway</b>				Sustainable funding model to support license costs with tooling beyond 2028 to be agreed			
<b>Information Governance Training</b>	Engage with the Information Governance Management Advisory Group (IGMAG) to identify and confirm future national training requirements			Deliver required updates and additions to the national IG training in accordance with the agreed national plan developments.			
<b>Clinical Risk Management Standards</b>		Agree next steps with Welsh Government on implementation of DCB clinical risk management standards					

### WG Policy Context



- The All Wales IT Infrastructure Review (AWIIR) 2020
- National Digital Architecture
- A Healthier Wales 2019
- DHCW Cloud Strategy 2022
- Digital and Data Strategy for Health and Social Care in Wales 2023

### DHCW Strategic Objectives

- Move all our live services to the cloud and close our datacentres
- At least a 34% lower carbon footprint with a clear route to achieving net-zero

### Stakeholder and User Needs

- High availability, reliability and responsiveness
- Excellent and efficient experience on desktop devices
- Access to technologies such AI
- Ability to self serve
- Improved visibility of system performance

### Delivery Priorities for 2026-29



#### Products and Services

- **Cloud and Data Centre Services:** Enabling a digital service availability of over 99.9% through secure, reliable and optimised cloud and data centre infrastructure. Reducing our datacentre footprint as we migrate services to the cloud. Strengthen resilience and recovery capabilities against cyber attacks through implementing an enhanced backup solution. Replace or retire end-of-life infrastructure. Develop roadmap and undertake initial testing of use of AI for an automated approach to firewall security.
- **Enterprise monitoring:** Improve service availability through implementing a solution to provide enhanced telemetry and application monitoring for DHCW product teams. Procure and implement a replacement infrastructure monitoring capability.
- **Microsoft 365 Services:** Lead on delivering a new Microsoft Enterprise Agreement for NHS Wales and support organisations to maximise value and benefits. Rationalise, replace and upgrade ~100 authentication servers and certificate services.
- **Digital Workplace (DHCW and clients):** Enhance user experience through optimising the lifecycle management and monitoring of PCs and laptops. Strengthen security posture by implementing additional tooling on managed end-user devices.

#### Programmes and Projects

- **Digital Workplace (NHS Wales):** Explore opportunities to optimise procurement and management across NHS Wales through conducting discovery work to support a broader national strategy.
- **Cloud Transition Programme:** Accelerate service delivery and drive operational efficiencies, through moving national digital services to the Cloud and delivering associated change in skills and working practices.

### Value and Outcomes

- Increasing confidence and trust from our partners to provide quality, reliable digital services, particularly vital clinical systems.
- Accelerated service delivery and increased agility to manage unpredictable demands.
- Shifting to high-value activities with Cloud rather than routine, low level maintenance.
- Increasing reliability, availability and security of services through Cloud.
- Cost avoidance and improved productivity through a new optimised Microsoft 365 EA, including AI tooling.
- Improved security of end-user devices.
- Improved value and improved speed of delivery through cloud-first applications.

### Potential Value Opportunities

- Improved user experience through accelerated device refresh and improved management processes
- Establish a Cloud Centre of Excellence to assist NHS Wales to embrace cloud services
- Establish a comprehensive service observability platform for DHCW

# 1.3 Sustainable Infrastructure

Key: \*NDA = National Digital Architecture

	Annual Plan				IMTP	
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Cloud and Data Centre Services</b> (*NDA)	Data Centre Optimisation and footprint reduction achieved				Continued reduction in footprint	Continued reduction in footprint
	Migrate databases to new platforms and retire associated end-of-life storage hardware					
	Cloud Computing Efficiency: Performance and governance improvements delivered					
	Procure and implement new network service for connectivity to NHS England					
	Implement new back-up solution		Implement AI-driven firewall ruleset			
<b>Enterprise Monitoring</b> (*NDA)	Procure replacement infrastructure monitoring solution	Implement new infrastructure monitoring solution and transition services to new platform				
	Undertake discovery exercise for enhanced application monitoring	Implement tactical solution for enhanced application monitoring				
		Develop business case for full deployment of enhanced application monitoring		Stand up Project	Procure and start implementation	Finish implementation
<b>Microsoft 365 Services</b>	Complete new Enterprise Agreement	New Enterprise Agreement assessed, and adoption strategy developed for new products				
	Complete replacement of domain controllers (authentication servers) across NHS Wales and undertake Risk Assessment exercise					
	Public Key Infrastructure (PKI): Upgrade completed and validated					
	Establish a steering group and agree initial service improvement activities		Implement the agreed service improvement activities			
<b>Digital Workplace</b>		Complete discovery, finalise requirements and start procurement of a new managed print service for GP Practices			Complete procurement and start deployment	
	Deploy and configure endpoint privilege management (EPM) solution					
	Complete targeted device replacement in DHCW	Start device refresh programme for GPs, DHCW and other organisations			Continued device refresh programme	Continued device refresh programme
	Develop cloud-native solution for provisioning PCs and laptops in all supported organisations		Deploy new provisioning process for all new PC and laptop deployments			
	Undertake a discovery exercise, to inform the development of a national, data-driven, and sustainable strategy for optimising PC/laptop procurement and management					
<b>Cloud Transition Programme</b> (*NDA)	Wave 2 cloud migrations	Wave 3 cloud migrations	Wave 4 cloud migrations	Wave 5 cloud migrations	Wave 6-8 cloud migrations	Wave 9 and final cloud migrations and project closure

### WG Policy Context



- Cyber Resilience Bill – new statutory duties and national reporting requirements
- Network and Information Systems (NIS) Regulations and NCSC Cyber Assessment Framework (CAF) compliance requirements
- UK Cyber Strategy for Health and Care (2023)
- ISO 27001 and DHCW governance commitments
- Escalating threat landscape and supply-chain risk
- Secure-by-design link to Cloud and AI programmes
- National Digital Architecture – alignment with agreed national digital and cyber architecture standards.

### DHCW Strategic Objectives

- Impacting on all strategic objectives

### Stakeholder and User Needs

- Protect the confidentiality, integrity and availability of NHS Wales data and services
- Provide strong cyber leadership, awareness and culture
- Ensure compliance with national regulations and standards
- Provide security assurance for critical services and infrastructure
- Enable secure adoption of emerging technologies and services

### Delivery Priorities for 2026-29



#### Products and Services

**Cyber Resilience and Incident Response:** Protect NHS Wales systems and data by leading national detection, response, and recovery activities.

**Cyber Compliance:** Operate the Cyber Resilience Unit on behalf of Welsh Ministers to assess and report compliance with the NIS Regulations and the NCSC Cyber Assessment Framework (CAF) across NHS Wales. Develop and support the audit and assurance elements of DHCW's Information Security Management System. Maintain compliance with the Code of Conduct for Cyber Security for AI, including ongoing staff training and awareness.

**Awareness and Leadership:** Promote strong cyber leadership, accountability, and a positive security culture across NHS Wales.

**Cyber Assurance:** Provide assurance for national services and supporting infrastructure. Define and maintain hardware and software security standards across NHS Wales. Deliver third-party and supply-chain cyber security assurance.

**Cyber Operations:** Protect national clinical and business systems developed and hosted by DHCW through effective monitoring, detection, and response. Increase automation and the use of advanced analytics within the National Cyber Security Operations Centre (CSOC) to improve the speed, consistency, and effectiveness of national cyber threat detection and response.

#### Programmes and Projects

##### SIEM (Security Information and Event Management) Platform Extension Programme

Renew and enhance the national SIEM service to maintain and improve cyber monitoring, threat detection, and national visibility across NHS Wales.

### Value and Outcomes

- Aligned with NHS Wales national cyber standards and legislation
- Reduced cyber incident detection and response times
- Enhanced assurance and visibility through increased automation and AI analytics
- Secure-by-design adoption across all digital, cloud and AI-enabled programmes
- Stronger cyber culture and more visible leadership across NHS Wales

### Potential Value Opportunities

- Implement legislative and operational changes required by the Cyber Resilience Bill
- Update NHS Wales Cyber Mandatory Training to include AI security and responsible use of AI
- Deliver AI-driven threat detection and assurance for monitoring AI use in NHS Wales
- Strengthen secure access for suppliers, partners and privileged users
- Embed security requirements within the Cloud Transition Programme
- Implement recommendations from national cyber resilience and ransomware exercises
- Increase automation within the National Cyber Security Operations Centre to improve the speed, consistency, and effectiveness of cyber threat detection and response

# 1.4 Cyber Security and Resilience

Annual Plan

IMTP

Key: \*NDA = National Digital Architecture

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Cyber Resilience and Incident response</b> (*NDA)	Establish Cyber Resilience Bill implementation plan and governance group		Deliver National Cyber Incident Response Exercise (multi-organisation)	Implement recommendations from ransomware and incident-response exercises		
<b>Cyber Compliance</b>				Complete first Cyber Resilience Bill compliance reporting cycle and submit to Welsh Government		
<b>Awareness and Leadership</b>	Deliver a year-round national cyber awareness and assurance programme for all DHCW staff and participating NHS Wales organisations					
	Continued Visible leadership via Chair and Senior Leaders forum ensuring all Health Boards and Trusts understand the risks associated with Cyber vulnerabilities for patients and staff, to include cyber security in AI.					
<b>Cyber Assurance</b> (*NDA)		Establish AI Monitoring and Assurance Framework for DHCW and NHS Wales				
<b>Cyber Operations</b> (*NDA)	Deploy automation and advanced analytics across DHCW and NHS Wales to enhance national threat detection and response					
	Implement additional machine learning/ AI automation					
	Implement security requirements of the DHCW Cloud Transition Programme					
	Improve the security and control of supplier access to NHS Wales systems					
	Enhance the security and oversight of user access and credentials across DHCW by strengthening privileged access, password management, and endpoint controls.					
<b>SIEM (Security Information and Event Management) Platform Extension Programme</b>	National SIEM re-procurement / extension					



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and Care Wales

# Mission 2

**DELIVER high quality digital products and services for health and care professionals**

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

### WG Policy Context



- Public Health Wales Strategy 2023-2035
- National Immunisation Framework for Wales 2022
- HL7 FHIR foundational standard (All NHS Wales bodies)
- Integrated Health For and In our Communities WG paper
- Community By Design

### DHCW Strategic Objectives

- All prescribing and medicines management in Wales is digitally enabled
- All our digital health systems and major social care systems flow data to and from the NDR platform

### Stakeholder and User Needs

- Frontline staff need fast, reliable workflows that fit clinical reality
- System leaders and delivery partners need trustworthy, timely data
- Citizens need confidence, clarity and minimal friction

### Delivery Priorities for 2026-29



#### Products and Services

- **Vaccine services:** continuing the iterative development of our Welsh Immunisation System product by expanding our core platform to manage migration of childhood and other Green Book vaccines and expanding the service to support prevention-based health and care.
- **Other public health services:** Support routine and planned requirements such as adult screening digital services (AAA and bowel), child health and public health promotion websites. This work will support the early detection of some health conditions, creating opportunities for early intervention and improved outcomes.
- **Community by Design:** Work with the Community by Design programme in the creation of an enabling digital and data delivery plan to support the prevention and public health management agenda and for NHS Wales.

### Value and Outcomes

- Ensuring a responsive and sustainable technology platform for vaccinations which users can rely on and enable faster onboarding of new products or campaigns.
- Providing digital and data services to screening programmes which aim to diagnose faster to improve survival outcomes.
- Helping to evidence how public health actions are impacting on viral transmission.
- Improved uptake of vaccinations means better vaccination intelligence to enable education and public confidence.

### Potential Value Opportunities

- Child health discovery
- AI opportunities around stratification and surveillance, predictive intelligence for future outbreaks and genomics AI risk based cohorting
- Discovery to streamline digital school consent, improve sustainability, and meet school and parent expectations (*See Portfolio 2.2 Primary Care Value Opportunities*)

## 2.1 Prevention and Public Health

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Welsh Immunisation System</b>		Discovery and Alpha on moving school age vaccine programmes to the Welsh Immunisation System			Beta for School Age programmes to Welsh Immunisation System	
	Ongoing product development and continual improvement of the Welsh Immunisation System					
<b>Other Public Health / Screening</b>	Support and deliver agreed priority requirements on Abdominal Aortic Aneurysm (AAA) Screening Information Management System (ASIMS)					
	Support and deliver agreed priority requirements on Bowel Screening Information Management System (BSIMS)					
	Support and deliver agreed priority requirements for population health management, as the digital lead in partnership with WG					

### WG Policy Context



- Community by Design - delivering care closer to home, with prevention, early intervention and wellbeing at its core
- NHS Primary Care Contract Reform
- DHCW Primary Care Strategy
- Digital and Data Strategy for Health and Social Care 2023

### DHCW Strategic Objectives

- All our digital health systems and major social care systems flow data to and from the NDR platform
- Establish an all-Wales framework for sharing health and social care data
- A comprehensive single digital health and care record is used across all settings throughout Wales
- Users report a top-quartile satisfaction for our products and services

### Stakeholder and User Needs

- More time freed up for clinical care by making digital processes quicker and easier
- Data to be shared safely so clinicians in cluster and community settings can provide better care
- Systems and platforms must be secure, reliable, and help staff provide care efficiently
- Data should be available and used to help plan and coordinate care

### Delivery Priorities for 2026-29



#### Products and Services

- **Choose Pharmacy:** Continue platform modernisation and a new user centred replacement, ensuring a stable service, built to modern standards for interoperability to give clinicians access to all available information for patients in one centralised hub.
- **Community Pharmacy:** Complete a discovery to identify opportunities to create value by improving integration, reducing inefficiencies for pharmacists, supporting the establishment of community pharmacy as a digital service
- **General Medical Services:** Provide effective digital systems and services that support primary care service users in providing clinical care, to be measured by improved user satisfaction and meeting the service key performance indicators.
- **Dental Digital Services:** Develop the dental service provision to include access to data, e-referrals and ongoing support of the Dental Access Portal (*see Portfolio 3.1 Patient Facing Products and Services*)

#### Programmes and Projects

- **General Medical Services:** Complete the transition of GP practices to a single supplier executing against agreed targets to ensure sustainable GP services. We will continue to develop, build on and future proof services; this includes developing a replacement service for analysis and provision of GP data.
- **Eyecare Referrals:** Support the implementation of eyecare referrals for Health Boards and community optometry practices

### Value and Outcomes

- Enabling service transformation through digital opportunities
- Delivery of products and services that support end users in their day-to-day work delivering patient care, informed by user-centred design
- Deriving intelligence from data through integrated and enhanced analytics

### Potential Value Opportunities

- Design solutions and guidance to support contract reforms and improve access, quality, and sustainability in primary care
- Expand use of Ambient Voice Technology to save time and improve patient experience
- Scope an approach for accredited self-care apps to support self-management and reduce frontline demand
- Develop demand-management/triage approaches to support care navigation, improve access and waiting times
- Scope care-home and domiciliary medicines management to make processes safer, more efficient, and reduce errors
- Discovery to streamline digital school consent, improve sustainability, and meet school and parent expectations (*see Portfolio 2.1 Prevention and Public Health*)
- Work with the Chief Digital Officer and HEIW on the Digital Future Roadmap to build digital skills and sustain adoption.

## 2.2 Primary Care

	Annual Plan				IMTP	
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Choose Pharmacy</b>			Choose Pharmacy re-platform go live. Integration with Shared Medicines Record available.		Develop further Choose Pharmacy integrations with other systems	
				Choose Pharmacy dashboards available.		
<b>Community pharmacy</b>	Undertake a discovery to identify opportunities to create value by improving integration, reducing inefficiencies for pharmacists.					
<b>General medical services (operational)</b>	Operational support to primary care through management of GP systems suppliers and contracts.					
<b>Dental digital services</b>	Dental activity data dashboards available					
	Ongoing support of dental access portal					
<b>General medical services (programmes)</b>	Complete migration of GP practices to new systems		Initiate discovery work for GP2GP cross border: electronic transfer of GP patient records			
	Full GP clinical system migration to cloud complete.					
		Replacement service for analysis and provision of GP data- minimal viable product available for first GP practice		Replacement service for analysis and provision of GP data- minimal viable product available to all GP practices		
<b>Eyecare referrals</b>		All HBs and community optometrists using eyecare referral system				

### WG Policy Context



- Mental Health and Wellbeing Strategy 2024 -2034
- Suicide and Self Harm Prevention Strategy 2024-2034
- Community By Design - delivering care closer to home, with prevention, early intervention and wellbeing at its core

### DHCW Strategic Objectives

- All our digital health systems and major social care systems flow data to and from the NDR platform
- Establish an All-Wales framework for sharing health and social care data
- A comprehensive single digital health and care record is used across all settings throughout Wales

### Stakeholder and User Needs

- Support the service transformation to enable more place and community based care
- Provide a secure digital record that supports safe, high-quality community and mental health care

### Delivery Priorities for 2026-29



#### Programmes and Projects

- **Community by Design Digital and Data Plan:** Collaborate with the Community by Design programme on the creation of a service design and a digital and data plan to support the service transformation.
- **Connecting Care:** Delivery of the DHCW elements against a Welsh Government agreed Connecting Care delivery plan, supporting the replacement of the Care Director system through the provision of Mental and Community Health products improving standardisation, usability and interoperability through data standards and integration.
- **Integrated Care Record View:** support integrated patient pathways through the development of the digital capability to access data from multiple systems across mental health, community and social care sectors to make available at the point of care the data and information necessary to work collaboratively across teams, improve care decision making, reduce risk to the citizen and improve their experience.
- **Mental Health Data and Delivery Plan:** Collaborate with the Strategic Programme for Mental Health and Welsh Government on the delivery of the Mental Health Digital and Data plan.
- **Community Data Standards :** Deliver a consistent data model to enable interoperability between community services.

### Value and Outcomes

- Service transformation through digital opportunities.
- Delivery of products and services that support end users in their day-to-day work delivering patient care, informed by user-centred design
- Deriving intelligence from data through integrated and enhanced analytics
- Enabling optimum decision making based on shared, standardised information between community health and social care

### Potential Value Opportunities

- Explore opportunities for AI in Community and Mental Health
- Explore opportunities for improved workforce planning enabled by the implementation of new community and mental health applications
- Create a framework for the validation and delivery at scale of people facing self-help and support applications to support digital pathways in areas such as mental health and weight management

## 2.3 Community and Mental Health

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Community by Design Digital and Data Plan</b>	Collaborate with Welsh Government on the production of the Community by Design Digital and Data Plan		Support the delivery of DHCW responsibilities in the Community by Design Digital and Data Plan		Support the delivery of DHCW responsibilities in the Community by Design Digital and Data Plan	
<b>Connecting Care</b>	Support HBs to award first Connecting Care contract	Supporting HB to deliver their Connecting Care implementation plans			Supporting HB to deliver their Connecting Care implementation plans	
				Complete planning and initiate exit activities from existing community and social care product		
<b>Integrated Care Record View</b>	Initiate the delivery following the outcome of the Integrated Care Record Outline Business Case submission		Commence delivery of the Integrated Care Record priority deliverables		Continue to deliver the Integrated Care Record deliverables	
<b>Mental Health Digital and Data Delivery Plan</b>	Collaborate with Welsh Government on the production of the Mental Health Digital and Data Plan	Support the delivery of DHCW responsibilities in the Mental Health Digital and Data Plan			Support the delivery of DHCW responsibilities in the Mental Health Digital and Data Plan	
<b>Community data standards</b>			Minimum operational community dataset to support interoperability between systems			

# Mission 2 :

## Portfolio 2.4 Planned Care

## Value and Outcomes

### WG Policy Context



- Planned Care - Transforming and modernising planned care and reducing NHS waiting lists
- A Healthier Wales 2021
- A Cancer Improvement Plan for NHS Wales 2023 – 2026
- National Clinical Framework 2021

### DHCW Strategic Objectives

- A comprehensive single digital health and care record is used across all settings throughout Wales
- Users report a top-quartile satisfaction for our products and services
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects
- Move all our data stores and services to the NDR platform to create a single national Clinical Data Repository

### Stakeholder and User Needs

- Shorter waiting times for elective procedures
- Effective use of clinical time and capacity (increase high volume low complexity procedures, theatre optimisation etc)

### Delivery Priorities for 2026-29



#### Products and Services

- **Modernisation of Planned Care Data Standards:** Develop and publish datasets that directly support the planned care policy agenda, in collaboration with stakeholders

#### Single Record

- **Implementation of Planned Care Data Standards:** Enable NHS staff to record planned care datasets through single record products.
- **Streamline Patient Record Workflows:** Improving where patients go through standardisation (including data and processes), capacity, and cross-border workflows. Standardise pathways and identifiers, unify administrative processes, and use real-time analytics to manage national capacity and support reduction of waiting times, from referrals and appointments to specialist healthcare and treatment plans.
- **Enhancing Specialist Healthcare:** Improving specialist collaboration through standardised pathways, multi-disciplinary teams (MDT) efficiency, and compliant datasets. Modernise and unify specialist pathways and datasets, integrate them into the Single Patient Record and NDR, and strengthen MDT decision-making across oncology, diabetes, palliative care, and related services.
- **Expanding Nursing Care Record:** Improving how nurses care, through real-time safety, digital risk assessment, and national standardisation. Delivering a fully digital, cloud-ready national nursing record across adult and paediatric care, enabling real-time safety intelligence, mobile documentation, and seamless interoperability.

#### Programmes and Projects

- **Women's Health:** Enable the use of digital technology to improve women's health including improved data collections, online information and digital tools
- **Strategic Programme for Planned Care:** Supporting the delivery of digital initiatives from the Strategic Programme for Planned Care to transform and modernise planned care and reduce waiting lists in Wales.

- **Faster, safer diagnostics:** Improved access to diagnostics enables earlier treatment and reduces unnecessary repeat procedures, minimising patient risk.
- **Streamlined clinical documentation:** Digital documents replace paper records, improving accessibility and continuity of care across NHS Wales.
- **Efficient information sharing:** Electronic access to patient information, such as current medications, reduces time spent on calls and supports informed decisions across care settings.
- **Increased health service capacity:** Digital innovations help expand the capacity of the health service to meet growing demand with resources prioritised for those in most need.

### Potential Value Opportunities

- Patient Flow
- PROMs and PREMs to understand linking outcomes to delivery and value
- Electronic Health Records
- E-Consent
- Authentication to Medical Certificate Cause of Death system
- AI enabled solution Cancer multi disciplinary team (MTD) pilot
- Ambient technology and referrals data improvement and waiting list validation
- Bedside Observations
- Planned care use case of NHS Wales App
- Opportunities identified by Single Record product board
- Improved clinical coding (*See Portfolios 1.1 and 4.2*)

## 2.4 Planned Care

	Annual Plan				IMTP		
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29	
<b>Modernisation of Planned Care Data Standards</b>	Support the development of Data Sets for Planned Care Policy				Further development to data sets to support the modernisation of Planned Care Data Standards		
	Development and maintenance of Proms (Patient Reported Outcome Measures) data standards						
	Deliver new cancer data set forms aligned to audit and clinical network requirements						
<b>Implementation of Planned Care Data Standards</b>	Implement new Planned Care datasets to comply with Planned Care data standards						
<b>Streamline Patient Record Workflows</b>	Standardise pathways and identifiers to unify administrative processes across secondary healthcare.				Further enhancements to single record products to support improvements in patient outcomes and further optimisation of patient record workflows.		
	Expand Hospital Initiated Referrals (HIR) adoption across Health Boards/Trusts and enhance functionality to improve timely access to care.						
	Discovery to enable regional clinic appointments to reduce referral waiting list lead times and utilise available clinic appointments in neighbouring Health Boards and Trusts.					Minimise duplication in managing patient pathways across Welsh Health Board Boundaries.	
<b>Enhancing Specialist Healthcare</b>	Enhance the Multi-Disciplinary Team (MDT) functionality and experience for cancer and palliative care specialists				Further enhancements and expansion to single record products to support specialist healthcare functionality such as cancer, palliative care and diabetes.		
	Expand the speciality healthcare functionality to optimise secondary healthcare operations across cancer, diabetes and palliative care.						
	Implement new national cancer data sets to comply with cancer data standards.						
	Implement new national diabetes data sets to comply with diabetes data standards.						
<b>Expanding Nursing Care Record</b>	Launch, validate and iterate the paediatric nursing care record and onboard 6 health boards to enable digital operations nationally.				Further enhancements to nursing care record, including mobile to improve quality of care through alerts and patient insights.		
	Expand the adult nursing care record to increase the digital patient record and optimise secondary healthcare operations to enable continued digital adoption.						
<b>Women's Health</b>	Supporting the ongoing development of the Women's Health Hubs, expanding provision of information via the website and developing approaches for better data linkages – Women's Health Network						
<b>Strategic Programme for Planned Care</b>	Progress the delivery of the all-Wales perioperative digital system, based on the outcomes of the business case process.						
	Discovery for e-consent to inform production of business case						
	Explore opportunities to use AI to support planned care initiatives including referrals, waiting lists and outpatient solutions						

### WG Policy Context



- Six Goals for Urgent and Emergency care (2021 – 2026)
- Quality Statement for Care of the Critically Ill (2021)
- Critical Care, Trauma and Emergency Medicine Network – Medium Term Plan, October 2024
- Quality Statement for Care in Emergency Departments (2024)
- Serious Violence Duty Statutory Guidance (2022)

### DHCW Strategic Objectives

- Move all our data stores and services to the NDR platform to create a single national clinical data repository
- All our digital health systems and major social care systems flow data to and from the NDR platform

### Stakeholder and User Needs

- Rapidly improve patient flow
- Deliver Medical Same Day Emergency Care (SDEC) at hospital front doors in line with national policy and the Six Goals programme.
- Enable 6 Goals for Urgent and Emergency Care to report on key data sets

### Delivery Priorities for 2026-29



#### Products and Services

- **Urgent and emergency care data standards service:** Ensuring consistency of a unified data set, securing standardised reporting to improve patient flow.

#### Single Record

- **Modernising Urgent and Emergency Healthcare:** A continually improving Emergency Department solution within the Welsh Clinical Portal, using real user insight to refine workflows and visibility, delivering a consistent, efficient digital experience that supports better patient outcomes across Wales.
- **Welsh Intensive Care Information Service:** Upon commencement of implementation, achieve service availability and live support targets for adopting Health Boards.

#### Programmes and Projects

- **Welsh Emergency Care Dataset (WECDS) Programme:** Deliver a solution to capture and make available the Welsh Emergency Care Data Set (WECDS) to achieve quality of care benchmarking and data insights.
- **Welsh Intensive Care Information System:** Improve and implement the collation and access to clinical information as well as real time data capture from bedside devices in intensive care units by implementing a fully managed electronic solution, capable of replacing all paper charts currently used for recording patient observations.

### Value and Outcomes

#### Product

Existing Welsh Patient Administration System customers have adopted the latest product iteration for urgent and emergency healthcare, enabling

- Welsh Emergency Care Data Set Standards (including SNOMED) to be established across emergency departments and minor injury units for NHS Wales and accessible via the National Data Resources for national business intelligence and management information purposes
- Welsh emergency care departments to be streamlined to optimise the clerical and clinical experience, helping improve the workflow to support smoother movement through unplanned care, to enhance the overall patient experience.

#### Programme

Better access, availability and analysis for urgent and emergency care data between care settings supports the Six Goals Programme, including, but not limited to:

- Management of high intensity service users.
- Public health syndromic surveillance – identifying public health issues based on collation of presenting complaint data.
- Enablement of violence prevention activity based on injury location.

### Potential Value Opportunities

- Discovery – digital support for urgent treatment centre development
- Discovery – deconditioning tool digitisation
- Directory of services – phase 1 support
- Discovery/consolidation – bed management and patient flow capabilities across Wales and potential for consolidation, building on 6 Goals and Welsh Government requirements.

These pipeline opportunities will also help optimise the experience for patients in planned care.

## 2.5 Urgent and Emergency Care

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Urgent and Emergency Data Standards Service</b>	Supporting business change for new Urgent and Emergency Healthcare App rollout across Health Board emergency departments					
	Supporting WG policy and the Six Goals programme with development of data sets, eg – 111, 999, Single Point of Access (SPOA), Discharge to Recover and Assess (D2RA) and Same Day Emergency Care (SDEC) etc and supporting the business change/ implementation of the data sets.					
		Review the Welsh Emergency Care Data Sets (WECDS) after implementation.		Develop a secondary uses data set for the usage of WECDS data to replace Emergency Department Data Set (EDDS)		
<b>Modernising Urgent and Emergency Healthcare</b>	Launch, validate and iterate the Urgent & Emergency App and onboard relevant health boards, enhancing digital operations across Emergency Departments.				Deliver Urgent and Emergency App / Single Record prioritised enhancements	
	Establish operational data pipelines for National Data Resource enablement (Six Goals) and ED performance insights.					
		Explore expanding the use of hospital initiated referrals from urgent care settings				
<b>Welsh Intensive Care Information Service</b>				Readiness to commence operational support for the Welsh Intensive Care Information System (WICIS) in line with planned implementations	Continued operational support for the WICIS solution	
		Explore the opportunity for use of the Welsh Nursing Care Record in critical care settings in conjunction with use of WICIS				
<b>Welsh Emergency Care Dataset Programme including the Urgent and Emergency Care App</b>	Develop a unified Welsh Emergency Care Data Set dashboard to integrate operational, clinical, audit, and secondary use data for strategic and operational intelligence including the use of AI				Further dashboards of emergency data	
	Support all sites in scope to implement WECDS including Same Day Emergency Care (SDEC) settings, including enhancement/development of the Urgent and Emergency App where required					
<b>Welsh Intensive Care Information System</b>	Readiness to commence operational support for the Welsh Intensive Care Information System (WICIS) in line with planned implementations					

### WG Policy Context



- Pathology Statement of Intent- Development of high quality, effective and resilient pathology services
- Imaging Statement of Intent - New strategic approach to the development of high quality, effective and sustainable imaging services for NHS Wales

### DHCW Strategic Objectives

- Move all our data stores and services to the NDR platform to create a single national clinical data repository
- All our digital health systems and major social care systems flow data to and from the NDR platform

### Stakeholder and User Needs

- Fast access to prior cases, results and images
- Minimal clicks, reduced data entry and duplication
- Clear concise and meaningful reporting

### Delivery Priorities for 2026-29



#### Products and Services

- **Laboratory Information Management System:** Ensure that the LIMS 2.0 system is effectively received into operational service, supporting and adapting to daily lab operations without disruption, as the previous version is safely retired.
- **Radiology Systems:** Ensure that the radiology service remains fully operational, supporting the daily workflow of radiology departments without interruption, and the RADIS legacy system is safely decommissioned following full implementation of new systems.
- **Electronic Test Requesting and Results Notifications:** Develop modern, integrated electronic test request and results solutions to reduce rejected samples and delays, enhancing data quality and service efficiency.

#### Programmes and Projects

- **Laboratory Information System:** Implement the final disciplines of LIMS 2.0 System and transition to service.
- Commence re-procurement readiness of **LIMS 3.0** as the contract expires in 2030.
- Support the implementation of the Infected Blood Inquiry recommendations as approved in the Business Case.
- **Radiology Information System Programme:** Complete support for local implementation (integrations, data migration connectivity) of a new radiology system across Wales and commence reprocurement readiness of **RISP 2.0** as contract expires in 2032.
- **Welsh Point of Care Testing:** Procure and implement and support a new point of care solution for secondary care. Consider any requested scope extension to include primary care which will provide immediate access to up to date clinical data.
- **Cardiac PACs:** Procure and implement a national Cardiac PACs solution.
- **Digital Cellular Pathology.** Support the outcome of the NHS Wales business case for the procurement of a replacement digital cellular pathology solution.

### Value and Outcomes

- Better access to test results improving patient care and contributing to earlier and preventative diagnosis.
- Improving clinical safety.
- Improving service performance.
- Improving information sharing across boundaries and single solution for storage and distribution of imaging.

## 2.6 Diagnostics

	Annual Plan				IMTP	
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Laboratory Information Systems services</b>			Complete effective and safe receipt of handover of LIMS 2.0 system to operation.	Decommission legacy laboratory information management system (LIMS 1.0) for live use preventing further updates		
<b>Radiology Information Systems services</b>	Safely exit and decommission RADIS subject to full implementation of Radiology service with remaining Health Boards/Trusts					
<b>Electronic Test Requesting and Results Notification</b>	<b>Electronic test requesting and results notification and electronic sign off</b> expanded across secondary and primary care, to cover specialties such as genomics discovery, cardiology, gynaecology, cytology, radiology into primary care, endoscopy, histology, phlebotomy, spirometry, and integration with the new radiology system.					
		Decommission PACS mobility viewer in Welsh Clinical Portal				
<b>Laboratory Information System Programme</b>	Programme management of replacement laboratory information management system go lives including Blood Transfusion and remaining disciplines (Microbiology and Blood Sciences)		Complete effective and safe handover of LIMS 2.0 system to operation			
	Support the Welsh Blood Service and Health/Board Trusts implementation of Infected Blood Inquiry recommendations					
				Complete draft business case for LIMS 3.0	LIMS 3.0 procurement readiness and initiation	
<b>Radiology Information System Programme</b>	Support remaining organisations to go live with a new radiology system			Commence draft business case for new RISP 2.0	Readiness to commence for RISP 2.0 procurement	RISP 2.0 procurement to commence
<b>Welsh Point of Care Testing</b>		Commence procurement of new Welsh Point of Care Testing solution			Solution in place for Welsh Point of Care Testing contract expiry	
<b>Cardiac PACS</b>	Discovery for a national Cardiac PACS solution	Commence draft of full business case for new Cardiac PACS	Readiness to commence procurement for Cardiac PACS	Cardiac PACS procurement to commence	Conclude Cardiac PACS procurement commence implementation	Implement Cardiac PACS

### WG Policy Context



- Welsh Government Review of E-prescribing 2021
- Pharmacy Delivering a Healthier Wales 2028 Goals
- Optimising pharmacy services at hospital discharge to improve patient flow 2022
- Independent Review of Clinical Pharmacy Services at NHS Hospitals in Wales – WG response Sept 2023
- Welsh Government – Programme for Government
- A New Prescription: The Future of Community Pharmacy in Wales (Welsh Government, 2021)
- NHS Wales Pharmacogenomics Delivery Plan

### DHCW Strategic Objectives

- All prescribing and medicines management in Wales is digitally enabled
- All our digital health systems and major social care systems flow data to and from the NDR platform
- Move all our live services to the cloud and close our datacentres
- Move all our data stores and services to the NDR platform to create a single national clinical data repository
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects.

### Stakeholder and User Needs

- Ability to share information with care professionals digitally
- Access to a consolidated medicines record at the point of care
- Clinical decision support during prescribing to enhance patient safety
- Reduced reliance on paper processes for prescribing and administering medicines

### Delivery Priorities for 2026-29



#### Products and Services

- **Welsh Hospital Pharmacy Stock Management System:** to ensure that the Welsh Hospital Pharmacy Stock Management System continues to function reliably in a secure environment, with timely contract re-procurement, and is interoperable with the digital architecture supporting wider pharmacy services.
- **Other Medicines Services:** To ensure that DHCW medicines services continue to function reliably supporting timely and effective supplementary medicines administration activities.
- **Electronic Prescription Service:** Successfully transitioning into a business as usual operating model for EPS prescriptions sent digitally from GP practices to community pharmacies / dispensers.
- **E-prescribing and Medicines Administration:** provision of integrations and ongoing support to organisations implementing EPMA systems to enable use and to allow medicines, allergies and intolerances information to be shared across settings and national/local systems.

*(See also Portfolio 2.2 Primary Care for community pharmacy)*

#### Programmes and Projects

- **Electronic Prescription Service (EPS):** Complete national roll out across all GP practices in Wales to digitally send prescriptions between GP practices and community pharmacies/dispensers. Explore opportunities to expand EPS into secondary care.
- **E-prescribing and Medicines Administration:** Delivering the national technical integrations and Application Programming Interfaces (APIs) to enable ePMAs procured from the national framework to integrate with the national architecture including reading and writing data into the Shared Medicines Record.
- Coordinate the national sharing of experiences, knowledge, lessons learned and best practice with Health Boards/Trusts through the Community of Knowledge and Action (CoKA) group.

### Value and Outcomes

**Operational Support:** Delivering reliable IT support and innovative software solutions that enhance system performance, user experience, and organisational growth.

**Cloud migration:** Accelerating digital innovation and efficiency by migrating products to the Cloud, enabling scalability and flexibility, cost efficiency, improving delivery speed, whilst supporting environmental sustainability.

**Common Ailments Service (CAS) Inform Admin Function:** Enabling faster data updates and improve overall efficiency, allowing All Wales Therapeutics and Toxicology Centre (AWTTC) users to manage the CAS formulary directly, reducing delays and cutting support calls by 5%.

#### Electronic Prescription Service:

- Removing need to print and wet sign prescriptions, freeing up clinical time
- Patients and pharmacies no longer need to visit a surgery to collect prescriptions
- End-to-end prescription tracking providing full visibility and traceability of a prescription
- Reduction in lost/misplaced paper prescriptions improving experience

#### E-prescribing and medicines administration:

- Improving antimicrobial stewardship, reducing inappropriate antibiotic use
- Clearer and more accurate medicines records including medicines administration statuses
- Reducing prescribing errors associated with handwriting and transcription
- Sharing data with the National Data Resource to contribute to a consolidated medicines, allergies and intolerances record

## Potential Value Opportunities

- **Expanding the Electronic Prescription Service (EPS)** to GP out of hours, urgent primary care settings, prison health services, hospital outpatient departments, homecare, non-medical prescribers to enable prescriptions to be sent digitally to a patient's nominated pharmacy, releasing clinical time spent on printing, signing and sending paper prescriptions.
- Procuring an interoperable **Systemic Anti-Cancer Therapies (SACT)** electronic Prescribing and Medicines Administration (ePMA) solution that contributes data to the Shared Medicines Record (SMR), supporting a consolidated medicines record accessible at the point of care, removing data silos and manual transcription between systems.
- Introducing an interoperable **ePMA solution for Welsh Ambulance Service Trust (WAST)**, ensuring medicines information flows into the SMR to support a consolidated medicines record, improving information sharing during transfers of care to improve patient safety.
- **Extending electronic prescribing** into primary and community care non medical prescribers to improve prescribing quality, safety and efficiency.
- **Extending electronic medicines administration** to care homes, domiciliary care providers and patients to share medicines information with the SMR to contribute to consolidated medicines record.
- **Integrating ePMAs with high-cost drugs management systems** to record use, reducing administrative burden, freeing up clinical time, and removing the need to manually transcribe medicines information between systems.
- **Integrating ePMA with the Pharmacy Stock Control System** for medicines not stocked on wards (closed loop medicines), enabling full digital ordering and removing the need to print and physically deliver orders to pharmacy departments.
- Introducing an electronic **Medicines Administration Record (e-MAR) for community care** with SMR integration to reduce risks of transcription errors and strengthening the consolidated medicines record.
- **Integrating Homecare medicine workflows with the Pharmacy Stock Control System** stock to release time, streamline workflows and improve operational efficiency and sustainability.
- **Integrating the Transforming Access to Medicines (TRAMS)** solution to the national digital architecture to support a more efficient, resilient and consistent supply of medicines across Wales.
- Providing access to **advanced decision support based on pharmacogenomics** test results to enhance patient safety and to support more precise and personalised prescribing for better patient outcomes.
- A dedicated **data and reporting** offering to promote a national approach to analysing and reporting on pharmacy data.
- **AI Opportunities:**
  - **GP assisted annual prescriptions** for stable conditions
  - Artificial Intelligence **stock forecasting** to improve efficiency in the stock supply chain
  - Patient **risk stratification**
  - AI assistance embedded in **ePMA** applications

## 2.7 Medicines

	Annual Plan				IMTP	
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Pharmacy Stock Control</b>		Assessing options for end of Welsh Hospital Pharmacy Stock Management System contract		Complete business case for Welsh Hospital Pharmacy Stock Management System reprourement		
		Complete migration to cloud for Welsh Hospital Pharmacy Stock Management System				
<b>Other Medicines Services</b>	Migration of the Welsh Medicines Service (WMEs), Individual patient funding requests application (IPFR), formulary management system (Inform), and SQL server reporting services to the cloud	Develop Common Ailments Service Inform admin function	Hospital Pharmacy Services Migration to Cloud			
	Ongoing business as usual for other medicines systems : Qpulse - document system (3rd party); COPPS - computerised outpatient printing service; Medicines Information Databank (3rd party)					
<b>Electronic Prescription Service</b>			Electronic Prescription Service (prescriptions from GP practices to pharmacy/dispenser) transitioned to a business as usual supported service	Ongoing Electronic Prescription Service support	Ongoing Electronic Prescription Service support	Ongoing Electronic Prescription Service support
<b>E - prescribing and Medicines Administration Service</b>	Providing operational support for ePMA integrations				Providing operational support for ePMA integrations	Providing operational support for ePMA integrations
<b>Electronic Prescription Service (Programme)</b>	Electronic Prescription Service live in phase 5 GP sites across Wales (228)	Electronic Prescription Service live in phase 6 GP sites across Wales (318)	Electronic Prescription Service live in phase 7 GP sites across Wales (371) – GP roll out complete	Closure of EPS tranche 1 (GPs, community pharmacies and dispensing appliance contractors)		
		Assurance for using EPS in GP Out of Hours completed	Assurance of bulk signing of prescriptions from within GP system completed			
<b>E - prescribing and Medicines Administration (Programme)</b>	Deliver integration Application Programming Interfaces (APIs) enabling health board/trust ePMA systems to connect to national architecture	Deliver integration Application Programming Interfaces (APIs) enabling health board/trust ePMA systems to connect to national architecture	Deliver integration Application Programming Interfaces (APIs) enabling health board/trust ePMA systems to connect to national architecture	Deliver integration Application Programming Interfaces (APIs) enabling health board/trust ePMA systems to connect to national architecture		
	E-prescribing in secondary care - Coordinate the sharing of experiences, knowledge, lessons learned and best practice with Health Boards through communities of practice, forums of learning and events to support readiness and roll out activities					
		Electronic Prescription Service: route to assurance for using EPS in hospital outpatients determined				



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NHS  
WALES

Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

# Mission 3

**DELIVER** high quality digital  
products and services for  
patients and the public

## 3.1 Patient Facing Products and Services

# Mission 3

## Portfolio 3.1 Patient Facing Products and Services

### WG Policy Context



- A Healthier Wales
- Digital and Data Strategy for Health and Social Care in Wales 2023
- Promote, prevent and prepare for planned care (3Ps policy)
- Community by Design - delivering care closer to home, with prevention, early intervention and wellbeing at its core

### DHCW Strategic Objectives

- The NHS Wales App is used regularly by over a million people
- Users report a top-quartile satisfaction for our products and services

### Stakeholder and User Needs

- Greater access and visibility of health and care information held about an individual
- Ability to share information with care professionals
- Increased involvement in management of own health and wellbeing

### Delivery Priorities for 2026-29



#### Products and Services

- **NHS Wales App:** Develop the NHS Wales App to drive forward service transformation, support Community by Design and empower patients to manage their health and well-being, whilst maintaining reliability and scalability of live service.
- **Dental Access Portal:** Support and enhance the dental access portal providing access to an NHS dentist in Wales for routine dental treatment



### Value and Outcomes

- **Improved patient empowerment:** give patients easy access to their health records and services, encouraging active involvement in their care and better health outcomes.
- **Enhanced communication:** enable smoother communication between patients and health and care providers, improving overall experience and satisfaction, reducing costs in future .
- **Greater efficiency:** digitise tasks to streamlines patient flow, reduce non-attendance, reduce in person contact, ease pressure on the system
- **Clearer pathways:** progressively connect with wider health services, offering a more holistic, joined-up approach to care
- **Data-driven insights:** Better understand patient behaviours and healthcare trends, supporting improved decision-making and policy development.

### Potential Value Opportunities

- Vaccines (history, bookings, notifications) to support prevention
- Appointments (equitable booking) to enable greater access
- Screening services (history, booking and notifications) to support prevention
- Value-led approach to third-party integrations to ensure ROI
- Opportunities from AI- enabled use cases for efficiency
- Care plans for patient empowerment
- Care navigation for improved access to the right care, supporting Community by Design ambitions
- Provide access to services through signposting and a consistent Directory of Services

### 3.1 Patient Facing Products and Services

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>NHS Wales App</b>		Monthly distinct users: 300k		Monthly distinct users: 350k		
	Complete/continue prioritised workstreams covering hospital referrals and appointments, digital documents and test results, including ensuring all data and insight is updated with each feature release					
			Early adopter of vaccines functionality in NHS Wales App			
	Discovery and development of new workstreams supporting digital medicines, screening services and improving patient communications					
	Ensure the NHS Wales App technology/platform is up to date, secure, performant and scalable					
<b>Dental Access Portal</b>	Maintain and enhance the Dental Access Portal					



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Digidol Cymru  
Digital Health  
and Care Wales

# Mission 4

**Drive better outcomes and  
value through innovation**

4.1 Research and Innovation

4.2 Value from Data

4.3 AI and Emerging Technologies

### WG Policy Context



- A Healthier Wales
- Innovation Strategy for Wales
- DHCW Research and Innovation Strategy
- NHS Wales e-Library Strategy
- Health and Care Research Wales Strategy
- NHS Wales Copyright License
- National Institute for Health and Care Research
- Health Data Research Service

### DHCW Strategic Objectives

- Deploy AI and automation, safely and ethically, to deliver year-on-year productivity improvements across NHS Wales
- An NDR secure data environment which provides access for research while protecting privacy
- A national information and data insights service which demonstrates net benefit and value

### Stakeholder and User Needs

- Easy access to trusted evidence and knowledge resources
- Support to navigate and access data and digital resource for research and innovation
- Efficient, well-curated knowledge management services

### Delivery Priorities for 2026-29



#### Products and Services

- **DHCW Research and Innovation Strategy:** To deliver the refreshed DHCW Research and Innovation Strategy by working with strategic partners, embedding a culture of R&I and delivering the assets through the enablement and contribution to high-quality data and digital research and innovation.
- **NHS Wales e-Library:** To provide a high-quality, user-led service to promote evidence-based practice and empower NHS Wales to improve and innovate.
- **DHCW Open Access Service:** To support DHCW authors and co-authors to make works openly available in accordance with copyright and licence agreements thereby making DHCW led research available publicly at no cost to the reader.
- **Artificial Intelligence:** Accelerate the exploration, adoption, and integration of Artificial Intelligence to strengthen research capabilities and drive knowledge mobilisation across NHS Wales.

### Value and Outcomes

- Strengthen organisational capability through increased uptake of R&I learning and training, enhancing awareness and enabling delivery of high-impact research and innovation projects
- Enhance collaborative value through improved partnership arrangements that maximise the impact of DHCW-led and co-delivered R&I initiatives.
- Actively contribute to the All-Wales Innovation Framework to align DHCW research and innovation activity with national priorities and system-wide transformation
- Increase use of NHS Wales e-Library resources to support evidence-informed practice and promote knowledge sharing across the health system.

### Potential Value Opportunities

- Foundational economy - assess value of innovation projects
- Health economic studies to assess impact and value of DHCW products and services

# 4.1 Research, Innovation and Knowledge Management

Annual Plan

IMTP

Key: \*NDA = National Digital Architecture

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>R&amp;I Strategy</b>	Governance aligned across Research, Innovation, Knowledge Management and NDR, with baseline collaboration targets set and NDR collaborative environment utilisation reported to the R&I Board				Continue to embed DHCW Research, Innovation, Knowledge Management and NDR operational governance to maximise opportunities in relation to utilisation of NDR collaborative data environments. <i>(See Portfolio 1.1)</i>	
	Centralised R&I dashboard and reporting protocols implemented, alongside delivery of the R&I/KM Engagement Strategy and L&D framework					
	Strategic partnerships (NHS, academia, third sector and industry including Think Tanks) established and maintained, with stakeholder map, partnership projects and a single access point for new collaborators published				Implement a KM playbook and KM tools to support Knowledge Sharing and mobilisation across DHCW	Implement a DHCW Innovation Management Tool to track DHCW led innovation and seek opportunities to scale up innovation through Health and Social Care Innovation Wales
		Complete Digital Economy Act annual review including preparation of security and capability evidence			Complete Digital Economy Act re-accreditation	
			Renegotiate SAIL SLA			
<b>NHS Wales E-Library</b>	Develop collections and increase uptake and usage of the NHS Wales e-Library				Develop collections and increase uptake and usage of the NHS Wales e-Library	
	Evidence guides for priority areas (eg Mental Health, Women's Health) published in line with the NHS Wales 2026-29 Planning Framework					
<b>Open Access Service (*NDA)</b>	DHCW content deposited to the institutional repository and Open Access Service delivered to maximise public access				Continue to deposit DHCW published content to the institutional repository and deliver the Open Access Service maximising public access to DHCW research and knowledge	
				Increase in DHCW authored and co-authored Open Access publications demonstrated	Demonstrate an increase in the number of DHCW authored and co-authored works published Open Access	Demonstrate an increase in the number of DHCW authored and co-authored works published Open Access
	Findings of the Open Access Feasibility Study implemented to inform future NHS Wales Open Access adoption					
				Framework delivered for measuring research impact and reach, including bibliometrics and altmetrics		
<b>Artificial Intelligence (*NDA)</b>	AI tools implemented to enhance research and knowledge management, including search and summarisation capabilities					
	AI-focused R&I projects supported across DHCW and through external partnerships					

### WG Policy Context



#### Strategic Programmes:

- Planned Care - Transform and modernise services and reduce NHS waiting lists
- NHS Performance and Improvement - Value Transformation Programme
- Community by Design
- National Data Resource (NDR) Programme
- DHCW Information and Analytics Strategy

### DHCW Strategic Objectives

- Move all our data stores and services to the NDR platform to create a single national clinical data repository
- A national information and data insights service which demonstrates net benefit and value
- Deploy AI and automation, safely and ethically, to deliver year-on-year productivity improvements across NHS Wales

### Stakeholder and User Needs

- Responsive and accessible service
- Timely insight and delivery
- High-quality, accurate and actionable intelligence

### Delivery Priorities for 2026-29



#### Products and Services

- **Information and Analytics Service:** Continue to provide and enhance national information/analytics using standardised data in line with our Information and Analytics Strategy.
- **Artificial Intelligence:** Identify and apply AI to strengthen analytics capability.
- **Official Statistics:** Broaden promotion and publication of dashboards (including public-facing) and data to support user self-service and transparency.

#### Programmes and Projects

- **Information and Analytics Projects:** Deliver projects that enhance our information and analytics service offering, focusing on new, AI-informed approaches to enhance analytics delivery.

### Value and Outcomes

- **Enhanced National Data Analytics:** Delivery of national data and reporting for consistent, high-quality analysis across Wales.
- **Clinical Dashboards:** Improvement of real-time insight and decision-making from national systems.
- **Official Statistics:** Broadened publication of trusted data (including public-facing) to increase transparency and support policy.
- **Value Transformation:** Use of value-based data and PROMs to measure outcomes and drive improvement.
- **National Data Warehouse:** Strengthened governance and operations for accurate, timely national datasets.
- **Artificial Intelligence:** Enhanced innovation and analytical capability through applied AI solutions
- **National Data and Analytics Platform (NDAP) :** Migration to a resilient, interoperable, and scalable new national platform.
- **Clinical Network Support:** Provision of bespoke dashboards and datasets for evolving analytical needs of national clinical programmes.
- **AI Data Processing:** Use of NLP and machine learning to automate clinical text analysis improving efficiency and accuracy.
- **PROMs Integration:** Enhanced patient-reported data to support value-based care and experience insight.
- Supporting **population health** data analysis.

### Potential Value Opportunities

- Expand national datasets to provide added value, eg Welsh Emergency Care Data Set (WECDS)
- Benchmarking dashboard solution including English data
- New data flows added to cloud platform

## 4.2 Value from Data

Key: \*NDA = National Digital Architecture

Annual Plan

IMTP

	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Information, and Analytics Service</b> (*NDA)	<b>National data analytics.</b> Deliver the national data analysis and reporting service as required for all-Wales health data.					
	<b>Clinical system dashboards.</b> Further develop national dashboards and reporting from DHCW clinical applications, such as those held within Welsh Clinical Portal.					
	<b>Value Transformation:</b> Deliver comprehensive support for the Value Transformation Programme as part of an agreed work plan, by providing actionable data insights and analysis for High Value High Impact Pathways; dashboards (both new and ongoing developments and maintenance of existing dashboards); customised data requests, acquisition of new datasets (including repatriation of audit data), and standardised PROMs.					
	<b>Value Transformation:</b> Provide population health data analysis and insight as part of the OECD PaRIS project.					
	<b>National Data Warehouse.</b> Maintain daily operations, including validating data accuracy and consistency, ensuring timely extract, transform, load processes, and managing data access.					
	<b>Primary Care:</b> Support information and reporting requirements from GMS contract					
	<b>Primary Care :</b> Support practices through the provision of data visualisations and reports within the Primary Care Information Portal					
	<b>Artificial Intelligence</b>	<b>Artificial Intelligence:</b> Identify opportunities for the use of AI to enhance our information and analytics service, including Natural Language Processing, conversational and predictive analytics				
<b>Official Statistics</b>	<b>Official Statistics.</b> Deliver, extend and enhance the range of Official Statistics in line with the code of practice and publish data including public facing dashboards.					
<b>Information and Analytics Projects</b>	<b>Transition of data to National Data Analytics Platform (NDAP).</b> Maximise the offering and resilience of our data through transition to a new platform and tooling to supersede the All Wales NHS Wales Switching Service. In conjunction with NDR Programme.					
	<b>Support requirements of clinical networks,</b> including dashboards, customised data requests, the acquisition of new data sets including the cancer data roadmap.					
	<b>Artificial Intelligence:</b> Using tools and techniques such as Natural Language Processing, to codify and classify free text clinical data eg radiology reports, clinic and referral letters ( <i>See Portfolio 1.1 for clinical coding</i> )					
	<b>Primary Care:</b> support implementation of a solution(s) that will assist GP practices with the delivery of their GMS contractual requirements.					
	PROMS visualisations in Welsh Clinical Portal					

### WG Policy Context



- AI in Wales: Welsh Government Landscape Review 2023
- Strategic AI Advisory Group and Welsh Government Office for AI 2025
- AI Cymru: Shaping a Smarter, Fairer, More Prosperous Wales 2025
- Towards a Strategy for Developing and Deploying AI within Welsh Health Boards 2022
- UK Government National AI Strategy 2021
- AI Playbook for the UK Government 2025

### DHCW Strategic Objectives

- Deploy AI and automation, safely and ethically, to deliver year-on-year productivity improvements across NHS Wales
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects

### Stakeholder and User Needs

- Access to safe, reliable AI features in our digital products that help reduce admin burden, support diagnosis and clinical care, and enable faster, better-informed decisions.
- Clear, practical guidance, training and hands-on support so people can use AI-enabled tools confidently and safely.
- Transparency and assurance about how AI makes decisions, so users can trust the outputs and understand where accountability sits.

### Delivery Priorities for 2026-29



Artificial intelligence is now a core enabler in health and care, with proven benefits in diagnostics, population health, operational efficiency and personalised care. Across DHCW, AI is increasingly embedded in products, programmes and enabling functions.

#### Products and Services

- We will mainstream responsible AI: strengthening governance, supporting teams to balance opportunity and risk, and enabling safe, ethical and productive adoption aligned to national standards.

Many AI and emerging technology opportunities are developed within other portfolios. **See individual portfolios for specific AI deliverables and timescales**

#### Programmes and Projects

##### DHCW AI Project

- **Governance** – Develop our AI policy, governance and assurance framework, aligned to our principles for responsible AI, and deliver clear standards and guidance as part of DHCW's system leadership for AI across NHS Wales
- **Capability** – Develop DHCW's organisational capability to source, design, develop, test, assure, implement and support AI-powered products and services, embedding AI into our operating model so capability is sustainable and repeatable.
- **Insight and activity tracking** – Establish a structured approach to horizon scanning and to tracking AI activity across DHCW and NHS Wales, providing clear insight into emerging technologies, identifying opportunities for adoption, and enabling early oversight of risks, duplication and system impact.

### Value and Outcomes

Support clinical care, population health and system efficiency through the responsible adoption of AI and emerging technologies, improving outcomes across NHS Wales.

### Potential Value Opportunities

- Ambient voice technologies to reduce clinical documentation burden and improve efficiency
- AI-enabled clinical coding to improve accuracy, speed and data quality
- Decision-support and triage tools to support diagnostics and clinical care pathways
- Predictive and analytics-driven applications improving flow, demand forecasting and system efficiency
- AI for software engineering to improve development efficiency, quality and consistency

**See also individual portfolios for specific AI pipeline deliverables.**

## 4.3 AI and Emerging Technologies

Key: *NDA = National Digital Architecture	Annual plan				IMTP	
	QTR 1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Governance</b>	Develop and publish the baseline AI governance and assurance framework and supporting materials for 2027/28				Embed the AI governance and assurance framework into existing DHCW processes and refine it based on early use and emerging best practice	
<b>Capability</b> (*NDA)			Develop a simple capability improvement plan covering skills, support, processes and initial guidance/ templates.		Extend capability-building activities based on learnings from 2026/27, supporting teams to apply agreed patterns and practices in early AI-related work	
<b>Insight and activity tracking</b>			Develop a light-touch method for tracking AI-related activity across DHCW.		Maintain the agreed horizon-scanning and activity-tracking process, ensuring ongoing visibility of developments in AI and emerging technologies	



GIG  
CYMRU  
NHS  
WALES

Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

# Mission 5

**BE the trusted partner and  
a high performing,  
inclusive organisation**

5.1 People and Culture

5.2 Partnerships and Engagement

# Mission 5

## BE the Trusted Partner and a High Performing, Inclusive Organisation

### Overview

Mission 5 covers key enablers of our IMTP delivery: our people and partnerships and how we empower collaboration and excellence

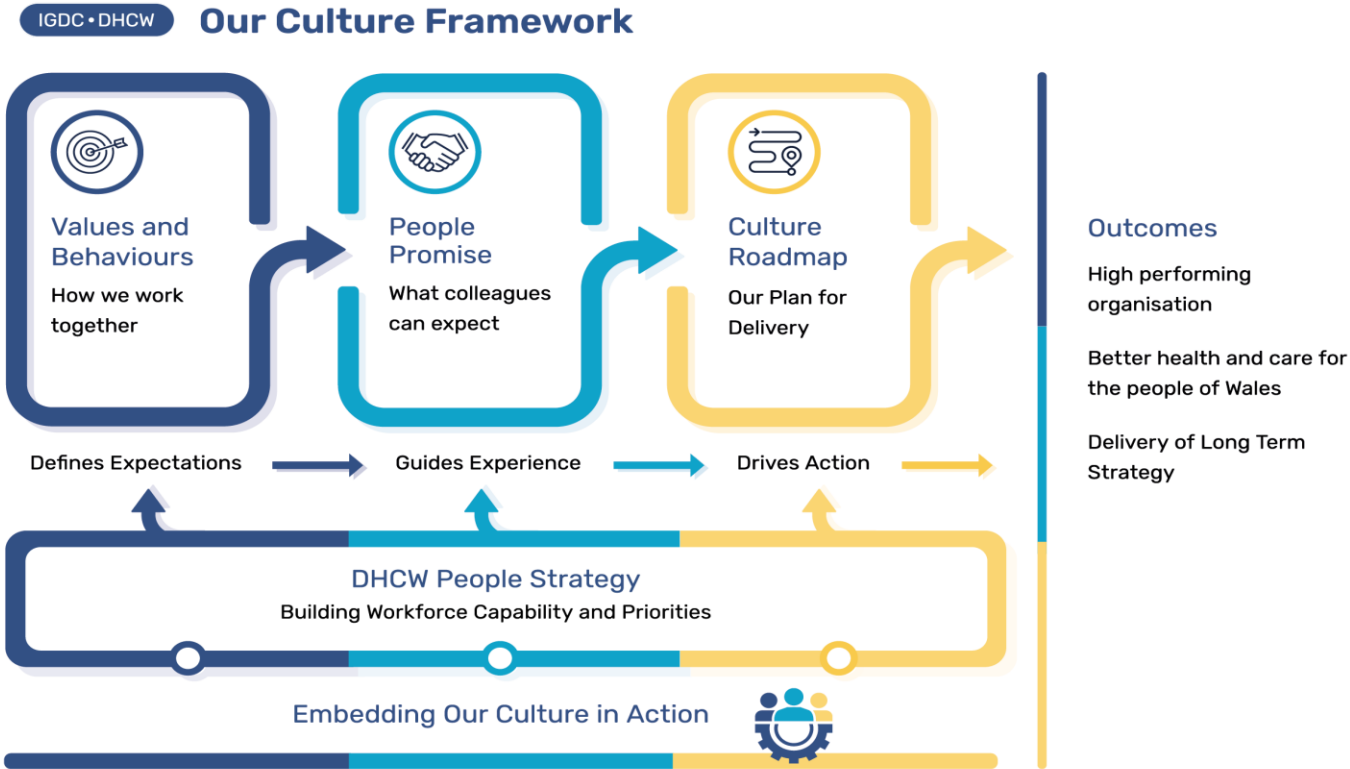
- [Our People and Culture](#)
- [Strategic Engagement and Partnerships](#)

### Our Culture: How We Work, Together

Our culture starts with our people and the partnerships that enable us to make the biggest impact. By fostering trusted relationships and bringing stakeholders together, we drive innovation and deliver lasting value through improved digital services for Wales. We start by truly understanding those we serve and embrace user-centered design as a guiding mindset. Collaboration is at our core – we build trust, share openly, and treat partners as valued members of our team.

Every day, we encourage innovation, curiosity and respectful challenge, always seeking new ways to make a positive difference. We celebrate respect, empathy and diversity, knowing these strengths help us thrive together. Through consistent engagement, User centered design and clinical approaches, we ensure our services are shaped by user needs, clinical insight, safety and quality – supporting greater confidence and adoption across NHS Wales.

This framework is our promise to put people first, strengthen relationships, and achieve fairer, better outcomes - turning our purpose into practice, together.



# Mission 5

## BE the Trusted Partner and a High Performing, Inclusive Organisation

### Strategic Context

- Well-being of Future Generations (Wales) Act 2015
- A Healthier Wales Workforce Strategy for Health and Social Care 2020
- Social Partnership and Public Procurement Act 2023
- Digital Inclusion Charter (Wales)
- The Marmot Principles
- Accessible Communication and Information Standards
- Minimum Digital Living Standard (MDLS)

### DHCW Enabling Strategies and Plans

- DHCW People Strategy 2026-2030
- DHCW Strategic Equality Plan 2023-2027
- DHCW Welsh Language Scheme
- DHCW Bilingual Skills Strategy
- DHCW Mwy Na Geiriau Action Plan
- DHCW Stakeholder Engagement Strategy 2023-2026
- DHCW Digital Inclusion Plan 2026-2029

### DHCW Strategic Objectives

- An academy approach to developing people through talent and leadership development programmes, aligned to Digital and Data Profession Capability Framework
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects
- Top quartile staff and stakeholder engagement for our products and services

### Engagement Pillars



Foster a culture of effective engagement, enhancing DHCW's capability and capacity



Develop effective strategic partnerships, networks, and forums to enable successful collaborative working



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



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

### Objectives for 2026-29



#### Organisational Design

- Embed a product/service-centred operating model with clear role families and accountabilities.
- Standardise job families and progression pathways aligned to the digital profession capability framework.
- Use data-driven workforce modelling to forecast and optimise capacity for agile, bilingual service delivery.

#### Inclusive Talent Development

- Scale a DHCW 'academy' offer across early careers, apprenticeships and internal mobility to build a strong digital and data talent pipeline.
- Make continuous learning the default through the Digital Learning Portal, targeted skills programmes (cloud, data/AI, product, design) and communities of practice.
- Embed a management competencies framework with compassionate leadership, coaching and 360 feedback to support consistent high performance.

#### Shaping our Culture

- Embed the People Promise by making values and behaviours visible, measurable and part of daily decisions, recognition and performance cycles.
- Strengthen wellbeing, inclusion and belonging through staff networks, safe space sessions and Marmot aligned actions.
- Our culture will be shaped by a strong commitment to the national **Equality Plans**, ensuring due regard to the wider equality agenda and supporting the delivery of accessible, inclusive and equitable services for all communities we serve.
- Celebrate collaboration and system leadership across NHS Wales and partners, using transparent engagement, partnership metrics and storytelling to build trust and adoption.
- Lead as a bilingual organisation, embedding Cymraeg across all services, communications, and culture to strengthen inclusivity and national identity.

### Value and Outcomes

#### Organisational Design

- **Clarity and Accountability:** Our people have clear roles and responsibilities, building a culture of trust, collaboration and accountability. This shared understanding supports high-quality outcomes, strong assurance and collective success across the organisation.
- **Consistent and Inclusive Structures:** We create an environment where standardised job families and clear progression pathways promote fairness, transparency, and equal opportunity preparing our workforce for the future.
- **Agile and Bilingual Service Delivery:** Through data-driven workforce planning, we ensure the right skills are available in the right places, supporting flexible, responsive, and bilingual services.

#### Inclusive Talent Development

- **Resilient Talent Pipeline:** We nurture a resilient pipeline by fostering an inclusive approach and continuous learning culture to attract, develop, and retain talent, ensuring DHCW is future-ready.
- **High Performance and Engagement:** Managers are equipped to support, coach, and inspire teams, driving high engagement and performance.

#### Shaping our Culture

- **Values-Driven Environment:** Our People Promise is visible and lived,
- **Wellbeing and Belonging:** Our people feel safe, included, and able to thrive, supported by networks, safe spaces, and actions aligned to Marmot principles.
- **Equality, Inclusion and Accessibility** - Embeds equality, inclusion and accessibility at the heart of DHCW's culture, decision-making and service design.
- **Collaborative and Engaged Workforce:** Engagement-led approaches and co-design with stakeholders foster trust, innovation, and adoption of new ways of working.
- **Bilingual Organisation:** Strengthens inclusivity, equality and cultural identity, boosting trust, engagement and organisational reputation. Embedding bilingual experience across digital products and customer touchpoints, improves outcomes and patient experience.

# Mission 5

## Our People and Culture – our workforce

### Our Workforce

The refreshed People Strategy, *People at the Heart of Digital Health*, focuses on creating a confident, capable, and valued workforce aligned to DHCW’s digital transformation agenda.

- **Values-driven culture:** Embedding our People Promise and Culture Framework.
- **Agile and bilingual service delivery:** Data-driven workforce planning to ensure flexibility and responsiveness.
- **Talent development:** An academy approach for leadership and technical capability growth.
- **Continuous learning:** Building AI-ready and digital skills across DHCW.

### Our Areas of Focus

- Building internal talent pipelines: Career mapping, apprenticeships, mentoring, and leadership development.
- Upskilling for the future: Agile, Cloud computing, Python, SQL, Scrum, AI and Leadership capability development.
- Strengthening leadership: Driving culture and change through emotionally intelligent leadership.
- Creating a culture for success: Inclusive environment supported by wellbeing initiatives, equality diversity and inclusion networks, flexible working, and high performance.

### Looking Ahead

- Launching the refreshed People Strategy and Values and Behaviours Framework.
- Deepening engagement through pulse surveys, dashboards, and culture advocates.
- Continuing to build a diverse, agile workforce aligned with the new operating model.
- Prioritising employee engagement, succession planning, and diversity in recruitment and career development.

By embedding these approaches, we aim to make DHCW a digital employer of choice, ensuring our workforce is equipped to meet strategic objectives.

### Workforce Composition (as at Oct 2025)



#### Contract Type:

- 83.20% Permanent
- 8.56% Fixed Term
- 7.19% Secondment
- 1.05% Honorary



#### Gender Split:

- 56% Male
- 44% Female

#### Ethnicity:

- 13% identify as from a minority ethnic background
- 82% White
- 5% undisclosed

#### Age Profile and Generational Breakdown:



- Gen Z (16–28): 10%
- Millennials (29–44): 47%
- Gen X (45–60): 38%
- Baby Boomers (61–70): 5%

#### Working Pattern:

- 90.80% Full-Time
- 9.20% Part-Time

#### Disability Declaration: 9.05%

### Our Values



#### Collaboration

- Teamwork
- Supporting and challenging
- Listening and valuing each other
- Reflecting
- Continuous learning



#### Innovation

- Creative thinking
- Courageous
- Transformational
- Embracing change
- Ambitious



#### Inclusive

- Diversity
- Equality
- Respect
- Fairness
- Equity
- Celebrate success and achievements



#### Excellence

- Empowerment
- Quality
- Continuous improvement
- Drive for results
- Pride in what we do
- Accountability



#### Compassion

- Dignity
- Kindness
- Empathy
- Personal responsibility
- Trust

### Our Focus

We will strengthen DHCW's role as a trusted national, regional and local partner by embedding consistent, transparent and responsive engagement across all programmes and products. Building on the 2024 Stakeholder Review, we will apply clear standards, tools and behaviours that ensure we listen to, understand and respond to the needs of citizens, clinicians and delivery partners. By working more closely with our health and care colleagues– including greater co-location and joint planning – we will deepen trust and accelerate the adoption of digital solutions that deliver better outcomes for Wales.

We will continue to recognise the important role we play in insuring digitally inclusive services are an intended consequence of digital innovation in health and care. We will embed digital inclusion best practices in design and delivery across our products and services.

We will mature our organisation-wide User Centred Design (UCD) capability to ensure every product and service is shaped around real user needs. By embedding UCD specialists and applying shared standards– including the DHCW Design System and Welsh Service Standards–our products and services will become more usable, accessible, bilingual and easier to adopt across NHS Wales.

We will strengthen the clinical and patient voice in design, assurance and delivery through our refined clinical, public and patient engagement approaches. A more structured, inclusive multidisciplinary approach will improve clinical safety, reduce variation and ensure digital solutions better support clinical pathways, enhancing quality and patient experience and outcomes.

### Objectives for 2026-29

- **Stakeholder Engagement:** Establish a consistent, transparent and inclusive DHCW-wide approach to stakeholder engagement, building staff capability for digital inclusion and delivering the next phase of actions from the 2024 Stakeholder Review to strengthen trust and improve satisfaction.
- **User Centred Design:** Embed mature UCD capability across DHCW by implementing shared standards, practices and tools through our community of practice, that ensure all products and services are designed around user needs and the Welsh context.
- **Strengthening Clinical and Public Engagement:** Strengthening the clinical and patient voice across design, delivery and assurance by embedding the Clinical Informatics Framework and refreshing the Public and Patient Assurance Group to enhance clinical safety, quality and adoption of digital solutions.

### Value and Outcomes

#### Stakeholder Engagement

- A consistently applied approach to engagement across DHCW that strengthens trust and transparency.
- Improved satisfaction and confidence through earlier involvement and clearer routes for feedback.
- Stronger partnerships that accelerate the adoption and impact of digital solutions across NHS Wales.
- Digitally inclusive products and services developed by digitally inclusive staff teams.

#### User-Centred Design

- Improved usability, accessibility and bilingual experience of DHCW products and services.
- More intuitive, consistent journeys through adoption of UCD standards and the Design System.
- Faster delivery and reduced rework through earlier validation with users.

#### Strengthening Clinical and Public Engagement

- Safer, higher-quality digital products through structured clinical and patient involvement and assurance.
- Increased clinical and patient confidence, efficiency and uptake of national solutions.
- Better alignment of digital services to clinical pathways, improving patient experience and care outcomes..

Mission 5						
Annual Plan					IMTP	
	QTR1 2026/27	QTR 2 2026/27	QTR 3 2026/27	QTR 4 2026/27	2027/28	2028/29
<b>Our People</b>						
<b>Organisational Design</b>	Develop and agree a strategic workforce plan that reflects the ambition of the People Strategy and sets out how we will build the capacity and capability needed to deliver the DHCW Long Term Strategy.			Embed product and service-based delivery as the standard way DHCW works, with named owners for priority products and services and consistent ways of working applied across the organisation	Evaluate the strategic workforce plan providing evidence on its alignment to current workforce capabilities and capacity	
<b>Talent Development</b>		Launch and embed the new Digital Learning Portal	In partnership with key stakeholders across NHS Wales develop targeted work packages and a delivery roadmap to support the growth and sustainability of the digital profession in Wales.			Implementation of Future Workforce Solution and develop a plan to transition all digital learning to the new platform
<b>Culture</b>				Translate the People Promise into consistent day-to-day practice through aligned people processes and delivery of the Culture Roadmap		Develop and implement the Culture Roadmap for 27/28
<b>Our Partnerships</b>						
<b>Stakeholder Engagement</b>			Launch the DHCW Engagement Strategy 2026-29, including incorporating the learning of the Stakeholder Review Action Plan	Creation of Digital Inclusion playbook	Implement enhanced partnership metrics and CRM-enabled insight to support improved maturity and engagement tracking	
<b>User Centred Design</b>		Advance the DHCW Design System through national approval to establish it as the NHS Wales Design System		Embed user centred design specialists across all products and services to ensure user voice informs design and delivery	Support adoption of Welsh Service Standards Assessments	
<b>Clinical and Patient Engagement</b>		Launch refreshed Public and Patient Advisory Group to strengthen the public voice to provide feedback and insight to our products and services		Define and publish DHCW's Clinical Engagement Approach, including clear roles, routes and expectations for clinical input into major programmes.		

# Adoption of DHCW Digital Products Across NHS Wales Partners

Digital Health and Care Wales	Health Education and Improvement Wales	NHS Wales Shared Services Partnership	NHS Wales P&I	Aneurin Bevan	Betsi Cadwaladr	Cardiff And Vale	Cwm Taf Morgannwg	Hywel Dda	Powys	Swansea Bay	Velindre	WAST	Public Health Wales
<b>Enablers</b>									Key	Intended Availability	In readiness	In Use	Other linkage
<b>Integrated Data Platform</b>													
National Data Resource – Clinical Data Repository				Encount/Demo	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart	Encount/Demo/Growth Chart		
National Data Resource – National Data and Analytics Platform													
APIs				WCRS	SMR	SMR	SMR			Growth Chart			
<b>Sharing Data Safely</b>													
Information Governance Toolkit													
National Intelligent Integrated Audit Solution													
Wales Accord on the Sharing of Personal Information				Inc LAs	Inc LAs	Inc LAs	Inc LAs	Inc LAs	Inc LAs	Inc LAs			
<b>Sustainable Infrastructure / Cyber Security and Resilience</b>													
Core Infrastructure													
Microsoft 365													
Security Information and Event Management (SIEM)													
Vulnerable Monitoring Service (VMS)													
<b>Products</b>													
<b>Prevention and Public Health</b>													
Screening Services													
Child Health (CYPrIS)													
Welsh Immunisation System													
<b>Primary Care</b>													
Choose Pharmacy													
Dental Access Portal													
GP Test Requesting													
GP Systems													
<b>Community and Mental Health</b>													
Connecting Care: Mental Health (MH) / Community Health (CH) Applications Procurement				MH	MH / CH	MH / CH	MH / CH	CH	MH / CH	MH / CH			
Connecting Care: CareDirector/ WCCIS - Mental Health (MH) / Community Health (CH) Legacy System				MH Legacy			MH / CH Legacy	CH Legacy	MH / CH Legacy	MH / CH Legacy			
<b>Planned Care</b>													
Digital Maternity Standards Adoption				Local Solution	Local Solution	Local Solution	Local Solution	Local Solution	Local Solution	Local Solution			
Welsh Patient Administration System						Local solution							
Welsh Patient Referral Service				Local solution									
Welsh Nursing Care Record (Hospital)													
Cancer Solution													
Welsh Information System for Diabetes Management													
Welsh Clinical Portal													

# Adoption of DHCW Digital Products Across NHS Wales

Digital Health and Care Wales	Health Education and Improvement Wales	NHS Wales Shared Services Partnership	NHS Wales P&I	Aneurin Bevan	Betsi Cadwaladr	Cardiff And Vale	Cwm Taf Morgannwg	Hywel Dda	Powys	Swansea Bay	Velindre	WAST	Public Health Wales	
								Key	Intended Availability	In readiness	In Use	Other linkage		
<b>Urgent and Emergency Care</b>														
Urgent and Emergency Care App				Local solution	Local solution									
Welsh Intensive Care Information System														
<b>Diagnostics</b>														
Laboratory Information Management System (LIMS) 2.0														
Radiology Informatics Solution Procurement New														
Welsh Point of Care Testing														
Electronic Test Requesting (Radiology)														
Electronic Test Requesting (Pathology)														
Electronic Test Requesting (Cardiology and new request types)					Cardiology & Histo	Cardiology & Histo	Cardiology	Cardiology						
<b>Medicines</b>														
E-prescribing and Medicines Administration (Secondary Care)														
Electronic Prescription Service (GP to Community Pharmacy)														
Welsh Hospital Pharmacy Stock Management System														
<b>Patient Facing Products and Services</b>														
NHS Wales App							P3F	P3F	P3F	P3F	P3F	P3F		
<b>Research, Innovation and Knowledge Management</b>														
NHS Wales eLibrary for Health														
<b>Value from Data</b>														
See National Data Resource above														
Data and Analytical Services														
PROMS and PREMS / Value in Health														



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Digidol Cymru  
Digital Health  
and Care Wales

# Financial Management

# The Financial Outlook

The Financial Plan for 2026/27 presents a breakeven position, which is subject to the agreement of the Programmatic (DPIF) funding allocation for 2026/27. It translates the objectives, activity and consequential resource requirements to form a fully integrated financial plan. It has been cross referenced with output from the IMTP Portfolio review exercise and workforce plan to ensure congruence with stated deliverables. For 2026/27 overall revenue funding will increase from £188.3m to £204.8m as a result of increases in national digital programme spend and the new Microsoft enterprise agreement and depreciation uplift. Within the plan, initiatives are targeted to deliver £5.8m of in year savings and Capital investments totalling £16.75m are planned.

The current Programmatic (previously DPIF) funding control total has been incorporated within 2026/27 forecast (future year allocations are unknown) with an additional requirement to support GP software supplier migrations, the final number of in year migrations and resourcing is to be confirmed with a consequential impact upon funding need.

Activity Area	Revenue				Capital			
	2025/26 £m	2026/27 £m	2027/28 £m	2028/29 £m	2025/26 £m	2026/27 £m	2027/28 £m	2028/29 £m
<b>Anticipated Funding</b>								
Core SHA Operations	155.66	167.03	168.76	169.46	4.33	3.64	3.64	3.64
Programmatic Activity	30.54	36.23	0.00	0.00	8.54	13.11	0.00	0.00
GP Migrations	2.10	1.53	0.00	0.00	0.00	0.00	0.00	0.00
<b>Total</b>	<b>188.30</b>	<b>204.80</b>	<b>168.76</b>	<b>169.46</b>	<b>12.87</b>	<b>16.75</b>	<b>3.64</b>	<b>3.64</b>
<b>Forecast Expenditure</b>								
Core SHA Operations	160.46	172.82	174.82	175.51	4.33	3.64	3.64	3.64
Programmatic Activity	30.54	36.18	0.00	0.00	8.54	13.11	0.00	0.00
GP Migrations	2.10	1.53	0.00	0.00	0.00	0.00	0.00	0.00
Savings & Efficiency	-4.80	-5.74	-6.05	-6.06	0.00	0.00	0.00	0.00
<b>Forecast Spend</b>	<b>188.30</b>	<b>204.8</b>	<b>168.76</b>	<b>169.46</b>	<b>12.87</b>	<b>16.75</b>	<b>3.64</b>	<b>3.64</b>
<b>Outlook Under/-Overpend</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

The key financial objective remains to provide quality and value for money services whilst ensuring a sustainable underpinning financial baseline for the organisation.

The future position is reflective of targeted efficiencies and the shift in spend from Capital Expenditure to Revenue as a result of completion of the Cloud Transition Programme.

Programmatic funding is issued non recurrently on a 'one year' basis; consequently, future years are excluded from the financial profile until agreed.

The key financial objective is to provide quality and value for money services whilst ensuring a sustainable underpinning financial baseline for the organisation.

# Underpinning Financial Planning Assumptions

**Remit Letter and Funding Allocation:** At the time of publication, DHCW has received its remit letter but not had confirmation of its Programmatic (DPIF) funding allocation. The financial plan has therefore been developed on the assumption that the full funding allocation requested will follow on after the remit letter.

**Workforce:** The plan triangulates operational delivery, workforce and financial impact/anticipated funding. Any deliverables not incorporated within the financial plan secured resources are shaded white (noting resource uncertainty) or grey (noting a pipeline deliverable).

## Pay Assumptions:

- The plan incorporates forecast pay costs (inclusive of increments but excluding 2026/27 pay awards). As outlined in the Welsh Government planning assumptions, it is anticipated that funding for the 2026/27 pay award will be held centrally within Welsh Government allocated to DHCW once awards and costs are confirmed.

## Funding:

- The Welsh Government DHCW baseline allocation will remain fixed into 2026/27. The Primary Care IM&T budget will attract a baseline uplift totalling £0.9m with Intra NHS Service Level Agreements also attracting a 1.11% increase.
- NHS Wales SLA's have also had an uplift of 1.11% applied with material changes reflecting digital inflation cost pressure recharges, All Wales licencing obligations and decommissioning of services.
- Funding to support GP Migration activity is currently predicated upon 4 practices per week with any requiring additional resource and funding.
- Non recurrent funding for digital priority schemes has been assumed as per funding allocation requested through Welsh Government.

## Financial Pressures

As part of the 2026/27 financial planning process DHCW has identified emerging cost pressures for the financial year, in the following areas:



**Pay (£1.0m):** This pressure represents pay elements not covered by the centrally funded pay award (such as the cost of staff increments) and are anticipated to be covered from the general allocation.



### Service Growth and Organisational Pressures (£3.0m):

These cost pressures recognise DHCW's requirement to support multiple initiatives including:

- The improvement of stakeholder engagement and investment in key supporting customer relationship management tooling to support delivery improvement.
- Support of the strategic transition to the new organisational target operating model and service transformation.
- Cyber, Networking and Information Governance increased requirements and strengthening.



**Indexation (£0.5m):** DHCW has reflected an assessment of unavoidable financial pressures related to the application of indexation levied by suppliers.



### Contractual Inflation & National investment Decisions (£5.7m):

These cost pressures reflect specific cost increases as a result of agreed embedded contractual obligations and national decisions. There will be £5.67m recovered from SLAs, meaning the impact to DHCW of £0.01m

# Source and Application of Funds

**Source of revenue funds:** The source of the majority of the organisation's revenue is provided by Welsh Government (circa 73% of the current financial plan for 2026/27) including an allocation for capital charges (depreciation). All other anticipated income relates to the payment for a range of services provided to NHS Wales and Northern Ireland via 'Service Level Agreements' and consequently can be more volatile in nature due to changes in service levels/terminations. It should be noted that a proportion of organisational funding (£112.67m/55%) is linked to ring fenced expenditure such as the provision of All Wales contracts (eg all Wales digital licensing, specific schemes/initiatives such as digital priority initiatives (DPIF) or services such as Primary Care IM&T Support) resulting in a decreased scope for internally benefiting savings.

Source of Funds	2025/26 £m	2026/27 £m	2027/28 £m	2028/29 £m
<b>Anticipated Funding</b>				
Welsh Government - Core	78.11	77.71	77.71	77.71
Welsh Government - Primary Care IM&T	19.68	20.91	20.91	20.91
Welsh Government - Depreciation	8.23	13.65	13.65	13.65
<b>Total Welsh Government</b>	<b>106.02</b>	<b>112.26</b>	<b>112.26</b>	<b>112.26</b>
GP Migration Funding	2.10	1.53	0.00	0.00
Welsh Government – Other		0.15	0.00	0.00
<b>Total Remit Letter</b>	<b>108.12</b>	<b>113.94</b>	<b>112.41</b>	<b>112.41</b>
NHS Wales SLA/Other	15.49	15.54	15.54	15.54
All Wales Digital Licencing	33.61	39.08	40.96	41.65
<b>Total Remit Letter and Recurrent</b>	<b>157.21</b>	<b>168.56</b>	<b>168.76</b>	<b>169.46</b>
<b>Programmatic</b>				
Welsh Government -Core	29.08	36.18	0.00	0.00
NHS Wales Contributions	1.38	0.00	0.00	0.00
Welsh Government - Other	0.65	0.05	0.00	0.00
<b>Total Programmatic</b>	<b>31.10</b>	<b>36.23</b>	<b>0.00</b>	<b>0.00</b>
<b>Grand Total Income</b>	<b>188.30</b>	<b>204.80</b>	<b>168.76</b>	<b>169.46</b>

**Application of revenue funds:** The projected application of funds to support IMTP deliverables are identified below.

Application of Funds	Revenue			
	2025/26 £m	2026/27 £m	2027/28 £m	2028/29 £m
<b>Anticipated Funding</b>				
SHA & Core Operational Services*	97.83	97.87	97.87	97.87
All Wales Licences	34.72	40.40	42.40	43.09
Primary Care IM&T	19.68	20.91	20.91	20.91
Depreciation	8.23	13.65	13.65	13.65
<b>Total Recurrent</b>	<b>160.46</b>	<b>172.82</b>	<b>174.82</b>	<b>175.51</b>
<b>Programmatic &amp; Non Recurrent Activity</b>				
Programmatic Activity*	30.54	36.18	0.00	0.00
GP Migrations	2.10	1.53	0.00	0.00
<b>Total Programmatic &amp; Non Recurrent</b>	<b>32.64</b>	<b>37.72</b>	<b>0.00</b>	<b>0.00</b>
<b>Total Allocation of Funds</b>	<b>193.10</b>	<b>210.54</b>	<b>174.82</b>	<b>175.51</b>
Savings Requirement	- 4.80	- 5.74	- 6.05	- 6.06
<b>Net Application of Funds</b>	<b>188.30</b>	<b>204.80</b>	<b>168.76</b>	<b>169.46</b>

## Notes:

- Savings are presented cumulatively and will be allocated to Directorates after approval of the IMTP and expenditure reduced.
- All Wales Digital licensing figure excludes primary care (directly charged to the ringfenced budget).

\*SHA & Core operational services includes c. £2m Disbursements per annum to NHS Wales organisations for Services provided under Service Level Agreements.

\*\*Programmatic Activity spend includes Disbursements to Health Boards to support programme delivery. In 2025/26 this was £9.1m; for 2026/27 this is planned to be £12.2m



GIG  
CYMRU  
NHS  
WALES

Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

# Legal and Statutory Obligations

# Legal and Statutory Obligations

DHCW will meet its legal and statutory obligations through the delivery of the IMTP. Key legal and statutory obligations are set out below for quality, procurement, social value and governance and will be met through DHCW's business as usual practice.



## Quality

### 1. The Health and Social Care (Quality and Engagement) (Wales) Act 2020

- **The 'Duty of Quality':** Legal mandate to drive continuous health improvement.
- **Standards:** Ensuring all digital services meet the 12 Health and Care Standards.

### 2. Medical Devices Regulations (SI 618)

- **SaMD Compliance:** Ensuring software is safe, validated, and UKCA marked.
- **Patient Safety:** Rigorous technical testing for tools used in diagnosis or care.
- **Post Market Surveillance:** Active monitoring and reporting of system risks to the MHRA.



## Procurement

### Foundational Economy policy, the Procurement Act 2023 and Social Partnership and Public Procurement Act 2023

DHCW will set and publish socially responsible procurement objectives and establish a procurement strategy to achieve these.

These will be reported in an annual socially responsible procurement report.



## Social Value

### The Well-being of Future Generations Act is the overarching piece of legislation that will enable DHCW to deliver social value.

'Social value' is a broad term used to describe the social, environmental, cultural and economic impacts that an organisation has through its day-to-day operations.

As legislated by the Well-being of Future Generations Act, DHCW needs to place 'sustainable development' at the heart of its decision making. DHCW's Social Value approach sets out the key legislation, policy and strategy in relation to social value.



## Governance

### The DHCW Board has four Committees reporting into it:

- **Audit and Assurance Committee**
- **Digital Governance and Safety Committee**
- **Remuneration and Terms of Service Committee**
- **Programmes Delivery Committee**
- and also a **Local Partnership Forum** enabling us to work effectively in partnership.

Governance and corporate practices are what keeps our organisation alive, ensuring that while we move to the rhythm of our strategic missions, we do so in a way that is compliant, ethical, efficient and effective.

# Legal and Statutory Objectives

## Strategic Context

- Well-being of Future Generations (Wales) Act 2015
- Foundational Economy policy
- Procurement Act 2023
- Social Partnership and Public Procurement Act 2023
- Health Service Procurement Act 2024
- NHS Wales Decarbonisation Strategic Delivery Plan
- DHCW Decarbonisation Action Plan 2024-27
- Health and Social Care (Quality and Engagement) (Wales) Act 2020 – Duty of Quality
- Medical Device Regulations 2002 SI 618 (as amended)
- Civil Contingencies Act 2004

## DHCW Strategic objective

- At least a 34% lower carbon footprint with a clear route to achieving net-zero
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects



## Objectives for 2026 - 29



- **Quality:** Implement an integrated Quality Improvement framework that enhances the quality culture within DHCW while ensuring compliance with the Quality Management System (QMS) and meeting our legislative requirements under the Duty of Quality and Medical Devices Regulations aligning with our performance framework.
- **Social Value:** Implement the Social Value approach that maximises DHCW's social and environmental value in line with the requirements of the Foundational Economy, the Well-being of Future Generations Act and other associated social and environmental guidelines within the Welsh context.
- **Procurement:** Apply and embed the Procurement Act across DHCW along with working in collaboration with our stakeholders meeting foundational economy objectives and enhancing reporting and analysis capability through tooling.
- **Governance:** Ongoing enhancement of the governance culture within DHCW whilst ensuring compliance with statutory reporting, planning and performance frameworks and PMO standards.

## Value and Outcomes

- Delivery of DHCW's wellbeing objectives under WBFGA
- A reduced carbon footprint – 34% lower carbon footprint with a clear route to achieving net-zero by 2035
- Ability to communicate the impact of digital on sustainable development
- A diverse, skilled and motivated workforce
- Increased safety compliance of systems
- Maintenance of external Quality Standards certifications
- A strong quality culture to meet the Duty of Quality
- Procurement of digital goods and services to stimulate the Welsh economy in accordance with the IMTP and other initiatives
- Ensure that the digital goods and services procured align with procurement best practice and value for money in accordance with procurement law and WG policy
- Effective enhanced programme governance arrangements
- A strong risk culture that meets the needs of the organisation
- A benefits led organisation
- A culture of performance improvement which empowers DHCW to achieve its vision through data driven actionable insights ultimately improving patient outcomes and adding value for our stakeholders

## Potential Value Opportunities

- Development of Social and Environmental strategy to deliver on Wellbeing Objectives
- Continued provision of robust commercial services to NHS Wales in accordance with procurement law and policy, striving to be world class and continuously seeking to improve in line with quality initiatives



Quality



Procurement



Social Value



Governance

# Wellbeing of Future Generations Act: Statement and Objectives

## Statement

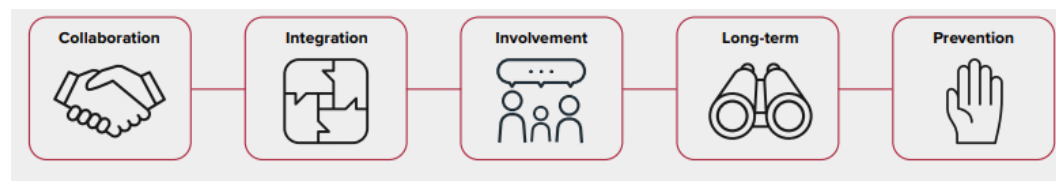
- The WFGA is central to our approach towards long-term planning within DHCW and is reflected in our purpose: **'To make digital a force for good in health and care'**. Our vision is to provide world leading digital services empowering people to live healthier lives.
- Our wellbeing objectives are designed to address the key challenges with regards to achieving the wellbeing goals in a digital world, which include: (1) the impact of Artificial Intelligence and digital innovation; (2) Electronic waste; (3) Data security; (4) Data privacy and ethical issues in relation to the use of personal health data; (5) Environmental footprint of hardware infrastructure and supply chain; (6) Recruiting and managing a diverse and skilled workforce.
- Our organisational strategy affirms our commitment to sustainability including our duties under the Well-Being of Future Generations Act, our decarbonisation strategy, and our work to support the foundational economy through our recruitment, partnerships and supply chain. As part of an integrated approach, our wellbeing objectives will deliver on wider sustainable development legislation and policy such as the Social Partnership and Public Procurement Act, which brings together four principles of Social Partnership; Socially Responsible Procurement; Fair Work and Sustainable Development. We have reviewed the priority areas within the Future Generations Commissioner's Cymru Can 2030 strategy, noting the focus area of Artificial Intelligence and broader priorities including the Foundational Economy, culture change, food, prevention and simplified partnership arrangements.
- Our stakeholder engagement plan forms the foundation for our approach to collaboration and involving people with an interest in achieving the wellbeing goals. Further, we have engaged with the Future Generations Office and collaborated with the Centre for Digital Public Services with an ability to demonstrate alignment between our wellbeing objectives.
- Our objectives have been developed with the sustainable principle at the forefront, having considered the long-term impacts, prevention and mitigation of future issues, integration and the existing strategies (both internally and externally), collaboration to strengthen approaches and involvement with our partners.
- Progress will be monitored and reported to the SHA Board and will form part of our Annual Report.

## Wellbeing Objectives

By 2035, digital innovation will support a more sustainable and equitable future for all in Wales. To help realise this ambition, we aim to:

1. Achieve net zero emissions across all of our operations and supply chain by 2035 and apply circular economy principles to minimise electronic waste.
2. Provide digital and data services that deliver economic, social, environmental and cultural value and meet population needs now and in the future.
3. Leverage clinical data, in combination with a diversity of data sources, to identify actionable insights which support prevention, population health, equity and well-being.
4. Enable the safe, effective and ethical deployment of Artificial Intelligence and digital innovation more broadly across Wales.
5. Put people first as a diverse, equitable and inclusive employer by offering meaningful work, paying the real Living Wage as a minimum and developing digital skills.

In working towards these objectives, we will promote the 5 Ways of Working as outlined in the act, with our stakeholder engagement plan as the foundation for achieving this.



In achieving our wellbeing objectives by 2035, we have set out our approach to achieving these objectives through our Social Value Delivery Model on the next page.

# Social Value Approach and Delivery Model

DHCW has developed a Social Value approach to support the delivery of the Wellbeing Objectives set under the Wellbeing of Future Generations Act. For DHCW, social value means the full range of impacts that our digital and data products and services have on social, environmental, cultural and economic outcomes. The Social Value Delivery Model (SVDM) provides a holistic view of how DHCW uses resources and relationships to create social value, integrating financial and non-financial performance for sustainable decision-making. It describes how DHCW transforms inputs into outputs and outcomes to create social value for stakeholders over the short, medium, and long term. The purpose of the SVDM is to:

1. Provide transparency on how DHCW's use of resources drives social value.
2. Help stakeholders understand long-term sustainability and resilience.
3. Link financial performance with environmental, economic, social and cultural factors and stakeholder outcomes to deliver on the wellbeing objectives and goals.

The overarching ambition for the SVDM is shaped by DHCW's vision, purpose and wellbeing objectives. The key principles supporting social value delivery are the 5 ways of working from the WBFGA and the Marmot principles. Governance and accountability arrangements are delivered through DHCW's established governance structures. Measurement and reporting will be through statutory reporting and performance returns at an organisational level and through benefits management reporting at a product / service / programme level.

The SVDM is set within the external environment, recognising the context within which DHCW operates. Its components are adapted from the International Integrated Reporting Framework as follows:

## Resource Inputs

Resources used by the organisation are categorised into six 'capitals': Natural, Human, Social and Relationship, Manufactured, Intellectual and Financial.

## Foundational Economy Delivery Mechanisms

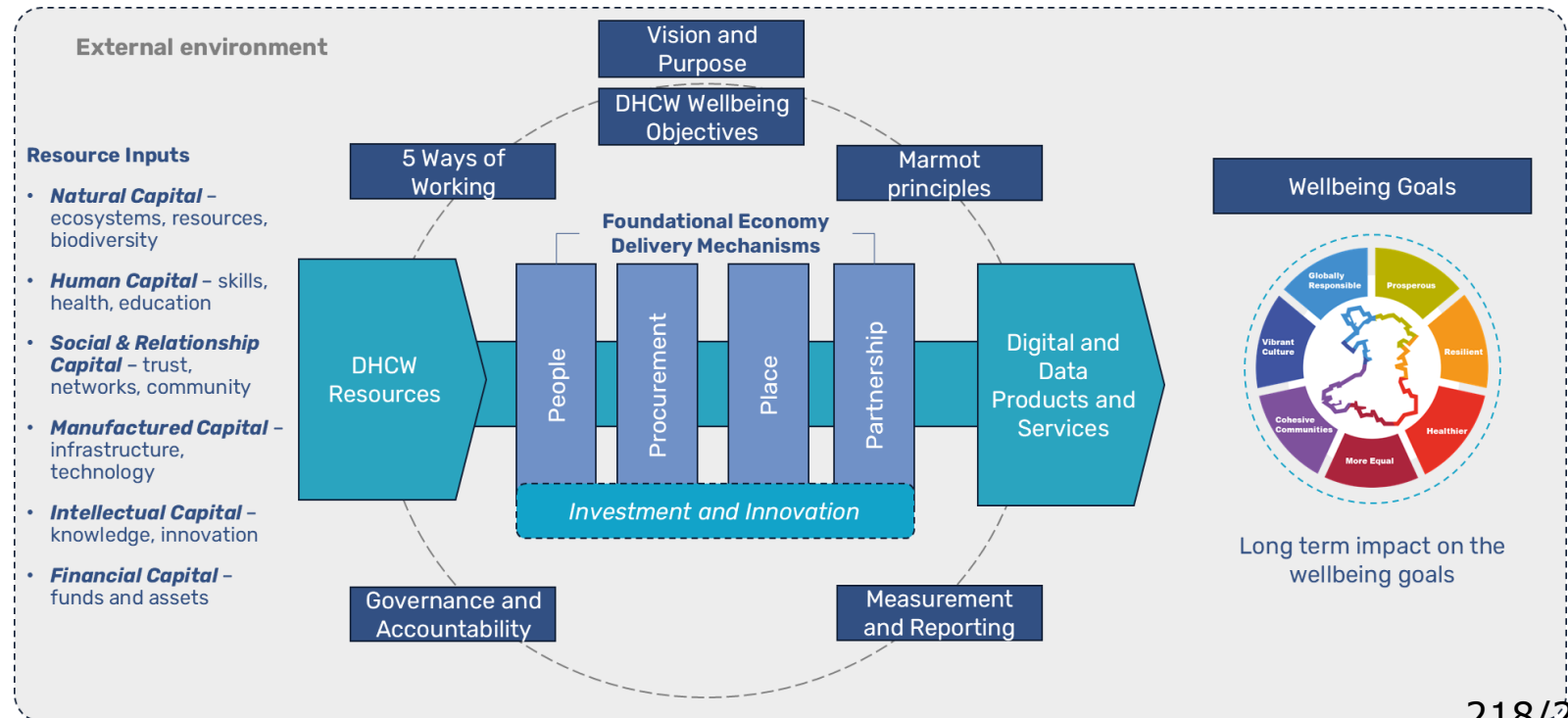
These are the key processes and operations that transform inputs into outputs and help to deliver social value in line with Welsh Government's Foundational Economy policy.

## Outputs

Digital and Data Products / Services and by-products delivered to customers and stakeholders.

## Outcomes

Broader effects on the wellbeing goals, such as social impact, environmental footprint, and economic contribution.



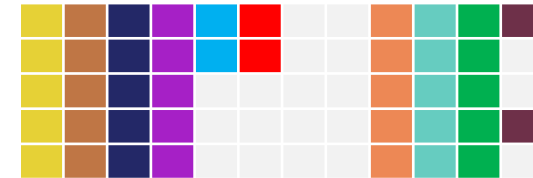
# Our Strategic Framework aligned with the Health and Care Quality Standards



- Safe
- Timely
- Effective
- Efficient
- Equitable
- Person Centred
- Workforce
- Culture
- Information
- Learning, Improvement and Research
- Whole Systems Approach
- Leadership

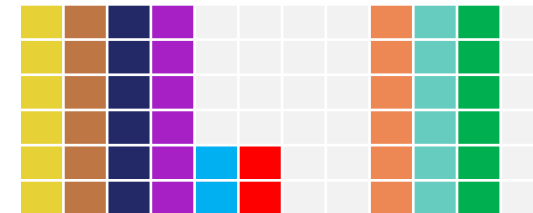
## 1 Provide a platform for enabling digital transformation

- Move all our data stores and services to the NDR platform to create a single national Clinical Data Repository
- Redesign our applications and services to a clean architecture which is secure by design and is based on open standards
- Extend data standards and data components to social care and other partners
- Establish an all-Wales framework for sharing health and social care data
- Move all our live services to the cloud and close our datacentres



## 2 Deliver high quality digital products and services for health and care professionals

- All prescribing and medicines management in Wales is digitally enabled
- All our digital health systems and major social care systems flow data to and from the NDR platform
- Our core health services are consolidated into a single all-Wales Electronic Health Record application
- Our core social care services are consolidated into a single all-Wales Electronic Social Care Record application
- A comprehensive single digital health and care record is used across all settings throughout Wales
- Users report a top-quartile satisfaction for our products and services



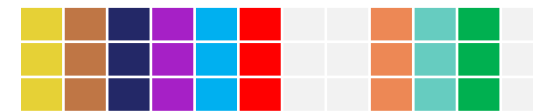
## 3 Deliver high quality digital products and services for patients and the public

- The NHS Wales App is used regularly by over a million people



## 4 Drive better values and outcomes through innovation

- An NDR secure data environment which provides access for research while protecting privacy
- A national information and data insights service which demonstrates net benefit and value
- Deploy AI and automation, safely and ethically, to deliver year-on-year productivity improvements across NHS Wales



## 5 Be the trusted partner and a high performing, inclusive organisation

- An academy approach to developing people through talent and leadership development programmes, aligned to Digital and Data Profession Capability Framework
- A secure, long term financially stable position
- At least a 34% lower carbon footprint with a clear route to achieving net-zero
- Work with partners and stakeholders to deliver a prioritised pipeline of future programmes and projects
- Top-quartile staff and stakeholder engagement





Ein cyf/Our ref: MA/JMHSC/2995/25

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16 March 2026

Dear Ruth and Helen,

## Digital Health and Care Wales (DHCW) Remit Letter and Financial Allocation for 2026/27

I am writing to you in my capacity as Cabinet Secretary for Health and Social Care, and on behalf of the Minister for Mental Health and Wellbeing, who is now on Maternity leave. This letter sets out the Welsh Government's strategic remit for Digital Health and Care Wales for 2026/27 and the financial allocation for the organisation for the same period.

As Wales' national digital organisation for health and social care, DHCW is responsible for the provision, design, management, development, and delivery of effective digital platforms, systems, and services to support the delivery of health and social care in Wales. Its core statutory functions are set out in the Digital Health and Care Wales (Establishment and Membership) Order 2020/1451, with functions having also been directed by the Welsh Ministers in the Digital Health and Care Wales (No.2) Directions 2021. The priorities set out in this letter have been determined, and are directed by, the Welsh Ministers with due consideration to these functions.

### Strategic Context

The remit for DHCW in 2026/27 is set out as the priorities outlined in this letter. They have been set within the Welsh Government's strategic agenda, and reflect the refreshed [policy actions](#) in 'A Healthier Wales'. This remit also aligns with the following six strategic priorities in the NHS Wales Planning Framework 2026-2029 (Framework):

- Timely access to care
- Population health & prevention
- Community by Design
- Mental health access
- Women's health

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

- Quality & Safety

In addition, DHCW will consider in delivering the expectations set out in the Remit:

- The Well-being of Future Generations Commissioner's strategy, Cymru Can, supporting sustainable development and long-term health improvement.
- The Welsh Ministers' Welsh Language Standards and the priorities set out in Mwy Na Geiriau (More Than Just Words), the Welsh Government's Welsh language plan for Health and Care.
- Welsh Government's strategic equalities plans including the Anti-racist Wales Action Plan; the LGBTQ+ Action Plan; the work of the Disability Rights Taskforce; Health Bodies' Strategic Equality Plans; and the revised Accessible Communication and Information Standards
- The National Value and Sustainability Board's focus on reducing waste, harm, and unwarranted variation, ensuring efficient use of resources.
- Science Research Evidence (SRE) division's (Science Evidence Advice at the time of report publication) report, "the NHS in 10 years+".
- Digital inclusion, aligned to the minimum digital living standard as a framework, should be integral to service design, ensuring equitable health and care provision across Wales and empowering individuals to actively participate in their own health and wellbeing and support the transition towards a more proactive, prevention-focused healthcare system.

Realising the potential of digital and innovation is a key element of preparing NHS services for the future. Any successful healthcare system must make far greater use of digital technologies in every aspect of its work.

### **Priorities for delivery in 2026/27**

The priorities for DHCW to deliver are outlined below. These align with DHCW's core responsibilities to secure the provision and promotion of effective digital platforms, systems, and services, and are set under the relevant 'A Healthier Wales' refreshed actions, as well as wider strategic priorities for Welsh Government referenced above. In accordance with the powers conferred by section 23 of the National Health Service (Wales) Act 2006, DHCW is directed by the Welsh Ministers to focus on these priorities, and future directions will be issued to underpin operational delivery of functions as appropriate. These priorities are expected to be the primary purpose for all DHCW's activities and will remain in place unless amended at the direction of the Welsh Ministers.

To ensure the effective delivery of these priorities, DHCW will provide end-to-end service provision for each area including effective programme management and coordination underpin transparent reporting. This means fully deploying solutions to end users and ensuring they deliver the intended patient and system outcomes. Clear accountability and transparency will be maintained throughout, with well-defined responsibilities, measurable progress, and robust assurance of outcomes. This comprehensive approach is essential to guarantee that each priority is not only initiated but fully implemented and embedded within the organisation's operations. The Welsh Government will commission and oversee the collaborative development of the digital strategy and roadmap for NHS Wales, and my officials will be keen to work with you as we develop that strategy.

## Key Priorities for 2026/2027:

### **Empowering Patients and Citizens**

**Outcome:** *Enable people to access health services and information, digitally support self-management and improved patient experience.*

**Priority:** Delivery of the NHS Wales App in accordance with a Ministerial endorsed roadmap for 2026/2027.

### **Integrated Health and Social Care**

**Outcome:** *Integration of health and care digital systems and where there is shared care record with social care to improve care coordination and patient outcomes, ensuring clear accountability for delivery*

**Priority:** Utilising the Integrated Care Record business case for Connecting Care, along with the defined scope for Connecting Care health agreed in Q4 2025-26, develop an implementation plan by June 2026 in collaboration with stakeholders to ensure the health and social care components of Connecting Care are effectively integrated.

### **Safer Medicines Management**

**Outcome:** *Demonstrable reduction in prescription errors and enhanced medicines management and improving patient safety.*

#### **Priorities:**

- Manage funding (capital and revenue) disbursed to health boards in line with the local ePMA business cases and strategic objectives which have been approved by Welsh Government.
- Provide transparent reporting to Welsh Government on ePMA programmes performance, finances, benefits, and delivery milestones, to programme completion - overseen by a revised National ePMA Programme Board governance which reports upwards to the DDaT Delivery Board
- By November 2026, all local ePMA systems fully deployed and operational across all relevant settings – confirm an all-Wales roadmap with milestones and benefit realisation points through the revised National ePMA Programme Board governance.
- As part of programme closure, confirm exit plans for legacy systems and avoidance of vendor lock-in, and report on realised benefits, value for money, and environmental impact.

### **National Architecture and Standards; Data Interoperability**

**Outcome:** *Consistent, high-quality information exchange across all health and care systems, supporting clinical safety and service improvement.*

#### **Priorities:**

- Participate in the Standards and Architecture Group on the development of standards using existing UK and international standards wherever possible and ensuring an appropriate balance between technical advancement and service impact.
- Develop a clear plan for all local and national systems to migrate and flow data to the Care Data Repository and National Data Analytics Platform (“the NDR Onboarding Plan”). The plan must include a proportionate assurance process and formal written commitments from each partner organisation against deliverable milestones and timetables. This assurance must demonstrate compliance with applicable data protection and information governance requirements, including UK GDPR and the Data Protection Act 2018, with appropriate consideration of lawful basis, purpose limitation, data minimisation, security controls, and transparency obligations. DHCW must engage with partner organisations throughout their onboarding, explicitly communicating any barriers encountered—including legal, information governance, or

technical constraints—and detailing the actions being taken to address and resolve these issues.

- Manage funding (capital and revenue) disbursed to health boards in line with the Onboarding Plan and strategic objectives which have been approved by Welsh Government.
- Provide transparent reporting to Welsh Government on NDR Onboarding Plan performance, finances, benefits, and delivery milestones, to programme completion - overseen by the NDR Programme Board governance which reports upwards to the DDaT Delivery Board

### **Digital Inclusion and Accessibility**

**Outcome:** *Services are accessible and inclusive for all, and that digital transformation reduces, not widens, health inequalities.*

**Priority:** Embed the Minimum Digital Living Standard in all digital solutions.

### **Cyber Resilience:**

#### **Outcomes:**

- *The independent NHS Wales Cyber Resilience Unit function supports the Competent Authority for Health, through Welsh Government, in meeting its statutory cyber security responsibilities across the health sector.*
- *Strengthening system-wide preparedness and supporting responses to cyber threats to ensure minimal disruption to services and patient care.*

#### **Priorities:**

- Ensure the hosted independent NHS Wales Cyber Resilience Unit function effectively discharges its delegated responsibilities to support the Competent Authority (Welsh Ministers through Welsh Government) in implementing the requirements of the NIS Regulations and incoming Cyber Security & Resilience Bill, ensuring clear independence of the NHS Wales CRU function from the DHCW broader cyber role.
- As part of the DHCW national cyber security support function, to demonstrate leadership in the event of a potential or actual cyber breach to NHS Wales, identify key areas of national improvement in high-risk areas and submit co-produced proposals where appropriate.

### **Primary Care Transformation**

#### **Outcomes:**

- *All GP practices successfully transition from INPS (Cegedim) to Optum, resulting in improved interoperability, data quality, and clinical efficiency across primary care settings.*
- *The redesigned Choose Pharmacy application delivers a more intuitive and effective digital experience, enabling pharmacists to provide safer, faster, and more integrated patient care.*
- *Secure Digital Access with every contractor and professional in primary care has reliable, secure access to NHS email and essential applications, ensuring seamless communication and safeguarding patient information.*
- *Electronic prescribing is fully deployed across primary care, reducing medication errors, streamlining workflows, and supporting safer, more efficient patient care.*

#### **Priorities:**

- Clear migration roadmap, and regular reporting on progress to Welsh Government, of GP practices from INPS (Cegedim) to Optum (Quarterly reporting)
- Whole system Primary Care Digital and Data Transformation Plan in partnership with WG NHS Performance and Improvement
- Choose Pharmacy - Redesign of the Choose Pharmacy application.

- MS365 Licences - Revise access to enable contractor/premise/professional access to NHS email and NHS applications.
- Community by Design: support the delivery of integrated care through digital enablers that support data driven approaches, interoperability, and robust information governance frameworks connecting services.

### **Eyecare Modernisation**

**Outcome:** *Improved referral pathways and timely access to specialist care*

**Priority:** Implement Optometry Electronic Referral System (ERS) across all Health Boards, with full deployment by September 2026, working closely with C&VUHB in their continued delivery and future resilience of the national digital eye care programme through sustainable solutions for both the Electronic Patient Record solution (OpenEyes) and the ERS which will be funded through both the core allocation and Primary Care Development budget. This will enable consistent, integrated patient care and streamlined referrals across all Health Boards, supporting long-term adoption and improved clinical outcomes, subject to compliance with statutory data protection, information rights, and governance obligations (including UK GDPR and the Data Protection Act 2018).

### **Cloud Transformation**

**Outcome:**

*Digital and data products and services transitioned to secure, scalable cloud platforms that advance national digital objectives, improving efficiency, resilience and sustainability across health and care services, including through data flows into the National Data Resource and patient access to health records through the NHS Wales App subject to compliance with statutory data protection, information rights and governance obligations (including UK GDPR and the Data Protection Act 2018).*

**Priorities:**

- Provide a roadmap with milestones and benefit realisation points.
- Confirm exit plans for legacy systems and avoidance of vendor lock-in.
- Report on progress, value for money, and environmental impact.
- Confirm the cloud business case remains live and under review.

### **Research Services**

**Outcome:**

*Advance the Ministerial agreement enabling Wales to participate in the Health Data Research Service, ensuring alignment with the UK life sciences strategy, and securing tangible benefits for Wales.*

**Priority:** Work with Welsh Government and academic partners to ensure the timely delivery of data research initiatives that underpin life Science, innovation, and research opportunities as a catalyst for enhancing health and wealth of the Welsh population and its economy.

### **National Programmes**

**Outcome:** *DHCW working with NHS Performance and Improvement on requirements will deliver National Programmes, to achieve measurable improvements in health and care outcomes, ensuring sustained support and tangible benefits for patients and services*

**Priorities:**

- **The Vaccination Programme-** DHCW must maintain and improve the Welsh Immunisation System, communicate all planned changes with at least one month's notice. DHCW must deliver all required vaccine schedule updates, complete onboarding of childhood vaccinations to WIS by end of 2026, launch public-facing digital services via the NHS Wales app as scheduled, provide timely data access, and offer technical support and training. DHCW must take forward any learning and

improvements identified following the review of winter respiratory programmes in January 2026. All milestones and changes must be clearly communicated and met as specified by Welsh Government.

- **Six Goals Urgent and Emergency Care Programme**-DHCW was commissioned and funded to deliver a complete and accurate submission of Emergency Department and Minor Injury Unit data in the Welsh Emergency Care Data Set (WECDS) format by 31 March 2026. Given that the roll out is behind schedule and the mandate will not be delivered by the target date, DHCW will develop a 'Recovery Plan' with new milestones to meet the existing mandate for the delivery of high-quality ED data. This will be done in collaboration with the Welsh Government and the 6 Goals programme.
- **Community by Design**- DHCW will deliver integrated digital solutions and robust information governance frameworks to enable scalable community and cluster working, fostering multi-professional collaboration and improved care pathways. DHCW will implement and expand pilots for digital care pathways and clusters, ensuring continuous adaptation based on frontline feedback. A clear roadmap for 2026/27 will be developed, encompassing integrated digital patient records, digital tools to support community working, public health management solutions, and associated information governance actions. The programme will also introduce digital enhancements, including the NHS Wales App prototype, integration of self-care applications, demand and capacity analysis tools, and initiatives such as digital triage and AI scribe pilots. Evaluation reports and national implementation plans will be produced, information governance frameworks updated, and digital solutions rolled out to additional clusters and pathways, supporting ongoing improvement and transformation.
- **Strategic Programme for Mental Health** DHCW will deliver transformational change in mental health services across Wales through the implementation of the 3-year Data and Digital Delivery Plan. The key deliverables include agreement and implementation of a mandated core data set for mental health services; development and evaluation of digital tools to enhance service delivery for both practitioners and service users; and the redesign of digital processes to improve care pathways and operational efficiency. All initiatives will be supported by robust governance, inclusive design, and data sharing agreements across Health Boards and with DHCW, with the NHS Wales App serving as a key enabler for secure patient access and service evaluation, in alignment with the Mental Health and Wellbeing Strategy Delivery Plan 2025–2028.
- **Planned Care Programme**; DHCW will deliver key improvements including the implementation of Data Set Change Notices (DSCNs) for referrals and outpatient activity, development of patient-level data for enhanced care measurement, and rollout of digital pre-operative systems across Wales. Work will also begin on redesigning the APC database, supporting standardised systems for regional collaboration and patient assessment. DHCW will provide the Welsh Government with a plan by April 2026 which sets out setting out a clear route to delivery for all of the above items in relation to Planned Care.
- **Cancer**– DHCW will transition the cancer informatics programme to business-as-usual product management. This should include ongoing maintenance of the system, planned/phased implementation of the development backlog, and enabling of the cancer data development roadmap (for secondary uses of the data). The development backlog should balance the following priorities: system availability and updates, further integration of clinical care between settings and organisations, improving pathway productivity and efficiency, and enhancing secondary uses of the data (including clinical audit).

- **Diabetes-** A digital patient record for the care of people with diabetes that can support integration of the care pathway between outpatient care, primary care, podiatry, dietetics, and paediatrics. With the capability to upload and link data for national clinical audit and national diabetes dashboards

Given the evolving nature of health and social care priorities, the Welsh Ministers retain the flexibility to adjust this remit during the year should Ministerial priorities change. Any such changes will be discussed by DHCW and Welsh Government Officials prior to an addendum being issued.

### **Information Governance.**

In relation to data protection, privacy and security and information governance frameworks, DHCW is required to support the work of Welsh Government to develop a clear framework and guidance around data policy and establish clarity around roles and responsibilities. Whilst work remains ongoing on the issuing of future directions with the view of refining DHCW's functions, DHCW must, as is always the case, ensure compliance with their statutory obligations, including for example in relation to data protection, information rights, and governance.

In implementing the remit set out in this letter and/or in response to other Welsh Government instructions, DHCW must ensure that any new or additional processing of personal data is initiated only once the full end-to-end data flow has been assessed and a clear legal and policy basis for the processing has been established.

Where proposed data processing is dependent on, or enabled by, **legislative, statutory, or regulatory measures**, DHCW must work with the relevant Welsh Government policy team at an early stage to determine whether the proposal engages the **Article 36(4) consultation requirement**. This includes making explicit where ministerial powers may be required to enable data flows from the relevant Health Board, Trust, Authority, and/or Primary Care setting. In such cases, DHCW will provide written input to Welsh Government, including a description of the proposed processing, data flows, and safeguards, to support Welsh Government's consideration of its obligations under Article 36(4). Welsh Government will then confirm whether an Article 36(4) consultation with the Information Commissioner's Office is required and, where applicable, will lead that consultation, drawing on DHCW's input, as necessary.

### **Operational Standards**

DHCW must ensure that DHCW digital systems across NHS and where there are shared care records with social care, in Wales settings achieve and maintain at least 99.9% operational uptime. Success will be measured by system availability, with less than 0.1 % unplanned downtime annually, and by the ability of clinicians, care professionals, and service users to reliably access essential digital tools and information. Additional metrics for success include:

- **Incident Response:** All critical system incidents resolved within four hours.
- **User Satisfaction:** At least 90% of users reporting satisfaction with system reliability and accessibility.
- **Data Integrity:** Zero loss of patient data due to system failures.
- **Service Coverage:** 100% systems availability across NHS and social care sites.

By consistently meeting these standards, we will support safe, efficient, and high-quality care delivery for the people of Wales.

### **Escalation Status**

As previously communicated, the escalation status for the performance and outcomes domain for DHCW remains at level 3 (enhanced monitoring). This reflects ongoing challenges

with the pace of delivery on key national priority programmes. DHCW is expected to work closely with Welsh Government officials to address these challenges, with regular review of escalation status and targeted support as required. Any changes to escalation status will be communicated and reflected in the monitoring and assurance arrangements.

### **Expectation of Foresight and Scenario Planning**

DHCW is expected to undertake regular horizon scanning and scenario planning exercises to anticipate potential changes in the health and care landscape, including technological, regulatory, and policy developments. These insights should inform strategic planning and operational readiness.

To ensure resilience and responsiveness throughout the year, DHCW must maintain organisational agility to adapt to in-year (2026/27) changes in priorities or circumstances. The organisation should proactively assess and develop its workforce capabilities, ensuring that the right skills and expertise are available to address emerging challenges and operational pinch points as they arise. This includes implementing flexible workforce planning, targeted upskilling, and rapid resource deployment where necessary, so that unforeseen delays in delivery can be mitigated swiftly and effectively. Such an approach will support the continuous achievement of objectives set out in this remit and the Framework. This will be subject to regular review as part of ongoing performance and assurance arrangements.

DHCW must pause all non-essential recruitment activity during 2026/27. Recruitment may proceed only where a role is critical to statutory delivery or priority programme commitments and only following explicit HSCEY Workforce authorisation supported by a robust, evidenced business need.

DHCW must exhaust all internal resourcing options, including redeployment, managed moves, and maximising existing capability, before seeking any external approval. In meeting Welsh Government's affordability requirements, DHCW must set out clearly where non-core activity can be reduced or ceased to realise savings and identify any further service or workforce changes that can contribute to delivering this financial expectation.

Any proposal to increase establishment will only be considered where supported by detailed workforce planning evidence, a full affordability assessment, and a clearly articulated rationale demonstrating why internal resourcing or reprioritisation cannot meet the requirement.

### **Planning and Performance Arrangements**

Your plans for meeting the requirements of the Framework and this remit should be set out in your Integrated Medium-Term Plan for 2026-29 (IMTP). Your plan should achieve financial balance. A "financially balanced" position reflects DHCW's statutory duty, under section 172(1) of the NHS Wales Act 2006, to ensure that in each financial year its expenditure attributable to the performance of its functions does not exceed the aggregate amount allotted to it by Welsh Ministers. The baseline review should initially focus on activities that fall outside the expectations of this remit, with a view to identifying work that could be stopped. Officials will continue to engage with DHCW to agree clear milestones and decision points throughout this process.

The timetable and arrangements for preparation and submission of the IMTP, including agreement of targets and performance measures, has been communicated separately. DHCW should determine additional plan contents as appropriate, reflecting any additional resources available.

Reporting arrangements for monitoring performance will include regular updates through IQPD and JET meetings, as well as review meetings with Welsh Government officials.

DHCW is also expected to pursue efficiency targets and measures as set out in the Framework and relevant Welsh Government guidance. Overarching arrangements for public service improvement and partnership working, including collaboration with NHS Performance and Improvement, Health Boards, and other national bodies, must be considered.

### **Financial Allocation**

The financial allocation for DHCW is set out in Annex A and we can confirm the 2026-27 baseline core funding allocation for DHCW is **£77.710m**.

The Primary Care IM&T budget allocation of **£22.436m** for the delivery and maintenance of Digital systems to support GP services.

The Primary Care Development budget allocation of **£150,000** to implement Optometry Electronic Referral System (ERS) across all Health Boards, with full deployment by September 2026 Financial allocation to DHCW can be reduced in line with section 171(3) of the National Health Service (Wales) Act 2006, which provides that “*the Welsh Ministers may make an allotment under this section increasing or reducing an allotment previously so made.*”

The allocation of funds for National Priorities under the Digital Priorities Investment Fund (DPIF) is currently under review and will be addressed in a subsequent funding correspondence.

DHCW should demonstrate a clear plan for how it will shift spending from routine or business-as-usual activities to innovation, directing more resources to transformative programmes. The plans should detail the steps for moving from government-funded development to ongoing maintenance and support, ensuring that resources are reallocated effectively and that the benefits of innovation are embedded across the organisation. DHCW should also undertake a benchmarking exercise to compare performance and value for money, using the findings to inform future investment and efficiency opportunities.

### Disbursement

Most programmes within the DCHW portfolio already include established disbursement arrangements, with funding to health boards accounted for within their overall programme costs. Accordingly, DCHW will manage funding from programmes (capital and revenue) disbursed to health boards which have been approved by Welsh Government, in line with the local business cases and strategic objectives.

### Baseline Review and Workforce

We also require DHCW to complete a financial base line review by the end of the first quarter of 2026/27. The baseline will need to identify options and choices for further savings that can be realised during the year that go beyond achieving financial balance. This initially should focus on activity outside the expectation of this remit letter that can be stopped including any activities outside of your statutory functions. Officials will further engage with you on this requirement including clear milestones and decision points throughout the process.

Whilst DHCW completes the base line review, DHCW must implement a recruitment freeze so that the opportunity for additional savings is not constrained by additional workforce costs and employment obligations above existing levels. Once the outcomes of base line review

are submitted, the Welsh Government will consider whether the recruitment freeze needs to continue.

### **Governance and Accountability**

You are required to uphold the highest standards of professionalism and foster a safe, respectful, rewarding, and inclusive environment for staff. Delivery assurance for this remit and your IMTP will be provided through established governance arrangements, including IQPD and JET meetings, alongside the DDaT Governance Structure. The DDaT Governance Structure will provide clear accountability for specific delivery projects, ensuring that progress is monitored, and risks are managed effectively.

To further enhance programme oversight and risk management, DHCW must assign a dedicated Senior Responsible Owner (SRO) for each programme, ensuring that this responsibility is held outside of the Chief Executive role. The appointed SRO will be accountable for the delivery, risk management, and performance of their respective programme, providing clear leadership and ownership.

DHCW is required to keep Welsh Government officials fully briefed on all emerging issues, risks, and any potential or actual impacts on programme delivery. This includes providing timely updates, early warnings of challenges, and transparent reporting on mitigation actions. Such arrangements will support effective governance, enable rapid response to risks, and ensure that Welsh Government is able to provide appropriate support and oversight as needed. These regular updates to Welsh Government officials must be maintained to demonstrate transparency and compliance. Board members and employees must also be fully compliant with all relevant governance policies and guidelines, including codes of conduct, conflict of interest, and Welsh Language standards.

### **Communications**

DHCW must maintain proactive engagement with Welsh Government officials and stakeholders, providing timely updates on any changes or issues affecting delivery. All major announcements require prior approval from Welsh Government officials and Ministers to ensure consistent messaging and maintain public confidence. Communications must also comply with Welsh Language standards and reflect organisational priorities.

### **Risk Management**

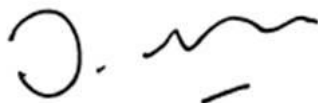
The identification and management of risks to the delivery of objectives is a core responsibility of both the Board and the Chief Executive, as outlined in the Framework. This includes establishing robust risk management processes, regularly reviewing the risk register, and ensuring that mitigation strategies are in place for all significant risks. The Board and Chief Executive must ensure that risk management processes include the proactive identification of risks arising from potential changes in priorities, funding, or external circumstances, with contingency plans developed and regularly reviewed.

In addition, the Board and Chief Executive must define and communicate clear risk tolerance levels for all programmes. This means setting explicit boundaries for the amount and type of risk that is acceptable in pursuit of your objectives and ensuring that these thresholds are consistently applied in decision-making and escalation processes. Risk tolerance should be reviewed regularly and adjusted in response to changes in priorities, funding, or external circumstances, to ensure that you remain within those agreed risk boundaries.

The Board and Chief Executive should foster a culture of risk awareness throughout the organisation, encouraging staff to report potential risks and to contribute to the development of effective solutions. Where strategic risks are identified that require a joint approach such

as those impacting multiple organisations or requiring cross-government collaboration. These should be discussed and agreed with Welsh Government officials. Any such joint approach will be formally recorded in this remit letter and will be subject to regular review to ensure its continued effectiveness. The Board and Chief Executive are expected to provide regular updates on risk management activities, including progress against agreed mitigation actions, as part of established governance and assurance arrangements.

Yours sincerely,

A handwritten signature in black ink, consisting of a large 'J' followed by a series of wavy lines and a short horizontal stroke at the end.

**Jeremy Miles AS/MS**

Ysgrifennydd y Cabinet dros Iechyd a Gofal Cymdeithasol  
Cabinet Secretary for Health and Social Care

## Annex A – Funding schedule.

<b>Core funding allocation (Revenue)</b>	<b>£m</b>
DHCW Core allocation – Revenue	65.877
2024-25 Pay Mapping Budget - DHCW	3.382
NHS Wales App BAU and Cancer informatics	5.000
DHCW National Insurance Contribution Increase 2026-27	1.174
DHCW Pay Award 2025-26	2.277
<b>Total</b>	<b>77.710</b>

<b>Non-Fiscal Resource</b>	<b>£m</b>
Digital Health and Care Wales – Depreciation – Non IFRS 16	12.510
Digital Health and Care Wales – Depreciation – IFRS 16	1.135
<b>Total</b>	<b>13.645</b>

<b>Primary care IM&amp;T allocation and Other Health Budget</b>	<b>£m</b>
Primary Care IM&T allocation	22.436
<b>Total</b>	<b>22.436</b>

<b>Primary Care Development budget</b>	<b>£m</b>
Eyecare	0.15
<b>Total</b>	<b>0.15</b>



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By e-mail to: [dsdghsceynhswce@gov.wales](mailto:dsdghsceynhswce@gov.wales)

23<sup>rd</sup> March 2026

Ms Jacqueline Totterdell  
Director General Health and Social Services  
NHS Wales Chief Executive  
Health and Social Services Group  
Cathays Park  
Cardiff  
CF10 3NQ

Dear Jacqueline,

**Re: Digital Health and Care Wales (DHCW) 2026/27 Remit Letter and Financial Allocation - Accountable Officer Response**

I am writing to formally acknowledge receipt of the Remit Letter from the Cabinet Secretary for Health and Social Care dated 16 March 2026 and to set out my response in respect of delivery, affordability and associated risk for 2026/27.

I welcome the clarity provided on the strategic priorities for the coming year and confirm DHCW's continued commitment to supporting the delivery of national digital services for NHS Wales. This response is intended to provide assurance on our approach while also formally recording the constraints and risks arising from the confirmed funding position.

**Financial Allocation and Planning Assumptions**

I note the confirmed core revenue allocation of £77.710m in addition to Primary Care IM&T funding of £22.436m and £0.15m for Primary Care Development (Eyecare).

I further note that no allocation has been confirmed for the Digital Priorities Investment Fund (DPIF) for 2026/27 at the time of issuing the remit. We have committed expenditure against major digital programmes in the form of pay and non-pay spend for 2026/27. Accordingly, DHCW's 2026/27 financial plan has been prepared on the assumption that the DPIF funding allocation will be provided as per our correspondence with the digital policy team. Details of these funding allocations are set out in Appendix 1 and 2, which totals £32.9m revenue and £13.1m capital for Digital Priority Investments and a further £3.68m in relation transition to BAU and pipeline opportunities.

With regards to funding for Service Level Agreements, we have signed agreements from all but one Health Board. We are committed to working with the outstanding Health Board to reach agreement before the end of March and have provided the required details in response to their queries. Further, the new Enterprise Agreement for Microsoft is currently progressing through the governance routes in all NHS Wales organisations and we expect approval from all bodies by the end of March.



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We are committed to delivering substantial savings and have planned for £5.74m (c. 3%) in 2026/27 to achieve financial balance, subject to the confirmation of the DPIF funding allocation. We will revisit the savings plan in the first quarter to assess the impact of DPIF funding and as part of the financial baseline review in order to identify opportunities where we could go beyond financial balance. We will also continue to actively mitigate the cost pressures associated with digital inflation, cloud services, cyber requirements and technical debt which continue to grow within a fixed funding envelope.

### **Deliverability of the Remit**

DHCW remains committed to progressing the priorities set out in the remit letter, including the NHS Wales App, national data and interoperability services, cyber resilience, and primary care digital transformation.

However, I must formally advise that if DPIF funding is materially reduced, delivery of the full scope, pace and ambition of the remit letter within the confirmed financial envelope cannot be assured.

Risks will be transparently reflected in the IMTP, programme delivery plans and the corporate risk register. To mitigate these risks, DHCW will:

- Revise DPIF funded delivery commitments, through our regular change control and reporting mechanisms;
- Maintain tight establishment and vacancy control, including a recruitment freeze in line with the remit letter guidelines;
- Complete a full baseline review during Quarter 1 to identify activity that can be stopped, paused, reduced or rephased;
- Reprioritise resources through existing governance to protect essential national services;
- Articulate the benefits that will not be delivered to the system as a consequence of any choices / options;
- Strengthen programme assurance and clarity of Senior Responsible Owner accountability; and
- Maintain early and open dialogue with Welsh Government officials where delivery assumptions or dependencies change.

### **Monitoring and Escalation**

As we remain in level 3 enhanced monitoring for delivery of major programmes, we will continue to work constructively with Welsh Government to address delivery challenges and improve assurance.

Where delivery of specific priorities is dependent on additional funding, including DPIF, this dependency will be explicitly stated, with clear options and implications presented for decision.



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## Summary

DHCW is committed to delivering safe, resilient and high quality digital services for NHS Wales and to fulfilling the responsibilities set out in the 2026/27 remit.

However, I must formally record that achievement of the remit in full, as currently articulated, is not possible without confirmed DPIF funding. Consequently, as Accountable Officer, I cannot, at this point, confirm that DHCW will meet its statutory responsibility to break even for 2026/27. I will be discussing this position at our Public SHA Board meeting on 26<sup>th</sup> March 2026. We will proceed on the basis of affordability, prioritisation and transparency, and will work closely with Welsh Government to understand the DPIF funding available and agree any necessary adjustments during the year.

Yours sincerely,

### Helen Thomas

Chief Executive Officer and Accountable Officer  
Digital Health and Care Wales



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Appendix 1 – DPIF Funding Allocation 2026/27

Programme Name	Revenue	Capital	Programme Objective
<b>Welsh Nursing Care Record (WNCR)</b>	£550,000	£0	Building on the success of the nursing care records across adult Wards in Wales, this Paediatric focussed initiative enables nurses to complete assessments at a patient’s bedside on a mobile tablet, or other handheld device, saving time, improving accuracy and minimising duplication. Healthcare workers can access essential information to make informed decisions about a patient’s care, no matter where that care is taking place.
<b>NHS Wales App</b>	£680,000	£4,900,000	Develop the NHS Wales App to drive forward service transformation and empower patients to manage their health and well-being whilst maintaining reliability and scalability of live service
<b>National Target Architecture</b>	£1,020,000	£0	To develop a unified National Target Architecture that provides a structured strategic framework for investment over a 10-year timescale to enable systems and data alignment across Wales, supporting the secure and effective sharing of health and care data, improving care delivery for all
<b>National Data Resource (NDR) - including disbursements</b>	£8,860,000	£0	To expand content of Care Data Repository from all participants in the health and social care landscape, supporting improved care, analysis and planning, research, and service delivery through the National Data & Analytics Platform. Phase 4 BJC by March 2027
<b>Electronic Prescribing System (EPS)</b>	£1,820,000	£0	To implement the capability to digitally send prescriptions from GP practices to patients nominated pharmacy/dispenser for collection, to provide choice and convenience by 30 <sup>th</sup> November 2026.
<b>ePMA: Programme only costs (DHCW)</b>	£1,190,000	£0	To support full deployment of hospital electronic prescribing and medicines administration across all relevant settings, meeting the national requirement for full implementation. This includes delivering integrations, interoperability and shared medicines record capability across Wales.
<b>Digital Intensive Care - Option1a</b>	£0	£3,830,000	The objective is to deliver a modern digital ICU system for Wales by completing build, validation and implementation planning. This will support safer, standardised intensive care documentation and data flows nationally.
<b>Connecting Care</b>	£10,740,000	£0	Connecting Care: Delivery of the Health elements against a Welsh Government agreed Connecting Care delivery plan, supporting the replacement of the Care Director system through the provision of Mental and Community Health products improving standardisation, usability and interoperability through data standards and integration.
<b>Welsh Community Care Information System (WCCIS)</b>	£810,000	£0	Maintenance of the Care Director system whilst the Connecting Care business case progresses.



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<b>Cloud Transformation</b>	£4,600,000	£1,400,000	The Cloud Transformation Initiative aims to deliver a secure, scalable, and future-proof cloud infrastructure that underpins the integration and modernisation of digital health and care services across Wales. By migrating core systems and data to the cloud, the programme will enhance agility, resilience, and data-driven decision-making, while ensuring robust cyber security, compliance with national standards, and value for public investment.
<b>RISP</b>	£159,542	£146,327	To fully deploy the new national radiology system across Wales, supporting each organisation's go-live and achieving a safe transition to modern imaging workflows. It will also enable the decommissioning of legacy RIS/PACS systems once new capability is embedded.
<b>LIMS</b>	£1,727,136	£2,824,709	The objective is to complete the national rollout of the new laboratory system, ensuring modern diagnostics capability is available across all sites. The programme will then retire the legacy LIMS and begin planning for the next-generation solution.
<b>LIMS 3.0</b>	£817,788	£0	The objective of this programme is to procure a replacement Laboratory Information Management System which will contribute to the Welsh Government Pathology statement of intent by developing safe, sustainable, and standardised pathology services through end-to-end information and communication technology systems and services. The current LIMS contract ends in September 2030
<b>Total</b>	<b>£32,974,466</b>	<b>£13,101,036</b>	

Appendix 2 - Pipeline and Transition to BAU 2026/27

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02920 500 500  
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Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

Tŷ Glan-yr-Afon  
21 Heol Ddwyreiniol Y  
Bont-Faen, Caerdydd  
CF11 9AD

Tŷ Glan-yr-Afon  
21 Cowbridge Road  
East, Cardiff  
CF11 9AD

BAU and Pipeline	Revenue	Capital	Programme Objective
<b>Cardiac PACS</b>	£300,000	£0	To deliver a single, modern, Once-for-Wales Cardiac PACS solution that provides a unified, interoperable cardiology imaging and information system across all Health Boards. The programme will replace fragmented local systems with a national platform that enables a complete longitudinal cardiac record, supports cross-boundary pathways, standardises data and reporting, and ensures clinicians can access and share high-quality imaging and results wherever patients receive care. <i>Funding requirement under review subject to business case</i>
<b>WPOCT</b>	£300,000	£0	The Welsh point-of-care testing solution allows healthcare professionals to carry out diagnostic or laboratory testing at or near the site of patient care. The system allows for patient results to be received and processed much quicker than in a medical laboratory enabling quicker clinical decisions, faster treatment and reduces demand on laboratories. <i>Funding requirement under review subject to business case</i>
<b>Integrated Care Record</b>	£934,000	£0	To develop a case that will allow health and social care professionals to share important patient information safely. This means everyone involved in a patient's care can work together more effectively, so that patients get the right help at the right time.
<b>Pre-operative assessment</b>	£600,000	£0	To develop a case to review and improve the pre-operative assessment systems in order to reduce the administrative burden of finding patients that are fit for surgery.
<b>EPS BAU</b>	£904,000	£0	To implement the capability to digitally send prescriptions from GP practices to patients nominated pharmacy/dispenser for collection, to provide choice and convenience by 30th November 2026.
<b>EPMA BAU</b>	£170,000	£0	To support full deployment of hospital electronic prescribing and medicines administration across all relevant settings, meeting the national requirement for full implementation. This includes delivering integrations, interoperability and shared medicines record capability across Wales.
<b>Urgent Emergency Care – Welsh Emergency Care Data Set</b>	£472,000	£0	Continued support for WECDS implementation and implementation within SDEC, including requirement gathering to inform development of the UEC App to enable implementation within SDEC
<b>Total</b>	<b>£3,680,000</b>	<b>£0</b>	



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# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES PROCUREMENT ACT UPDATE

Eitem ar yr Agenda: Agenda Item:	5.3
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Moreton, Acting Director of Finance
Paratowyd gan: Prepared By:	Chris Moreton, Acting Director of Finance
Cyflwynwyd gan: Presented By:	Chris Moreton, Acting Director of Finance

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	The Committee is being asked to <b>RECEIVE / DISCUSS</b> the Procurement Act update.



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIAENT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: All standards apply	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	ISO 30415 - Human Resource Management. Diversity & Inclusion
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: All quality standards apply	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Whole Systems Approach
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Equitable
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: This is a summary report for noting	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
FE	Foundational Economy		

### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The UK Government has introduced a major reform of public procurement through the Procurement Act 2023, which came into force on 24 February 2025. The Act replaces the previous four EU-derived procurement regimes with a single, simplified legislative framework aimed at improving transparency, value for money, and accessibility for suppliers, including SMEs. The Procurement Act aims to modernise and streamline procurement, reducing bureaucracy while strengthening accountability.
- 3.2 In parallel, Wales has introduced additional statutory obligations through the Social Partnership and Public Procurement (SPPP) (Wales) Act 2023, which embeds social partnership, fair work and socially responsible procurement as core duties for Welsh public bodies. The SPPP operates alongside the UK Procurement Act and creates Wales-specific expectations for procurement governance and reporting.
- 3.3 This paper provides an update and overview of the key reforms included within the Procurement Act and DHCW’s progress made in relation to implementation.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The Board Assurance Dashboard deep dive, out in [Appendix A Procurement Act](#), sets out the specific matters for consideration by the Committee.

### 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 There are no key risks or matters for escalation

### 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
RECEIVE / DISCUSS the Procurement Act update.	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES CORPORATE RISK REGISTER

Eitem ar yr Agenda: Agenda Item:	5.4
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	07 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Bethan Walters, Corporate Risk Manager
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs   Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	The Committee is being asked to
<b>DISCUSS</b> the Corporate Risks assigned to the Audit and Assurance Committee. <b>NOTE</b> the status of the Corporate Risk Register.	



## 1 ASESAD O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	All Apply
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 14001, ISO 20000, ISO 27001, BS10008	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Leadership
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: Safe Care, Governance, Leadership and accountability	
<b><u>DATGANIAD ASESAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Risk Management and Assurance activities, equally affect all. An EQIA is not applicable	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> 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.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
<b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
<b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Risk Management Group	03/03/2026	Discussed and verified
Management Board	19/03/2026	Discussed and verified
Laura Tolley, Deputy Board Secretary   Head of Corporate Governance	March 2026	Reviewed
Chris Darling, Director of Corporate Affairs   Board Secretary	March 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	IMTP	Integrated Medium Term Plan



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

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

3.2 A full review of the BAF took place during May 2025 and was approved by the SHA Board in May 2025.

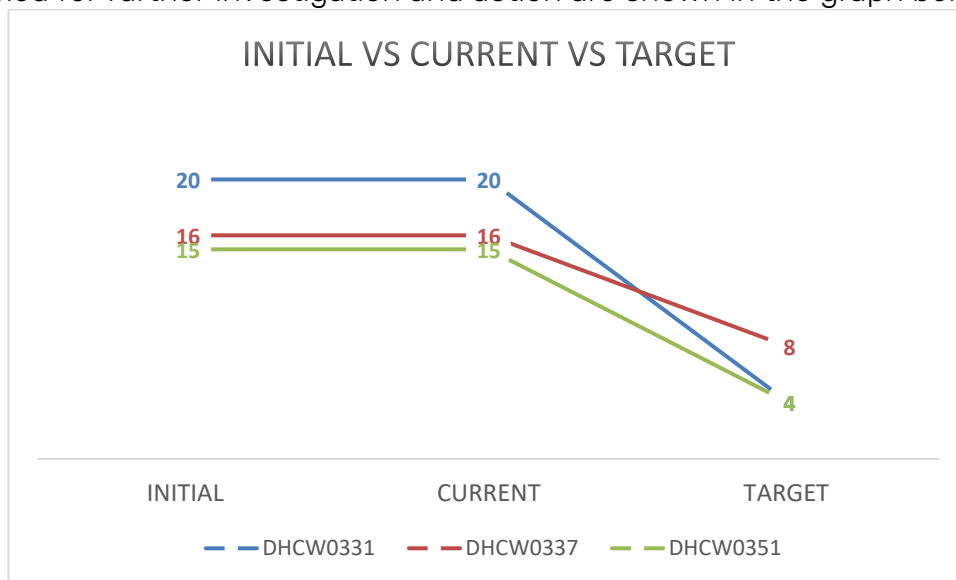
### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 Committee members are asked to consider risk, in the context of assurance 'what could impact on the Organisation being successful in the short term (1 – 12 months) and in the longer term (12 – 36 months).

4.2 The Committee are asked to consider the risks assigned to the Committee

- DHCW0331 – Fixed Term Resource Funding
- DHCW0337 – Sustainable Digital Services and Development Funding Model
- DHCW0351 – Changes in Political Landscape in Wales

4.3 The overview of initial risk score versus current versus target, and risks that may be identified for further investigation and action are shown in the graph below.



4.3 DHCW's Corporate Risk Register currently has 15 risks on Register, 3 of which are allocated to the Audit and Assurance Committee. 3 are detailed at item [5.4i Appendix A](#) for consideration by this Committee. The remaining 12 risks are assigned to the Digital Governance and Safety and the Programmes Delivery Committee and are considered in public/private session as per the Committee assignment approach.

4.4 Committee members are asked to note the following changes to the Corporate Risk Register as a whole (new risks, risks removed and changes in risk scores) since the last report:

**NEW RISKS (1) 1 Public, 0 Private**

RISK REF/TITLE	RISK DESCRIPTION	COMMITTEE ASSIGNMENT
DHCW0353 – Programme Funding Connecting Care	IF no funding is confirmed for next year THEN the Health Boards are unable to fully commit to recruiting resources to support deliverables expected this year to prepare or initiate procurement RESULTING IN them not making as much progress as is necessary to meet ongoing timelines	Programmes Delivery Committee

**RISKS REMOVED (3) 3 Public, 0 Private**

RISK REF	RISK TITLE	STATEMENT	COMMITTEE ASSIGNMENT
DHCW0336	Audit + Withdrawal of contracts	Contract extension signed downgraded to Directorate level for management	Digital Governance & Safety Committee
DHCW0346	DDaT Governance Review Implementation	DDaT Governance Delivery Board now in place and meeting monthly – score reduced downgraded for management at Directorate level	Audit & Assurance Committee
DHCW0353	Programme Funding Connecting Care	Although some delays have been experienced HBs and DHCW have progressed work across the programme mitigating issues around long-term commitments to resourcing by utilising internal capabilities or contingent support, so impact of this risk can be further reduced, and risk can be downgraded to Directorate level	Programmes Delivery Committee

**CHANGES IN SCORE (0) 0 Public, 0 Private**

There were no changes in score during the period.

4.5 The Committee 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.



		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)					DHCW0298 - Delay in WLIMS implementation 2.0
	MAJOR (4)			DHCW0349 - RADIS Team Scaling Back 25/26 DHCW0352 - Delivery of 2025-2026 Milestones	DHCW0337 Sustainable Digital Services and Development Funding Model **DHCW0341 **DHCW0342 DHCW0348 Transition to new data Architecture	DHCW0331 - Fixed term funding resource DHCW0333 - MICIS Implementation Delay DHCW0263: DHCW Functions DHCW0320 - Citizen and stakeholder trust in use of HSC data
	MODERATE (3)		DHCW0300 - Canisic (Screening and Palliative Care)		DHCW0347 National Target Architecture Roadmap DHCW0237 - New Requirements impact on resources and plan	DHCW0351 - Changes in political landscape in Wales
	MINOR (2)					
	NEGLECTIBLE (1)					

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

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 The Committee are asked to note the three risks on the Corporate Risk Register which are assigned to the Committee.
- 5.2 The Committee is asked to note the changes in the organisations risk profile during the reporting period (since the last Audit and Assurance Committee meeting) as a result of one new risk being added and three risks being removed from the Corporate Register.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:  
Recommendation:

The Committee is being asked to

**DISCUSS** the Corporate Risks assigned to the Audit and Assurance Committee.  
**NOTE** the status of the Corporate Risk Register.

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES WELSH LANGUAGE STANDARDS

Eitem ar yr Agenda: Agenda Item:	5.5
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Enw'r Cyfarfod: Name of Meeting:	Audit and Assurance Committee
Dyddiad y Cyfarfod: Date of Meeting:	7 April 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Eleri Wyn Roberts, Welsh Language Manager Laura Tolley, Head of Corporate Governance/ Deputy Board Secretary
Cyflwynwyd gan: Presented By:	Laura Tolley, Head of Corporate Governance/ Deputy Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
<b>NOTE</b> the Compliance Notice and the ongoing work that will enable DHCW to build a sustainable, organisation-wide approach to Welsh Language compliance and culture, ensuring full adherence to the Standards by the statutory deadlines.	



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	N/A
<b>ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)</b>	N/A
<b><u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u></b>	A Wales of Vibrant Culture and Thriving Welsh Language
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u></b>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u></b>	Leadership
<b><u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u></b>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<b><u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u></b>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
<b>ANSAWDD A DIOGELWCH</b> GOBLYGIADAU/EFFAITH <b>QUALITY AND SAFETY</b> IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
<b>CYFREITHIOL</b> GOBLYGIADAU/EFFAITH <b>LEGAL</b> IMPLICATIONS/IMPACT	Yes, please see detail below The Compliance Notice places statutory duties on Digital Health and Care Wales under the <i>Welsh Language (Wales) Measure 2011</i> . DHCW must comply with all imposed Service Delivery, Policy-Making, Operational, and Supplementary Standards by the stated imposition dates. Non-compliance may result in formal investigation, enforcement action, or penalties issued by the Welsh Language Commissioner. The organisation must therefore ensure that policies, procedures, systems, and services are aligned with the Standards, and that legally required records are maintained and published (e.g., annual compliance reports, complaints records, workforce skills records).
<b>ARIANNOL</b> GOBLYGIADAU/EFFAITH <b>FINANCIAL</b> IMPLICATION/IMPACT	Yes, please see detail below Achieving compliance may require further investment in translation, digital system development, staff training, recruitment activity, policy revision, signage, and communication materials. There may also be financial impacts linked to upgrading digital platforms (e.g., bilingual web pages, Welsh interfaces, apps), ensuring translation provision for meetings, and resourcing Welsh language training programmes. Failure to comply could lead to additional financial pressures arising from remedial actions or potential enforcement costs.
<b>AR Y GWEITHLU</b> GOBLYGIADAU/EFFAITH <b>WORKFORCE</b> IMPLICATION/IMPACT	Yes, please see detail below The Welsh Language Standards introduce several duties relating directly to the workforce, including: <ul style="list-style-type: none"> <li>• assessing staff Welsh language skills;</li> <li>• providing training and development opportunities in Welsh;</li> <li>• offering HR policies, contracts, forms, and performance documents in Welsh;</li> <li>• ensuring staff can make or respond to complaints in Welsh;</li> <li>• categorising posts according to Welsh language skill requirements; and</li> <li>• supporting managers and frontline teams to</li> </ul>



	<p>deliver services in Welsh.</p> <p>This requires comprehensive workforce planning, targeted skill development, improved recording systems, and ongoing support to embed bilingual working practices.</p>
<p><b>ECONOMAIDD- GYMDEITHASOL</b> GOBLYGIADAU/EFFAITH <b>SOCIO ECONOMIC</b> IMPLICATION/IMPACT</p>	<p>Yes, please detail below</p> <p>Compliance with the Standards contributes positively to linguistic equity and inclusion, supporting Welsh Government aims to increase Welsh language use and access to public services. Strengthening bilingual service delivery enhances fairness for Welsh-speaking communities, particularly in areas where the Welsh language is central to social, cultural, and economic life. There are no adverse socio-economic impacts anticipated; instead, improved access to services through the medium of Welsh supports broader well-being and participation.</p>
<p><b>YMCHWIL AC ARLOESI</b> GOBLYGIADAU/EFFAITH <b>RESEARCH AND INNOVATION</b> IMPLICATION/IMPACT</p>	<p>Yes, please see detail below</p> <p>The Standards encourage embedding Welsh language considerations within research, evaluation, and innovation activity, especially where such work informs policy decisions. This may require ensuring consultation materials, surveys, user-experience testing, and research outputs are available bilingually. It also strengthens the organisation's approach to inclusive design, user-centred innovation, and digital accessibility by ensuring that new systems, tools, and platforms consider Welsh language functionality from the outset.</p>

## 2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Welsh Language Group	18/3/26	Approved
Chris Darling, Executive Director of Commercial Services, Board Secretary	24/3/26	Approved
Laura Tolley, Head of Corporate Governance, Deputy Board Secretary	24/3/26	Approved

<b>Acronymau</b> <b>Acronyms</b>			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 Digital Health and Care Wales are committed to creating a culture where the Welsh Language is visible, valued, and a natural part of everyday working life. Our approach places people and organisational culture at the centre, ensuring that the Welsh Language is not seen as an administrative requirement, but as an essential part of who we are as a national organisation serving the people of Wales.
- 3.2 Embedding this culture is fundamental to achieving compliance with the Welsh Language Standards. By strengthening bilingual behaviours, building confidence across teams, and creating systems that enable staff to use Welsh naturally, compliance becomes a by-product of a mature and supportive organisational environment.
- 3.3 Strengthening this cultural foundation will make it easier for DHCW to meet the statutory requirements of its Compliance Notice by the imposition deadlines and maintain high standards into the future.
- 3.4 DHCW received its [Welsh Language Compliance Notice](#) on 4 March 2026, this sets out the Welsh Language Standards with which DHCW must comply across:
- Service Delivery
  - Policy Making
  - Operational; and
  - Supplementary standards.

The notice defines specific duties relating to correspondence, telephone services, meetings, public events, digital services, recruitment, staff policies, training, and internal administration.

- 3.5 The imposition dates for the Standards range between 4 September 2026 and 4 March 2027.

### 4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The Committee is asked to note the scope, timelines, and legal obligations arising from the Compliance Notice. Key matters for consideration include:
- Requirements to deliver Welsh language services across all communication channels.
  - Policies and processes that must be revised or newly developed to meet Operational Standards.



- Resource implications for training, translation, digital development, and workforce planning.
- Governance responsibilities for monitoring compliance, maintaining statutory records, and reporting annually to the Welsh Language Commissioner.

#### 4.2 Current Staff Welsh Language Skills Data



Current workforce data shows that 54% of DHCW staff have Welsh Language skills, reported via ESR, this is a positive achievement that reflects the growing cultural shift within the organisation.

Although the original milestone of reaching 60% in 2025–2026 was not met and has now been revised to 2027, this progress demonstrates increasing engagement and confidence across teams.

Recognising that meaningful, sustainable change is built through culture and everyday behaviours rather than numerical targets alone, DHCW continues to invest in creating a supportive bilingual environment. A comprehensive range of free Welsh language courses, including courtesy-level provision, remains available to all staff, and the Welsh Language Team actively promotes these opportunities throughout the year, including through directorate senior leadership discussions.



- 4.3 DHCW's ongoing compliance with the Welsh Language Scheme provides a strong foundation for the introduction of the Welsh Language Standards. To maintain this position and proactively manage any potential escalation risks, the Welsh Language Team are developing a comprehensive monitoring framework that will systematically reassess all Standards and strengthen organisational oversight.
- 4.4 Work is underway to design a new Welsh Language Strategy that brings together the core requirements of the Standards and the ambitions of the *More Than Just Words* Five-Year Plan. By replacing the existing Bilingual Skills Strategy and Welsh Language Policy, the new strategy will create one clear, cohesive organisational direction, strengthening our culture, supporting staff confidence, and embedding bilingual practice across everyday working life.
- 4.5 Since the last Committee meeting, the Welsh Language Commissioner published ['Complaints about the Welsh language: Opportunities to strengthen'](#). DHCW have assessed and [summarised](#) its well-established complaints procedure to ensure it has embedded the main opportunities for improvement identified in the publication, to include:
- Increasing the visibility of the complaints procedure on websites
  - Strengthening consistency in how complaints are recorded
  - Ensuring that complaints about the Welsh language are embedded within corporate processes.

The summary provides assurance that DHCW continues to prioritise the delivery of Welsh language services wherever possible. This process supports transparency, learning, and continuous improvement.

## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 Failure to comply with Welsh Language Standards poses significant legal and reputational risks for DHCW. Non-compliance could undermine stakeholder confidence and impact patient and service user experience, particularly where services cannot be delivered in the language of choice. There are financial risks associated with increasing demand for Welsh Language services, which require proactive resource planning.
- 5.2 A significant reduction of approximately 80% in Welsh language funding for 2026–27 presents a material risk to DHCW's ability to deliver the level of Welsh language services needed to meet its statutory duties. To monitor and mitigate this risk, DHCW will:
- strengthen financial oversight by regularly reviewing the impact of funding reductions on training capacity and reporting emerging risks through established governance routes



- prioritise core training provision to maximise cultural and behavioural impact, ensuring that available courses, particularly courtesy-level and essential skills development, are targeted where they will have greatest organisational benefit
- work with People & OD and Finance Directorates to develop a costed recruitment approach that identifies specific funding gaps relating to Welsh language advertising and targeted promotion of roles to increase our Welsh Language workforce.

## 6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:  
Recommendation:

The Committee is being asked to

**NOTE** the Compliance Notice and the ongoing work that will enable DHCW to build a sustainable, organisation-wide approach to Welsh Language compliance and culture, ensuring full adherence to the Standards by the statutory deadlines.