

# PWYLLGOR CYFLAWNI RHAGLENNI CYHOEDDUS

Thu 07 August 2025, 09:30 - 12:50

Microsoft teams

## Agenda

09:30 - 09:30  
0 min

### 1. MATERION RHAGARWEINIOL

#### 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 - 09:40  
10 min

### 2. AGENDA GYDSYNIO

#### 2.1. Cofnodion y Cyfarfod Diwethaf

I'w Gymeradwyo Cadeirydd

##### • Cyhoeddus

📄 2.1i DRAFT PDC Minutes PUBLIC 10 July 2025-en-cy-C.pdf (7 pages)

#### 2.2. Blaengynllun Gwaith

I'w Nodi Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.2 Forward Workplan.pdf (5 pages)

09:40 - 10:00  
20 min

### 3. I'W HADOLYGU

#### 3.1. Cofnod Gweithredu (Nid oes unrhyw gamau gweithredu agored ar y cofnod)

I'w drafod Cadeirydd

Mills Belinda  
31/07/2025 12:09:26

10:00 - 11:10

4.

70 min

## ER SICRWYDD

4.1.

### Adroddiadau Sicrwydd Blynyddol

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

4.1.1.

#### Rhaglen Moddion Digidol

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

- Gwasanaeth Presgripsiynau Electronig
- Rhagnodi a Gweinyddu Meddyginiaethau yn Electronig

 4.1i PRES\_ Digital Medicines Programmes\_PDC\_August\_2025 dr 0 1.pdf (31 pages)

4.1.2.

#### Rhaglen Gwybodeg Canser


*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

 4.1ii PRES - PDC - Cancer Informatics Programme August 2025.pdf (11 pages)

4.1.3.

#### Mamolaeth Ddigidol Cymru

*Er Sicrwydd*      *Cyfarwyddwr Rhaglenni ac Ymgysylltu*

 4.1iii PRES - PDC - Maternity Programme Closure August 2025.pdf (2 pages)

### **Break 10 munud**

11:00-11:10

11:10 - 12:50

5.


100 min

## LLYWODRAETHU, RISG, PERFFORMIAD A SICRWYDD

5.1.

### Adroddiad Rhaglenni Mawr

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

 5.1 Major Programmes Report.pdf (6 pages)

5.1.1.

#### Adnodd Data Cenedlaethol

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

5.1.2.

#### Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

5.1.3.

#### Gweinyddu Cleifion Cymru (dadgyfuno a mudo)

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Gweithrediadau*

Mills Belinda  
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#### **5.1.4.**

#### **Mamolaeth Ddigidol Cymru**

*Er Sicrwydd*      *Cyfarwyddwr Rhaglenni ac Ymgysylltu*

#### **5.1.5.**

#### **System Gwybodaeth Gofal Dwys Cymru (WICIS)**

*Er Sicrwydd*      *Cyfarwyddwr Rhaglenni ac Ymgysylltu*

#### **5.1.6.**

#### **Caffael System Gwybodaeth Radioleg (RISP)**

*Er Sicrwydd*      *Cyfarwyddwr Rhaglenni ac Ymgysylltu*

#### **5.1.7.**

#### **System Gwybodaeth Labordy**

*Er Sicrwydd*      *Cyfarwyddwr Rhaglenni ac Ymgysylltu*

#### **5.1.8.**

#### **Cysylltu Gofal**

*Er Sicrwydd*      *Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl*

#### **5.1.9.**

#### **Fframwaith Systemau Meddygon Teulu**

*Er Sicrwydd*      *Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl*

#### **5.1.10.**

#### **Rhaglen Gofal Llygaid Digidol Genedlaethol**

*Er Sicrwydd*      *Cyfarwyddwr Gwasanaethau Digidol Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl*

#### **5.1.11.**

#### **Cytundeb Microsoft 365 Enterprise**

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Gweithrediadau*

#### **5.1.12.**

#### **Pontio i'r Cwmwl**

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Gweithrediadau*

#### **5.1.13.**

#### **Moddion Digidol - Gwasanaeth Presgripsiynau Electronig (EPS)**

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

#### **5.1.14.**

#### **Moddion Digidol - Rhagnodi a Gweinyddu Meddyginiaethau yn Electronig (ePMA)**

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

#### **5.1.15.**

#### **Gwybodeg Canser**

*Er Sicrwydd*      *Cyfarwyddwr Gweithredol Strategaeth*

#### **5.2.**

#### **Y Gofrestr Risg Gorfforaethol**

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- **Archwiliadau Dwfn (DHCW0345 Cyllid ar gyfer Cyflawni Gweithredol Cyfarwyddwr Gofal yn 25/26)**

 5.2 Corporate Risk Register - July 25 PDC.pdf (7 pages)

### **5.3.**

#### **Statws Uwchgyfeirio – Diweddariad ar y Cynllun Gwella**

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

-  5.3 Escalation Improvement Plan Update.pdf (6 pages)
-  5.3ii Roadmap - High Level 17 06 25 NTA.pdf (3 pages)
-  5.3iii 2025-06-23 Stakeholder advisory group Minutes.pdf (7 pages)
-  5.3iv Stakeholder Advisory Board Exec Summary-en.pdf (2 pages)
-  5.3v Stakeholder Advisory Board Exec Summary-en-cy-C.pdf (2 pages)

**12:50 - 12:50**

0 min

## **6.**

### **MATERION I GLOI**

#### **6.1.**

##### **Unrhyw Faterion Brys Eraill**

*I'w drafod*      *Cadeirydd*

#### **6.2.**

##### **Adroddiad Crynhoi Cynnydd y Pwyllgor i Fwrdd yr AIA**

*I'w Nodi*      *Cadeirydd*

#### **6.3.**

##### **Dyddiad y cyfarfod nesaf: 06 Tachwedd 2025**

*I'w Nodi*      *Cadeirydd*



## CYFARFOD EITHRIADOL PWYLLGOR CYFLAWNI RHAGLENNI – CYHOEDDUS

### COFNODION, PENDERFYNIADAU A CHAMAU GWEITHREDU I'W CYMRYD

🕒 14:00-15:00  
Teams

📅 10 Gorffennaf 2025



MS

Yn Bresennol (Aelodau)	Blaenlythrennau	Teitl	Sefydliad
David Selway	DS	Cadeirydd y Pwyllgor	IGDC
Ruth Glazzard	RG	Is-gadeirydd y Bwrdd	IGDC
Simon Jones	SJ	Cadeirydd y Bwrdd	IGDC
Rowan Gardner	RoG	Aelod Annibynnol	IGDC

Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol   Ysgrifennydd y Bwrdd	IGDC
Ifan Evans	IE	Cyfarwyddwr Gweithredol Strategaeth	IGDC
Sam Hall	SH	Sam Hall, Cyfarwyddwr Gofal Sylfaenol, Cymunedol ac Iechyd Meddwl	IGDC
Belinda Mills	BM	Cydylynydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	IGDC

Acronymau			
AIA	Awdurdod Iechyd Arbennig	WPAS	System Gweinyddu Cleifion Cymru
NDR	Adnodd Data Cenedlaethol	LINC	Rhwydwaith Gwybodaeth Labordai Cymru
SRO	Uwch Swyddog Cyfrifol	BAU	Busnes fel Arfer
DSPP	Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd	WICIS	System Wybodaeth Gofal Dwys Cymru
GIG	Gwasanaeth Iechyd Gwladol	IGDC	Iechyd a Gofal Digidol Cymru
WCCIS	System Wybodaeth Gofal Cymunedol Cymru	LIMS	System Rheoli Gwybodaeth Labordy
AB	Bwrdd Iechyd Prifysgol Aneurin Bevan	CTM	Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg



LIC	Llywodraeth Cymru	PDC	Y Pwyllgor Cyflawni Rhaglenni
DMC	Mamolaeth Ddigidol Cymru	OBC	Achos Busnes Amlinellol
EPS	Gwasanaeth Presgripsiynau Electronig	RISP	Caffael y System Gwybodeg Radioleg
UAT	Profion Derbynioldeb Defnyddwyr	CDR	Y Storfa Data Gofal
BIPBC	Bwrdd Iechyd Prifysgol Betsi Cadwaladr	LIC	Llywodraeth Cymru
IQPD	Cynllunio a Darparu Ansawdd Integredig	WIVS	Gwasanaeth Dilysu Hunaniaeth Cymru
BIPBA	Bwrdd Iechyd Prifysgol Bae Abertawe	DDaT	Bwrdd Digidol, Data a Thechnoleg
EPMA	Rhagnodi a Gweinyddu Meddyginiaethau yn Electronig		

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu i'w Gofnodi
<b>RHAN 1 — MATERION RHAGARWEINIOL</b>			
1.1	<p><b>Croeso a Chyflwyniadau</b></p> <p>Croesawodd y Cadeirydd bawb i gyfarfod eithriadol Pwyllgor Cyflawni Rhaglenni Iechyd a Gofal Digidol Cymru (IGDC), a nododd y bydd cyfarfodydd y Pwyllgor Cyflawni Rhaglenni yn cael eu cynnal yn amlach oherwydd newid statws uwchgyfeirio IGDC o Lefel 1 i Lefel 3. Ffocws y cyfarfod yw goruchwyllo cynnydd mewn perthynas â'r cynllun gwella uwchgyfeirio.</p> <p>Darparodd y Cadeirydd hefyd hysbysiadau cadw tŷ ynghylch agweddau technegol ar gofnodi'r cyfarfod a'r disgwyliadau o ran ymddygiad safonol.</p>	Nodwyd	Dim i'w nodi
1.2	<p><b>Ymddiheuriadau am Absenoldeb</b></p> <ul style="list-style-type: none"> <li>Laura Tolley, Pennaeth Llywodraethu Corfforaethol   Dirprwy Ysgrifennydd y Bwrdd</li> <li>Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau</li> </ul>	Nodwyd	Dim i'w nodi
1.3	<p><b>Datganiadau o Fuddiant</b></p> <p>Nid oedd unrhyw ddatganiadau o fuddiant.</p>	Nodwyd	Dim i'w nodi
<b>RHAN 2 - PRIF AGENDA</b>			
	<p><b>Cofnodion y Cyfarfod Diwethaf</b></p> <ul style="list-style-type: none"> <li>Cyhoeddus</li> <li>Preifat - crynodeb</li> </ul> <p><b>Penderfynodd y Pwyllgor Cyflawni Rhaglenni:</b></p>	Cymeradwywyd	Dim i'w nodi

Cofnodion wedi'u cadarnhau ar gyfer:

Cyfarfod Eithriadol Pwyllgor Cyflawni Rhaglenni - Cyhoeddus Gorffennaf 2025

“Cynhyrchwyd y ddogfen gyda chymorth Co-pilot.”



	<b>GYMERADWYO</b> cofnodion y cyfarfod diwethaf.		
2.2	<p><b>Cofnod Gweithredu</b> Nododd y Pwyllgor nad oedd unrhyw gamau gweithredu newydd ar y cofnod gweithredu.</p> <p><b>Penderfynodd y Pwyllgor Cyflawni Rhaglenni: NODI'R Cofnod Gweithredu.</b></p>	Trafodwyd	Dim i'w nodi
2.3	<p><b>Statws Uwchgyfeirio – Diweddariad ar y Cynllun Gwella</b></p> <p>Cyflwynodd Chris Darling (CD), Cyfarwyddwr Materion Corfforaethol   Ysgrifennydd y Bwrdd y diweddariad, gan dynnu sylw at y canlynol:</p> <ul style="list-style-type: none"> <li>Mae IGDC mewn proses uwchgyfeirio ar gyfer rhaglenni mawr o dan fframwaith goruchwyllo ac uwchgyfeirio GIG Cymru.</li> <li>Cytunwyd ar gynllun gwella gyda Llywodraeth Cymru, sy'n adlewyrchu'r fframwaith uwchgyfeirio, a chafodd ei gymeradwyo yng nghyfarfod Cyflawni Perfformiad Ansawdd Integredig ar 14 Mai 2025.</li> <li>Mae'r Pwyllgor Cyflawni Rhaglenni (PDC) yn goruchwyllo ac yn craffu ar gynnydd yn erbyn y cynllun cyflawni, gyda diweddariadau rheolaidd i'r Bwrdd ac adroddiadau misol i Lywodraeth Cymru.</li> <li>Cynhaliwyd Cyfarfod Gweithredol ar y Cyd â Llywodraeth Cymru ar 27 Mehefin 2025 i drafod y statws uwchgyfeirio a rhannu'r wybodaeth ddiweddaraf.</li> <li>Mae'r cynllun gwella yn cynnwys 42 o gerrig milltir, gyda 12 i fod i'w cwblhau erbyn diwedd mis Mehefin a thros 30 wedi'u hamserlennu i'w cyflawni erbyn diwedd mis Medi.</li> <li>Mae storfa wybodaeth a rennir drwy sianel Teams wedi'i sefydlu i staff IGDC a chydweithwyr yn Llywodraeth Cymru gael mynediad at y cynllun gwella a'r statws cerrig milltir.</li> </ul> <p><b>Cerrig Milltir Mis Mai</b></p> <ul style="list-style-type: none"> <li>Roedd chwe charreg filltir i fod i gael eu cyflawni ym mis Mai, gan gynnwys cyflwyno <b>Achos Busnes Amlinellol Cysylltu Gofal, Cymunedol ac Iechyd Meddwl</b> i Lywodraeth Cymru, a gwblhawyd a'i gyflwyno cyn diwedd mis Mai. Dywedodd SH fod yr Achos Busnes Amlinellol wedi'i gyflwyno ar amser a'i fod yn dal i gael ei adolygu gan Lywodraeth Cymru. Er bod y canlyniad llawn yn yr arfaeth, mae'r Llywodraeth wedi cydnabod bwch cyllido'r rhaglen ac wedi darparu cyllid ar gyfer Ch1 i gefnogi gwaith parhaus ar gyfer Cysylltu Gofal, ac ar gyfer System Wybodaeth Gofal Cymunedol Cymru (WCCIS) – y systemau presennol ar gyfer 2025/26.</li> <li>Mae prosesau llywodraethu rhaglen <b>System</b></li> </ul>	Trafodwyd	Dim i'w Nodi

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Cofnodion wedi'u cadarnhau ar gyfer:

Cyfarfod Eithriadol Pwyllgor Cyflawni Rhaglenni - Cyhoeddus Gorffennaf 2025  
“Cynhyrchwyd y ddogfen gyda chymorth Co-pilot.”



**Wybodaeth Gofal Dwys Cymru (WICIS)** wedi'u hailosod, ac mae gweithdai'n parhau ac yn symud ymlaen.

Dywedodd IE fod y ddarpariaeth yn cael ei rheoli o fewn y fframwaith ailosod trwy weithdai'r GIG ym mis Gorffennaf ac Awst. Bydd manyleb a chynllun diwygiedig yn dilyn. Mae prosesau llywodraethu wedi'u hailosod gyda Llywodraeth Cymru, ac mae'r gweithdai ar y trywydd iawn.

- **Rhaglenni Mawr - cytunwyd a gweithredwyd dulliau a gweithdrefnau diwygiedig ar gyfer cynllunio, perfformiad, risg a rheoli rhaglenni.** Cadarnhaodd IE fod archwiliad mewnol y Swyddfa Rheoli Portffolio wedi'i gynnal a'i fod bellach wedi'i gyflwyno i'r Pwyllgor Archwilio a Sicrwydd a'r Pwyllgor Cyflawni Rhaglenni, ochr yn ochr ag archwiliad Adnodd Data Cenedlaethol, ac mae'r ddau wedi derbyn sicrwydd rhesymol. Mae archwiliadau mewnol ychwanegol wedi'u cynllunio eleni, gan gynnwys rheoli rhaglenni cyffredinol (yn ystod trydydd chwarter 2025/26) a gweithredu rhaglenni canser.
- **Ynglŷn â Chynllun Gweithredu'r Adolygiad Rhanddeiliaid:** Dywedodd IE fod y cynllun gweithredu mewn ymateb i'r arolwg rhanddeiliaid wedi'i ddatblygu, ei gymeradwyo ac wedi bod drwy Fwrdd IGDC, a bod mecanweithiau a threfniadau sicrwydd ar waith i oruchwylio cyflawniad y cynllun gweithredu.
- **Ynglŷn â threfniadau llywodraethu'r Adolygiad Rhanddeiliaid.** Dywedodd IE fod y strwythurau llywodraethu ar waith, gan gynnwys gweithgor mewnol IGDC, bwrdd goruchwylio a Grŵp Ymgynghorol Rhanddeiliaid strategol allanol a gyfarfu am y tro cyntaf ddiwedd mis Mehefin gyda Phrif Swyddog Gweithredol IGDC yn cadeirio.
- **O ran olrhain cyflawni cynllun gweithredu'r Adolygiad Rhanddeiliaid:** Cadarnhaodd IE fod cyflawniad y camau gweithredu yn y cynllun gweithredu yn cael ei olrhain yn weithredol, gyda thua 30% o gerrig milltir IGDC yn cael eu hadrodd fel rhai sydd wedi'u cwblhau ar hyn o bryd, a'r garreg filltir oedd 20% erbyn diwedd mis Mai.

#### Cerrig Milltir Mis Mehefin

- **Ynglŷn â'r Saernïaeth Darged Genedlaethol:** Dywedodd IE fod hwn yn brosiect newydd a gomisiynwyd ac a ariannwyd gan Lywodraeth Cymru yn y flwyddyn ariannol hon, gan roi'r dasg i IGDC o ddatblygu saernïaeth darged a map ffordd

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Cofnodion wedi'u cadarnhau ar gyfer:

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"Cynhyrchwyd y ddogfen gyda chymorth Co-pilot."



pontio sydd wedi'u cyd-gynllunio ar gyfer Cymru. Mae hyn yn cynnwys cyflawni cynllun buddsoddi strategol erbyn diwedd y flwyddyn. Mae IGDC yn gweithio'n agos gyda Llywodraeth Cymru ar adnoddau a chyflawni, ac wedi penodi Channel 3 ac Air Logic yn bartneriaid technegol allanol. Mae gwaith ymgysylltu â rhanddeiliaid, gan gynnwys cyfarwyddwyr digidol, ar y gweill.

- **Ynglŷn â sefydlu Bwrdd Prosiect ar gyfer y Saernïaeth Darged Genedlaethol.** Cadarnhaodd IE fod y Bwrdd Prosiect ar gyfer y prosiect Saernïaeth Darged Genedlaethol wedi'i sefydlu ac wedi cynnal ei gyfarfod cyntaf, dan gadeiryddiaeth Cyfarwyddwr Gweithredol Strategaeth IGDC. Roedd cynrychiolwyr o bob sefydliad allweddol, gan gynnwys Llywodraeth Cymru. Yn y cyfarfod, cadarnhawyd y Cylch Gorchwyl ac adolygwyd anghenion adnoddau a chapasiti i fodloni amserlen gyflym y prosiect. Mae'r prosiect ar y trywydd iawn gyda chydweithio agos rhwng IGDC a Llywodraeth Cymru, a rhanddeiliaid eraill.
- **Ynglŷn â Moddion Digidol:** Cadarnhaodd IE fod y portffolio Moddion Digidol wedi'i symleiddio o bedair i ddwy raglen, EPS ac EPMA, gyda Llywodraeth Cymru yn cymeradwyo'r strwythur llywodraethu a'r trefniadau adrodd newydd.
- **Ynglŷn â'r Cofnod Meddyginiaethau a Rennir CDR ac APIs FHIR wedi mynd yn fyw:** Cadarnhaodd IE fod APIs FHIR ar gyfer meddyginiaethau ac alergeddau bellach wedi mynd yn fyw. Mae gwaith mudo ar y gweill i alinio systemau presennol a chysylltu gweithrediadau EPMA dan arweiniad Byrddau Iechyd â'r Cofnod Meddyginiaethau a Rennir, gyda Chaerdydd a'r Fro yn cyflwyno'r EPMA cyntaf yn GIG Cymru ar 10 Gorffennaf 2025.
- **Ynglŷn â Gofal Dwys Cymru: Gweithdai dylunio clinigol i'w cynnal:** Cadarnhaodd IE fod gweithdai dylunio clinigol yn parhau tan ddechrau mis Awst, gan ddarparu ymgysylltu hyblyg i glinigwyr.
- **Ynghylch Cytuno ar Gerrig Milltir Craidd y Rhaglen Gwybodeg Canser - Disodli Canisc:** Cadarnhaodd IE fod y rhaglen Gwybodeg Canser i ddatgomisiynu meddalwedd etifeddol Canisc wedi wynebu oedi byr oherwydd problemau mudo data ond ei bod wedi aildechrau gyda Colposgopi yn mynd yn fyw ar 9 Gorffennaf 2025, gan nodi'r garreg filltir olaf yn y broses ddatgomisiynu. Bydd gwaith pellach sy'n gysylltiedig â chanser yn parhau o dan ddull newydd sy'n seiliedig ar gynnyrch. Nododd y Pwyllgor na chyflawnodd y

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Cofnodion wedi'u cadarnhau ar gyfer:

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"Cynhyrchwyd y ddogfen gyda chymorth Co-pilot."



garreg filltir hon y dyddiad diwedd mis Mehefin ar gyfer rhoi Colposgopi ar waith, ond ei fod bellach ar waith.

- **Ynghylch Gwasanaethau Gofal Sylfaenol, gan gynnwys y gwaith mudo parhaus i EMIS o INPS (Cegedim) Vision, a chymorth i'r rhaglen genedlaethol gofal sylfaenol:** Cadarnhaodd SH fod 78 o bractisiau wedi mudo hyd yn hyn, gyda 115 yn weddill. Mae dau bractis yr wythnos yn cael eu mudo, a disgwylir i hyn godi i bedwar ar ôl gwerthu INPS. Mae'r gwaith ar y trywydd iawn i'w gwblhau rhwng mis Mawrth a mis Mai 2026.

O'r dystiolaeth a gyflwynwyd ac a adolygwyd, cadarnhaodd y Pwyllgor fod pob un o'r 12 carreg filltir uwchgyfeirio ar gyfer Mai a Mehefin bellach wedi'u cwblhau. Carreg filltir 9.1 Colposgopi yn Mynd yn Fyw oedd yr unig carreg filltir i fethu ei dyddiad targed o ddiwedd mis Mehefin, a hynny o naw diwrnod, ond ei bod bellach wedi'i chwblhau. Cadarnhawyd y gellid cyflwyno'r sefyllfa hon i gyfarfod Ansawdd, Perfformiad a Chyflawni Integredig (IQPD) Llywodraeth Cymru ym mis Gorffennaf, gyda chymeradwyaeth y Pwyllgor.

#### **Cerrig Milltir Mis Gorffennaf**

Edrychodd y Pwyllgor ar y cerrig milltir a oedd ar yr amserlen i'w cyflawni erbyn diwedd mis Gorffennaf.

- Nodwyd bod dwy o gerrig milltir mis Gorffennaf yn ymwneud â'r Saernïaeth Darged Genedlaethol:
- **Cytuno ar gynllun ac amserlen y prosiect gyda chyflenwyr a rhanddeiliaid (neu yn ôl cyfarwyddyd Llywodraeth Cymru):** Cadarnhaodd IE ei fod ar y trywydd iawn, heb unrhyw angen rhagweladwy am gyfarwyddyd pellach gan Lywodraeth Cymru. Gall swyddogion ar y bwrdd prosiect anfon llythyr cefnogol at sefydliadau iechyd yn cymeradwyo'r dull y cytunwyd arno.
- **Cytuno ar ddatganiad gweledigaeth Saernïaeth Darged Unwaith i Gymru (hefyd yn amodol ar fewnbnw Llywodraeth Cymru).** Cadarnhaodd IE fod y Bwrdd Arwain Digidol, Data a Thechnoleg newydd wedi cyfarfod ddechrau mis Mai ac wedi sefydlu safbwynt Llywodraeth Cymru ar "Unwaith i Gymru," gan ddiffinio tair lefel ar gyfer asesu rhaglenni. Mae'r carreg filltir hon wedi'i chwblhau.
- Nododd CD fod trydedd carreg filltir mis Gorffennaf o bedair, o dan Adran 4 y Cynllun Gwella, yn gofyn i sefydliadau'r GIG ymrwmo i gytundeb Rheolydd Data ar y Cyd WASPI i alluogi llif data i'r Storfa Data Gofal Cenedlaethol. Mae gan y carreg filltir hon ddibyniaethau sy'n cynnwys Llywodraeth Cymru ac mae'n cyd-fynd ag Argymhelliad 26 gan

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Cofnodion wedi'u cadarnhau ar gyfer:

Cyfarfod Eithriadol Pwyllgor Cyflawni Rhaglenni - Cyhoeddus Gorffennaf 2025  
"Cynhyrchwyd y ddogfen gyda chymorth Co-pilot."



	<p>Grŵp Cynghori'r Gweinidog ar Berfformiad a Chynhyrchiant.</p> <p>Tynnodd IE sylw at y ffaith bod cytundeb Rheolydd Data ar y Cyd WASPI yn gofyn am gydsyniad gwirfoddol gan bob sefydliad GIG, oni bai bod Llywodraeth Cymru yn rhoi cyfarwyddyd gwahanol. Er bod WASPI wedi'i hen sefydlu a'i gymeradwyo, mae gwahanol safbwyntiau yn bodoli ar gyfrifoldebau cyfreithiol, yn enwedig o ran rheoli data. Mae nifer o grwpiau cyfoedion a byrddau arwain wedi adolygu'r mater, ac mae'r gwaith yn parhau i gyrraedd consensws cydweithredol erbyn diwedd mis Gorffennaf – ond mae'r hyder y gellir bodloni'r amserlen honno yn rhesymol, nid yn uchel.</p> <ul style="list-style-type: none"> <li>• Nododd IE fod y gwaith o sefydlu'r Grŵp Ymgynghorol Rhanddeiliaid Allanol dan gadeiryddiaeth y Prif Swyddog Gweithredol ar y trywydd iawn.</li> <li>• Nododd CD fod tri o'r pedair carreg filltir allweddol ar amser. Mae'r garreg filltir llywodraethu gwybodaeth yn fwy cymhleth, gyda phosibilrwydd y bydd angen i Lywodraeth Cymru fandadu cyrff iechyd yn unol â llythyr cylch gwaith IGDC.</li> </ul> <p>Yn ogystal â phedair carreg filltir Gorffennaf 2025, tynnwyd sylw Llywodraeth Cymru at y meysydd canlynol yng Nghyfarfod y Cydbwyllgor Gweithredol (JET) a gynhaliwyd ar 27 Mehefin 2025 i nodi meysydd pryder/i'w nodi yn ymwneud â cherrig milltir yn y dyfodol:</p> <ul style="list-style-type: none"> <li>• Cyflawni LIMS</li> <li>• INPS / Mudo Meddygon Teulu</li> <li>• Cysylltu Gofal</li> <li>• Lansio Ap GIG Cymru i'r cyhoedd - Nododd IE fod IGDC yn adrodd yn agos ac yn bersonol ar Ap GIG Cymru i'r Gweinidog Iechyd Meddwl a Llesiant.</li> </ul> <p><b>Penderfynodd y Pwyllgor Cyflawni Rhaglenni:</b></p> <ul style="list-style-type: none"> <li>• <b>NODI</b> statws presennol y Cynllun Gwella Uwchgyfeirio Monitro Uwch er <b>SICRWYDD</b></li> <li>• <b>NODI</b> bod Bwrdd IGDC am ystyried ystyriaethau system gyfan mewn perthynas ag uwchgyfeirio.</li> <li>• <b>DRAFOD</b> yr ymateb i uwchgyfeirio ac ystyried unrhyw uwchgyfeirio i Fwrdd yr AIA.</li> </ul>		
<b>RHAN 6 - MATERION I GLOI</b>			
<p><b>Unrhyw Faterion Brys Eraill</b></p> <ul style="list-style-type: none"> <li>• Ni chodwyd unrhyw fater brys.</li> </ul>	Trafodwyd	Dim i'w nodi	
<p><b>Dyddiad y cyfarfod nesaf:</b></p> <ul style="list-style-type: none"> <li>• 07 Awst 2025</li> </ul>	Nodwyd	Dim i'w nodi	

Cofnodion wedi'u cadarnhau ar gyfer:

Cyfarfod Eithriadol Pwyllgor Cyflawni Rhaglenni - Cyhoeddus Gorffennaf 2025

“Cynhyrchwyd y ddogfen gyda chymorth Co-pilot.”

# IECHYD A GOFAL DIGIDOL CYMRU

## DIGITAL HEALTH AND CARE WALES

### FORWARD WORKPLAN

<b>Eitem ar yr Agenda:</b> <b>Agenda Item:</b>	2.2
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<b>Enw'r Cyfarfod:</b> <b>Name of Meeting:</b>	Programmes Delivery Committee
<b>Dyddiad y Cyfarfod:</b> <b>Date of Meeting:</b>	07 August 2025

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

<b>Noddwr Gweithredol:</b> <b>Executive Sponsor:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary
<b>Paratowyd gan:</b> <b>Prepared By:</b>	Belinda Mills, Corporate Governance Coordinator
<b>Cyflwynwyd gan:</b> <b>Presented By:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary

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

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# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	All missions apply
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<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>	

<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
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



<b>ASESIAD O'R EFFAITH / IMPACT ASSESSMENT</b>	
<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
Programmes Delivery Committee	November 2024	Initial workplan approved

<b>Acronymau Acronyms</b>			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WASPI	Wales Accord on the Sharing of Personal Data
NIAS	National Intelligent Integrated Audit Solution	SRO	Senior Responsible Officer



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Programmes Delivery Committee has a [Cycle of Committee Business](#) that is reviewed on an annual basis. In addition, a Forward Workplan dashboard is used to identify any additional items for inclusion to ensure the Committee is reviewing and receiving all relevant matters in a timely fashion

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

4.1 The following items as noted are due to be presented to the Committee meeting on 07 August 2025:

Item	Executive Lead
Action log	Chair
Annual Assurance Reports Q2: • Digital Medicines Programme • Cancer Informatics Programme • Digital Maternity Cymru	Executive Director of Strategy
Assurance Reports	Executive Director of Strategy
Audit Reports	Relevant Lead
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Declarations of interest	Chair
Deep Dive	Director of Corporate Affairs/Board Secretary
Deep Dive (DHCW0345 Funding for Operational Delivery of Care Director in FY25/26)	Director of Corporate Affairs/Board Secretary
Escalation Status -Improvement Plan Update	Director of Corporate Affairs/Board Secretary
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Learning from Programmes	Executive Director of Strategy
Major Programmes Report	Executive Director of Strategy
Minutes	Chair
Tracking Programmes	Executive Director of Strategy
Welcome and Introductions	Chair

4.2 The items below have been identified for the following meeting on 06 November 2025:

Mills, Belinda  
31/07/2025 12:09:18  
Forward Workplan



Item	Executive Lead
▲	
Action log	Chair
Annual Assurance Reports Q3	Executive Director of Strategy
• Welsh Community Care Information System & Connecting Care	
• Digital Services for Patients and Public	
• National Data Resource	
Assurance Reports	Executive Director of Strategy
Audit Reports	Relevant Lead
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Corporate Risk Tending Analysis	Director of Corporate Affairs/Board Secretary
Declarations of interest	Chair
Deep Dive	Director of Corporate Affairs/Board Secretary
Escalation Status -Improvement Plan Update	Director of Corporate Affairs/Board Secretary
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Learning from Programmes	Executive Director of Strategy
Major Programmes Report	Executive Director of Strategy
Minutes	Chair
Tracking Programmes	Executive Director of Strategy
Welcome and Introductions	Chair

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

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

## 6 ARGYMHELLIAD / RECOMMENDATION

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

Mills, Belinda  
31/07/2025 12:09  
Forward Workplan



GIG  
CYMRU  
NHS  
WALES

Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

# Digital Medicines Programmes

## Programmes Delivery Committee

August 2025

Laurence James



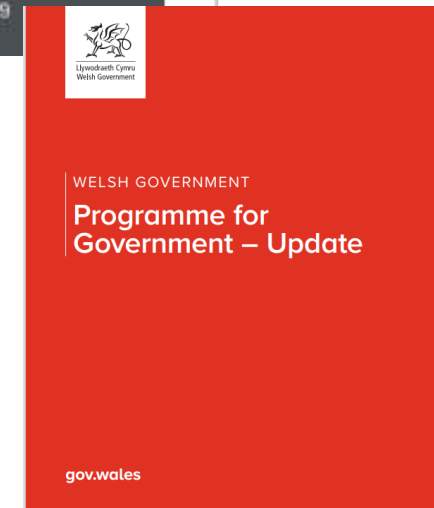
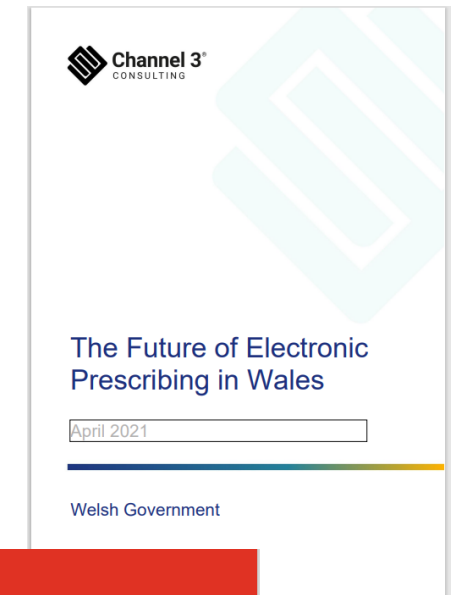
Moddion Digidol  
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# Digital Medicines Programme: Strategic and Policy Drivers

- Pharmacy: Delivering a Healthier Wales 2019
  - 2025 Goal to implement e-prescribing including supporting patients to access pharmacy services through the NHS Wales App
- In 2021, Welsh Government commissioned an independent review into electronic prescribing in Wales *“The Future of Electronic Prescribing in Wales (2021)”*
  - Digital Medicines established bringing together two programmes and two projects
  - Vision to deliver a fully digitised e-prescribing environment across Wales
- E-Prescribing is a *“Programme for Government”* commitment and therefore a government priority
  - Introduce e-prescribing and support developments that enable accurate detection of disease through artificial intelligence.



Gwneud rhagnodi, dosbarthu a rhoi meddyginiaethau ym mhobman yng Nghymru yn **haws, yn fwy diogel, yn fwy effeithlon ac effeithiol, ar gyfer cleifion a gweithwyr proffesiynol drwy ddull digidol**

Making the prescribing, dispensing and administration of medicines everywhere in Wales **easier, safer, more efficient and effective for patients and professionals through digital**

Mills Belinda  
24/07/2025 12:09:26



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Rhaglen **Gwasanaeth Rhagnodi Electronig** Gofal Sylfaenol  
Primary Care **Electronic Prescription Service** Programme



## Digital Medicines Programme



Prosiect **Cofnodion Meddyginiaethau** a Rennir  
Shared **Medicines Record** Project



Rhaglen **Rhagnodi a Gweinyddu Meddyginiaethau** Gofal  
Eilaidd yn Electronig  
Secondary Care Electronic **Prescribing and Medicines Administration** Programme



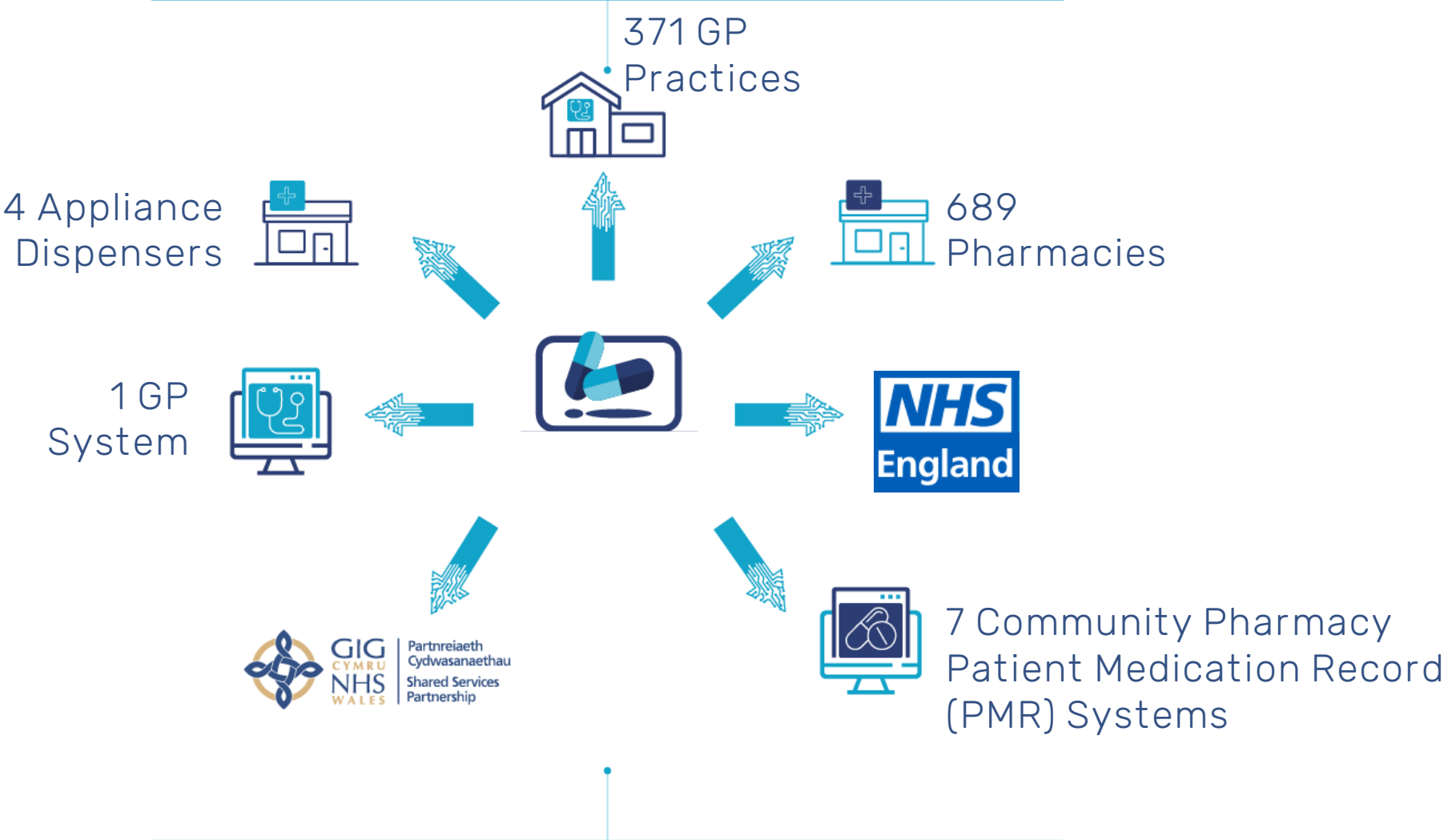
Prosiect **Mynediad i Gleifion**  
**Patient Access** Project

Mills, Belinda  
31/07/2025 12:09:26

# Primary Care – Electronic Prescription Service (EPS) Programme

Mills, Belinda  
31/07/2025 12:09:26

# Primary Care Electronic Prescription Service (EPS) Programme



Mills, Belinda  
31/07/2025 12:09:26

# Electronic Prescription Service (EPS): Key benefits



## **More time for GPs:**

No need to print and wet sign prescriptions – freeing up valuable clinical time



## **Improved Patient Convenience:**

Patients no longer need to visit the surgery to collect prescriptions



## **Streamlined Pharmacy workflow:**

Pharmacies no longer need to collect prescriptions from surgeries



## **End-to end Prescription Tracking:**

Track prescriptions from digital signing to dispensing



## **Reduction in lost/misplaced paper prescriptions:**

Digital reduces risks

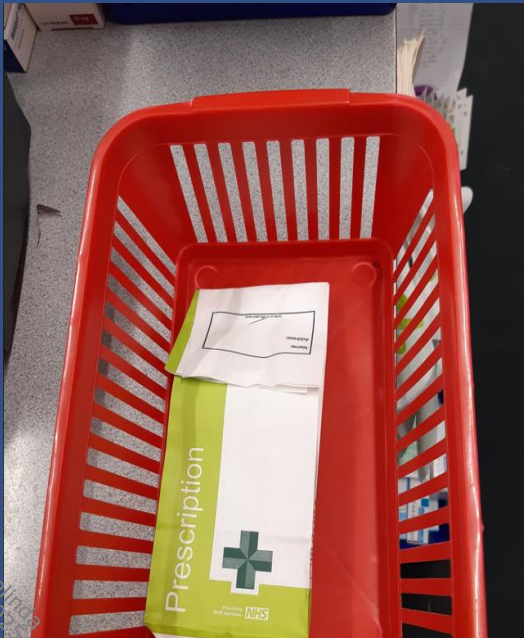


## **Reduction in transportation needs:**

No more physical delivery of prescriptions to NWSSP for reimbursement

# Primary Care Electronic Prescription Service (EPS) Programme

– What progress have we made in the last 12 months?



In January 2025, all Community Pharmacy PMR systems in Wales assured to use EPS

In June 2025, All Dispensing Appliance Contractors (DACs) assured to use EPS in Wales

EPS in use in all health boards areas in Wales

77 (20%) GP Practices, 425 (62%) community pharmacies and all 4 (100%) Dispensing Appliance Contractors - benefitting 224k patients (June 2025)

3.5 million prescription items dispensed using EPS

Welsh Government milestone to be live in 60% of pharmacies by March 2026 achieved

National roll out underway with 160 (43%) GP sites scheduled to be live by 31<sup>st</sup> March 2026

Planning for EPS to be tested in Urgent Primary Care Services with National Six Goals Programme

Public facing EPS implementation dashboard published (First iteration)

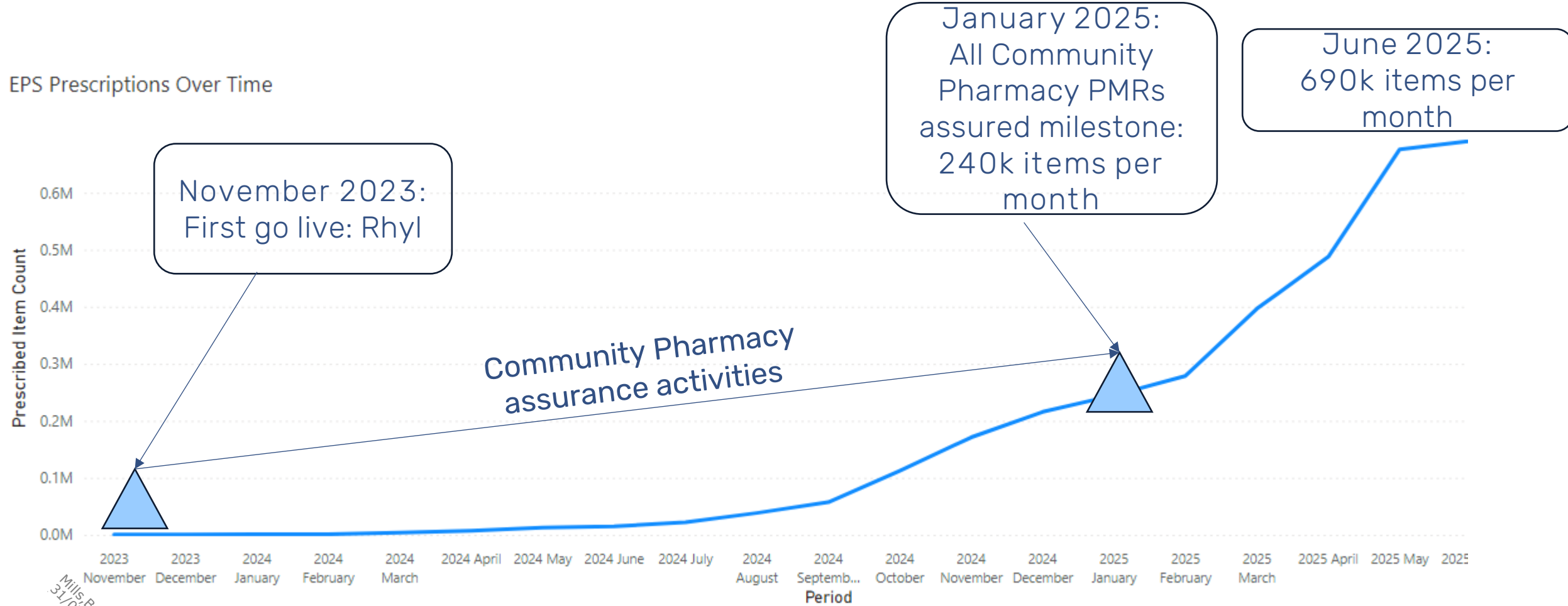


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# EPS Prescriptions items per month

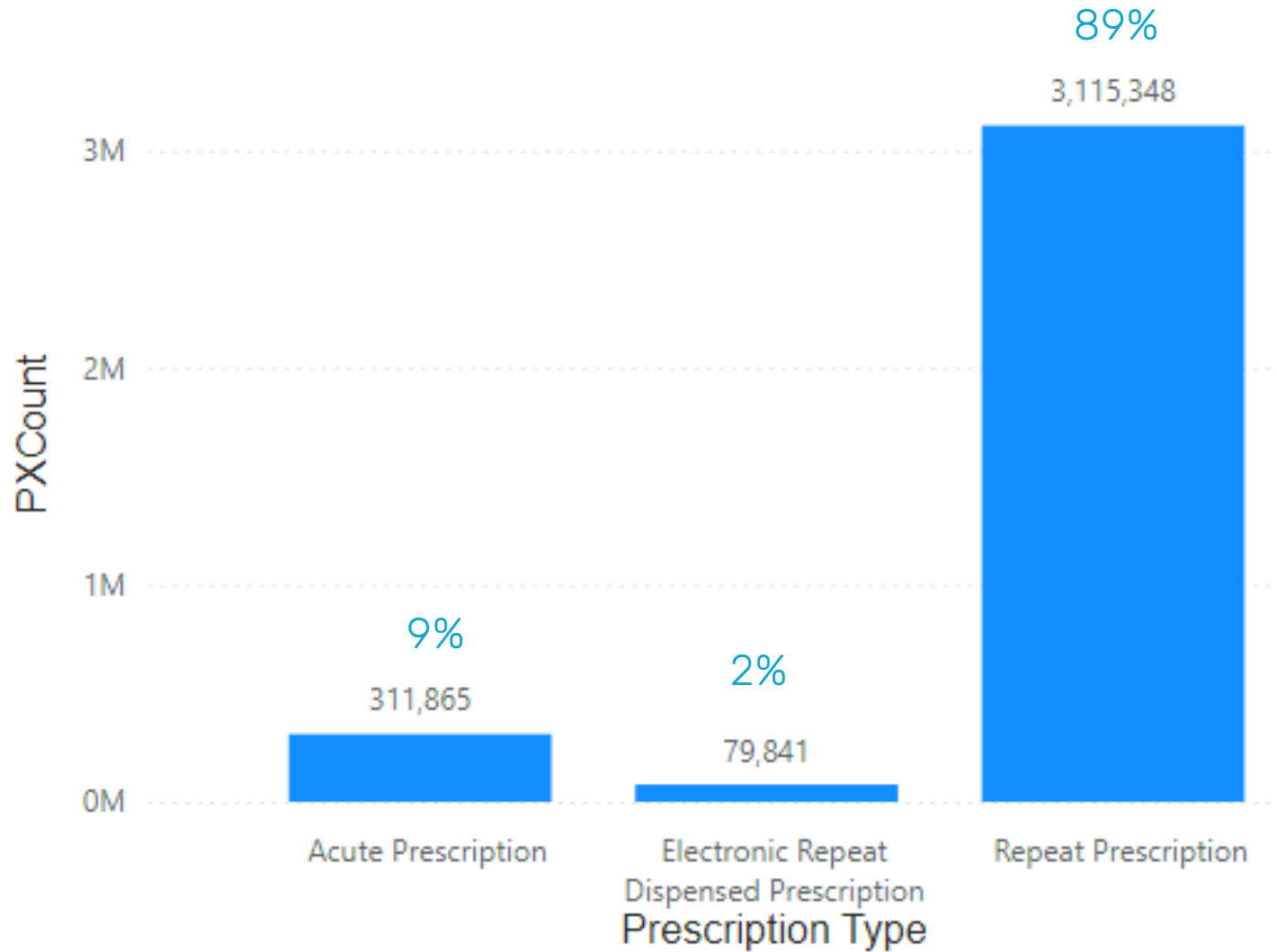
EPS Prescriptions Over Time



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31/07/2025 12:09:26

# EPS Prescription Types

Count of Prescription Items



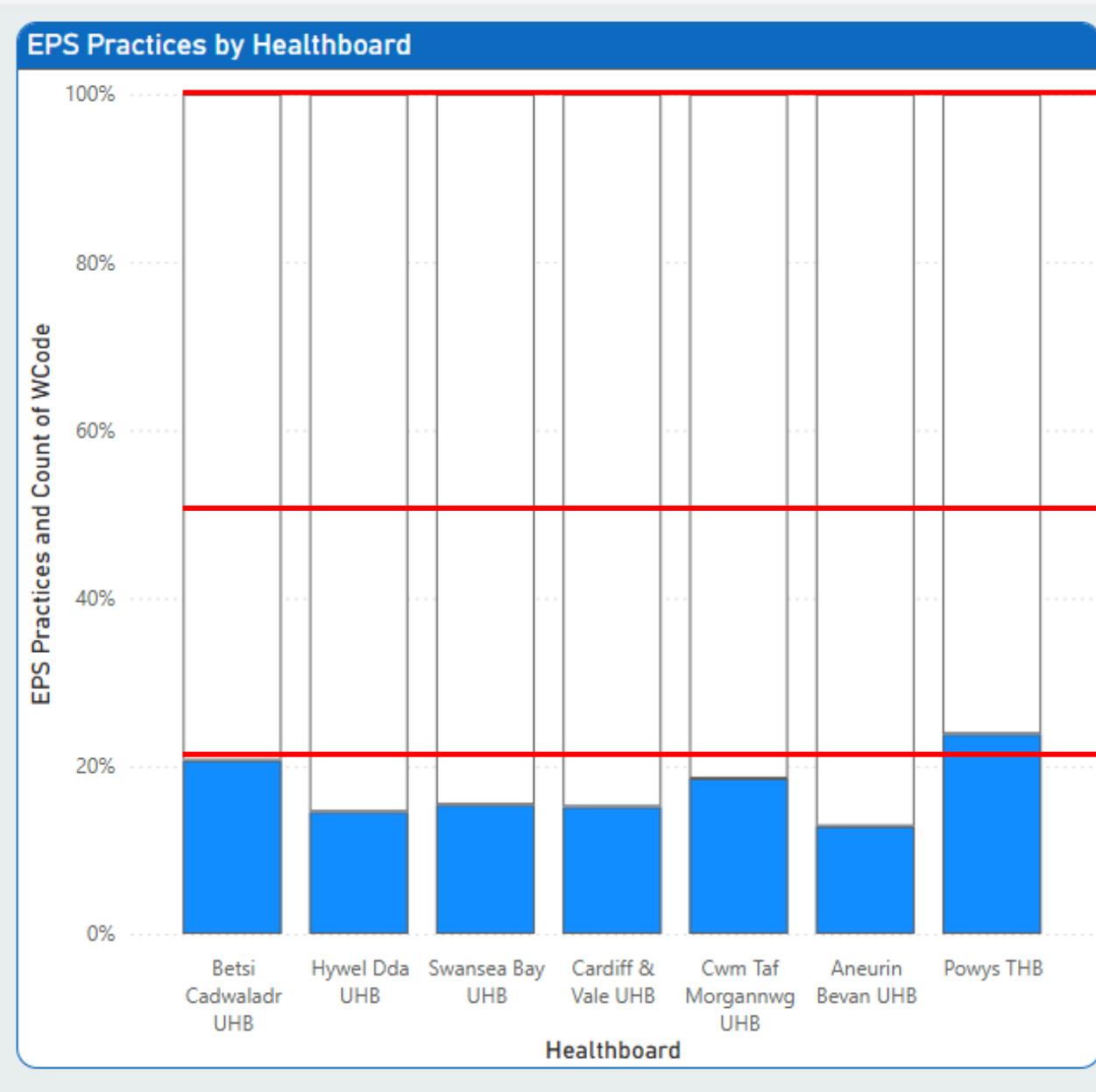
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# EPS GP Practices by Health Board Area Programme



100%: Target September 2027

50%: Target May 2026

20%: June 2025

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31/07/2025 12:09:26

*“EPS is the best thing we've ever done. The GP has more time for patient care – we love it!”*

- Lakeside Medical Centre,  
Rhyl, Denbighshire.

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31/07/2025 12:09:26

*“EPS is the best thing we've ever done. The GP has more time for patient care – we love it!”*

- Lakeside Medical Centre, Rhyl, Denbighshire.

*“We're receiving fewer phone calls to trace prescriptions and using less paper.”*

- Plas Menai Surgery, Llanfairfechan, Conwy.

Mills, Belinda  
31/07/2025 12:09:26

*““EPS is the best thing we've ever done. The GP has more time for patient care we love it!” ”*

- Lakeside Medical Centre, Rhyl, Denbighshire.

*“We're receiving fewer calls to trace prescriptions and using less paper”*

- Plas Menai Surgery, Llanfairfechan, Conwy

*“EPS has been a massive change for the better for the pharmacy and has saved so much time already. We no longer have to call the GP surgery numerous times a day to track down prescriptions.”*

- Fferyllwyr Llyn, Blaenau Ffestiniog, Gwynedd.

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31/07/2025 12:09:26

*““EPS is the best thing we've ever done. The GP has more time for patient care we love it!” ”*

*“Our patients have really noticed the difference and have been surprised by how much quicker it can be. They don't have to bring over a piece of paper, and by the time they get to us their prescription has been dispensed and is waiting on the shelf.”*

*“We're receiving fewer calls to trace prescriptions and using less paper.”*

- Llanfairfechan, Conwy.

*“EPS has been a massive change for the better for the pharmacy and has saved so much time already. We no longer have to call the GP surgery numerous times a day to track down prescriptions.”*

- Fferyllwyr Llyn, Blaenau Ffestiniog, Gwynedd.

Mins A Wlada  
31/03/2025 09:26

““EPS is the best thing we've ever done. The GP has more time for patient care we love it!” ”

“We're receiving fewer paper calls to trace prescriptions and using less paper.”

“EPS has been a massive change for the better for the pharmacy and has saved so much time already. We no longer have to call the GP surgery numerous times a day to track down prescriptions.”

“Our patients have really noticed the difference and have been surprised by how much quicker it can be done. They don't have to bring a piece of paper, and by the time they get to us the prescription has been dispensed and is waiting on the shelf”

**“We're seeing an approximate 75% reduction in the paper prescriptions being processed by reception for signing and we felt supported throughout.”**

- Meddygfa Gwydir Surgery,  
Llanrwst, Conwy

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31/07/2025 12:09:26

““EPS is the best thing we've ever done. The GP has more time for patient care we love it!” ”

“We're receiving fewer calls to trace prescriptions and using less paper.”

- Manager of Plas Men

“EPS has been a massive change for the better for the pharmacy and has saved so much time already. We no longer have to call the GP surgery numerous times a day to track down prescriptions.”

“Our patients have really noticed the difference and have been surprised by how much quicker it can be done. They don't have to bring a piece of paper, and by the time they get to us the prescription has been dispensed and is waiting on the shelf”

“We're seeing an approximate 75% reduction in the paper prescriptions being processed by reception signing and we felt supported throughout.”

- Meddygfa Gwydir Surgery, Llanrwst, Conwy

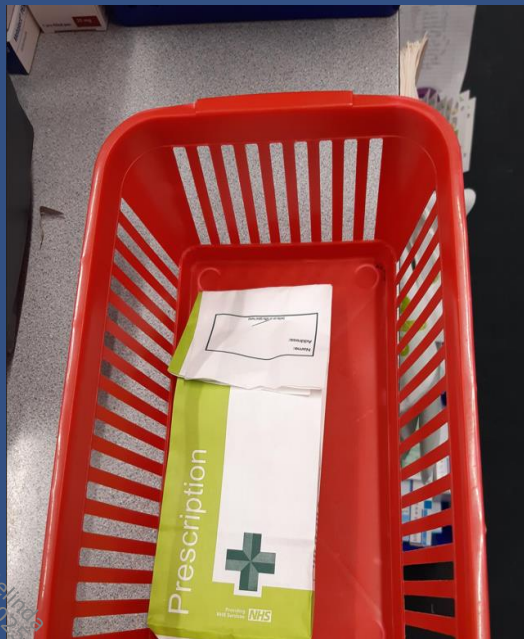
“Prescriptions no longer go missing and it's better than we ever expected. It's made a huge difference in the pharmacy, completely changing the workflows to increase efficiency.”

- Canolfan Goffa Ffestiniog.

Mills, Belinda  
31/07/2025 12:09:26

# Primary Care Electronic Prescription Service (EPS) Programme

– What are the next steps?



Continue with EPS implementation schedule – 160 (43%) of GP practices to be live by 31<sup>st</sup> March 2026

Continue roll out to Community Pharmacies

Begin transition to a Business as Usual (BaU) nationally supported service

Benefits Realisation report in March 2026

Take forward EPS testing within Urgent Primary Care Services

Discovery work for enabling EPS for hospital outpatient prescriptions



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Secondary Care –

# Electronic Prescribing and Medicines Administration (ePMA) Programme

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31/07/2025 12:09:26

# Secondary Care electronic Prescribing and Medicines Administration (ePMA) Programme

## SECONDARY CARE – What are we doing?

- Supporting the deployment of electronic Prescribing and Administration of Medicines (ePMA) solutions in every hospital in Wales.
- A nationally governed programme, procured and deployed locally
- Ambition is to introduce Closed Loop Medicines Dispensing (CLMD) and Closed Loop Medicines Administration (CMLA) to create a fully digital process for prescribing, ordering, dispensing and administering medicines.
- 8 national integrations and SMR API being delivered by the national team, to integrate ePMAs with the national architecture
- National Technical and Clinical Assurance Group (TCAG) and Community of Knowledge and Action Group (CoKA)

Mills, Belinda  
31/07/2025 12:09:26



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# Secondary Care ePMA Programme: Key Benefits



## Digital Prescription Management

Replaces paper-based medicines charts and prescriptions, reducing paper copes



## Time Savings

Eliminates the need to search for paper charts, freeing up clinical time for patient care



## Faster Medicines Reconciliation on Admission

Read and write medicines, allergies and intolerances from the Shared Medicines Record (SMR). Reduces risk of transcribing errors



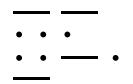
## Improving Legibility and Accessibility

Removes risk associated with illegible handwriting, reducing risk of misinterpretation



## Clinical Decision support

Provides automated alerts for drug and allergies interactions, helping to prevent harm and adverse drug reactions



## Standardised Coding and Interoperability

Captures medicines using dm+d and allergies using SNOMED CT, enabling data to be shared with the Shared Medicines Record (SMR)

# National integrations and APIs

Integration Components	Output
Welsh Patient Administration System (WPAS) Admission, Discharge and Transfer (ADT) messages	Flow into ePMAs to create drug chart and to prescribe for inpatients
WPAS Outpatient messages	Flow into ePMAs to prescribe for outpatients
Welsh Results Reporting Service (WRRS) Diagnostic Test Results feed	View agreed test results in ePMA to support safer prescribing
Welsh Clinical Portal (WCP) Stapling	Launching ePMA from WCP patient record
CTM UHB ePMA send Discharge Advice Letters (DALs) to WCRS and to GPs via WCCG	Sending hospital DALs and making a copy available in national care document repository
User authentication (identity management)	NADEX integration for Nervecentre and Entra ID integration for Better
Infrastructure connectivity	Providing a secure Virtual Private Network (VPN) connection between ePMAs and NHS Wales network
Shared Medicines Record (SMR) Application Programming interface (API)	Delivering API to read and write medicines and allergies with the SMR and populating the WCP DAL with medicines at the point of hospital discharge

Milla Beldar  
31/05/2025 12:09:26

## Secondary Care ePMA programme

– What progress have we made in the last 12 months?

6 health board contracts signed with supplier

Hybrid of systems: Better, System C and Nervecentre. Interoperability is essential

National integrations in flight to integrate ePMAs with national architecture

First ePMA go live: July 2025

National Technical and Clinical Assurance Group (TCAG)

Community of Knowledge and Action Group (CoKA)

National engagement event

Specification Requirement produced for Closed Loop Medicines Dispensing (CLMD)

EPS Outpatient discovery commenced

Mills, Belinda  
31/07/2025 12:09:26

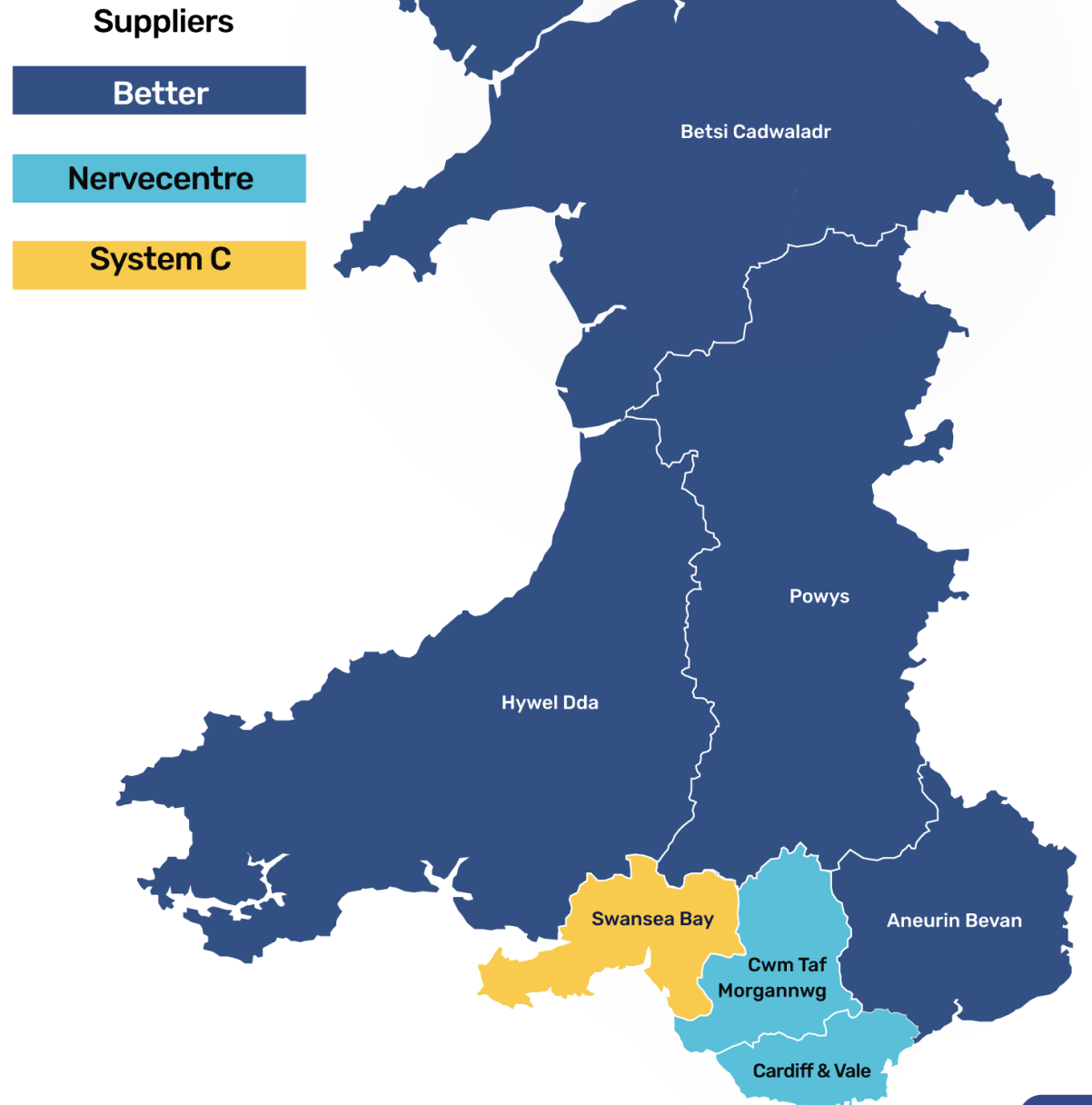


Moddion Digidol  
Digital Medicines

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# Secondary Care ePMA programme

– Landscape of procured ePMA providers



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31/07/2025 12:09:26



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# Secondary Care ePMA programme

– What are the next steps?

Delivering national integrations and APIs

Complete Welsh Informatics Assurance Group (WIAG) process

Onboard ePMA suppliers to the SMR API

EPS outpatients discovery

2025 Go lives: Cardiff and Vale, Powys, Betsi Cadwaladr, Cwm Taf Morgannwg Health Boards

2026 Go lives: Aneurin Bevan and Hywel Dda University Health Boards

Benefits realisation report by 31<sup>st</sup> March 2026

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# Shared Medicines Record (SMR) Project

- **A single record of prescribed medicines and allergies** for every patient in Wales will mean, for the first time, all a patient's medicine and allergies information will be in one place.
- **Patients won't need to re-provide** your medication details whenever they see a healthcare professional
- **Clear view of medicines and allergies** presented in one place to the clinical user at the point of care.
- **Credible source of data** to inform decision making /decision support.
- **Removes need to transcribe** from one system to another.
- **Consolidated medicine and allergies record** feeding the National Data Resource.



# Shared Medicines Record (SMR) Project

– What progress have we made in the last 12 months?

Project transitioned to be governed under Secondary Care ePMA Programme

API published on consumer platform. API available in sandbox, user acceptance testing and production environments

API enables Medicines, Allergies and Intolerances information recorded in the SMR and GP system to be written into assured systems removing the need to transcribe. It also populates the Discharge Advice Letter in WCP at the point of discharge.

Welsh Health Circular (WHC) published in January 2025 mandating the use of the dictionary of medicines and devices (dm+d)

Technical guidance documents published

Transferred knowledge to Care Data Repository (CDR) team to operationally support SMR and its API

Readiness to migrate allergies and intolerances form legacy data repository into the SMR

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# SMR API Onboarding Dashboard

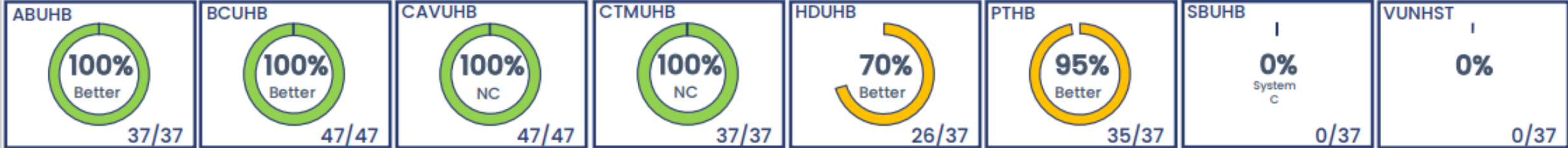


Iechyd a Gofal Digidol Cymru  
Digital Health and Care Wales

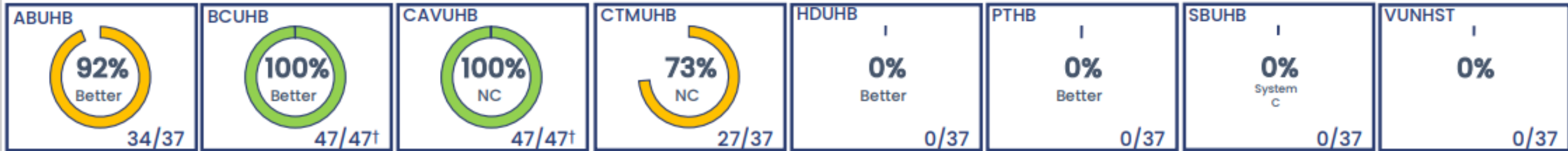
Iechyd a Gofal Digidol Cymru Digital Health and Care Wales

ePMA SMR API On-Boarding Dashboard  
Date: 08/07/2025

## SMR API Onboarding Application: Submission\*



## User Acceptance Testing (UAT) Environment Access Approval



## Production Environment Access Approval



# Patient Access Project

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31/07/2025 12:09:26

# Patient Access Project

– What progress have we made in the last 12 months?



“Push Ready” notifications feature developed with 2/7 Community pharmacies onboarded to API and using feature – 9,616 notifications sent to NHS Wales App

“Pharmacy nomination” feature in development

Joint working group established with NHS England’s NHS App team

Pipeline medicines features for the NHS Wales App transferred to Digital Services for Patients and Public (DSPP) Programme

Project closed with residual activity transferred to DSPP and governed by new “NHS Wales App Digital Medicines Project Board”

Diolch / Thank You

Unrhyw Gwestiynau? / Any Questions?

For more information, visit our website



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CYMRU  
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Digital Health  
and Care Wales

# Programmes Delivery Committee: Annual Assurance Report

## Cancer Informatics Programme

August 2025

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31/07/2025 12:09:26

# What is the Cancer Informatics Programme?

The Cancer Informatics Programme was established to provide a new solution that meets the current needs of the users, integrates fully with existing systems, and has the resilience & reliability required to support clinical services. To improve access to cancer information and new ways of delivering cancer services and care; supported by modern information and digital technologies to ensure cancer services and outcomes for patients in Wales.

The CaNISC System will be replaced by a bespoke designed system that uses electronic forms (eForms) to provide the required data into the Welsh Clinical Portal (WCP) system, in conjunction with information held in the Patient Administration System (PAS).

2019-09-10 12:09:26

# What is CaNISC?

Cancer Informatics in Wales is currently provided by the **Cancer Network Information System Cymru** (CaNISC) system, this delivers key cancer information and intelligence priorities, along with an extensive medical image repository.

The current CaNISC system is used extensively across Wales by all Health Boards and Trusts, hospices and other organisations involved in the delivery of cancer care.

The system has three main areas of function; a clinical record of cancer care (including multidisciplinary meeting outcome record), a Patient Administration System (PAS) for Velindre Cancer Centre, and provides cancer related business Intelligence and activity data (Admitted Patient Care, Service and Financial Framework (SaFF) and Waiting Times Reporting).

Importantly CaNISC is also the main data source for research and development, national clinical audit datasets and national cancer returns (via the Welsh Cancer Intelligence & Surveillance Unit (WCISU), and Cancer Research UK).

# Why does CaNISC need to be replaced?

The existing CaNISC system is end of life, increasingly difficult to maintain and no longer meets the needs of the service.

CaNISC was developed in the FoxPro language last updated in 2007, since 2015 it is unsupported.

The Microsoft 2012 servers were end of Life in 2023 and while these systems receive regular security updates and patches, there is significant risk in that these updates could cause unexpected behaviour in the FoxPro software and potentially permanently disable it.

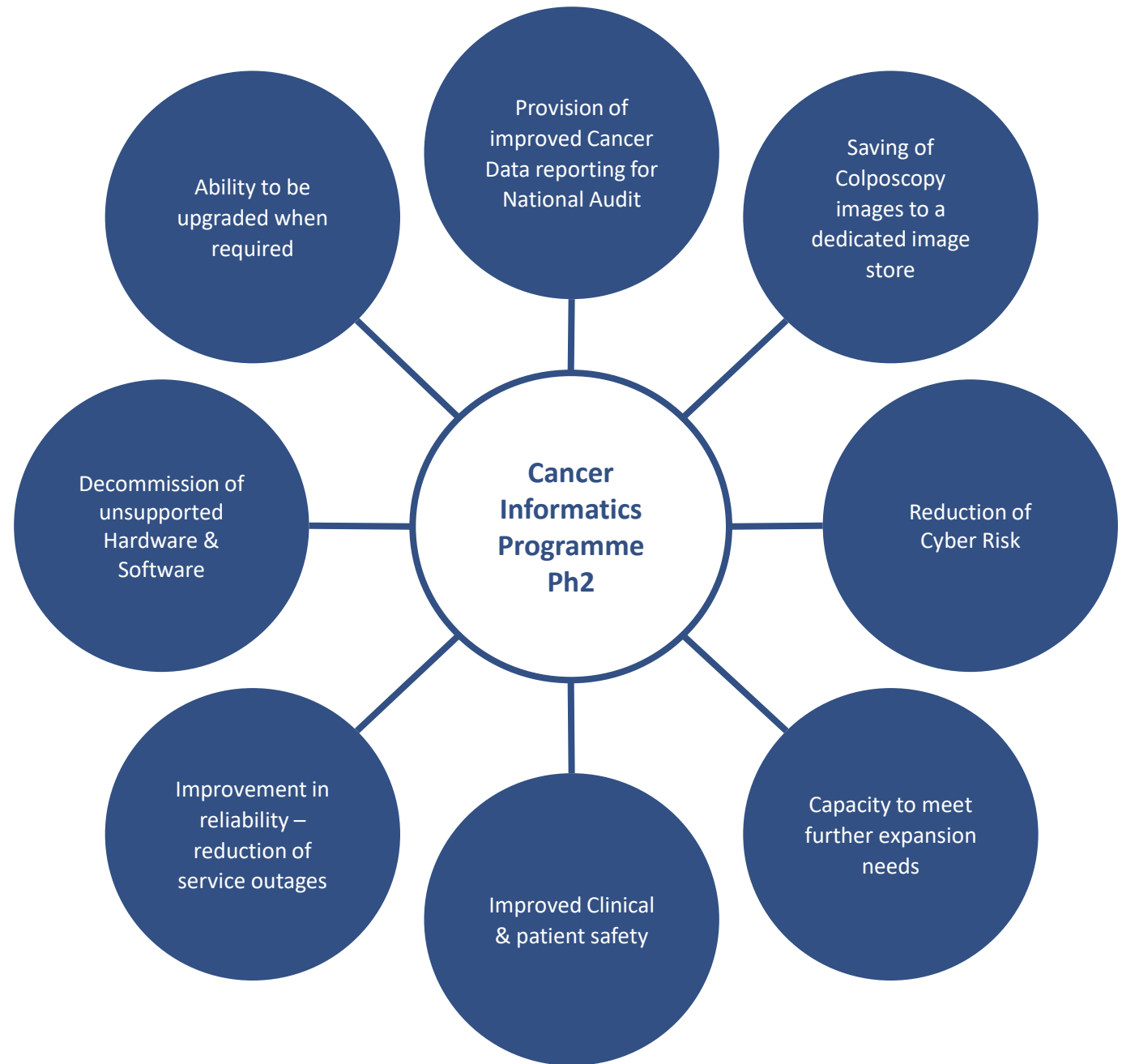
A lack of expertise in FoxPro and the fragility of the Canisc software has resulted in a development freeze on modernisation of the information data collection elements of the software.

# Benefits Forecast

Expected Benefits are set out in the Outline Business Case (OBC) and Full Business Case (FBC)

Benefits realisation review is underway for Phase 2, and the decommission of the **Cancer Network Information System Cymru (CaNISC)** system.

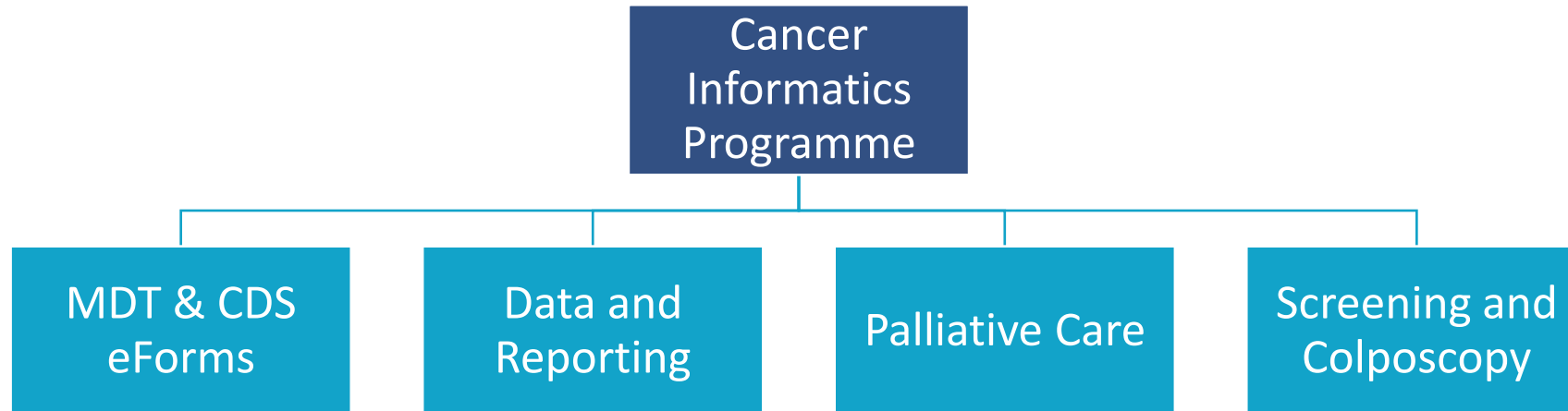
Benefits identified are based on reduction of Cyber risk, cost savings on running 30+ year old legacy application, increased functionality, integration into existing data systems, already utilised by users and enhanced audit data required by Welsh Government.



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# Programme Structure

The Programme consists of four Projects/Workstreams:



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# MDT & CDS eForms

**Summary** – Project to develop Multidisciplinary Team (MDT) and Cancer Data Set (CDS) eForms to support cancer Multidisciplinary Meetings (MDM). Delivery of forms via the WCP MDM Module.

**Progress** – Project Scope complete in January 2025, CDS and MDT forms available for 18 Cancer sites and in use across Health Boards and Velindre.

**Next Steps** – Project Closure Report to be signed off as part of overall programme closure.

Tumour Site Group	ABUHB	CAV	CTM	HDD	SB	VCC	BCUHB	POW's
<b>CDS Form</b>								
Breast - (Site specific)	01/04/2023	01/04/2023	01/05/2023	01/09/2023	01/01/2023		01/11/2023	
Urology - Prostate - (Site)	01/05/2023	01/05/2023	01/05/2023	01/11/2023	01/05/2023		01/02/2024	
Urology - (Core)	01/07/2023	01/05/2023	01/05/2023	01/11/2023	01/05/2023		01/02/2024	
Lower GI - (Site specific)	01/08/2023	01/08/2023	01/08/2023	01/12/2023	01/08/2024		01/02/2024	
Upper GI - CG - (Site specific)	01/02/2024	01/02/2024	01/10/2024	01/07/2024	01/07/2024		01/02/2024	
Upper GI - HGD - (Site specific)	01/02/2024	01/11/2024	01/10/2024	01/07/2024	01/07/2024		01/02/2024	
Upper GI - (Core)	01/02/2024	01/11/2024	01/10/2024	01/07/2024	01/07/2024		01/02/2024	
Skin - (Core)	01/10/2023	01/10/2023	08/01/2025	01/08/2024	01/08/2024		01/02/2024	
Head & Neck - (Core)	01/11/2023	01/02/2024	03/08/2024	01/08/2024	01/08/2024		01/02/2024	
Haematology - (Core)	01/01/2024	01/08/2024	01/10/2024	01/01/2024	01/07/2024		01/02/2024	
Lymphoma - (Core)	01/01/2024	01/08/2024	01/10/2024	01/01/2024	01/07/2024		01/02/2024	
Brain & CNS - (Core)	01/02/2024	01/08/2024	08/07/2024	01/08/2024	01/07/2024		01/02/2024	
Lung - (Site specific)	01/02/2024	01/02/2024	01/07/2024	01/05/2024	01/05/2024		01/02/2024	
Gynaec - (Core)	01/02/2024	01/11/2024	04/11/2024	01/05/2024	01/05/2024		01/02/2024	
Thyroid - (Core)	01/02/2024	01/11/2024	03/08/2024	01/08/2024	01/08/2024		01/02/2024	
Sarcoma - (Core)	23/02/2024	01/09/2024	28/08/2024	01/09/2024	01/08/2024		01/02/2024	
Neuroendocrine (NET) - (Core)	01/02/2024	01/10/2024					01/02/2024	
Unknown Primary (URP) - (Core)	01/02/2024			09/01/2024	01/08/2024		01/02/2024	
<b>Cancer MDT Form</b>								
Breast	**	01/04/2023*	02/04/2023	01/09/2023	01/01/2023	14/11/2022	***	
Urology	**	01/05/2023*	01/05/2023*	01/11/2023	01/05/2023	14/11/2022	***	
Lower GI	**	01/06/2023*	01/09/2024	01/11/2023	01/08/2024	14/11/2022	***	
Upper GI	**	01/02/2024*	01/10/2024	01/07/2024	01/07/2024	14/11/2022	***	
Skin	**	01/10/2023*	08/01/2025	01/08/2024	01/08/2024	14/11/2022	***	
Head & Neck	**	01/02/2024*	03/08/2024	01/08/2024	01/08/2024	14/11/2022	***	
Haematology	**	*	01/10/2024	01/08/2024	01/07/2024		***	
Lymphoma	**	*	01/10/2024	01/08/2024	01/07/2024		***	
Brain	**	*	08/07/2024	01/08/2024	01/07/2024		***	
Lung	**	01/02/2024*	01/08/2024	01/05/2024	01/05/2024		***	
Gynaec	**	01/11/2024*	01/08/2024	01/08/2024	01/05/2024		***	
Thyroid	**	01/11/2024*	03/08/2024	01/08/2024	01/08/2024		***	
Sarcoma	**		28/08/2024	01/09/2024	01/08/2024		***	
Neuroendocrine (NET)	**	01/10/2024*					***	
MUC/CLP/URP	**		01/10/2024	09/01/2024	09/01/2024	14/11/2022	***	
ACS	**						***	
Penile	**		01/11/2024	01/11/2023	01/10/2024		***	
TYA	**	*					***	
HPB	**	01/11/2024*	01/10/2024	01/07/2024	01/08/2024		***	
HCC	**	01/11/2024*	01/10/2024	01/07/2024	01/07/2024		***	
SABR	**						***	

**Key:**

- In use - start date
- In use - not all sites
- Not in use yet - planned date
- Not in use - no planned date

**CAV MUI's - not on the plan**

- Adrenal
- Childhood
- Colorectal
- EPC
- Myeloma Local
- Region Myeloma
- Pancreas
- Paraprotein
- Peritoneal
- Skull base
- Palliative Care
- Colposcopy

**Bold:** Form completed live in the MUI  
 \* Hosted MUI  
 \*\* ABUHB uses proformas/excel for their MUI discussions but are looking to implement the MUI forms if they have approval from their SHU  
 \*\*\* BCU uses Cito for their MDT discussions but may test the MDT Forms within the WCP

Mills, Linda  
31/10/2025 12:09:26

# Palliative Care

**Summary** – Creation of WCP forms to replace the CaNISC functionality used in palliative care. This consisted of the delivery of three forms for palliative care, the Patient Preferences Form, the Specialist Palliative Care Form and the palliative care MDT form. The project also delivered specific functionality within Welsh Clinical Workflow Manager (WCWM) to support the service.

**Progress** – All forms and functionality deployed into the Health Boards in March 2025. On 14 April CaNISC was changed to “read only” for Palliative Care Users .

**Next Steps** – Project Closure Report to be signed off as part of overall programme closure.

	PPF				SPC				WCP 24.2.1 Live (partial dependency for MDT & WCWM)	MDT				WCWM(CM)			
	Accepted	Deployed / Available	Live / Available	Confirmed In Use	Accepted	Deployed / Available	Live / Available	Confirmed In Use		Accepted	Deployed	Live / Available	Confirmed In Use	Accepted	Deployed	Live / Available	Confirmed In Use
ABUHB		04.09.24			21.01.25	12.12.24	06.02.25	03.03.25									
BCU	06.08.24	04.09.24	19.11.24	01.12.24	20.12.24	12.12.24	13.01.25	14.02.25	19.11.24	12.11.24	11.11.24	13.01.25	04.03.25	23.10.24	29.10.24	19.11.24	03.12.24
CAV	28.01.25	04.09.24	06.02.25	24.03.25	28.01.25	12.12.24	06.02.25	17.03.25	28.11.24	28.01.25	11.11.24	26.11.24	31.03.25	28.01.25	29.10.24	26.11.24	28.03.25
CTM	18.09.24	04.09.24	04.12.24	10.12.24	10.02.25	12.12.24	12.02.25	25.02.25	04.12.24	10.02.25	11.11.24	04.12.24	10.02.25	29.10.24	04.12.24	25.02.25	
HDD	07.10.24	04.09.24	10.12.24	11.12.24	10.12.24	12.12.24	12.12.24	24.12.24	10.12.24	11.11.24	11.11.24	10.12.24	21.01.25	11.10.24	29.10.24	10.12.24	03.01.25
VCC	10.01.25	04.09.24	13.01.25	14.01.25	10.01.25	12.12.24	13.01.25	14.01.25	27.11.24	12.11.24	11.11.24	27.11.24	01.12.24	29.10.24	27.11.24		
PTHB	13.08.24	05.12.24	20.01.25	04.02.25	07.01.25	12.12.24	20.01.25	21.01.25	05.12.24	11.12.24	11.11.24	20.01.25	07.03.25	18.11.24	29.10.24	05.12.24	04.02.25
SBUHB	04.04.24	04.09.24	30.09.24	08.10.24	17.12.24	12.12.24	10.01.25	16.01.25	21.11.24	12.11.24	11.11.24	21.11.24	18.01.25	12.11.24	29.10.24	21.11.24	03.01.25
WW	15.07.24				10.12.24					11.11.24				11.10.24			

Key:

- Action Complete
- Date Planned
- No Date Available
- Critical/Action Required
- Adoption Decision Pending
- No Intention to Adopt

Mills, R. / 15/10/2025 12:09:26

# Data and Reporting

## Summary

Creation of reporting and dashboards to support performance monitoring and service improvement. The project's scope also includes the development of radiotherapy and systemic anti-cancer therapy treatment (SACT) summaries into WCP.

## Progress

Reporting in place for all cancer areas except for Screening and Colposcopy due to dependencies on the service going live. Development of the Radiotherapy Treatment summary is ongoing and SACT summaries are being tested by users.

## Next Steps

Complete build of dashboards following Screening and Colposcopy go-live and then final project report. Deployment of treatment summaries to be transferred to Business as Usual

Mills, Ben  
31/07/2025 12:01:26

# Screening and Colposcopy

## Summary

Replacement solution for the Colposcopy record currently maintained within CaNISC. This includes the third party Mediscan application used for capturing colposcopy images.

## Progress

Following issues with final tests ahead of a planned go-live in March, the deployment was postponed so that DHCW and the Mediscan supplier could address issues. A new version of the Mediscan application was provided by the supplier on 18 June 2025 and the solution was deployed in clinic on 09 July 2025.

## Next Steps

Complete backload of clinical history from CaNISC into WCP, restrict CaNISC access to read only and then prepare to decommission front end access to the solution 16 weeks from Colposcopy go-live (31 October).

Mills.Brenda  
31/07/2025 12:09:26

# Cancer Funding and Programme Team

- Programme funding expired on 31 March 2025
- Funding from Welsh Government to support the Core team retained to maintain business as usual, led by Cancer Product Manager in Single Record Team
- Programme Team re-assigned to other DHCW Programmes
- Programme closure will detail handover to Single Record Team for BAU and transition from Programme Management to Product Management

Mills, Belinda  
31/07/2025 12:09:26

# Final Steps

- Produce Programme Closure Report and hold final Cancer Informatics Programme Board to approve closure
- CaNISC to be made “read only” for Screening and Colposcopy users
- All front end access to CaNISC to be decommissioned by 31 October 2025 (to allow 16 weeks for Colposcopy History)
- CaNISC data to be archived and made available for reporting
- Enhancements to Cancer System functionality to be managed via Single Record product Board

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31/07/2025 12:09:26



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Digidol Cymru  
Digital Health  
and Care Wales

# Programmes Delivery Committee: Annual Assurance Report

## Digital Maternity Cymru Programme

August 2025

Mills, Belinda  
31/07/2025 12:09:26

## Programme Closure Report – Summary Slide

POMB Submission Date: 17 JUL 2025

### Background

[Full Report to follow once approved by Programme Board](#)

The vision of the DMC Programme was to deliver “a digital maternity solution across Wales that supports clinicians and empowers women and birthing people to participate in high quality, safe care that supports improved outcomes and experiences”. The programme was established in April 2023, following a Discovery project and associated set of recommendations for the way forward for NHS Wales. Considering reviews of the Programme and dialogue with stakeholders across NHS Wales, Welsh Government wrote to Digital Health and Care Wales on 01 May 2025 to confirm that the Digital Maternity Cymru Programme should be closed and a report produced that includes lessons learned so that this can provide insights for future initiatives.

### Programme Performance

The programme did not meet objectives set out as part of the discovery recommendations, due to a policy decision by WG, which defined a local procurement approach, negating the need for a national programme. Planned workstreams around data outputs, system configuration and testing, and health board implementation were not established as part of programme due to the WG policy change.

#### DMC Projects:

- **Discovery:** The project met its objective to provide recommendations for the best way forward and setting foundations for a national programme and system procurement.
- **Procurement:** Development of an OBC was an addition to the scope, which, coupled with external delays in agreeing the OBC, resulted in significant delays to commencing. Unclear/changing commitments to health board buy-in also resulted in changes to the commercial approach. The procurement was abandoned following a recommendation by all workstream groups.
- **Clinical Standards:** The project made considerable progress towards mapping all existing data collection across health boards, identifying variation and alignment to evidence-based tools. Progress was slower than expected, with uncertainty around buy-in and difficulty in engaging clinical community impacting progress, resulting in no published standards.

### Against Objectives:

Due to the change in approach, the programme was unable to meet the following objectives:

- A digital maternity system for clinical users, and a portal/app for service users,
- Integration into the national architecture.
- National data products.
- Implementation of the system.

Delivery of the following was partially met, and transferred to the new standalone project:

- Standardised maternity datasets.

### Against Timescales:

- Discovery project met 3/4 of the 22/23 milestones on time, 1 was delayed due to recruitment challenges.
- In 23/24, only 1 milestone was met, with multiple re-forecast to 24/25 due to the delay caused by requirement to develop DMC OBC.
- In 24/25, 3 milestones were achieved with 7 cancelled due to the decision not to proceed with national programme.

### Against Budget:

FY	Budget	Actual
22/23	£375,964	£385,235
23/24	£1,691,000	£1,388,587
24/25	£1,399,993	£1,233,206

### Significant Issues / Risks to Transition

No risks or issues to transition for procurement or system, due to the change in approach.

Risks related to local resource constraints to support delivery of data standards, and local adoption of standards have transitioned to the Maternity Data Standards project.

### Benefits to realise

Benefits identified in the OBC will not be met. Benefits definition and realisation will transfer to local implementation projects. Significant baselining and forecasting work was shared with health boards to support local initiatives.

### Lessons Learnt

- Obtain a clear strategy and definition of 'Once for Wales' at Welsh Government level which is explicitly understood and agreed with stakeholders across Wales.
- All parties must be clear on, and adhere to, procurement rules and regulations in terms of engaging with suppliers during procurement processes. DHCW to consider with WG and NHS Wales Shared Services Partnership how the learning from this programme can be reflected through guidance and policy in future.
- Ensure the requirement, approach to, and process for approval of any business case for a national solution is understood and agreed up front, to ensure that it can be appropriately scoped into defined work and stakeholders have a clear expectation of timescales involved.
- The timelines in the original proposal were overly optimistic (Complete implementation by March 2025) and did not reflect the depth of work required to procure and standardise using a national approach with a broad range of stakeholders.

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES MAJOR PROGRAMMES REPORT

<b>Eitem ar yr Agenda:</b> <b>Agenda Item:</b>	5.1
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<b>Enw'r Cyfarfod:</b> <b>Name of Meeting:</b>	Programmes Delivery Committee
<b>Dyddiad y Cyfarfod:</b> <b>Date of Meeting:</b>	7 August 2025

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

<b>Noddwr Gweithredol:</b> <b>Executive Sponsor:</b>	Ifan Evans, Executive Director of Strategy
<b>Paratowyd gan:</b> <b>Prepared By:</b>	Lindsay Hodge, Head of Portfolio Management
<b>Cyflwynwyd gan:</b> <b>Presented By:</b>	Ifan Evans, Executive Director of Strategy

<b>Pwrpas yr Adroddiad:</b> <b>Purpose of the Report:</b>	For Assurance
<b>Argymhelliad:</b> <b>Recommendation:</b>	The Committee is being asked to
<b>NOTE</b> the Major Programmes Overview Report update on status of key programmes managed by DHCW for <b>ASSURANCE</b> .	

Mills Belinda  
31/07/2025 12:09:26



# 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 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
	Outcome: N/A
Datganiad: Statement:	



<b>ASESIAD O'R EFFAITH / IMPACT ASSESSMENT</b>	
<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 is no direct impact on resources as a result of 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

<b>Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn</b> <b>Person / Committee / Group who have received this paper prior to this meeting</b>		
<b>PERSON, PWYLLGOR NEU GRŴP</b> <b>PERSON, COMMITTEE OR GROUP</b>	<b>DYDDIAD</b> <b>DATE</b>	<b>CANLYNIAD</b> <b>OUTCOME</b>
DHCW Portfolio Oversight session Management Board	17 July 2025	Approved

<b>Acronymau</b> <b>Acronyms</b>			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

The [Major Programmes Overview Report](#) provides an overall RAG status dashboard for key programmes and projects in the DHCW portfolio, together with individual assurance highlight reports for each and an update on completed actions following the recent Internal Audit review of the Programme Management Office.

#### Scope of Report

The Major Programmes Overview Report consists of assurance highlight reports which summarise the main progress and issues for noting and discussion. It also includes the RAG dashboard for Other Programmes and notes any changes to the status of escalations relevant to the Programme Delivery Committee.

#### PMO Audit Report

The Q1 Change Control action below, included in the PMO audit report has now been achieved and evidence provided. The internal audit team have confirmed completion and closure of the action.

- **Audit Recommendation Change Control:** Whenever there's a change to a project's budget, timeline, or scope, it was documented in the change control log. This makes it easy to track every significant change and see why decisions were made. The change log was on a shared drive, documenting changes had been approved by the Planning and Performance Management Group (PPMG). However, there were some gaps in the completeness of the change control log e.g.
  - no reason given to why the change has been approved; and
  - current and new priority ratings are not regularly completed.
- **Action:** Management will ensure the change control log is fully complete for relevant core fields e.g. reason for rejection and change of priority for milestones.
- **Evidence.** A fully complete and up to date change log – June 25.
- **Evidence provided and action closed – June 25.**

#### Project Management Tooling

A new project management tool has been rolled out across DHCW. This enables the automation of reports and portfolio level dashboards in Power BI. The Q2 assurance reports for the Programmes Delivery Committee will be completed in the tooling. As a result the dashboard and reports for future meetings will be accessible via a PowerPoint pack linked to Power BI.

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

**The portfolio now includes more programmes reporting a RAG status with reasonable or high confidence in delivery. With 4 programmes currently not subject to assessment.**

Integration Hub, National Target Architecture and M365 Enterprise Agreement have been scored as major programmes and are submitting Assurance Reports for the first time. Since Q4, the GP System Migration programme has changed status from GREEN to RED and the LIMS2.0 programme moved from AMBER/RED to RED. Connecting Care has improved its

RAG to AMBER/RED.

Two programmes / projects are **RED**

No confidence of successful delivery requiring critical decisive action:

- **LIMS 2.0:** The budget shortfall and significant UAT and data migration delays underpin the red rag status. Approval from HB Chief Execs is required for the revised discipline deployment approach.
- **GP Systems Framework:** RAG downgraded pending confirmation of funding from WG to support migrations during 2025/26

Three programmes /projects are **AMBER/RED** with low confidence of successful delivery requiring urgent management attention:

- **Cancer Informatics Programme:** Amber-Red due to delays in the Colposcopy solution, a key dependency for CANISC decommissioning, with testing issues pushing go-live to beyond June 25. *July Update: Colposcopy solution now live – programme to move into closure.*
- **Radiology Information System Procurement (RISP):** Revised go-live dates pending HB agreement, local RAGs vary. Some go live dates moved.
- **Connecting Care:** Funding and resource uncertainties, however, OBC submission and review offer some confidence.

**Programmes with RED and AMBER/RED RAG statuses have outlined their respective 'route to green' within their individual reports and the overarching RAG Dashboard.** The primary factors contributing to the current status include:

- Awaiting confirmation of funding from Welsh Government.
- Completion of outstanding testing activities including the resolution of a high volume of bugs and defects.
- Availability of Health Board resources to carry out User Acceptance Testing (UAT) within the required timescales.

The remaining programmes/projects are reporting AMBER/GREEN or GREEN or have not been assessed as activity has been suspended due to a formal review/reset or have been completed.

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

### Major Programmes – Overarching Escalations to PDC

There are no escalations at PDC level.

## 6 ARGYMHELLIAD / RECOMMENDATION

**Argymhelliad:  
Recommendation:**

The Committee is being asked to



GIG  
CYMRU  
NHS  
WALES

Iechyd a Gofal  
Digidol Cymru  
Digital Health  
and Care Wales

**NOTE** the Major Programmes Overview Report update on status of key programmes managed by DHCW for **ASSURANCE**.

Mills, Belinda  
31/07/2025 12:09:18  
Major Programme Report

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES CORPORATE RISK REPORT

<b>Eitem ar yr Agenda:</b> <b>Agenda Item:</b>	5.2
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<b>Enw'r Cyfarfod:</b> <b>Name of Meeting:</b>	Programmes Delivery Committee
<b>Dyddiad y Cyfarfod:</b> <b>Date of Meeting:</b>	07 August 2025

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

<b>Noddwr Gweithredol:</b> <b>Executive Sponsor:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary
<b>Paratowyd gan:</b> <b>Prepared By:</b>	Bethan Walters, Corporate Risk Manager
<b>Cyflwynwyd gan:</b> <b>Presented By:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary

<b>Pwrpas yr Adroddiad:</b> <b>Purpose of the Report:</b>	To Receive/Discuss
<b>Argymhelliad:</b> <b>Recommendation:</b>	The Committee is being asked to
<p><b>DISCUSS</b> the Corporate Risks assigned to the Programmes Delivery Committee.  <b>NOTE</b> the status of the Corporate Risk Register.  <b>DISCUSS</b> Deep dive DHCW0345 - Funding for Operational delivery of Care Director in FY25/26</p>	

Mjlls Belinda  
21/07/2025 12:09:26



# 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL STRATEGIC MISSION</b>	Deliver high quality digital products and services
<b>RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)</b>	All are relevant to the report
<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 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: ISO 14001 ISO20000 ISO 27001 BS 10008	
<b><u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u></b>	Leadership
<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: Safe Care Governance, Leadership and Accountability	
<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: Risk Management and Assurance activities equally affect all. An EQIA is not applicable	



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<b>ASESIAD O'R EFFAITH / IMPACT ASSESSMENT</b>	
<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. The risk owners will be clear on the expectations of managing risks assigned to them
<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

<b>Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn</b> <b>Person / Committee / Group who have received this paper prior to this meeting</b>		
<b>PERSON, PWYLLGOR NEU GRŴP</b> <b>PERSON, COMMITTEE OR GROUP</b>	<b>DYDDIAD</b> <b>DATE</b>	<b>CANLYNIAD</b> <b>OUTCOME</b>
RISK Management Group	01/07/2025	Reviewed
Laura Tolley, Deputy Board Secretary	July 2025	Reviewed
Chris Darling, Board Secretary	July 2025	Reviewed
Management Board	17/07/2025	Approved

<b>Acronymau</b> <b>Acronyms</b>
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DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WG	Welsh Government
NI	National Insurance	DPIF	Digital Priorities Investment Fund
DSPP	Digital Services for Patients and the Public	WICIS	Welsh Intensive Care Information Service
WASPI	Wales Accord on the Sharing of Personal Information	NDR	National Data Resource
SLA	Service Level Agreement	IMTP	Integrated Medium Term Plan
IRAT	Integration and Reference Team	ICU	Intensive Care Unit
ISD	Information Services Directorate	HBs	Health Boards
WG	Welsh Government	FDU	Finance Delivery Unit
SAIL	Secure Anonymised Information Linkage	CAPEX	Capital Expenditures
OPEX	Operating Expenditures	DU	Delivery Unit

### 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. As part of the Strategy, a committee assignment approach to corporate risk assurance is taken. Therefore, any corporate risks relating to DHCW's major Programmes, within the scope of the Programmes Delivery Committee will be considered by this Committee going forward.
- 3.2 This Committee will have oversight of all Programme risks and therefore portfolio oversight of threats and opportunities in relation to the portfolio level risk profile is an important consideration for the Committee.
- 3.3 Committee members are asked to consider risk, in the context of DHCW Programmes Delivery 'what could impact on the Organisation being successful in the short term (1 – 12 months) and in the longer term (12 – 36 months).
- 3.4 There are wider considerations regarding organisational factors which include: sector, stakeholder, and system factors, as well as National and International environmental factors.

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

4.1 In terms of DHCW's Corporate Risk Register, there are currently 21 risks on the Corporate Risk Register, of which 7 are for the consideration of this Committee.

The risks assigned to the Programmes Delivery Committee are as follows:

- DHCW0333 WICIS Implementation Delay
- DHCW0318 Welsh Language Scheme Compliance
- DHCW0344 Funding for Connecting Care in FY25/26
- DHCW0345 Funding for Operational delivery of Care Director in FY25/26
- DHCW0347 National Target Architecture Transition Roadmap
- DHCW0348 Transition to new data architecture
- DHCW0349 RADIS Team scaling back 25/26

4.2 The [Risk Register](#) presents the Committees public register representing the 7 public risks assigned to this Committee.

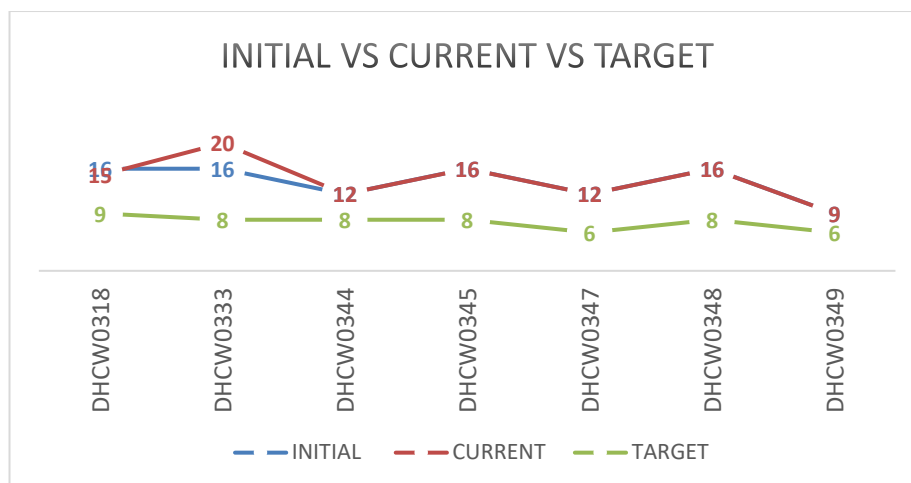
4.3 The Committee are asked to consider the DHCW Corporate Risk Register Heatmap showing a summary of the DHCW risk profile which includes the 3 Significant and 4 Critical risks assigned to the Committee. The key indicates the current position of the risk.

4.4 On the Corporate Risk Register there are sixteen critical risks overall, of which four are assigned to the Programmes Delivery Committee.

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)			**DHCW0281 ↔ **DHCW0282 ↔	DHCW0340 - GP Systems and Services provided by third party could be withdrawn ↔	
	MAJOR (4)			DHCW0344 Funding for Connecting Care in FY25/26 ★	DHCW0336 - Audit + Withdrawal from Contracts ↔ DHCW0337 - Sustainable Digital Services and Development Funding Model ↔ **DHCW0341 ★ **DHCW0342 ★ DHCW0343 Remit Letter 2025/2026 ★ DHCW0345 Funding for Operational delivery of Care Director in FY25/26 ★	DHCW0331 - Fixed term resource funding ↔ DHCW0333 - WICIS Implementation Delay ↔ DHCW0263: DHCW Functions ↑ DHCW0320 – Citizen and stakeholder trust in use of HSC data ↑
	MODERATE (3)		DHCW0300 – Canisc (Screening and Palliative Care) ↓	DHCW0318 – Welsh Language Scheme Compliance ↔		
	MINOR (2)					
	NEGLECTIBLE (1)					

4.5 The Committee are asked to consider the overview of initial risk score versus current versus target and risks that may be identified for further investigation and action.

Mills Belinda  
31/07/2025 12:09:28



Please note that DHCW0344, DHCW0345, DHCW0347, DHCW0348 and DHCW0349 current scores are tracking the same as the initial scores.

4.6 Committee members are asked to discuss [Deep Dive DHCW0345](#) - Funding for Operational delivery of Care Director in FY25/26.

4.7 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):

**NEW RISKS (4) – 4 public, 0 Private**

There were four new risks escalated during the period.

Reference	Name	Primary Risk Domain	Committee Assignment
DHCW0347	National Target Architecture Transition Roadmap	Development of Services	Programmes Delivery Committee
DHCW0348	Transition to new data architecture	Information, Access and Sharing	Programmes Delivery Committee
DHCW0349	RADIS Team scaling back 25/26	Service Delivery	Programmes Delivery Committee
DHCW0350	Increased Cadence of GP Migrations	Finance	Digital Governance & Safety Committee

**RISKS WITH SCORE CHANGES (0) – 0 public, 0 private**

There were no changes in score during the period

**RISKS REMOVED (1) – 0 public, 1 private.**

There was one risk removed during the period.

Reference	Name	Commentary	Committee Assignment



DHCW0282	**PRIVATE**	Risk closed and linked to DHCW0342 PRIVATE for management	Digital Governance & Safety Committee
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## 5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

- 5.1 The Committee is asked to note the changes in the risk profile during the reporting period as a result of the changes to the Corporate Register.

## 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<p><b>DISCUSS</b> the Corporate Risks assigned to the Programmes Delivery Committee.  <b>NOTE</b> the status of the Corporate Risk Register.  <b>DISCUSS</b> Deep dive DHCW0345 - Funding for Operational delivery of Care Director in FY25/26</p>	

# IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES ESCALATION STATUS- IMPROVEMENT PLAN UPDATE

<b>Eitem ar yr Agenda:</b> <b>Agenda Item:</b>	5.3
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<b>Enw'r Cyfarfod:</b> <b>Name of Meeting:</b>	Programmes Delivery Committee
<b>Dyddiad y Cyfarfod:</b> <b>Date of Meeting:</b>	7 August 2025

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

<b>Noddwr Gweithredol:</b> <b>Executive Sponsor:</b>	Helen Thomas, Chief Executive Officer
<b>Paratowyd gan:</b> <b>Prepared By:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary
<b>Cyflwynwyd gan:</b> <b>Presented By:</b>	Chris Darling, Director of Corporate Affairs / Board Secretary / Ifan Evans, Executive Director of Strategy

<b>Pwrpas yr Adroddiad:</b> <b>Purpose of the Report:</b>	For Assurance
<b>Argymhelliad:</b> <b>Recommendation:</b>	The Committee is being asked to
<b>NOTE for ASSURANCE</b> the current status of the Enhanced Monitoring Improvement Plan.	

## 1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

<b>CENHADAETH STRATEGOL</b> <b>STRATEGIC MISSION</b>	All missions apply
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<b>RISG GORFFORAETHOL</b> (cyf, os yw'n briodol) <b>CORPORATE RISK</b> (ref if appropriate)	
<b>ASESIAD O'R EFFAITH AR ANSAWDD</b> (cyf, os yw'n briodol) <b>QUALITY IMPACT ASSESSMENT</b> (ref if appropriate)	

<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:	

<b><u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u></b>	ISO 27001 - Information Security Management Systems
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></b> <b><u>DUTY OF QUALITY ENABLER</u></b>	Leadership
<b><u>PARTH ANSAWDD</u></b> <b><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 ASESIAD O'R EFFAITH AR 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	

Mills, Belinda  
31/07/2025 12:09  
Escalation Status Update



<b>ASESIAD O'R EFFAITH / IMPACT ASSESSMENT</b>	
<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

<b>Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn</b> <b>Person / Committee / Group who have received this paper prior to this meeting</b>		
<b>PERSON, PWYLLGOR NEU GRŴP</b> <b>PERSON, COMMITTEE OR GROUP</b>	<b>DYDDIAD</b> <b>DATE</b>	<b>CANLYNIAD</b> <b>OUTCOME</b>
Helen Thomas, CEO	May 2025	Approved
Simon Jones	May 2025	Approved

<b>Acronymau</b> <b>Acronyms</b>			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DDaT	Digital, data, and technology	SRO	Senior Responsible Owner



### 3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

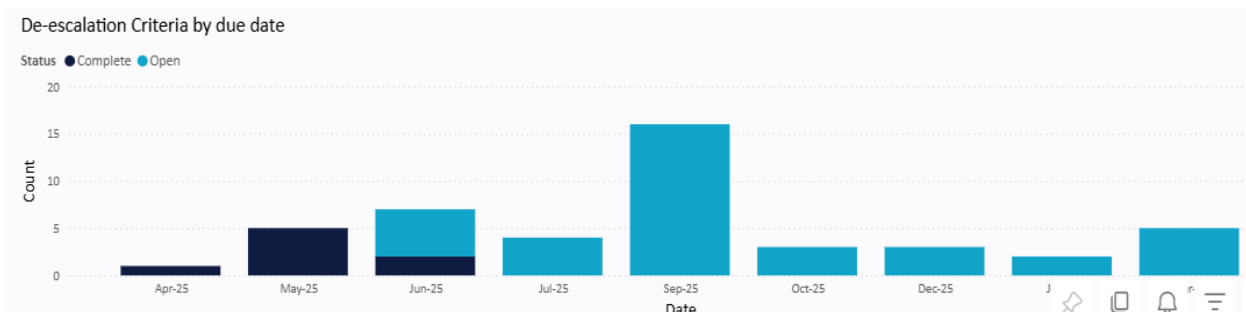
- 3.1 On 11 March 2025, DHCW’s escalation status changed from [Level 1 – Routine Monitoring, to Level 3 – Enhanced Monitoring](#).
- 3.2 The increased escalation relates specifically to the delivery of major programmes, under the ‘performance and outcomes’ domain of the [NHS Oversight, Assurance, Escalation and Intervention Framework](#).
- 3.3 DHCW have worked closely with Welsh Government to confirm the arrangements for escalation and the plan to be monitored to inform the future escalation status.
- 3.4 As previously reported the Programmes Delivery Committee (PDC) has Board Sub-Committee oversight of the detailed delivery of the Enhanced Monitoring Improvement Plan, addressing areas included in the [Escalation Framework](#).

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

#### 4.1 Enhanced Monitoring Improvement Plan

Whilst in escalation the Programmes Delivery Committee has a role to provide assurance on behalf of the SHA Board on the delivery of the [Enhanced Monitoring Improvement Plan](#), which sets out DHCW’s response to the areas of concern/escalation and the proposed milestones and actions against the de-escalation criteria to demonstrate the required improvement. The Enhanced Monitoring Improvement Plan was approved at the Integrated Quality, Performance and Delivery (IQPD) meeting held on the 14 May. Since this date, a shared repository has been developed between DHCW and Welsh Government, to allow a transparent approach to tracking milestone delivery, with each milestone broken down by month. The repository also allows evidence to demonstrate that the milestone has been completed.

The distribution of milestone delivery over time can be seen below:



The Programmes Delivery Committee reviewed all milestones and associated evidence, due for delivery by the end of June at the meeting on the 10 July. Following this Committee meeting the status of these milestones were presented to Welsh

Mills, Belinda  
31/07/2025 11:09

Government at the Integrated Quality, Performance and Delivery (IQPD) meeting on the 16 July. As noted on the 10 July all twelve milestones to be delivered by the end of May and June had been completed, with only one milestone (9.1) Colposcopy go-live missing its target date of 30 June by nine days.

The Programmes Delivery Committee are asked to review the status of the milestones due for completion by the end of July - [DHCW Enhanced Monitoring Improvement Plan July 2025 milestones](#).

The Committee are further asked to note the 16 milestones due for delivery by the end of September 2025, which will be reviewed in detail at the PDC meeting scheduled for the 9 September.

## 4.2 Welsh Government Feedback

The main point of note from the JET meeting held on 26 June:

- DHCW to further work on how major digital programmes can ensure consistent sign up and commitment from all NHS Wales partners through collaborative engagement and how the Once for Wales framework is used. This is being addressed through a number of milestones scheduled for delivery by the end of September 2025, regarding defining programme typology and commercial options.

The main points of note from the IQPD meeting held on 16 July:

- Extensive discussions on the LIMS and RISP delivery options, concerns around health board delivery convergence and the proposal to move to a discipline by discipline approach for LIMS.
- The need to work collectively with WG and partners to ensure the NHS Wales App features are utilised and used when made live.
- Have a follow up discussion with WG on NHS Wales architecture resources and the importance of delivering a target future state and mapped current state by the end of September 2025.
- Engage with WG early on the programme typology and commercial options work.

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

- 5.1 DHCW has been put into Level 3 - Enhanced Monitoring for escalation in relation to delivery of major programmes. For the majority of major programmes included within DHCW's Escalation Framework, working in partnership with other Health Bodies and wider partners is essential for successful delivery, and as such the Enhanced Monitoring Improvement Plan has a 'dependencies' column to ensure if action is required by a partner to achieve a milestone this is documented and tracked as part of the improvement plan.



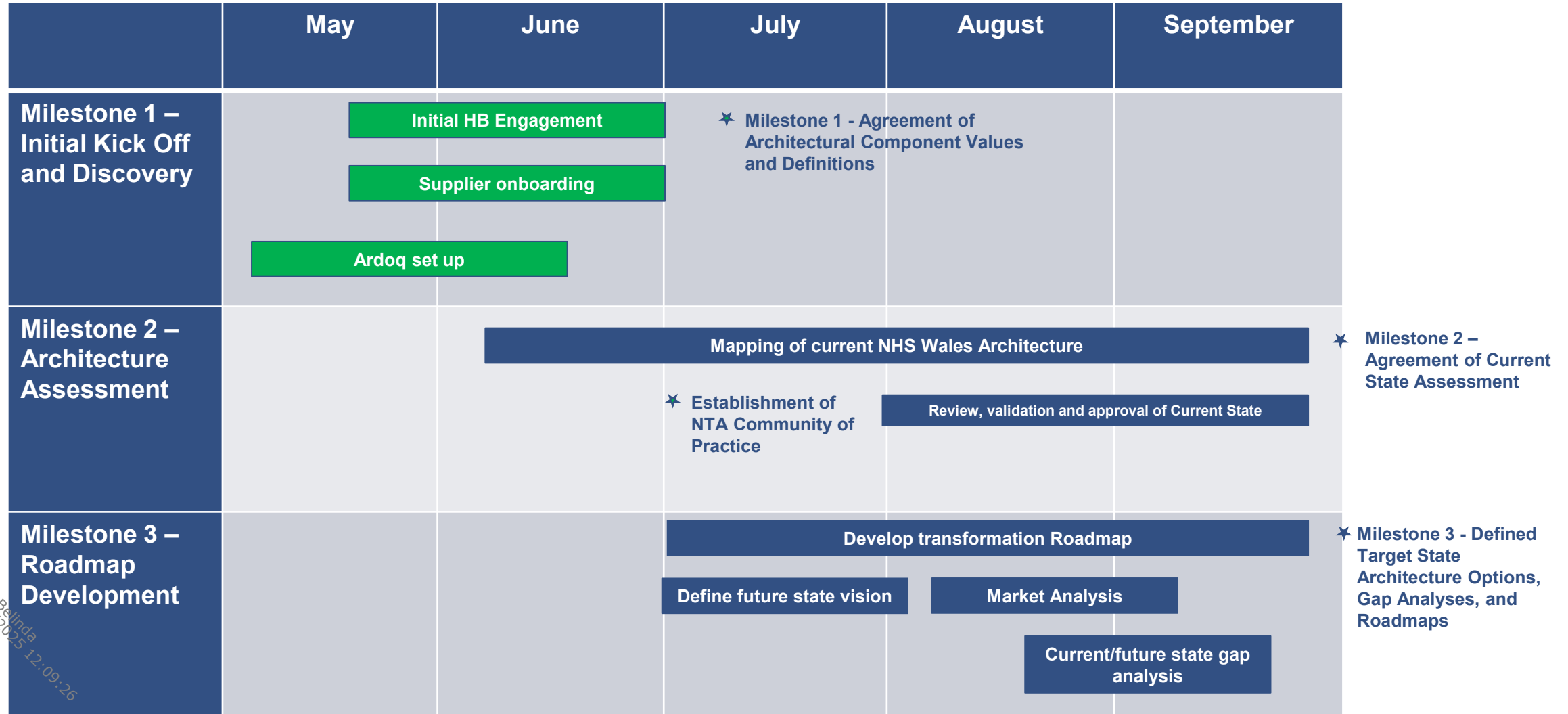
5.2 The DHCW Board must ensure they continue to provide sufficient oversight and scrutiny of all areas of DHCW business. Major programmes account for circa 20% of DHCW’s investment annually and therefore ensuring continued assurance of product and service delivery generally will be vital whilst also ensuring enhanced scrutiny on major programme delivery.

## 6 ARGYMHELLIAD / RECOMMENDATION

<b>Argymhelliad: Recommendation:</b>	The Committee is being asked to
<b>NOTE for ASSURANCE</b> the current status of the Enhanced Monitoring Improvement Plan.	

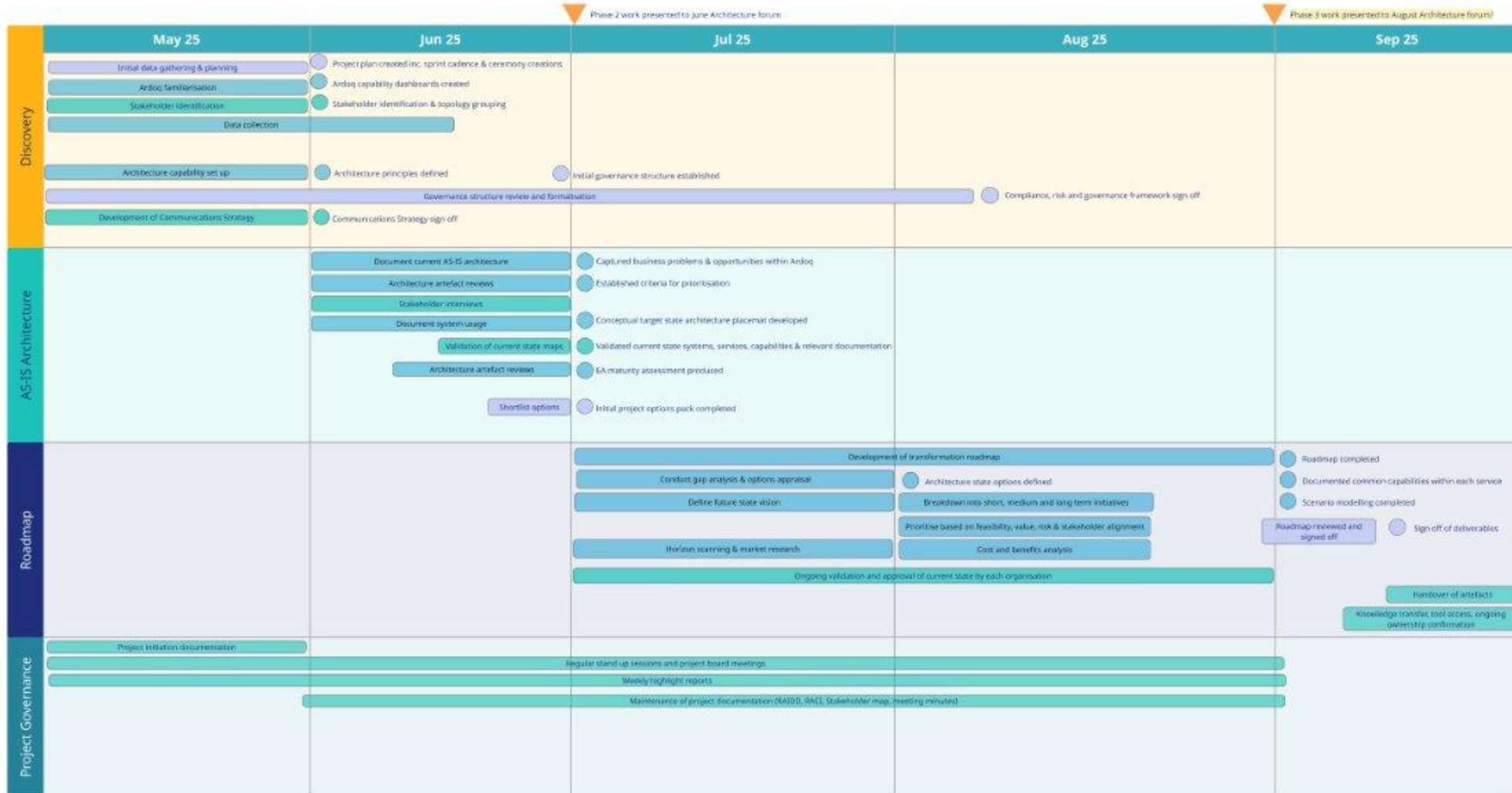
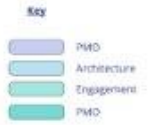
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Escalation Status Update

## National Target Architecture Project Supplier work roadmap



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# National Target Architecture Channel 3 Consulting Plan



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## National Target Architecture Project Plan on a Page



ID	Details	Planned Month
4902	Establish Enterprise Architecture MVP: principles, standards and patterns	September 2025
5367	Clear architectural maps and description of current architecture with risks, deficiencies and strengths mapped.	September 2025
5366	Final proposed future state	December 2025
5368	Clear roadmap to move from current position towards future state - draft	December 2025
5369	Clear roadmap to move from current position towards future state - final	March 2026


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## Stakeholder Advisory Group

### MINUTES, DECISIONS & ACTIONS TO BE TAKEN

 12:30 to 13:30

 24/06/2025

 Teams Meeting

**Chair** Helen Thomas

In Attendance	Init.	Title / Organisation	Apologies	Title / Organisation
Helen Thomas	HT	CEO/DHCW	Ian Harris	Deputy Chair/General Practitioners Committee Wales
Meinir Jones	MJ	National Clinical Director Planned Care (interim), Non-Exec Director/NHS Executive	Huw Thomas	Hywel Dda/Directors of Finance
Hywel Daniel	HD	Executive Director of People and Culture /Cwm Taf Morgannwg	Lisa Trigg	Director of Improvement & Development/Social Care Wales
Paul Solloway	PS	Director of Digital / Assistant Director of Digital Programs / Aneurin Bevan University Health Board		
Iain Bell	IB	Director of Knowledge & Research /Public Health Wales		
Stuart Morris	SM	Director of Digital /Cwm Taf Morgannwg		

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		University Health Board		
Nadine Payne	NP	Head of Engagement & Strategic Partnerships /Digital Health and Care Wales		
Julia Sumner	JS	Assistant Director of Communications /Digital Health and Care Wales		
Cari-Ann Quinn	CAQ	Chief Executive Officer /Life Science Hub Wales		
Aled Roberts	AR	Associate Director of Contractor Engagement /Community Pharmacy Wales		
Dom Hurford	DH	Medical Director /Cwm Taf Morgannwg		
Aaron Marfell	AM	Senior Engagement Officer/DHCW		
Catherine Morgan-Edwards	CM E	Chief Nursing Information Officer /Swansea Bay University Health Board		
Jason Walker	JW	Chief Clinical Information Officer /Betsi Cadwaladr University		
Chris Brown	CB	DDTiV representative TBC		

		/NHS Executive		
Sian Richards	SR	Executive Director of Digital, Data & Engagement /Health Education and Improvement Wales		

Item No	Item	
1.1	<p>Welcome and Apologies</p> <p>HT Delivered a rundown of the group’s purpose, explaining that there is an aim to meet twice a year. All members introduced themselves and their role.</p>	
2.1	<p>Stakeholder Review Overview</p> <p>NP provided an overview of the stakeholder review conducted in 2024, explaining the objectives, methodology, and key findings. The review aimed to better understand stakeholders understanding of DHCW, perceptions of DHCW, impact and experiences of working with and forward views.</p> <p>Summary of findings</p> <p>NP highlighted the key findings of the review, which included positive feedback on technical expertise and crisis response but also identified areas for improvement such as inconsistent communication and unclear roles and responsibilities.</p> <p>Recommendations</p> <p>NP explained how ATOS recommended six themes for improvements, with foster collaboration and partnership the strongest and the lack of clarity in the system wide roles and responsibilities identified as a key challenge.</p> <p>Delivering our action plan</p> <p>NP discussed the recommendations from the stakeholder review and the resulting action plan, which includes seventy-five sub-deliverables. She explained the governance structure and the progress made so far, with 26% of DHCW-led actions and 20% of system-wide actions completed.</p> <p>NP Explained the creation of the Delivery Leads working group and its purpose and how the aim for the Stakeholder Advisory group would provide input and feedback.</p> <p>Reflections</p> <p>System Wide Approach: SM and PS emphasised the need for a</p>	

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	<p>system-wide approach to improve relationships and collaboration, highlighting relationships are two ways, and suggesting that all stakeholders should be involved in the process.</p> <p>NP agreed and it would be useful for other organisations to consider the findings and what they could do to support better system working.</p> <p>HT queried how could this forward and suggested to start potentially through Directors of Digital.</p> <p>Collective Behaviours: IB highlighted the importance of tackling behaviours collectively as a system, stating that inconsistent behaviours and lack of transparency can hinder progress. Lack of leadership around national service transformation is hindering national digital transformation. Need to function as one team, with consistent messaging and behaviours.</p> <p>Collaboration Challenges: Participants discussed the challenges of collaboration, including the need for a shared vision, clear roles and responsibilities, and effective communication.</p> <p>Trust and Credibility: SR mentioned the importance of building trust and credibility through reliable and impactful engagement, suggesting that the trust equation could be applied to improve relationships.</p> <p>Clarity of roles &amp; shared vision: collective discussion around importance of defining roles &amp; having shared vision.</p> <p>Summary</p> <p>Agreement that the activity should not just be DHCW but should be system wide.</p> <p>There needs to be clarity around roles. and a clear vision agreed at system level.</p> <p>A need for consistency in behaviours and actions to drive trust.</p>	
<p>2.2</p> <p>Mills Belinda 31/07/2025 12:09:26</p>	<p>Terms of Reference</p> <p>NP presented the terms of reference for the stakeholder advisory group, outlining the group's objectives, scope, and reporting structure. Participants provided feedback on the terms of reference, querying scope to ensure sighted on delivery issues and suggesting the need for timely distribution of documents and the inclusion of Welsh Government as an observer.</p> <p>Action – Confirm Welsh Governments role in group.</p> <p>Decision – ToR agreed</p> <p>Action – Documentation to be sent one month prior to the meeting. Then a refresher a week before.</p>	

	<p>Summary</p> <p>The terms of reference were approved with the agreement to distribute documents earlier and to include Welsh Government as an observer, ensuring comprehensive engagement and feedback.</p>	
2.3	<p>Progress to date and discussion</p> <p>Key Achievements: Nadine highlighted key achievements, including the creation of an engagement toolkit, improved communication channels, and joint planning with NHS partners to ensure alignment and collaboration.</p> <p>Challenges: Nadine discussed the challenges faced in implementing and measuring the action plan, such as the need for system-wide collaboration, clarity of roles, and managing stakeholder expectations.</p> <p>Action - Create a method of measuring the impact</p> <p>Action - Develop a plan to engage other peer groups and operational groups to enhance digital collaboration.</p> <p>Further Improvements: Nadine identified areas for further improvement, including enhancing transparency, fostering collaboration, and ensuring consistent communication across the organisation and with stakeholders.</p> <p>Governance and Monitoring: Nadine explained the governance and monitoring mechanisms in place to track progress, including regular meetings, progress updates, and reporting to the board and Welsh Government.</p> <p>HT recognised that members views had come out through the course of the conversation and asked for final comments.</p> <p>PS emphasised the national governance and roles and responsibilities as the critical areas.</p> <p>Action - Reflections and discussion note to be sent to team members.</p> <p>Summary</p> <p>Agreement on the importance of Fostering collaboration.</p> <p>The meeting provided positive feedback.</p>	
<p>Miss Belinda 31/07/2025 12:09:26</p>	<p>Any other Business</p> <p>None.</p>	

3.2	<p>Next Steps: Helen Thomas concluded the meeting by thanking participants for their feedback and emphasising the importance of the group's work. She mentioned that a discussion note would be shared with participants and their networks to ensure continued engagement and collaboration.</p> <p>Date and Time of Next Meeting Thursday 6<sup>th</sup> November 2025, 11:30 – 12:30</p>	
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No.	Decisions Made	Agreed by
1	The Terms of Reference were agreed.	All

No.	Actions to be taken	Responsible	Target Date
1	Meeting Preparation - Meeting documentation and progress reports to be sent at least one month before the meeting to allow the representatives time to discuss with their groups.	Aaron Marfell	06/10/2025
2	Meeting Length - Length of the meeting to be discussed and agreed	All	01/10/2025
3	Welsh Government involvement - Welsh Governments role as an observer within the group to be confirmed before the next meeting.	Helen Thomas/Nadine Payne	31/07/2025
4	Action Plan Impact measurement - Create a method to measure the impact of the action plan. Including pulse surveys and other benchmarking tools.	Nadine Payne	01/10/2025
5	Action plan system wide actions - consider findings and how other stakeholders can support improved system working.	All	01/10/2025
6	Action plan system wide actions - link in with Directors of Digital to consider forward system wide plan to support better system working	Nadine Payne	01/10/2025
7	Communication of meeting outputs - Send out a discussion note summarising key points and	Aaron Marfell	08/07/2025

	feedback from the meeting to all participants for further dissemination within their networks.		
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## DHCW STAKEHOLDER REVIEW

Summary of Stakeholder Advisory Board 24<sup>th</sup> June 2025

### DHCW STAKEHOLDER REVIEW: BACKGROUND AND PURPOSE

As part of DHCW's ongoing commitment to be a trusted partner, Atos undertook an independent strategic stakeholder review in 2024 to better understand stakeholders' perceptions of DHCW and their experiences working and communicating with the organisation.

### KEY FINDINGS

Stakeholders expressed positive feedback on technical expertise, staff capability and crisis response. Areas for improvement: inconsistent communication, limited engagement, and delivery delays, Unclear roles and responsibilities within DHCW, alongside similar ambiguity in the wider system, were cited as a significant challenge.

### ACTION PLAN THEMES

The final recommendation report identified six areas for improvements:

- Promote transparency & effective communication
- Foster collaboration & partnership
- Enhance active listening & responsiveness
- Clarity of roles & responsibilities
- Optimise efficiencies & simplify processes
- Advance interoperability & system integration

From these themes a defined action plan has been developed with 75 sub deliverables to be achieved for financial year 25-26. An internal Delivery Leads Group has been established to drive progress of this work.

### STAKEHOLDER ADVISORY BOARD

A Stakeholder Advisory Board has been established to represent stakeholder groups, provide feedback, and discuss progress against the Stakeholder Review Action Plan. The first meeting, chaired by Helen Thomas, CEO of DHCW, took place on 24th June 2025.

### KEY OUTCOMES

- Recognition of Importance: The group recognised the importance and impact of the Stakeholder Review and their role in supporting delivery of system-wide actions.
- Terms of Reference: Accepted by the group, outlining the role and remit of the group, its members, their organisations, and peer group representation.

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#### ACTIONS DISCUSSED

- Welsh Government Involvement: Proposed as an observer to ensure they remain informed of plans and progress.
- Measuring Impact: Developing a clear methodology to measure the impact of the actions aligned to DHCW's Stakeholder Review
- Supporting System Working: Linking with Directors of Digital for forward system-wide plans.

#### NEXT STEPS

The next meeting is scheduled for 6<sup>th</sup> November 2025. Pre-meeting documentation will be sent out for discussion. The focus will be on supporting improved system working, finalising the role of the Welsh Government in the group, and measuring the impact that the action plan is having.

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## ADOLYGIAD RHANDDEILIAID IGDC

Crynodeb o'r Bwrdd Cyngori Rhanddeiliaid 24 Mehefin 2025

### ADOLYGIAD RHANDDEILIAID IGDC: CEFNDIR A PHWRPAS

Fel rhan o ymrwymiad parhaus IGDC i fod yn bartner dibynadwy, cynhaliodd Atos adolygiad rhanddeiliaid strategol annibynnol yn 2024 i ddeall canfyddiadau rhanddeiliaid o IGDC a'u profiadau o weithio a chyfathrebu â'r sefydliad yn well.

### CANFYDDIADAU ALLWEDDOL

Mynegodd rhanddeiliaid adborth cadarnhaol ar arbenigedd technegol, gallu staff ac ymateb i argyfyngau. Meysydd i'w gwella: nodwyd cyfathrebu anghyson, ymgysylltu cyfyngedig, ac oedi wrth gyflawni, rolau a chyfrifoldebau aneglur o fewn IGDC, ochr yn ochr ag amwysedd tebyg yn y system ehangach, fel her sylweddol.

### THEMÂU'R CYNLLUN GWEITHREDU

Nododd yr adroddiad argymhelliad terfynol chwe maes i'w gwella:

- Hyrwyddo tryloywder a chyfathrebu effeithiol
- Meithrin cydweithio a phartneriaeth
- Gwella gwrando'n weithredol ac ymatebolrwydd
- Eglurder rolau a chyfrifoldebau
- Optimeiddio effeithlonrwydd a symleiddio prosesau
- Datblygu rhyngweithredu ac integreiddio systemau

O'r themâu hyn, datblygwyd cynllun gweithredu diffiniedig gyda 75 o is-gyflenwadau i'w cyflawni ar gyfer blwyddyn ariannol 25-26. Mae Grŵp Arweinwyr Cyflawni mewnol wedi'i sefydlu i yrru cynnydd y gwaith hwn.

### BWRDD CYNGHORI RHANDDEILIAID

Mae Bwrdd Cyngori Rhanddeiliaid wedi'i sefydlu i gynrychioli grwpiau rhanddeiliaid, rhoi adborth, a thrafod cynnydd yn erbyn Cynllun Gweithredu'r Adolygiad Rhanddeiliaid. Cynhaliwyd y cyfarfod cyntaf, dan gadeiryddiaeth Helen Thomas, Prif Swyddog Gweithredol IGDC, ar 24 Mehefin 2025.

### CANLYNIADAU ALLWEDDOL

- Cydnabyddiaeth o Bwysigrwydd: Cydnabu'r grŵp bwysigrwydd ac effaith yr Adolygiad Rhanddeiliaid a'u rôl wrth gefnogi cyflawni camau gweithredu ar draws y system.
- Cylch Gorchwyl: Wedi'i dderbyn gan y grŵp, gan amlinellu rôl a chylch gwaith y grŵp, ei aelodau, eu sefydliadau, a chynrychiolaeth y grŵp cyfoedion.

### CAMAU GWEITHREDU A DRAFODWYD

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- Cyfranogiad Llywodraeth Cymru: Wedi'i gynnig fel arsylwr i sicrhau eu bod yn cael eu hysbysu am gynlluniau a chynnydd.
- Mesur Effaith: Datblygu methodoleg glir i fesur effaith y camau gweithredu sy'n cyd-fynd ag Adolygiad Rhanddeiliaid IGDC
- Gwaith System Gefnogol: Cysylltu â Chyfarwyddwyr Digidol ar gyfer blaengynlluniau system gyfan.

## Y CAMAU NESAF

Mae'r cyfarfod nesaf wedi'i drefnu ar gyfer 6 Tachwedd 2025. Bydd dogfennau cyn y cyfarfod yn cael eu hanfon allan i'w trafod. Bydd y ffocws ar gefnogi gwell gweithio systemau, cwblhau rôl Llywodraeth Cymru yn y grŵp, a mesur yr effaith y mae'r cynllun gweithredu yn ei chael.

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