SHA Board PUBLIC Meeting

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

Zoom

Agenda

10:00 - 10:05 1. PRELIMINARY MATTERS

5 min

1.1. Welcome and Introductions

For Noting Chair

1.2. Apologies of Absence

For Noting Chair

1.3. Declaration of Interests

For Noting Chair

10:05 - 10:10 2. CONSENT AGENDA

5 min

2.1. Unconfirmed Minutes of 30 March 2023 Board Meeting

For Approval Chair

2.1 DHCW SHA Board Meeting Minutes 20230303 V1.pdf (15 pages)

2.1.1. Matters Arising

2.2. Unconfirmed Private Abridged Minutes of 30 March 2023 Board Meeting

For Approval Chair 2.2 DHCW SHA PRIVATE ABRIDGED Board Meeting Minutes 20230330 V1.pdf (3 pages)

2.2.1. Matters Arising

2.3. Unconfirmed Private Abridged Minutes of 20 April 2023 Joint Extraordinary Board meeting with Cardiff & Vale UHB

For Approval Chair 2.3 DHCW CAV PRIVATE ABRIDGED Extraorindary Board Meeting Minutes 20230420 Final Draft.pdf (4 pages)

2.3.1. Matters Arising



2.4. Unconfirmed Private Abridged Minutes of 20 April 2023 Extraordinary Board Meeting

Chair

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

2.4.1. Matters Arising

2.5. Action Log

For Noting Chair

There are no actions.

2.6. Forward Workplan

For Noting Board Secretary

2.6 Forward Workplan Report.pdf (4 pages)

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

10:10 - 10:40 3. MAIN AGENDA

30 min

3.1. Shared Listening and Learning Presentation

For Discussion Executive Medical Director/ National Medical Examiner for Wales

3.1 Shared Listening & Learning_Medical Examiners Service.pdf (3 pages)

3.1i TEM - CG - Shared Listening and Learning Medical Examiner Service.pdf (9 pages)

10:40 - 10:55 4. FOR REVIEW

15 min

4.1. Chair & Vice Chair Report

For Discussion Chair

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

4.2. Chief Executive's Report

For Discussion Chief Executive Officer

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

10:55 - 12:20 5. STRATEGIC ITEMS

85 min

5.1. Strategic Procurement Report

For Approval Executive Director of Strategy

5.1 REP - SHA Board Strategic Procurement Report May 2023.pdf (11 pages)

5.1i App1i DHCW Commitment of Expenditure Over Chief Executive Limit; P812 Ext Resources V1.0 (1) - Copy.pdf (9 pages)

5.1ii App1ii DHCW Commitment of Expenditure Over Chief Executive Limit; P308.02 SIT D0.2.pdf (7 pages)

5.1iiii App1iii DHCW Commitment of Expenditure Over Chief Executive Limit; P531 DQS.pdf (7 pages)

5.1iv App1iv DHCW Commitment of Expenditure Over Chief Executive Limit; P835 TTP Telephony D0.1.pdf (7 pages)

5.2. Stakeholder Engagement Plan Update

For Noting

For Noting

Executive Director of Strategy

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

-5.3. Strategic Workforce Review Update

Director of People and Organisational Development

5.3. SHA WFPBOARD PAPER SJ TAYLOR FINAL HT F17052023 (004).pdf (6 pages)

5.3i final WFP ANALYSIS 1922SJT.pdf (11 pages)

5.4. Transfer of Eyecare Digitisation Programme

For Approval Chief Executive Officer

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

Break

12:20 - 14:15 6. GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE 115 min

6.1. Corporate Risk Register Report including Annual Review of Risk Appetite and Risk Tolerance

For Approval Board Secretary

6.1 Risk Management Report.pdf (8 pages)

6.1ii Appendix B DHCW Corporate Risk Register.pdf (13 pages)

6.2. Board Assurance Framework Report

For Approval Board Secretary

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

6.3. Integrated Organisational Performance Report

Executive Director of Strategy For Discussion

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

6.4. Finance Report

For Discussion Executive Director of Finance

Update on Financial Position Annual Plan 2023/24

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

6.5. Audit & Assurance Committee Highlight Report

For Noting Committee Chair

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

6.6. Digital Governance and Safety Committee Highlight Report

For Noting Committee Chair

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

6.7. IM Digital Network Highlight Report

For Noting Network Cuan 6.7 IM Digital Network Highlight report.pdf (4 pages)

6.8. Local Partnership Forum Highlight Report

For NotingAdvisory Group Chair6.8 LPF Highlight report.pdf (4 pages)

14:15 - 14:15 7. CLOSING MATTERS

0 min

7.1. Any Other Urgent Business

For Discussion Chair

7.2. Date of Next Meeting

For Noting Chair

Thursday 27 July 2023





DHCW SHA Board Meeting – PUBLIC – Unconfirmed minutes

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 30 March 2023 as a virtual meeting broadcast live via Zoom.



10:30 to 14:50



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

In Attendance	Initial	Title	Organisation
Nathan Couch	NC	Performance Audit Lead	Audit Wales
Chrus Darling	CD	Board Secretary	DHCW
Darren Griffiths (for item 5.1 only)	DG	Audit Manager	Audit Wales



Sam Hall	SH	Director of Primary, Community and Mental Health Digital Services	DHCW
Nerys Hurford	NH	Translator	Nerys Hurford Translation
Sarah-Jane Taylor	SJT	Director of People & Organisational Development	DHCW
Laura Tolley	LT	Corporate Governance Manager (Secretariat)	DHCW

Apologies	Title	Organisation
There were no apologies for abse	ence.	

Acronyms				
DHCW	Digital Health and Care Wales	SHA	Special Health Authority	
CEO	Chief Executive Officer	DPIF	Digital Priority Investment Fund	
POD	People and Organisational Development	IMTP	Integrated Medium-Term Plan	
IOPR	Integrated Organisational Performance Report	NWSSP	NHS Wales Shared Services Partnership	
ВСИНВ	Betsi Cadwaladr University Health Board	ICT	Information, Communication, Technology	

ltem No	Item Detail	Outcome	Action
PRELIN	IINARY MATTERS		
1.1	Welcome and Apologies	Noted	None to
	The Chair welcomed everyone bilingually to the DHCW SHA Board meeting.		note
20105170023	The Chair confirmed the meeting was being broadcast live via Zoom, in addition, the recording would be available via the DHCW website for any persons unable to access the meeting live. The Zoom platform was being used to allow for members to be visible throughout the entire meeting and for simultaneous translation to take place, allowing members to engage in the meeting in English or Welsh.		
	The Chair provided some housekeeping notices regarding the technical aspects of live streaming the meeting, the planned breaks, and the use		

	of the consent agenda for items 2.1 to 2.14.		
	The Chair advised that the Board had just concluded a short private meeting which was held in private due to commercial sensitivities regarding the LINC Programme, no decisions were made during this private meeting.		
1.2	Apologies for Absence	Noted	None to
	There were no apologies for absence		note
1.3	Declarations of Interest	Noted	None to
	There were no declarations of interest.		note
CONSE	NT AGENDA – FOR APPROVAL AND NOTING		
2.1	Unconfirmed Minutes of the Board meeting held on 26 January 2023	Approved	None to
	The Board resolved to:		note
	APPROVE the minutes of the Board meeting held on 26 January 2023 subject to one minor amendment requested.		
2.2	Unconfirmed Private Abridged Minutes of 26 January 2023 Board Meeting	Approved	None to note
	The Board resolved to:		
	APPROVE the unconfirmed private abridged minutes of 26 January 2023 board meeting.		
2.3	Action Log	Noted	None to
	The Board resolved to:		note
	NOTE the Action Log.		
2.4	Forward Workplan	Noted	None to
	The Board resolved to:		note
	NOTE the contents of the Forward Plan.		
2.5	Board Cycle of Business 2023-24	Approved	None to
	The Board resolved to:		note
	APPROVE the Board Cycle of Business 2023-24.		
2.6	Annual Committee and Advisory Group Reports	Approved	None to
>	The Board resolved to:		note
0110 05-1	APPROVE the Annual Committee and Advisory Group reports.		
2.7	Board and Committee Effectiveness Self-Assessment	Noted	None to
	The Board resolved to:		note
	NOTE the Board and Committee Effectiveness Self-Assessment.		



	WALES and Care Wales		
2.8	Annual Review of Standing Orders and Compliance Report The Board Resolved to: APPROVE the Annual Review of Standing Orders and Compliance	Approved	None to note
	Report.		
2.9	Governance Assurance Framework Review	Approved	None to
	The Board resolved to:		note
	APPROVE the Governance Assurance Framework Review.		
2.10	Health and Care Standards Annual Assessment	Approved	None to
	The Board resolved to:		note
	APPROVE the Health and Care Standards Annual Assessment.		
2.11	Emergency Planning Annual Report	Approved	None to
	The Board resolved to:		note
	APPROVE the Emergency Planning Annual Report.		
2.12	Policy Report	Approved	None to
	The Board resolved to:		note
	APPROVE the Policy Report.		
2.13	Wellbeing of Future Generations Act	Noted	None to
	The Board resolved to:		note
	NOTE the Wellbeing of Future Generations Act update.		
2.14	Gender Pay Gap Annual Report	Approved	None to
	The Board resolved to:		note
	APPROVE the Gender Pay Gap Annual Report.		
MAIN	AGENDA		
PART 3	- FOR REVIEW		
3.1	Chair's Report	Received	None to
	The Chair outlined the following highlights from within the report:	& Approved	note
	Programme Governance Arrangements	Approved	
2	The Chair advised the Board that the final Independent Review into Programme Governance Arrangements report was due to be		
18/05/2023	shared imminently and this would be an agenda item at the May SHA Board meeting.		
	Ministerial Away Day		
	The Chair stated that he attended an away day with the Minister		
	for Health and Social Care and other NHS Wales Chairs on 16 4 DHCW SHA F	Board Meeting	



	WALES DIgital Health wALES and Care Wales		
	March 2023 and discussed the role of DHCW, digital themes and funding priorities. The Chair also advised that there were also discussions on the challenges faced across NHS Wales including highlighting the significant financial challenges and the ongoing cyber security threat. The Chair shared that there was a common view around Once for Wales interoperability and a recognition that significant transformation can be achieved through digital whilst recognising the resources required to do this.		
	The Chair requested approval from the Board for Chairs Action that had been taken since the last Board meeting which was for the All Wales NWSSP Contract for Utility Contract Changes.		
	The Chair also advised that future reports would include highlights from the Vice Chair.		
	The Board resolved to:		
	RECIEVE the contents of the Chair's report and APPROVE the Chairs Action.		
3.2	Chief Executive's Report	Received	None to
	Helen Thomas, Chief Executive Officer (HT) provided the following highlights from the report:	& Discussed	note
	• Eye Care Digitisation Programme - HT advised that ongoing conversations had taken place with Welsh Government policy leads and Cardiff and Vale UHB and it had been proposed that the programme would transfer to DHCW on 1 June 2024. A programme transition plan would be implemented, and an update would be brought to the SHA Board meeting in May 2023.		
	 Chief Executives Management Team Meeting & Telehealth Strategic Workshop, TEC Cymru Event – HT explained on both occasions there were productive discussions around virtual wards with Tec Cymru taking this work forward. 		
10/10/10/10/10/10/10/10/10/10/10/10/10/1	• Equality and Social Justice Committee. HT informed the Board that Ifan Evans, Executive Director of Strategy, Rhidian Hurle, Executive Medical Director and Darren Lloyd, Associate Director of Information Governance and Patient Safety attended the Senedd Equality and Social Justice Committee one day inquiry on data justice and the use of personal data in the Welsh NHS on 27 March 2023 where there was good discussion around how data is currently being used, the impact of the rapid shift towards digital technology in NHS Wales, keeping personal data safe and future plans for using patient data to improve the delivery and quality of healthcare services.		

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NHS	Digital Health
WALES	and Care Wales

	The Board resolved to:					
	RECEIVE and DISCUSS the contents of the Chief Executive's report.					
PART 4	PART 4 – STRATEGIC ITEMS					
4.1	IMTP 2023-26	Approved	None to			
	Ifan Evans, Executive Director of Strategy (IE) introduced the report and confirmed the IMTP 2023-26 was being presented for approval prior to submission to Welsh Government. IE advised it was a pleasure to present the report for Board approval and explained the following:		note			
	• A number of workshops had been held over the past few months where over 100 people, including staff, Board members and stakeholders contributed to the development of the IMTP;					
	• The workshops and engagement ensured that everyone took ownership of the plan;					
	• The IMTP was considerably shorter than previous years;					
	 The emphasis of IMTP was change work, transformation work and the additional work DHCW undertake and DHCW principal programmes; 					
	 Business as usual services were core to DHCW as an organisation, these were included in the plan but were not as apparent as other areas, this was deliberate as emphasis was being placed on key deliverables that were important for DHCW; 					
	 Strategic engagement was very challenging across NHS and social care in general; 					
	 Digital arena was changing rapidly which was why DHCW were being clear on what it does to help its stakeholders to understand DHCWs role; 					
	• DHCW were very open and transparent in terms of challenges within the IMTP;					
	• The IMTP would be submitted to Welsh Government for approval on 31 March 2023.					
20105/10013	Ruth Glazzard, Vice Chair (RG) commented that there was a lot in the IMTP for DHCW to deliver. Whilst it was being acknowledged that it would be challenging to deliver, the Board would need to ongoingly challenge delivery over the coming months.					
	The Board resolved to:					
	APPROVE the IMTP 2023-26.					



4.2	Finance Report	Received	None to
	Claire Osmundsen-Little, Executive Director of Finance (COL) presented the financial performance report to February 28th. The following was highlighted:	& Discussed	note
	• DHCW were forecasting achievement of all targets for year end;		
	 Pay award was agreed by Welsh Government and actioned in March; 		
	• An overview of the revenue run rate was shared;		
	 Core Revenue performance was highlighted with some pressures in Clinical, Finance and Business and Assurance and ICT Directorates; 		
	 Savings target was due to be achieved and an overview of projected savings targets was shared; 		
	• COVID-19 spend was at £8.7m to date, this was split into Test, Trace, Protect and Vaccines. £9.1m was predicted to be spent;		
	• DHCW had recorded a £24.5m revenue spend against DPIF schemes to date, with a plan to spend £31.4m by the end of the year;		
	• DHCW recorded £6.2 capital spend to date, with £1.2m still to be spent, this was expected to be achieved;		
	• The draft Audit Accounts timetable was shared;		
	• A new ISA315 Audit Standard would be used to support the review of the accounts;		
	• There was a significant cost pressure on the NHS, allocations uplifts would be 1.5% for 2023/24, 0.75% for 2024/5 and 2% for 2025/26;		
	 Unavoidable pressures and necessary investments were shared; 		
	 The current position forecasted a net recovery target of £1.9m in 2023/24 prior to implementation of any additional mitigating actions; 		
	 Risks and opportunities were highlighted as, Digital Inflation, Contractual Energy Cost Increases and Microsoft VAT Recovery; 		
18/05/12	• DHCW would move a data centre in 2023-24 and this would be covered from DPIF and Capital funding;		
	 Welsh Government had agreed to fund the Cyber Resilience Plan capital and revenue costs for 2023-24. Funding was not recurrent, but this was a positive step forward. 		

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	Following the presentation, the below comments were made:		
	 Digital inflation was multicomplex; 		
	 Pay inflation was held centrally and would be covered by Welsh Government; 		
	• DHCW were not submitting a balanced IMTP plan this year due to financial pressures;		
	 Full confirmation of Service Level Agreements from Health Boards had not been received which was a risk; 		
	• DHCW had taken steps to deliver a savings plan in 2023-24, therefore, the team were reasonably confident that savings would be delivered for 2023-24, however a strategic savings plan would be needed for the coming years.		
	The Board resolved to:		
	RECEIVE and DISCUSS the Finance Report.		
4.3	Strategic Equality Plan	Approved	None to
	Sarah-Jane Taylor, Director of People and OD (SJT) shared the Strategic Equality Plan. She highlighted the following:		note
	• This was the first Strategic Equality Plan for DHCW;		
	 The SEP outlined DHCW's commitment of being an inclusive Employer of Choice; 		
	 DHCW would need to review and revise all its equality objectives at least once every four years. 		
	 Marilyn-Bryan Jones, Independent Member and Independent Member Board Champion for equality had been involved in the development of the plan; 		
	 The plan had been out for consultation for a number of weeks, all comments and feedback received was taken on board and incorporated into the plan; 		
	• Key commitments included in the plan included:		
	- Attract and Retain		
	- Anti-Racism		
	- Anti-Bullying		
~	- Development Opportunities		
	The Board welcomed the plan and explained the focus now would be on how the plan is brought to life. SJT confirmed that the plan was discussed openly at the last Senior Leadership Day to ensure DHCW embrace the expectations set out in the plan.		
	The Board resolved to:		



	APPROVE the Strategic Equality Plan.		
4.4	Product Approach Sam Lloyd, Executive Director of Operations (SL) presented the product management approach update. He highlighted the:	Received & Discussed	None to note
4.4	Sam Lloyd, Executive Director of Operations (SL) presented the		
	 A maturity assessment would be undertaken and an action plan to address this would be developed; Having a meaningful product platform depends on good architecture being in place; 		
	 architecture being in place; An example of the Product Operating Model was shared; High-level next steps were shared; A focus on skill set was being undertaken, this was being looked at jointly with Gartner; 		
10/10/10/10/10/10/10/10/10/10/10/10/10/1	 The following comments were made: There was a close connection between product approach and the organisations strategic objectives; DHCW would continue to run projects, programs and portfolios alongside a product approach; 		



WALES and Care Wales		
• The product method of working was in place across industries, therefore there was learning DHCW could take from different organisations;		
 The measurement of value in the healthcare setting would be key to a sustainable funding model; 		
• Collaboration across the organisation was needed;		
• If product is successful, it would transform the organisation.		
The Board resolved to:		
RECEIVE and DISCUSS the Product Approach.		
National Data Resource Business Justification Case	Noted	None to
E delivered the NDR Phase 3 digital investment proposal. He nighlighted the following:		note
• March 2023 marked the end of phase 2 business case. The phase 3 case sets out the justification and funding required for April 2023- March 2025;		
 DHCW was a major delivery organisation for the NDR programme, leading on the delivery of the national components; 		
• The majority of NDR staff were employed by DHCW;		
 There were changes anticipated to the delivery plan as part of the Welsh Government scrutiny/approval process, as well as the DPIF budget pressures; 		
 Benefits included within the Business Justification Case would be owned by various stakeholder partners, including health boards, within the National Data Resource Programme. 		
The Board resolved to:		
NOTE the National Data Resource Business Justification Case		
Lunch Break – 35 minutes		
GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE		
Audit Wales Structured Assessment 2022 and Annual Audit Report	Assured	None to
Darren Griffiths from Audit Wales delivered the Audit Wales Structured Assessment 2022. The following points were highlighted:		note
• Overall, Audit Wales found that DHCW was embedding good governance arrangements, and must now seek to further develop its role as a trusted digital partner to exploit digitally enabled service opportunities across Wales;		
DHCW was well led and has made positive progress in establishing and embedding appropriate arrangements to		
	 The product method of working was in place across industries, therefore there was learning DHCW could take from different organisations; The measurement of value in the healthcare setting would be key to a sustainable funding model; Collaboration across the organisation was needed; If product is successful, it would transform the organisation. The Board resolved to: RECEIVE and DISCUSS the Product Approach. National Data Resource Business Justification Case E delivered the NDR Phase 3 digital investment proposal. He nighlighted the following: March 2023 marked the end of phase 2 business case. The phase 3 case sets out the justification and funding required for April 2023- March 2025; DHCW was a major delivery organisation for the NDR programme, leading on the delivery of the national components; The majority of NDR staff were employed by DHCW; There were changes anticipated to the delivery plan as part of the Welsh Government scrutiny/approval process, as well as the DPIF budget pressures; Benefits included within the Business Justification Case would be owned by various stakeholder partners, including health boards, within the National Data Resource Programme. The Board resolved to: NOTE the National Data Resource Business Justification Case SCVERNANCE, RISK, PERFORMANCE AND ASSURANCE Audit Wales Structured Assessment 2022 and Annual Audit Report Darren Griffiths from Audit Wales delivered the Audit Wales Structured Assessment 2022 and Annual Audit Report Overall, Audit Wales found that DHCW was embedding good governance arrangements, and must now seek to further develop its role as a trusted digital partner to exploit digitally enabled service opportunities across Wales;	 The product method of working was in place across industries, therefore there was learning DHCW could take from different organisations; The measurement of value in the healthcare setting would be key to a sustainable funding model; Collaboration across the organisation was needed; If product is successful, it would transform the organisation. The Board resolved to: RECEIVE and DISCUSS the Product Approach. Noted E delivered the NDR Phase 3 digital investment proposal. He nighlighted the following: March 2023 marked the end of phase 2 business case. The phase 3 case sets out the justification and funding required for April 2023- March 2025; DHCW was a major delivery organisation for the NDR programme, leading on the delivery of the national components; The majority of NDR staff were employed by DHCW; There were changes anticipated to the delivery plan as part of the Welsh Government scrutiny/approval process, as well as the DPIF budget pressures; Benefits included within the Business Justification Case would be owned by various stakeholder partners, including health boards, within the National Data Resource Programme. The Board resolved to: WOTE the National Data Resource Business Justification Case unch Break – 35 minutes GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE Audit Wales Structured Assessment 2022 and Annual Audit Report Darren Griffiths from Audit Wales delivered the Audit Wales Structured Assessment 2022. The following points were highlighted: Overall, Audit Wales found that DHCW was embedding good governance arrangements, and must now seek to further develop its role as a trusted digital partner to exploid digitally enabled service opportunities across Wales; DHCW was well led and has made positive progress in



5.2	Betsi Cadwaladr University Health Board Review of Board Effectiveness	Assured	None to
105/1013	RECEIVE and DISCUSS the Audit Wales Structured Assessment 2022 and Annual Audit Report 2022 for ASSURANCE.		
7011	The Board resolved to:		
	• Performance audit work has led the Auditor General to conclude that the DHCW is making positive progress in embedding good governance arrangements and must now seek to further develop its role as a trusted digital partner to exploit digitally enabled service opportunities across Wales.		
	 DHCW met its financial duty to break even against its Revenue and Capital Resource Limit for the year ending 31 March 2022; 		
	• One recommendation was made and actions to address this would be reviewed as part of the 2022-23 accounts work;		
	 DHCW's accounts were properly prepared and materially accurate and issued an unqualified audit opinion on them. Audit Wales work did not identify any material weaknesses in DHCW's internal controls; 		
	The Audit Wales Annual Report 2022 for DHCW was shared and the following highlighted:		
	The Audit & Assurance Committee would be closely monitoring the recommendations from the report to ensure that they are fulfilled, in addition, opportunities for learning would be taken forward.		
	The Structured Assessment was discussed at the Audit & Assurance Committee in February 2023, it was a very positive report and reflected DHCW growing maturity as an organisation;		
	As DHCW move towards flexible, agile delivery it would be difficult to set firm timescales within all plans and strategies, however it was noted that milestones would be included, recognizing some flexibility within them, and this would ensure that the SHA Board and its Committees gain assurance that plans were being met;		
	This was the first Structured Assessment for the organisation and was an evolution of the Baseline Governance Review which was undertaken in 2021;		
	The following comments were made:		
	 Milestones and targets would need to be included in plans to enable effective progress monitoring. 		
	 DHCW has effective planning approaches, but further work was required to develop its longer-term strategy; 		
	support good governance;		

note

11/260

- DHCW Assessment

э.4	Corporate Risk Register Report	received	none to
5.4	Report	Received	None to
(01/05/12013 ×	The Board resolved to: RECEIVE and DISCUSS the Integrated Organisational Performance		
	• The plan on the page articulated DHCW's ambition for the year, it did not include all the organisations plans, it focused on the plans that were most important for DHCW and what had been prioritised.		
	 The interim plan on a page was highlighted, noting that the Annual Business Plan would be shared with the Board in May which would include all the level of detail around DHCW programmes; 		
	 The report focused on planning, however, over the coming months a focus would be on reporting performance; 		
	• The Board IOPR was presented on a bi-monthly basis in arrears;		
	IE delivered the integrated organisational report to end of February 2023. The following comments were made:	& Discussed	note
5.3	Integrated Organisational Performance Report	Received	None to
	RECEIVED and DISCUSSED the Betsi Cadwaladr University Health Board Review of Board Effectiveness – DHCW Assessment for ASSURANCE .		
	The Board resolved to:		
	The Board acknowledged the need to ongoingly test and assure themselves in this area.		
	of Board organisational development work. As the DHCW Board and Executive team became fully established, DHCW commissioned Deloitte as a partner to design a bespoke Board Organisational Development programme for DHCW. This work commenced in October 2022 and a big focus of the programme was Board challenge, cohesion, and trust.		
	Chris Darling, Board Secretary (CD) presented the report and advised that the BCUHB report looked at the Executive team and Board and how it was functioning. CD advised that DHCW's Executive team had only recently been fully appointed to and this had taken almost two years to be a fully recruited team. This was a similar position for Independent Members due to delays in the recruitment process. The BCUHB report provided a helpful reminder on the importance		
	The Chair advised for assurance purposes following the publication of the Audit Wales BCUHB report, he requested a DHCW assessment to be undertaken against the themes and recommendations from the report.		



	drew a advised	ttention to the World d themes relevant to	he Corporate Risk Register Report. CD d Economic Forum Global Risk Report and DHCW were discussed at the last Board following points were highlighted:	& Discussed	note
	•	There were 31 risks were detailed in the	on the corporate risk register, of which 20 e report;		
	•	every Digital Govern	ed as private, 10 of which are discussed at nance & Safety Committee and 1 would be & Assurance Committee;		
	•	Since the last Board	meeting, 15 risks had been added:		
	-	DHCW0302	Velindre CANISC SLA Income Increase		
	-	DHCW0303	Primary Care IM&T Funding		
	-	DHCW0304	NHS Wales SLA Income Increases		
	-	DHCW0305	Welsh Government Core Funding		
	-	DHCW0306	Switching Service – Succession		
	-	DHCW0307 development	Switching Service - Responsive		
	-	DHCW0308	Sustainable funding for NIIAS		
	-	DHCW0311 Model Changes	Digital Cost Pressure – Supplier Price		
	-	DHCW0312 Fluctuation Risk	Digital Cost Pressure – Exchange Rate		
	-	DHCW0313 Changes	Digital Cost Pressure – Service Model		
	-	DHCW0314	Digital Cost Pressures – Supply Chain Risk		
	•	Since the last Board	meeting, 7 risks had been removed:		
	-	DHCW0228	Fault Domains		
	-	DHCW0289	Digital Inflation		
	-	DHCW0302	Velindre Canisc SLA Income		
	-	DHCW0303	Primary Care IM&T Funding		
	-	DHCW0305	Welsh Government Core Funding		
10/10/10/10/10/10/10/10/10/10/10/10/10/1	•	Since the last Board change in score:	meeting there had been 2 risks with a		
703	~~~ <u>~</u> ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	increased from 12 t	er Capacity to support EPS – This has been o 20 – IE was the risk owner and advised technical supply chain however mitigation hrough;		

WALES and Care Wale		GIG CYMRU NHS WALES	lechyd a Gofal Digidol Cymru Digital Health and Care Wale	s
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	WALES and Care Wales		
	 DHCW0259 Staff Vacancies – A lot of work has been done in this area and this has been reduced from 15 to 12. 		
	DHCW's highest scoring risks were:		
	 DHCW0299 - Supplier capacity to support Electronic Prescription Service readiness activities; 		
	- DHCW0298 - Delay in the Implementation of LINC (WLIMS 2; and		
	- DHCW0304 - NHS Wales SLA Income Increases		
	CD advised the organisations risk position was currently dominated by cyber and finance risks, however it was anticipated a number of risks would be mitigated down before the next SHA Board meeting in May 2023.		
	IE added that work was being undertaken to get programme and project risks on the organisations risk register. These risks were scored by the programme / project however reassurance was provided to the Board that DHCW were also actively managing these risks.		
	The Board resolved to:		
	RECEIVE and DISCUSS the Corporate Risk Register		
5.5	Remuneration and Terms of Service Committee Highlight Report	Noted	None to
	The Chair provided a brief update from the two Remuneration and Terms of Service Committee meetings that were held on 19 January and 2 March 2023. The Chair advised the Committee reviewed its annual reporting requirements, were updated on the executive team performance and objectives in addition to approving a settlement agreement.		note
	The Board resolved to:		
	NOTE the Remuneration and Terms of Service Committee Highlight Report		
5.6	Local Partnership Forum Highlight Report	Noted	None to
x	Andrew Fletcher, Associate Board Member (AF) provided an update from the Advisory Group meeting and informed the Board that Hybrid Working and the Estates Plan were being carefully monitored by the Local Partnership Forum.		note
	The Board resolved to:		
2023	NOTE the Local Partnership Forum Highlight Report		
5.7	Digital Governance and Safety Committee Highlight Report	Noted	None to note
	Rowan Gardner, Independent Member and Chair of Digital		

	Governance & Safety Committee provided an update to the Digital Governance and Safety Committee meeting that took place in February and commented on the open approach to the meeting which was very positive.		
	The Board resolved to:		
	NOTE the Digital Governance and Safety Committee Highlight Report		
5.8	Audit and Assurance Committee Highlight Report	Noted	None to
	Marian Wyn Jones, Independent Member (MWJ) delivered a report on the Audit and Assurance meeting that took place in February. MWJ advised the Board that the Committee received the following Audit Reports, all of which received 'Reasonable Assurance' which was pleasing:		note
	- Financial Sustainability		
	- Embedding the Stakeholder Engagement Strategy		
	- Performance Management		
	- Switching Services		
	MWJ also expressed her appreciation of commitment from the Deputy Chief Executive / Executive Director of Financial and Corporate Governance team.		
	A query was raised around how the organisation disseminate information and updates from Board and Committee meetings to staff. It was explained numerous communication tools were used to include Staff Briefing with the CEO, Internal Newsletters, Board Insights, Board Summary Videos and TenTalks.		
	The Board resolved to:		
	NOTE the Audit and Assurance Committee Highlight Report		
PART 6	- CLOSING MATTERS	1	
6.1	Any Other Urgent Business	Discussed	None to
	There was no other urgent business raised.		note
6.2	Date and Time of Next Meeting	Noted	None to
	Thursday 25 May 2023		note
	The meeting closed at 14:50		
X01105/202			



DHCW SHA Board Meeting – PRIVATE ABRIDGED – Unconfirmed minutes

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 30 March 2023 as a virtual meeting via MS Teams



09:30 - 10:15



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

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



Alison Maguire	AM	Programme Director	DHCW
Michelle Sell	MS	Director of Planning and Performance / Chief Commercial Officer	DHCW
Sarah-Jane Taylor	SJT	Director of People & Organisational Development	DHCW
Laura Tolley	LT	Corporate Governance Manager (Secretariat)	DHCW

Apologies	Title	Organisation
There were no apologies for abse	ence.	

Acronyms	Acronyms				
DHCW	Digital Health and Care Wales	SHA	Special Health Authority		
CEO	Chief Executive Officer	LINC	Laboratory Information Network Cymru		
RISP	Radiology Information System Procurement				

ltem No	Item Detail	Outcome	Action
PRELIN	IINARY MATTERS		
1.1	Welcome and Apologies The Chair welcomed everyone to the private SHA Board meeting and confirmed this meeting was for information purposes only to receive an update on the LINC programme and no formal decisions were being made.	Noted	None to note
1.2	Apologies for Absence There were no apologies for absence	Noted	None to note
1.3	Declarations of Interest There were no declarations of interest.	Noted	None to note
	Matters Arising There were no items on the consent agenda identified by Board members for moving to the main agenda.	Discussed	None to note

CONSENT AGENDA - FOR APPROVAL AND NOTING



2.1	Unconfirmed Minutes of the Private Board meeting held on 26 January 2023	Approved	None to note
	The Board resolved to:		
	APPROVE the minutes of the Private Board meeting held on 26 September 2022 subject to one minor amendment being made.		
2.2	Action Log	Noted	None to
	The Board resolved to:		note
	NOTE there were no actions.		
MAINA	AGENDA		
PART 3	- FOR DISCUSSION		
3.1	LINC Programme Update		
	Helen Thomas, Chief Executive Officer provided an overview of the current LINC Programme and challenges.	Noted	None to note
	Michelle Sell, Director of Planning and Performance and Chief Commercial Officer shared a high-level timeframe and options for consideration to the Board.		
	The Board resolved to:		
	NOTE the LINC Programme Update		
PART 4	- CLOSING MATTERS		
4.1	Any other urgent business	Discussed	
	There was no any other urgent business raised.		
4.2	Date and Time of Next Meeting TBC	Noted	None to note





DHCW and Cardiff & Vale University Health Board PRIVATE ABRIDGED Extraordinary Board Meeting – Unconfirmed minutes

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



09:00 - 09:45



Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Ruth Glazzard	RG	Vice Chair of the Board	DHCW
lfan Evans	IE	Executive Director of Strategy	DHCW
Andrew Fletcher	AF	Associate Board Member – Trade Union	DHCW
Rowan Gardner	RoG	Independent Member	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Claire Osmundsen- Little	COL	Deputy Chief Executive / Executive Director of Finance	DHCW
Alistair Klaas Neill	AKN	Independent Member	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW
Charles Janczewski	CJ	Chair of the Board	CAV
Paul Bostock	РВ	Chief Operating Officer	CAV
Emma Cooke	EC	On behalf of Fiona Jenkins *JQ to confirm title	CAV
Susan Elsmore	SE	Independent Member	CAV
Abigail Harris	АН	Executive Director of Strategic Planning	CAV
Akmal Hanuk	АНа	Independent Member	CAV
David Edwards	DE	Independent Member	CAV

1 DHCW & CAV Joint PRIVATE Board Meeting 20230420



Rachel Gidman	RG	Executive Director of People and Culture	CAV
Michael Imperato	MI	Independent Member	CAV
Meriel Jenney	MJ	Executive Medical Director	CAV
Mike Jones	MJo	Associate Board Member – Trade Union	CAV
Fiona Kinghorn	FK	Executive Director of Public Health	CAV
Sara Moseley	SM	Independent Member	CAV
Catherine Phillips	СР	Executive Director of Finance	CAV
Ceri Phillips	Cph	Vice Chair of the Board	CAV
Suzanne Rankin	SR	Chief Executive Officer	CAV
Jason Roberts	JR	Executive Nurse Director	CAV
David Thomas	DT	Director of Digital and Health Intelligence	CAV
Rhian Thomas	RT	Independent Member	CAV
John Union	JU	Independent Member	CAV

In Attendance	Initial	Title	Organisation
Joanne Brandon	JB	Director of Communications and Engagement	CAV
Chris Darling	CD	Board Secretary	DHCW
Sam Hall	SH	Director of Primary, Community and Mental Health Digital Services	DHCW
Harriett Kings	нк	Assistant Head of Communications	DHCW
Alison Maguire	AM	Programme Director	DHCW
James Quance	JQ	Board Secretary	CAV
Michelle Sell	MS	Director of Planning and Performance / Chief Commercial Officer	DHCW
Sarah Jane Taylor	SJT	Director of People & Organisational Development	DHCW
Matt Temby	MT	Managing Director Planned Care	CAV
Laura Tolley	LT	Corporate Governance Manager (Secretariat)	DHCW



Apologies	Title	Organisation
Fiona Jenkins	Executive Director of Therapies	CAV
Marian Wyn Jones	Independent Member	DHCW
Marilyn Bryan Jones	Independent Member	DHCW
Sara Moseley	Independent Member	CAV

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

ltem No	Item Detail	Outcome	Action
PRELIN	IINARY MATTERS		
1.1	Welcome and Apologies The DHCW Chair welcomed everyone to the Joint Digital Health and Care Wales and Cardiff and Vale University Health Board Extraordinary Private Board Meeting.	Noted	None to note
	The DHCW Chair confirmed the meeting was being held to receive an update on the LINC Programme to help inform individual Board decisions. The meeting was being held in private due to commercial sensitivities.		
10/01/05/10	The DHCW Chair confirmed the approach to hold a joint Board meeting had been agreed by himself, Charles Janczewski, CAV Chair, Suzanne Rankin, CEO CAV and Helen Thomas, DHCW CEO to ensure both Boards received the same update and can hear questions raised from all Board members. In addition, at the end of the joint session, the respective Boards would go into their own private Board meetings to formally make a decision on how they wish to proceed.		
1.2	 Apologies for Absence Apologies for absence were noted from: Fiona Jenkins, Executive Director of Therapies, CAV 	Noted	None to note

	Marian Wyn Jones, Independent Member, DHCW		
	Marilyn Bryan Jones, Independent Member, DHCW		
	• Sara Moseley, Independent Member, CAV		
1.3	Declarations of Interest	Noted	None to
	There were no declarations of interest.		note
MAIN	AGENDA		
PART	2 – FOR DISCUSSION		
2.1	LINC Programme Update		
	Helen Thomas, Chief Executive Officer, DHCW (HT) provided an overview of the current LINC Programme and challenges. Suzanne Rankin, Chief Executive Officer, CAV (SR) confirmed that CAV Board had been briefed and were aware of the current status. SR explained there was a pressing operational need for a robust and reliable LIMS system to replace the current legacy system which was due to expire in June 2025 and the Health Board could not run without a LIMS system, therefore there was a significant risk that needed mitigation.	Noted	
	Michelle Sell, Director of Planning and Performance and Chief Commercial Officer (MS) gave a comprehensive overview of the current position of the LINC Programme and options for consideration.		
	The very positive working relationship between CAVUHB and DHCW was noted.		
	Both DHCW and CAV Boards expressed sincere gratitude to all involved in the work to date.		
	The Board resolved to:		
	DISCUSS the LINC Programme Update.		
PART	3 - CLOSING MATTERS		
3.1	The DHCW Chair closed the meeting	Noted	





DHCW SHA PRIVATE ABRIDGED Extraordinary Board Meeting – Unconfirmed minutes

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



10:00 - 10:30



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

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



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

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

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

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



MAIN AGENDA

PART 2 – FOR DISCUSSION

2.1	LINC Programme Update		
	The Chair asked if all Board members had received adequate information and had sufficient time to review the information to allow for a decision to me made. All Board members confirmed they had received adequate information in sufficient time to allow for a decision to be made.	Noted	None to note
	Helen Thomas, Chief Executive Officer (HT) confirmed this was highly unusual position for the organisation to be in and expressed sincere thanks to Michelle Sell, Alison Maguire and the wider team for the collaborative work undertaken to date in a very challenging environment. HT added that the current position had received unanimous All-Wales support from operational teams to board level which was a testament to how the complex issues had been managed in a collaborative and transparent way since the Programme had transferred to DHCW, from the NHS Wales Collaborative on 1 January 2023.		
	Michelle Sell, Director of Planning and Performance / Chief Commercial Officer advised due to the significant risks an urgent decision needed to be made.		
	The Chair advised although Marian Wyn Jones, Independent Member was unable to attend the meeting, she had confirmed in writing she was in support of the recommendation outlined in the report.		
	The Board resolved to:		
	APPROVE the decision to terminate the contract with Citadel Health and to invoke the contingency plan.		
PART	3 - CLOSING MATTERS		
3.1	The DHCW Chair closed the meeting	Noted	





DIGITAL HEALTH AND CARE WALES FORWARD WORKPLAN REPORT

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

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

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

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



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

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1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organsation		
CORPORATE RISK (ref if approp	priate)		

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, pleas	se list below:

HEALTH CARE STANDARD	Governance, leadership and acccountability	
If more than one standard applies, p	lease list below:	

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

Workforce EQIA page

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

Forward Workplan Report

Author: Laura Tolley Approver: Chris Darling

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

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

2 SITUATION/BACKGROUND

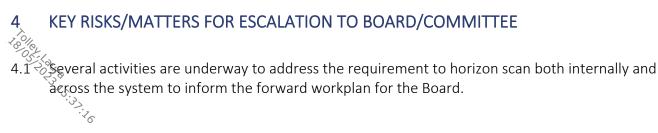
2.1 The Board have a <u>Cycle of Board Business</u> that is reviewed on an annual basis. Additionally, there is a forward workplan which is used to identify any additional timely items for inclusion to ensure the Board are reviewing and receiving all relevant matters in a timely fashion.

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 3.1 The following items have been added to the Forward Workplan and are due to be presented at the meeting on 25 May 2023:
 - Strategic Workforce Planning Update
 - Transfer of Eyecare Digitisation Programme
 - IMTP Accountable Officer Letter Annual Financial Plan 2023/24
 - Stakeholder Engagement Plan Update
 - RISP Programme Full Business Case*
 - Cyber Implementation of the 3-year plan*

*Items taken in private session

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



Forward Workplan Report

Page 3 of 4

Author: Laura Tolley Approver: Chris Darling

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

5 **RECOMMENDATION**

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

6 APPROVAL / SCRUTINY ROUTE

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



Forward Workplan Report

Page 4 of 4

Author: Laura Tolley Approver: Chris Darling

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SHA Board Forward Workplan 2023-24



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



27-Jul-23	28-Sep-23	30-Nov-23	26-Jan-24	28-Mar-24
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DIGITAL HEALTH AND CARE WALES SHARED LISTENING AND LEARNING PRESENTATION – MEDICAL EXAMINER SERVICE

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

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

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

Purpose of the Report	For Discussion/Review
Recommendation	
The Board is being asked to: DISCUSS the Shared Listening a	and Learning Presentation
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TŶ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD



1 IMPACT ASSESSMENT

	Expanding the content, availability and functionality of the Digital Health and Care Record	
CORPORATE RISK (ref if appropriate)		N/A

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	Timely Care
If more than one standard applies, p	lease list below:

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

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

Page 2 of 3



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

2 SITUATION/BACKGROUND

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

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

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

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

5 **RECOMMENDATION**

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

6. APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting

->		
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Rhidian Hurle	17/5/23	Approved
×3.3.		





The Welsh Medical Examiner Service

DHCW Board Presentation:

25th May 2023

Dr Jason Shannon





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



Births and Deaths Registration Act 1953

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

Department of Health & Social Care

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

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

2000



2003 Dame Janet Smith recommends oversight of death certification by medical examiners

2016-19

Every death deserves to be looked at

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



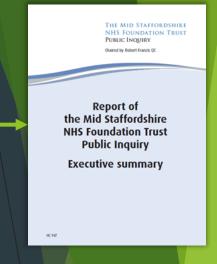
2009 (2012)



Coroners and Justice Act 2009 Chapter 25 CONTENTS

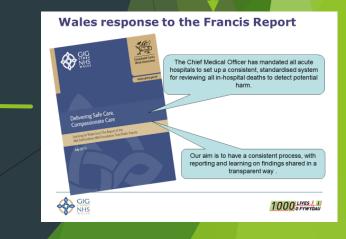
Subsections 19-21. Statutory provision for medical examiners is set out but lays dormant

1000 LIVES i



2013

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





The Notification of Deaths Regulations 2019

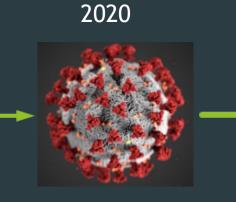
UK Statutory Instruments > 2019 No. 1112 > Whole Instrument NUMERICE DISCOVER PATHOLOGY NEWS NIKS NATIONAL MEDICAL EXAMINER ANNOUNCED TO SUPPORT BEREAVED FAMILIES AND IMPROVE PATIENT SAFETY

MARCH 2019

Health Update

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

2019 Legal requirements for doctors to notify a coroner are introduced. Funding of roll out using Cremation Form 5 fees Lead ME and MEO for Wales appointed



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

	egisl	ation	.gov.uk
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Home Browse Legislation New Legislation Coronavirus Legisl

Year

Number:

Coronavirus Act 2020

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

EASEMENTS:

Title:

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

March 2022

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

Statement made on 27 April 2023 Reterment UNIN NCWETCO Statement made by Maric Conference of State (Minister for Worner) and Parliamentary Under Free of State (Minister for Mental Health and Women's Health State (Minister for Mental Health and Women's Health State (Minister for Mental Health and Statement Statement Statement Relevant provisions of the Coroners and

Action of the Coroners and Justice Act 2009 & Health and Care Act 2022 will be commenced by autumn 2023 with full statutory system (including 4/9Condary legislation April 2024)

₩ UK ₩ Parliament

Parliamentary Bills

<u>UK Parliament</u> > <u>Business</u> > <u>Legislation</u> > <u>Parliamentary Bills</u> > Health

Health and Care Act 2022

Government Bill



The Welsh Medical Examiner Service

- Single digital service across Wales
 - Separately contracted medical examiner and officer staff
- Maximum independence

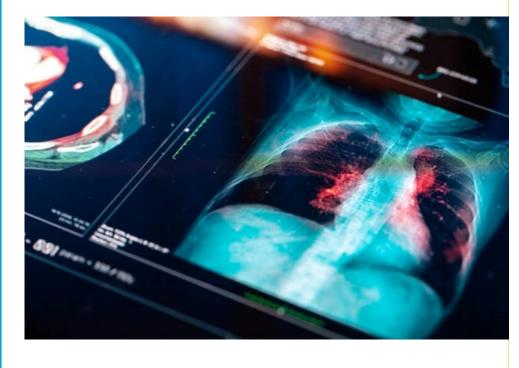
- Full time Medical Examiner Officers (MEO's)
- Wide range of backgrounds for ME's and MEO's
- Most acute care setting deaths already covered
- Some community deaths now covered

The Medical Examiner Service - Three functions, questions and methods

- 1. Accurate and reliable death certification (compliance with the 1953 Act)
- 2. Appropriate referral to a coroner (compliance with Notification Regs 2019)
- 3. Concerns and problems in care for further consideration by relevant care providers (integration with mortality review, QI processes)
- 4. What did the person die from?
- 5. Does it meet the requirements to notify a coroner?
- 6. Are there any concerns about the care provided (records, attending doctor, bereaved)
- 1. Review relevant clinical records (scanned, WCP, Primary Care)
- 2. Interaction with attending (certifying) doctor
- 3. Interaction with the bereaved
- lt is not

An inspectorate

- An investigation service
- A counselling service for the bereaved
- > An advice service for how to complete and MCCD / Cremation form
- Scrutinise, detect and pass on



CHALLENGES

Secondary Care Records Access (scanned, WCP etc) Primary Care (Data Sharing Agreement, Access Agreement) Team working across Wales in the remote environment Access to certifying doctors Access to bereaved families



What have we learned?

- Death Certification
- Coroner Referral
- Care Provision
- Our Service

Diolch yn fawr Thank you

WEL

Ín



DIGITAL HEALTH AND CARE WALES CHAIR & VICE CHAIR REPORT

		Agenda Item	4.1
Name of Meeting	SHA Board		
Date of Meeting	25 May 2023		
25			
Public or Private	Public		
IF PRIVATE: please indicate reason	N/A		

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

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



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



1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply	
CORPORATE RISK (ref if approp	riate)	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, pleas	se list below:

HEALTH CARE STANDARD	Governance, leadership and acccountability
If more than one standard applies, p	lease list below:

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

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

Chairs Report

Author: Chris Darling Approver: Simon Jones



relating to the activity outlined within this report.

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

2 SITUATION/BACKGROUND

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

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Digital Programme Governance Independent Review

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

3,2 Joint DHCW and Cardiff and Vale UHB Board meeting 20 April 2023

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

Chairs Report

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Author: Chris Darling Approver: Simon Jones

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

3.3 DHCW Board Meeting – LINC Programme 20 April 2023

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

3.4 Board Development Day 27 April 2023

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

3.5 Board Briefing 4 May and 11 May

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

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

3.6 Cyber Security Awareness Raising Webinar

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

3.7 Meeting with Audit Wales 6 April 2023

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

Chairs Report

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Author: Chris Darling Approver: Simon Jones



3.8 All Wales IM Digital Network 18 April 2023

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

3.9 Independent Member Objectives Review and Chief Executive Objectives

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

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

3.10 Chair Ministerial End of Year Review 2022/23

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

3.11 Meeting with Llais Chief Executive Officer 9 May 2023

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

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

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

3.13 Chair Peer Group 25 April 2023

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

3.14 Bevan Foundation Publication

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

Chairs Report

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Author: Chris Darling Approver: Simon Jones

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3.15 Vice Chair Peer Group

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

3.16 Vice Chair Meeting with CDPS Chair

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

3.17 Welsh NHS Confederation Members session with the Future Generations Commissioner

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

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

5 RECOMMENDATION

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

6 APPROVAL / SCRUTINY ROUTE

Person / Committee / Group who have received or considered this paper prior to this meeting

PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Chair	May 2023	Approved



Chairs Report

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Author: Chris Darling Approver: Simon Jones



DIGITAL HEALTH AND CARE WALES CHIEF EXECUTIVE OFFICER REPORT

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

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

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

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



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1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply	
CORPORATE RISK (ref if approp	oriate)	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

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

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

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

Author: Chris Darling Approver: Helen Thomas



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

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

## 2 SITUATION/BACKGROUND

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

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

#### 3.1 Sad Passing of a Senior Solution Architect

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

#### 3.2 Welsh Government Digital Health and Care Strategy

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

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

CEO Report

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Author: Chris Darling Approver: Helen Thomas



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

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

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

#### 3.4 Accountable Office Letter

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

#### 3.5 Executive Away Days 18 and 19 April 2023

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

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

#### 3.6 LINC Programme Update

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

#### 3.7 Digital Cellular Pathology

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

**CEO** Report

Page 4 of 6

Author: Chris Darling Approver: Helen Thomas



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

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

#### 3.9 Chief Executives Management Team Meeting

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

#### 3.10 NHS Wales Leadership Board

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

#### 3.11 Staff Conference 2023

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

#### 3.12 DHCW Staff Awards 2023

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

#### 3x13 Meeting with John Quinn, Interim Chief Information Officer NHS England

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

CEO Report

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Author: Chris Darling Approver: Helen Thomas



#### 3.14 Welsh Ambulance NHS Trust Strategic Engagement Session

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

#### 3.15 Chief Executives Time Out

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

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

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

#### 5 **RECOMMENDATION**

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

#### 6 APPROVAL / SCRUTINY ROUTE

 Person / Committee / Group who have received or considered this paper prior to this meeting

 PERSON, COMMITTEE OR GROUP
 DATE
 OUTCOME

 Helen Thomas, Chief Executive
 May 2023
 Approved

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CEO Report

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Author: Chris Darling Approver: Helen Thomas



# **DIGITAL HEALTH AND CARE WALES** STRATEGIC PROCUREMENT REPORT

Agenda	5.1	
ltem		

Name of Meeting	SHA Board	
Date of Meeting	25 May 2023	

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

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

Purpose of the Report	For Approval		
Recommendation	Recommendation		
The Board is being asked to: <b>APPROVE</b> the Contract Awards as detailed in Appendix 1.			
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TŶ GLAN-YR-AFON 21 Cowbridge Road East, Cardiff CF11 9AD



# 1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services
CORPORATE RISK (ref if appro	oriate)

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

H	EALTH CARE STANDARD	Safe Care
lf	If more than one standard applies, please list below:	

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

## Workforce EQIA page

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

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

# 2. SITUATION/BACKGROUND

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



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

- 3.1 Appendix 1 sets out four (4) Contract Award Approvals for the consideration of the Board.
- 3.2 An overview of the contractual activity requiring approval is provided below:
  - (i) Framework Agreement to secure specialist External Workforce Resources, to be utilised by DHCW only;
  - (ii) Agreement for the provision of a System Integration Tool (*'Fiorano'*) Enterprise Licence and associated support;
  - (iii) Agreement for the provision of a Primary Care Data Quality System ("**DQS**") for data quality and reporting requirements for national and local initiatives;
  - (iv) Licencing Agreement for the purchase and supply of a Microsoft Dynamics 365 Integrated Telephony Provision to be used within the Test, Trace and Protect Customer Relationship Management system("CRM").

#### (i) P812 External Workforce Resources Framework Agreement

Contractors:	Lot 1 - Trustmarque Solutions & TPX Impact Ltd Lot 2 - Kainos and TPX Impact Ltd Lot 3 - Trustmarque Solutions & TPX Impact Ltd
Term:	1 June 2023 to 31 May 2027 with no option to extend the Agreement
Value:	Maximum value - £10,000,000.00 (excluding VAT) subject to individual "call offs"

Approval Requested: Contract Award

#### Context/Background

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

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

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

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

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

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

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

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

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

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

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

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



Softcat PLC

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

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Value: £5,027,424.20

Approval Requested: Contract Award

#### Context/Background

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

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

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

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

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

Contractor: Informatica

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

Value: £6,000,000.00 excluding VAT

Approval Requested: Contract Award

#### Context/Background

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

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

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

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

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

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

#### (iv) P835 Microsoft Dynamics Integrated Telephony Provision

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

Value: £5,549,940.40 ex VAT

Approval Requested: Contract Award

#### Context/Background

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

Following a rapid market engagement exercise to identify and appraise the ability of CRM systems a decision to procure a CRM solution from Microsoft was made. The licencing for Microsoft Dynamics E355 to deliver the CRM solution had been procured via an existing Enterprise Agreement, held by the Authority, and transacted via an All-Wales Licence Reseller agreement with Trustmarque. For the avoidance of doubt, these licencing requirements are NOT considered as part of this briefing.

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

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

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

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

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

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

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

- 4.1 Appendix 1 includes four (4) Contract Award Approvals relating to:
  - (i) P812 External Workforce Resources Framework Agreement;
  - (ii) P308.02 System Integration Tool;
  - (iii) P531 Data Quality System;
  - (iv) P835 Microsoft Dynamics 365 Integrated Telephony Provision.

**P812 External Workforce Resources Framework Agreement** in respect of which:

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

the procurement strategy and approach, including the selection and evaluation processes and

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

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

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

#### P308.02 System Integration Tool in respect of which

- a. The procurement has been undertaken in accordance with the requirements of Standing Financial Instructions, including Public Contract Regulations 2015, as assured by the Director of Planning & Performance / Chief Commercial Officer; and
- b. DHCW's evaluation team comprising key subject matter experts have approved the procurement strategy and approach, including the selection and evaluation processes and the award outcome, as assured by the Executive Director of Operations.
- c. Funding for the agreement comes directly from established budgets within Digital Health and  $C_{\mu}$  Care Wales as assured by the Executive Director of Finance.

d. DHCW's intention to enter into this Agreement has not been notified to Welsh Government on the basis that it is not required to do so where an existing Framework has been utilised for the

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

#### P531 Data Quality System in respect of which

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

#### **P835 Microsoft Dynamics Integrated Telephony Solution** in respect of which:

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

#### 5. RECOMMENDATION

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

#### **APPROVAL/SCRUTINY ROUTE:**

Person/Committee/Group who have received or considered this paper prior to this meeting

PERSON/COMMITTEE/GROUP	DATE	OUTCOME
Michelle Sell – Director of Planning &	2 May 2023	Approved
, Performance / Chief Commercial Officer		
Itan Evans – Executive Director of Strategy	4 May 2023	Approved
Claire Osmundsen-Little – Executive Director	12 May 2023	Approved
of Finance		
Helen Thomas – Chief Executive Officer	12 May 2023	Approved
`A		

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#### **APPENDIX 1: Key Procurement Documents for Approval**

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



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

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

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

#### 1. DESCRIPTION OF GOODS / SERVICES / WORKS

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

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

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



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

The Lots are set out below:

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

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

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

Lot 1 – TPXimpact and Trustmarque Solutions

Lot 2 – Kainos and TPXimpact

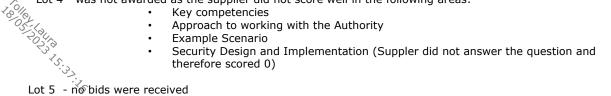
Lot 3 – TPXimpact and Trustmarque Solutions²

1.1 Nature of contract:	First	$\boxtimes$	Contract	Contract	
Please indicate with a (x) in the relevant box	time		Extension	Renewal	

1.2 Period of contract including extension options:			
Expected Start Date of Contract	01 st June 2023		
Expected End Date of Contract	31 st May 2027		
Contract Extension Options (E.g., maximum term in months)	None		

#### **2. STRATEGIC FIT**

 $\gtrsim~^1$  Lot 4 - was not awarded as the supplier did not score well in the following areas:



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



#### 2.1 VISION AND STRATEGIC MISSIONS

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

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

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

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

2.2 INTEGRATED MEDIUM-TERM PLAN		
Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
		$\boxtimes$
This requirement has been presented owing to the need to secure external resources to support DHCW to resolve issues		
with resourcing capacity and capability which are required to meet the organisation's Business Plan and to utilise any		
special funds that are provided throughout a financial year.		

#### 2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

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

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



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

2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED									
Please mark v	Please mark with a (x) in the box the relevant principles for this scheme.								
Click <u>here</u> for more information									
Prevention		Long Term		Integration		Collaboration	$\boxtimes$	Involvement	
-	Within the Agreement DHCW have ensured that 15% of the weightings for the award decision made by DHCW is allocated to Social Value including the Foundational Economy in Wales and sustainability.								

## **3. PROCUREMENT ROUTE**

<b>3.1 How is the contract being procured?</b> Please mark with a (x) as relevant.					
Competition		Single source			
Three (3) Quotes		Single Quotation Action			
Formal Tender Exercise		Single Tender Action			
Mini Competition		Direct call off Framework			
Find a Tender		All Wales contract			
(replaces OJEU, Public Contract Regulations 2015 still apply)	$\boxtimes$				

#### **3.2** Please outline the procurement procedure.

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

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



#### **3.3** What has been the approximate timeline for procurement?

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

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

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

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



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



## 4. BENEFITS (Quantifiable / Non-Quantifiable)

#### 4.1 Outline benefits of preferred option

The following benefits are anticipated:

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

#### **5. RISKS & MITIGATION**

5.1 Please state risks of not proceeding with the scheme	5.2 Please state any mitigation to reduce the risk if the scheme is not approved
Should this Framework Agreement not be awarded resourcing constraints will continue within the organisation which will impact the	A number of smaller consultancy procurements would need to be undertaken.
delivery of the DHCW Business Plan and IMTP.	People and Organisational Development would need to run further recruitment drives to try to secure external resources.

#### **6. FINANCIAL ANALYSIS**

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £10,000,000.00	Including VAT £12,000,000.00
The nature of spend	Capital 🗌	Revenue 🖂
OF SAL		·
How is the scheme to be funded? Please	e mark with a (x) as relevant.	
Existing budgets	$\boxtimes$	
Additional Welsh Government funding		
Other		



EXPENDITURE	Year 1	Year 2	Year 3	Years 4	Total	Total
CATEGORY	(exc. VAT)	(inc. VAT)				

Framework Agreement does not commit DHCW to any expenditure and will have a nominal Value of £1.00 per Supplier. Only following a Call Off / Mini Competition / Direct Award by DHCW will commitments to expenditure be made.

Potential expenditure under this framework will depend upon a number of factors including budget availability, the success of the relationship and services provided to meet the organisation's business plan and any special initiatives.

A single work package on any Lot cannot exceed £500K ex VAT in value. It is therefore estimated that the total value of the framework (across all lots) will be up to £10m ex VAT over the four (4) year period.







## 7. DECLARATION OF COMPLIANCE

<b>7.1 Procurement Approval</b> The Head of Commercial Serv confirms that policies and pro	vices / Delegated Authority has approved the procurement route and cedures have been followed.
Head of Commercial Services:	Julie Francis
Signature:	X       Julie Francis         Julie Francis       Head of Commercial Services         Signed by: Julie Francis (JU000244)
that all procurement rules, st	ng email confirmation, to seek Board approval is making a declaration anding orders and standing financial instructions have been complied rvices Team retain this confirmation electronically in the tender file.
Director of People and OD:	Sarah-Jane Taylor
Signature:	
	<b>Approval</b> providing email confirmation, to seek Board approval is making a and financial matters in respect of this decision have been considered
Lead Director Name:	Claire Osmundsen-Little
Signature:	Claire Osmundsen-Little Executive Director of Finance & Business Assura

# 8. APPROVALS AND ASSURANCE RECEIVED

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

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



## 9. CONFIRMATION OF DHCW BOARD APPROVAL

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

-	d has approved the award of this agreement for the durations ptions) as set out in this paper at its meeting of 26 th January
Chair of DHCW Board:	Simon Jones
Signature:	X Simon Jones Chair of DHCW Board
Independent Member:	
Signature:	X Independent Member
Chief Executive Officer:	Helen Thomas
Signature:	X Helen Thomas Chief Executive Officer





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

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

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

## **1. DESCRIPTION OF GOODS / SERVICES / WORKS**

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

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



1.1 Nature of contract:	First	Contract	Contract	$\boxtimes$
Please indicate with a (x) in the relevant box	time	Extension	Renewal	

1.2 Period of contract including extension options:			
Expected Start Date of Contract	19 th June 2023		
Expected End Date of Contract	18 th June 2026		
Contract Extension Options (E.g., maximum term in months)	Option to extend for 2 x 12 months to 18 th June 2028		

#### 2. STRATEGIC FIT

## 2.1 VISION AND OUR STRATEGIC PILLARS

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

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

<b>Goal 1:</b> Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers				
<b>Goal 2:</b> Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services	$\boxtimes$			
<b>Goal 3</b> : Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points				
<b>Goal 4:</b> Enable users to derive value from data collected from national and local systems through Big Data Analysis				

## 2.2 INTEGRATED MEDIUM-TERM PLAN

Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
If not, please explain the reason for this in the space provided.		





This scheme should relate to at least one of the SHA's wellbeing objectives. Please mark with a (x) in the box th objectives for this scheme.	e relevant
Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	
Improve the health and well-being of families across Wales by striving to care for the needs of the whole person.	
Create new, highly skilled jobs and attract investment by increasing our focus on research, innovation, and new models of delivery.	$\boxtimes$
Deliver bold solutions to the environmental challenges posed by our activities.	$\boxtimes$
Bring communities and generations together through involvement in the planning and delivery of our services.	
Demonstrate respect for the diverse cultural heritage of modern Wales.	
Strengthen the international reputation of the SHA as a centre of excellence for teaching, research and technical innovations whilst also making a lasting contribution to global well-being.	

#### 2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

allocated to Social Value including the Foundational Economy in Wales and sustainability.

Please mark with a (x) in the box the relevant principles for this scheme. Click <u>here</u> for more information									
Prevention		Long Term	$\boxtimes$	Integration	$\boxtimes$	Collaboration	$\boxtimes$	Involvement	
Within the Agreement DHCW have ensured that 10% of weightings for Award decision made by DHCW is									

#### **3. PROCUREMENT ROUTE**

**2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES** 

<b>3.1 How is the contract being procured?</b> Please mark with a (x) as relevant.				
Competition		Single source		
Three (3) Quotes		Single Quotation Action		
Formal Tender Exercise		Single Tender Action		
Mini Competition	$\boxtimes$	Direct call off Framework		
Find a Tender		All Wales contract		
(replaces OJEU, Public Contract Regulations 2015 still apply)				

## **3.2** Please outline the procurement procedure.

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





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

3.3 What has been the approximate timeline for procurement?

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

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

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

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

#### 4. BENEFITS (Quantifiable / Non-Quantifiable)

#### 4.1 Outline benefits of preferred option

The following benefits are anticipated:

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

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5. RISKS & MITIGATION



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

### 6. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £5,858,449.20	Including VAT £7,030,139.04
The nature of spend	Capital 🗌	Revenue 🖂

How is the scheme to be funded? Please mark with	a (x) as relevant.
Existing budgets	$\boxtimes$
Additional Welsh Government funding	
Other	

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

The ability to call off additional resources under the contract cannot exceed £100K ex VAT in value per annum.

It is therefore estimated that the total value of the contract (5 years) will be £5,858,449.20ex VAT.





## 7. DECLARATION OF COMPLIANCE

<b>7.1 Procurement Approval</b> The Head of Commercial Services / Delegated Authority has approved the procurement route and confirms that policies and procedures have been followed.				
Head of Commercial Services:	Julie Francis			
Signature:	X Julie Francis Head of Commercial Services			
<b>7.2 Director Approval</b> The Lead Director, by providing email confirmation, to seek Board approval is making a declaration that all procurement rules, standing orders and standing financial instructions have been complied with. DHCW's Commercial Services Team retain this confirmation electronically in the tender file.				
Executive Director of Operations:	Sam LLoyd			
Signature:	Sam Lloyd Executive Director of Operations			
<b>Executive Director of Finance Approval</b> The Director of Finance, by providing email confirmation, to seek Board approval is making a declaration that all budgetary and financial matters in respect of this decision have been considered and complied with.				
Executive Director of Finance:	Claire Osmundsen-Little			
Signature:	Claire Osmundsen-Little Executive Director of Finance & Business Assura			

# 8. APPROVALS AND ASSURANCE RECEIVED

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

	Date of Meeting	Outcome
Evaluation Team	25/04/2023	Endorsed
Welsh Government Notification	Not Required under NPS Framework	Not Required under NPS Framework
SHA Board	25/05/2023	To be granted by this document
.76		·



## 9. CONFIRMATION OF DHCW BOARD APPROVAL

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

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26 th January 2023.					
Chair of DHCW Board:	Simon Jones				
Signature:	X Simon Jones Chair of DHCW Board				
Independent Member:					
Signature:	X Independent Member				
Chief Executive Officer:	Helen Thomas				
Signature:	X Helen Thomas Chief Executive Officer				





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

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

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

## **1. DESCRIPTION OF GOODS / SERVICES / WORKS**

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

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

The overall scope of this new Agreement is to:

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



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

1.1 Nature of contract:	First	Contract	Contract	$\boxtimes$
Please indicate with a (x) in the relevant box	time	Extension	Renewal	

1.2 Period of contract including extension options:				
Expected Start Date of Contract	2 June 2023			
Expected End Date of Contract 1 June 2025				
Contract Extension Options (E.g., maximum term in months)	Option to extend for 3 x 12 months to 1 June 2028			

## 2. STRATEGIC FIT

## 2.1 VISION AND OUR STRATEGIC PILLARS

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

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

<b>Goal 1:</b> Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers				
<b>Goal 2:</b> Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services	$\boxtimes$			
<b>Goal 3</b> : Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points				
<b>Goal 4:</b> Enable users to derive value from data collected from national and local systems through Big Data Analysis				





2.2 INTEGRATED MEDIUM-TERM PLAN		
Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	$\boxtimes$	
If not, please explain the reason for this in the space provided.		

# 2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

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

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

# 2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

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

Click **<u>here</u>** for more information

Prevention		Long Term	$\boxtimes$	Integration	$\square$	Collaboration	$\boxtimes$	Involvement	
er en dion		20118 1 01111		integration		conaboration		interretient	
Within the A	green	nent DHCW ha	ave er	nsured that 10%	6 of v	veightings for Awa	rd de	cision made by DH0	CW is
allocated to Social Value including the Foundational Economy in Wales and sustainability.									





### **3. PROCUREMENT ROUTE**

<b>3.1 How is the contract being procured?</b> Please mark with a (x) as relevant.						
Competition		Single source				
Three (3) Quotes		Single Quotation Action				
Formal Tender Exercise		Single Tender Action				
Mini Competition		Direct call off Framework				
Find a Tender	$\boxtimes$	All Wales contract				
(replaces OJEU, Public Contract Regulations 2015 still apply)						

## **3.2** Please outline the procurement procedure.

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

## 3.3 What has been the approximate timeline for procurement?

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

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





## 4. BENEFITS (Quantifiable / Non-Quantifiable)

## 4.1 Outline benefits of preferred option

The following benefits are anticipated:

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

#### **5. RISKS & MITIGATION**

5.1 Please state risks of not proceeding with the scheme	5.2 Please state any mitigation to reduce the risk if the scheme is not approved
Should this contract not be awarded it will not be possible to audit or report on the data gathered/used by the 385 GP Practices in NHS Wales.	

#### 6. Financial Analysis

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £6,000,000.00	Including VAT £7,200,000.00
The nature of spend	Capital 🗌	Revenue 🖂

How is the scheme to be funded? Please mark with a (x) as relevant.			
Existing budgets	$\boxtimes$		
Additional Welsh Government funding			
Other			

EXPENDITURE CATEGORY	Year 1 (exc. VAT)	Year 2 (exc. VAT)	Year 3-5 (exc. VAT)	Total (exc. VAT)	Total (inc. VAT)
Revenue – Licence, Support & Training	£489,200	£489,200	£1,540,980	£2,519,380	£3,023,256
Revenue – Data Extract, submission monitoring & Management Daily-Annually <i>Optional Expenditure if required</i>	£696,124	£696,124	£2,088,372	£3,480,620	£4,176,744
	£1,185,324	£1,185,324	£3,629,352	£6,000,000	£7,200,000
180/10 18-05-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15-10 15	<u>.</u>				



## 7. DECLARATION OF COMPLIANCE

<b>7.1 Procurement Approval</b> The Head of Commercial Services / confirms that policies and procedure	Delegated Authority has approved the procurement route and es have been followed.
Head of Commercial Services:	Julie Francis
Signature:	X Julie Francis Head of Commercial Services
7.2 Director Approval	
that all procurement rules, standing	il confirmation, to seek Board approval is making a declaration orders and standing financial instructions have been complied eam retain this confirmation electronically in the tender file.
Directory of Primary Care:	Sam Hall
Signature:	X Sam Hall Director of Primary Care
	<b>val</b> ing email confirmation, to seek Board approval is making a nancial matters in respect of this decision have been considered
Executive Director of Finance:	Claire Osmundsen-Little
Signature:	Claire Osmundsen-Little Executive Director of Finance & Business Assura

## 8. APPROVALS AND ASSURANCE RECEIVED

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

	Date of Meeting	Outcome
Evaluation Team	30/04/2023	Endorsed
Welsh Government Notification	Issued to WG 26/04/2023	Outstanding
SHA Board	25/05/2023	To be granted by this document
.46		·



## 9. CONFIRMATION OF DHCW BOARD APPROVAL

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

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26 th January 2023.				
Chair of DHCW Board:	Simon Jones			
Signature:	X Simon Jones Chair of DHCW Board			
Independent Member:				
Signature:	X Independent Member			
Chief Executive Officer:	Helen Thomas			
Signature:	X Helen Thomas Chief Executive Officer			





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

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

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

## 1. DESCRIPTION OF GOODS / SERVICES / WORKS

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

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

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

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



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

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

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

1.1 Nature of contract:	First	Contract	Contract	$\boxtimes$
Please indicate with a (x) in the	time	Extension	Renewal	
relevant box				

1.2 Period of contract including extension options:		
Expected Start Date of Contract	2 June 2023	
Expected End Date of Contract	1 June 2024	
Contract Extension Options (E.g., maximum term in months)	Option to extend for 2 x 12 months to 1 June 2026	

## 2. STRATEGIC FIT

#### 2.1 VISION AND OUR STRATEGIC PILLARS

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

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

<b>Goal 1:</b> Mobilise digital transformation by building on our foundations of data protection, infrastructure and information availability and flow - opening our architecture to enable faster, consistent sharing of data with partners and suppliers	$\boxtimes$
<b>Goal 2:</b> Support the modernisation of clinical specialties and healthcare processes through delivering dedicated high-quality digital services	$\boxtimes$
<b>Goal 3</b> : Empower staff and patients by combining data from many systems to form a comprehensive digital health and care record accessible anywhere, when needed, via easy to navigate digital entry points of the second s	$\boxtimes$
<b>Goal 4:</b> Enable users to derive value from data collected from national and local systems through Big Data Analysis	$\boxtimes$

.16



2.2 INTEGRATED MEDIUM-TERM PLAN		
Is this scheme included in the SHA's Integrated Medium Term Plan?	Yes	No
	$\boxtimes$	
If not, please explain the reason for this in the space provided.		

## 2.3 SHAPING OUR FUTURE WELLBEING OBJECTIVES

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

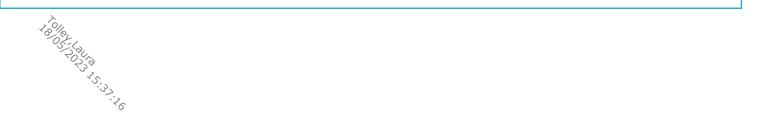
Reduce health inequalities, make it easier to access the best possible healthcare when it is needed and help prevent ill health by collaborating with the people of Wales in novel ways.	$\boxtimes$
Improve the health and well-being of families across Wales by striving to care for the needs of the whole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

# 2.4 FIVE WAYS OF WORKING (SUSTAINABLE DEVELOPMENT PRINCIPLES) CONSIDERED

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

Click **<u>here</u>** for more information

Prevention		Long Term	$\boxtimes$	Integration	$\square$	Collaboration	$\boxtimes$	Involvement	
er en dion		20118 1 01111		integration		conaboration		interretient	
Within the Agreement DHCW have ensured that 10% of weightings for Award decision made by DHCW is									
allocated to Social Value including the Foundational Economy in Wales and sustainability.									





## **3. PROCUREMENT ROUTE**

<b>3.1 How is the contract being procured?</b> Please mark with a (x) as relevant.					
Competition		Single source			
Three (3) Quotes		Single Quotation Action			
Formal Tender Exercise		Single Tender Action			
Mini Competition	$\boxtimes$	Direct call off Framework			
Find a Tender		All Wales contract			
(replaces OJEU, Public Contract Regulations 2015 still apply)					

## **3.2** Please outline the procurement procedure.

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

#### 3.3 What has been the approximate timeline for procurement?

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

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

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

#### 4. BENEFITS (Quantifiable / Non-Quantifiable)

## 4.1 Outline benefits of preferred option

The following benefits are anticipated:

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



#### 5. RISKS & MITIGATION

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

#### 4. FINANCIAL ANALYSIS

Maximum expected whole life cost relating to the award of contracts	Excluding VAT £5,549,940.40	Including VAT £6,659,928.48
The nature of spend	Capital 🗌	Revenue 🛛

How is the scheme to be funded? Please mark with a	a (x) as relevant.
Existing budgets	
Additional Welsh Government funding	
Other	

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





## 7. DECLARATION OF COMPLIANCE

<b>7.1 Procurement Approval</b> The Head of Commercial Services / confirms that policies and procedure	Delegated Authority has approved the procurement route and es have been followed.
Head of Commercial Services:	Julie Francis
Signature:	X Julie Francis Head of Commercial Services
7.2 Director Approval	
that all procurement rules, standing	il confirmation, to seek Board approval is making a declaration orders and standing financial instructions have been complied eam retain this confirmation electronically in the tender file.
Directory of Primary Care:	Sam Hall
Signature:	X Sam Hall Director of Primary Care
	<b>val</b> ing email confirmation, to seek Board approval is making a nancial matters in respect of this decision have been considered
Executive Director of Finance:	Claire Osmundsen-Little
Signature:	Claire Osmundsen-Little Executive Director of Finance & Business Assura

## 8. APPROVALS AND ASSURANCE RECEIVED

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

	Date of Meeting	Outcome
Evaluation Team	25/04/2023	Endorsed
Welsh Government Notification	Not Required under NPS Framework	Not Required under NPS Framework
SHA Board	25/05/2023	To be granted by this document
.16		



## 9. CONFIRMATION OF DHCW BOARD APPROVAL

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

The Digital Health and Care Wales Board has approved the award of this agreement for the durations and values (including extensions and options) as set out in this paper at its meeting of 26 th January 2023.			
Chair of DHCW Board: Simon Jones			
Signature:	X Simon Jones Chair of DHCW Board		
Independent Member:			
Signature:	X Independent Member		
Chief Executive Officer:	Helen Thomas		
Signature:	X Helen Thomas Chief Executive Officer		





# DIGITAL HEALTH AND CARE WALES STAKEHOLDER ENGAGEMENT PLAN UPDATE

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

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

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

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



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

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



# 1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Development of the new Digital Organisation		
CORPORATE RISK (ref if approp	priate)		

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

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

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

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



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

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

# 2 SITUATION/BACKGROUND

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



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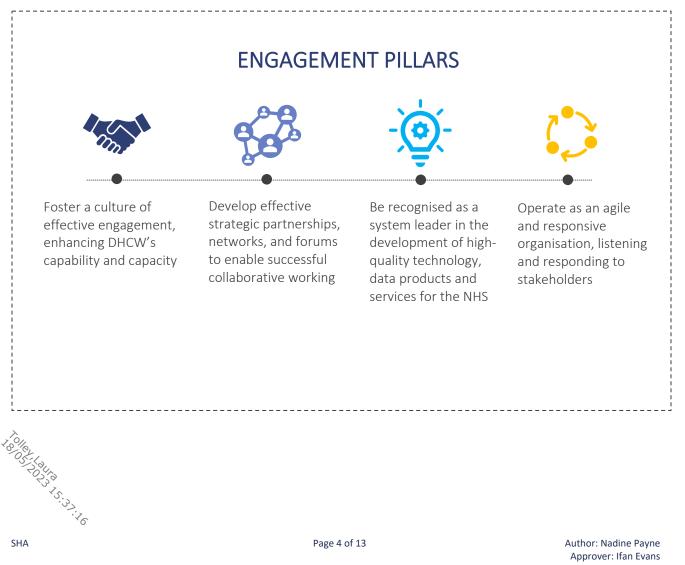
# 3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

#### 3.1 Review of Current Activities and Plan

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

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

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



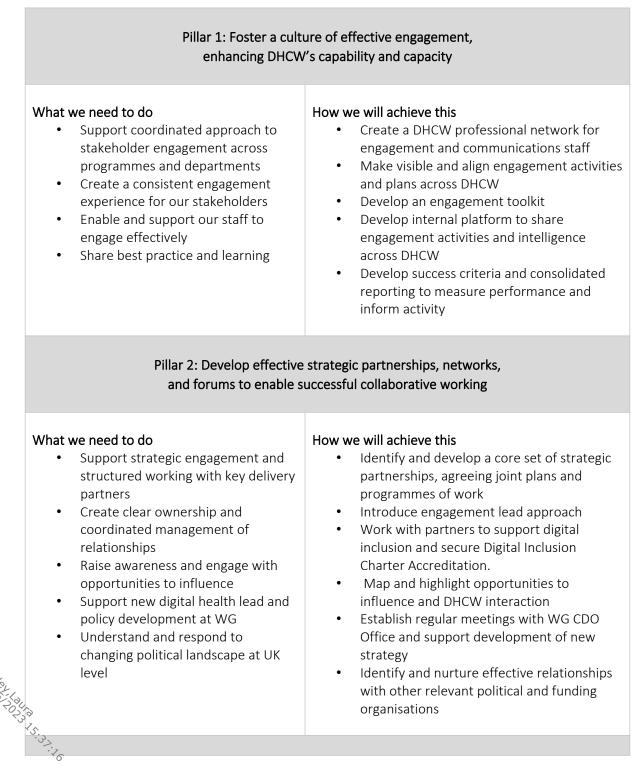
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#### 3.3 Prioritisation and focus – our engagement pillars

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

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



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

<ul> <li>What we need to do</li> <li>Raise awareness of purpose and work of DHCW in Wales, UK and beyond</li> <li>Demonstrate our value as a trusted strategic partner</li> <li>Contribute to thought leadership series</li> <li>Support value case for digital</li> </ul>	<ul> <li>How we will achieve this</li> <li>Refine and publish our engagement strategy</li> <li>Support development of comms plan that highlights engagement activities and our coproduction approach</li> <li>Highlight and engage on opportunities where we can lead in adding value for our stakeholders and define our value proposition through key messaging.</li> <li>Deliver a thought leadership series with partners</li> <li>Enable and promote 'communities of practice'</li> <li>Identify and engage with global best progress, reputation and success</li> </ul>
	gile and responsive organisation, ponding to stakeholders
<ul> <li>What we need to do</li> <li>Introduce regular feedback mechanisms for delivery and other partners</li> <li>Consolidate data and Intelligence on engagement to inform actions and decision making</li> <li>Increase our understanding of our stakeholders and their views of DHCW</li> <li>Ensure coordinated and timely feedback for stakeholders</li> </ul>	<ul> <li>How we will achieve this</li> <li>Undertake retrospectives with partners and an annual feedback mechanism with stakeholders to increase understanding and inform future focus</li> <li>Support undertaking of digital maturity assessment around system usability</li> <li>Scope potential for DHCW National Stakeholder Open Forum.</li> <li>Embed public voice across DHCW - Map existing public and patient engagement activity and promote PaPAG as mechanism for engagement across DHCW</li> </ul>

#### 3.4 Streamlined Action Plan

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

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

#### 3.5 Measuring Success

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

#### 3.6 Governance

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

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

#### 3.7 Resource

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

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

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

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

4.1 If the refined action plan is not approved there is a risk that the engagement objectives will not be achieved.

4.2 The successful delivery of the action plan is dependent on building additional resource in the central engagement team and the embedding of effective and coordinated engagement across DHCW. The

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

## 5 **RECOMMENDATION**

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

# 6 APPROVAL / SCRUTINY ROUTE

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



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## Appendix 1: Stakeholder Engagement Refined Action Plan 2023-25

1	Establish a DHCW Professional Network for Engagement and Communications	Creation of professional network for DHCW engagement and comms staff with regular meetings agreed	Head of Engagement & Assistant Director of Communications	Internal platform development / all stakeholders	Apr-23	Sep-
2	Scope and develop an engagement toolkit	Development of an engagement toolkit with materials and resources to support DHCW staff to engage effectively	Head of Engagement/ Professional Network for Engagement and Comms	Internal platform development / all stakeholders	Oct-23	Oct-
3	Build dedicated capacity in strategic engagement	Recruited initial engagement team staff to deliver refined action plan	Head of Engagement	Internal platform development / all stakeholders	Mar-23	Oct-
4	Coordinate and make visible engagement strategies and activities across programmes and departments	Creation of accessible central platform with engagement action plans and activities from across DHCW shared	Head of Engagement/ Professional Network for Engagement and Comms	Internal platform development / all stakeholders	Oct-23	Jun-2
5	Set up 'Tractivity' as pilot tool to share engagement intelligence across DHCW	Functioning 'Tractivity' platform to record and share stakeholder information and activity	Public Engagement Lead	Internal platform development / all stakeholders	Apr-23	Aug-



6	Establish T&F group to scope CRM system and review Tractvity	Established T&F Group with representation from across DHCW to scope requirements for system for managing stakeholder engagement	Head of Engagement	Internal platform development / all stakeholders	Apr-24	Dec-25
7	Develop success criteria and reporting to measure performance and inform activity	Defined measures of success for engagement actions and agreed reporting structure for engagement activity with DHCW Management Board	Head of Engagement	Internal platform development / all stakeholders	Jan-23	Jun-23
2. D	evelop effective strategic partnership	s, networks, and forums to enable succe	ssful collaborative working	g		
8	Identify and develop a core set of strategic partnerships, agreeing joint plans and programmes of work	List of agreed priority stakeholders with joint plans and programmes of work in place	Head of Engagement and DHCW Management Board	All partners (inc. NHS partners, national bodies, strategic programmes, commercial organisations, universities, and community partners)	Jan-23	Mar-24
9	Introduce an engagement lead approach to better manage stakeholder relationships	Identified and appointed engagement leads for different partners and stakeholder groups to better support collaborative working and communicated this to the external partners and colleagues within DHCW.	Head of Engagement & DHCW engagement leads	All stakeholders	Jul-23	Dec-24
10	Map and highlight opportunities to influence and develop appropriate DHCW engagement	Creation of one accessible list across DHCW of relevant boards and forums and DHCW representation	Head of Engagement / Professional Network for Engagement and Comms	All stakeholders	Oct-23	Mar-24
~3° ~3						
SHA		Page 10 of 13	Author: Nadine Pay	Ine		

Author: Nadine Payne Approver: Ifan Evans



11	Establish relationship with WG CDO Office	Initiated engagement with the new WG CDO Health, with regular meetings established with team across different levels	Head of Engagement, Chief Executive Officer and Director of Finance	Welsh Government	Apr-23	Sep-23
12	Achieve Digital Inclusion Charter accreditation and deliver action plan to embed the six pledges	Achieved Digital Inclusion Charter accreditation and delivered action plan to embed the six pledges working with our partners	Organisational Development, Culture and Engagement Lead, Head of Engagement & Public Engagement Lead	Cwmpas, Digital Communities Wales, Welsh Government, NHS partners	Apr-23	Mar-24
3. B	e recognised as a system leader in the	e development of high-quality technology	, data products and servic	ces for the NHS		1
13	Support delivery of communications strategy that highlights our purpose, collaborative approach and outcomes	Developed a 12-month comms plan to support our engagement objectives	Head of Engagement & Assistant Director of Communications	All stakeholders	Jul-23	Mar-2
14	Create value proposition to define our 'offer' for our stakeholders including key messaging	Created suite of materials that make our 'offer' clear for stakeholders, highlighting areas where we can work together and where we add value	Head of Engagement & Assistant Director of Communications	All stakeholders	Oct-23	Oct-24
15	Enable and support communities of practice	List of communities of practice run by DHCW to share with DHCW staff and stakeholders	Head of Engagement / Professional Network for Engagement and Comms	All stakeholders	Apr-24	Sep-24
16	Support delivery of thought leadership series working with other partners	Agreed partnership with LSHW to deliver series of thought leadership sessions in 2023-24.	Head of Engagement, Executive Director of Strategy	LSHW, Academia, Welsh and UK Government, NHS Wales partners and commercial partners	Jul-23	Mar-2

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17	Publicise refined engagement strategy, highlighting our ambitions and how we will achieve these	Published our refined engagement strategy, highlighting our ambitions and how we will achieve these	Head of Engagement	All stakeholders	Apr-23	Sep-23
18	Identify and engage with global best practice/exemplar orgs, compare and measure progress, reputation and success	Identified a list of global exemplars and mapped our engagement with healthcare ecosystems outside Wales	Head of Engagement, Executive Director of Strategy	LSHW, Academia, Welsh and UK Government, NHS Wales partners and commercial partners	Jul-24	Dec-2
4. C	perate as an agile and responsive org	anisation, listening and responding to sta	akeholders		1	1
19	Scope potential for DHCW National Stakeholder Open Forum	Review and provide recommendations for DHCW Management Board on suitability of establishment of National Stakeholder Open Forum	Head of Engagement	All stakeholders	Apr-24	Oct-2
20	Undertake retrospectives on partnerships	Undertaken retrospectives on partnerships, with results collated and shared with DHCW colleagues to inform future working	Head of Engagement, allocated account leads on partnerships	DHCW partners including Health Boards and trusts, and national representative bodies	Dec-23	Jun-24
21	Support undertaking of digital maturity assessment across NHS Wales	Completed an assessment of digital maturity with clinical users of NHS Wales against KLAS framework	Executive Director of Strategy, Head of Planning, Business Change Lead, Head of Engagement	NHS Wales Health Boards and Velindre	Jan-23	Jun-2
22	Scope and undertake an annual feedback mechanism	Scoped and undertaken an annual survey of stakeholders and semi structured interviews with results collated and shared with DHCW colleagues to inform future actions and feedback mechanisms to stakeholders established.	Head of Engagement	All stakeholders	Jul-23	Dec-2

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



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# DIGITAL HEALTH AND CARE WALES STRATEGIC WORKFORCE PLANNING UPDATE

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

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

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

Purpose of the Report	For Noting				
Recommendation					
The SHA Board is being asked	d to <b>NOTE</b> the content of the report.				



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

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#### IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply	
CORPORATE RISK (ref if approp	oriate)	

WELL-BEING OF FUTURE GENERATIONS ACTA More Equal WalesIf more than one standard applies, please list below: All standards listed under the Well-Being of<br/>Future Generations Act applies

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

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

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

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

Strategic Workforce Planning

Author: Sarah-Jane Taylor, Joanne Jamieson Approver: Sarah-Jane Taylor



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

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

#### 2. SITUATION/BACKGROUND

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

Strategic Workforce Planning

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Author: Sarah-Jane Taylor, Joanne Jamieson Approver: Sarah-Jane Taylor



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

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

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

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

#### • Age Analysis

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

#### • Geographical Analysis

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

- **Recruitment Analysis** forecast recruitment for 23-24 (DDaT+ categories) The top three categories within the analysis findings are:
  - IT Operations IT Service Managers, Service Desk Managers, Service Transition Managers, End User Computing Engineer, Infrastructure Operations Engineer, Applications Operations Engineer etc
  - **Product and Delivery** Product Managers, Business Analysis, Programme Delivery Manager, Delivery Managers and Service Owner
  - **Technical** Data Architect, Dev Ops Engineer, Infrastructure Engineer, Software Developer and Technical Architect

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

#### • Skills Gap Analysis

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

- Software development
- ITIL service management
- Leadership and management

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

Author: Sarah-Jane Taylor, Joanne Jamieson Approver: Sarah-Jane Taylor



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

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

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

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

#### 5. **RECOMMENDATIONS**

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

As part of the DHCW Strategic Resourcing Group an organisational programme committed to investing in education leavers at all ages (school leavers, interns, apprenticeship schemes and graduates), is required for 23-24 within an agreed funding model. Placements and work with the education sector will be led by the People and OD team supported by Digital Leads and

Strategic Workforce Planning

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Directorate Heads.

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

#### 6. APPROVAL / SCRUTINY ROUTE

APPROVAL / SCRUTINY ROUTE - Person / Committee / Group who have received or considered this paper prior to this meeting

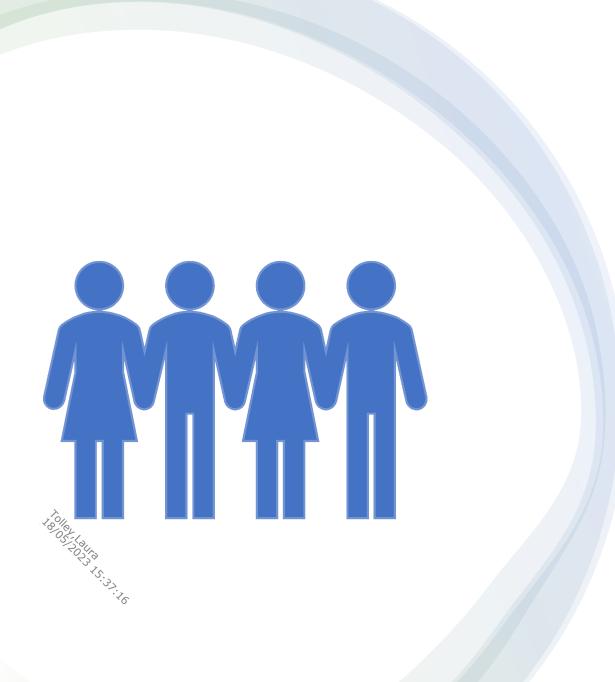
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME
Executive Directors Meeting	10 th May 2023	Approved
Management Board	12 th May 2023	Approved
Strategic Resourcing Group	23 rd May 2023	To be held – future meeting as of date
		of issue of Board paper



Strategic Workforce Planning

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# Workforce Planning Findings April 2023

# What information did we request

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

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

DDaT+ classification of roles

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

Resource requirements – in year and beyond

# Current staff in post headcount as at 1st April 2023

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

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

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

****** Does not include contractors through call off contracts

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

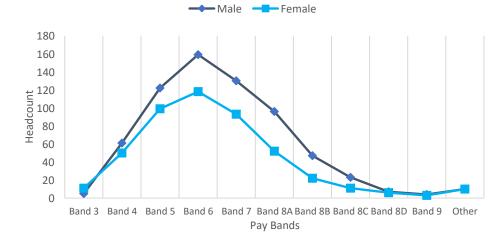
# NUMBER OF DIRECTLY EMPLOYED STAFF

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

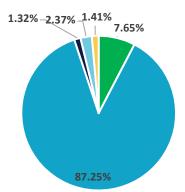
BLACK, ASIAN & MINORITY ETHNIC COMMUNITY – 8.95% OF DHCW WORKFORCE

# PAY BAND BY MALE AND FEMALE

## PAY BAND BY MALE AND FEMALE



DISABLITITY





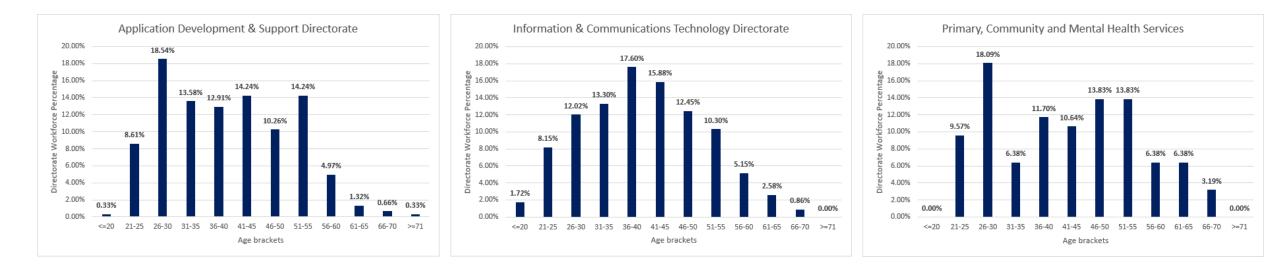
8.78% BABY BOOMERS (aged between 57 – 75) 41.70% GENERATION X (aged between 41 - 56) 43.81% MILLENNIALS (aged between 25 - 40) 5.71% GENERATION Z

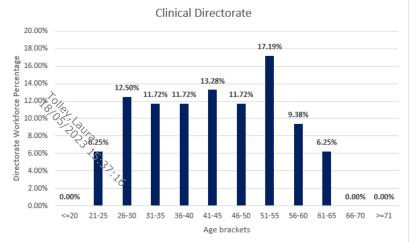
**4 GENERATIONS** 

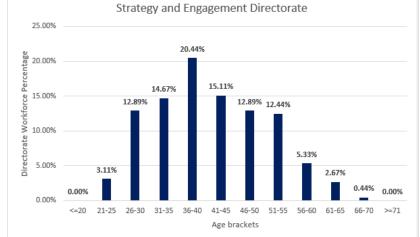
**86.7%** I would recommend my organisation as a place to work (NHS STAFF SURVEY)

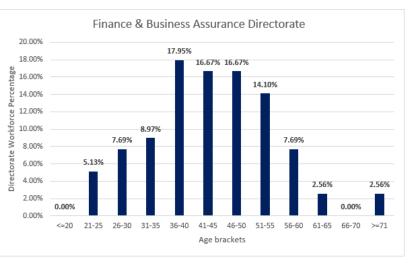
(aged under 25)

# Directorate Age profile









# Where our employees live

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

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

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

# Forecasted Recruitment per DDaT Plus Categories

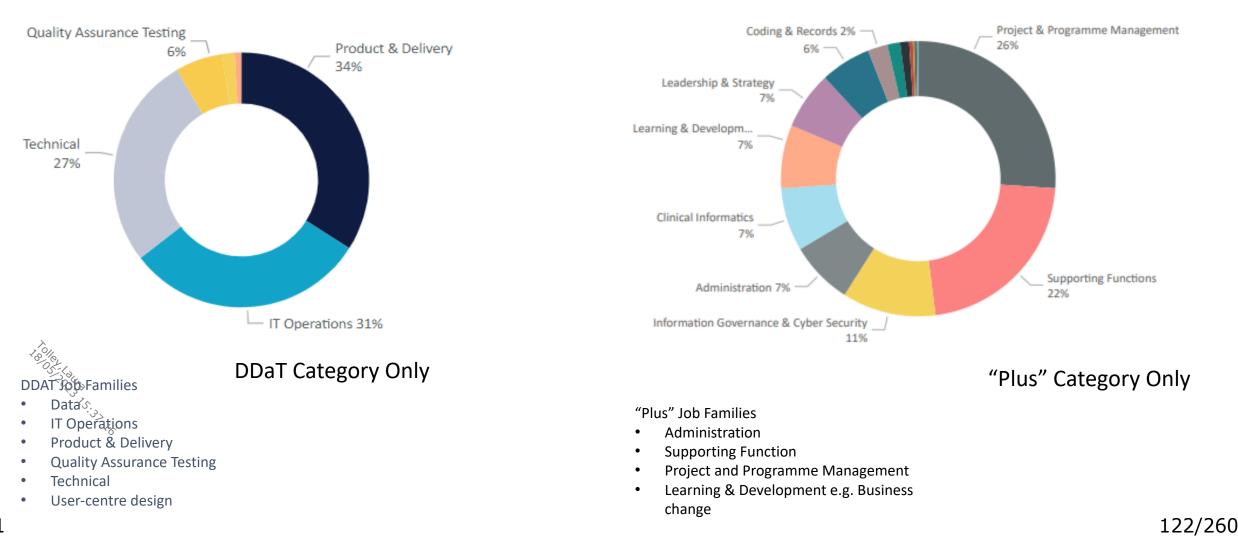
45 40 35 30 25 20 15 0 Product and delivery Quality assurance Supporting Functions Administration Data IT operations Learning and Project and Technical User-centred design Development Programme testing (QAT) Management

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

*Learning & Development = Business Change Team

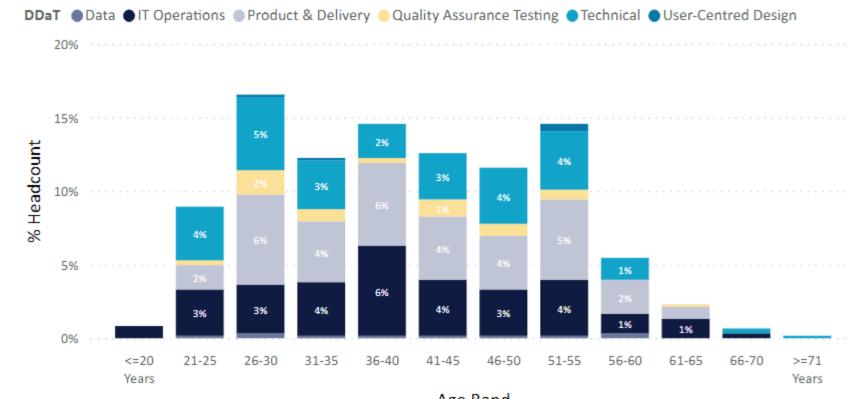
# DDaTPlus Profile of DHCW Workforce

# Breakdown of DDaT Job Families in DHCW Workforce



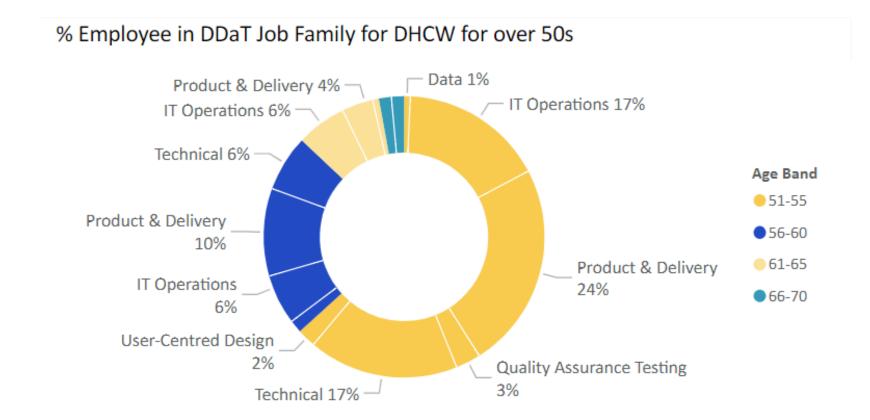
# Age Profile

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



Age Band

# Age Profile in DDaT job family Succession Planning



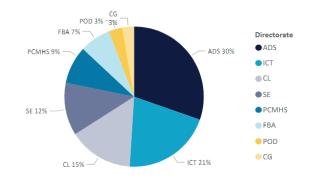
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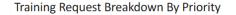
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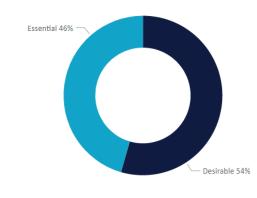
# Skills Gap Analysis



#### Employees Requesting Training by Directorate









# DIGITAL HEALTH AND CARE WALES TRANSFER OF DIGITAL EYECARE PROGRAMME

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

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

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

Purpose of the Report	For Approval		
Recommendation			
The Board is being asked to:			
1) <b>NOTE</b> the recommend	ation of the recent gateway zero review, supported by Welsh		
Government, requesti	ng DHCW take over the ownership and management of the		
Digital Eye Care Progr	amme, currently managed by Cardiff and Vale UHB		
2) NOTE progress and pla	anned actions to meet the proposed transfer date of 1 st June.		
3) APPROVE to the property	$_{\odot}$ 3) APPROVE to the proposed transfer date of 1 st June and to pause and reset the		
Yes Programme during the period of due diligence and transition.			
.46			

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

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



### 1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Mobilising digital transformation and ensuring high quality health and care data	
CORPORATE RISK (ref if approp	priate)	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, pleas	se list below:

HEALTH CARE STANDARD	Timely Care
If more than one standard applies, p	lease list below:

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

IMPACT ASSESSMENT		
QUALITY AND SAFETY	Yes, please see detail below	
IMPLICATIONS/IMPACT		
	The Eyecare Digitalisation Programme enhances the quality of eyecare to Welsh citizens	
LEGAL	Yes, please see detail below	
IMPLICATIONS/IMPACT	Any legal implications will be worked through during the transition phase	
FINANCIAL	Yes, please see detail below	
IMPLICATION/IMPACT	Any financial implications will be worked through during the transition phase	
WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below	
	To be worked through during the transition phase	
SOCIO ECONOMIC	No, there are no specific socio-economic implications related to	
AMPLICATION/IMPACT	the activity outlined in this report.	
RESEARCH AND INNOVATION	No, there are no specific research and innovation implications	
.16		

Transfer of Digital Eyecare Programme

Author: Alison Paul Approver: Sam Hall



relating to the activity outlined within this report.

Acronyms	3		
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CaVUHB	Cardiff & Vale University Health Board	LHB	Local Health Board
CIN	Clinical Implementation Network	NWSSP	NHS Wales Shared Services Partnership
EPR	Electronic Patient Record	OGC	Office of Government Commerce
SRO	Programme Senior Responsible Officer	RAID	Risks, Assumptions, Issues, Dependencies

## 2 SITUATION/BACKGROUND

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

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

Transfer of Digital Eyecare Programme

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

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

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

During May the following streams of work will be concluded:

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

Transfer of Digital Eyecare Programme

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

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

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

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

### 5 **RECOMMENDATION**

The Board is being asked to:

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

Transfer of Digital Eyecare Programme

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Author: Alison Paul Approver: Sam Hall

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130/260



# 6 APPROVAL / SCRUTINY ROUTE

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



Transfer of Digital Eyecare Programme

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Author: Alison Paul Approver: Sam Hall



# DIGITAL HEALTH AND CARE WALES RISK MANAGEMENT REPORT

		ltem	
Name of Meeting	SHA Board		
Date of Meeting	25 May 2023		

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

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

Agenda

6.1

Purpose of the Report	For Approval			
Recommendation				
The Board is being asked to: <b>NOTE</b> the Risk and Board Assurance Framework Workplan; <b>RECEIVE</b> and <b>DISCUSS</b> the status of the Corporate Risk Register including changes since the last meeting; <b>APPROVE</b> the DHCW Risk Appetite statement and associated risk tolerances and appetite per risk				
domain.				
domain.	<b>TŶ GLAN-YR-AFON</b> 21 Heol Ddwyreiniol Y Bont-Faen, Caerdydd CF11 9AD			

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



## 1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services		
<b>CORPORATE RISK</b> (ref if appropriate)		All are relevant to the report	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 9001
If more than one standard applies, pleas	e list below:
ISO 14001	
ISO 20000	
ISO 27001	
BS 10008	

HEALTH CARE STANDARD	Governance, leadership and acccountability		
If more than one standard applies, please list below:			
Safe Care			
Effective Care			

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

IMPACT ASSESSMENT	
QUALITY AND SAFETY	Yes, please see detail below
IMPLICATIONS/IMPACT	Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety.
LEGAL	Yes, please see detail below
IMPLICATIONS/IMPACT	Should effective risk management not take place, there could be
	legal implications
FINANCIAL	Yes, please see detail below
IMPLICATION/IMPACT	Should effective risk management not take place, there could be
	financial implications
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the
OS-LA	activity outlined in this report.
×3,	
.16	

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Author: Bethan Walters Approver: Chris Darling



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

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

## 2 SITUATION/BACKGROUND

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

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

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

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

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

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

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

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

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

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

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

Risk Ref	isk Ref Risk Title Risk Description	
	Technical Debt Accumulation	IF DHCW is unable to reduce and/or prevent further
		accumulation of technical debt, THEN DHCW will be unable
		to embrace latest technologies and modernise working
DHCW0316		practices, RESULTING IN increasing challenges to deliver
		high quality digital services and meeting customer
		demands within reasonable timescales.
0HCW0317	**PRIVATE**	**PRIVATE**
DHCW0318	**PRIVATE**	**PRIVATE**
DHCW0319	**PRIVATE**	**PRIVATE**

### NEW RISKS (4)

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### **RISKS REMOVED (5)**

Risk Ref	Risk Title	Risk Description	Statement
DHCW0286	**PRIVATE RISK**	**PRIVATE RISK**	Downgraded for management at
DHCW0286	PRIVATE RISK **		Directorate level
		IF Data Centre migration activity	Downgraded for management at
	Data Centre	takes place in 2023/24 THEN	Directorate level
DHCW0288	Migration	additional cost pressures will	
	Revenue Funding	emerge RESULTING IN a	
		requirement to source	
		additional funding.	
		IF utility costs increase	Downgraded for management at
	Increased Utility	significantly as expected THEN	Directorate level
DHCW0284	Costs Financial	costs will exceed those normally	
011010284	Pressures	budgeted for RESULTING IN	
	FIESSUIES	increased facilities costs and a	
		financial pressure	
		IF suppliers revise product	Downgraded for management at
		charging methodology with a	Directorate level given the
	Digital Cost		strengthened account management
DHCW0311	Pressure –	there will be an increased cost	arrangements
Difewooli	Supplier Price	pressure for the IMTP period,	
	Model Changes	RESULTING IN an increased risk	
		to the organisations ability to	
		reach a break-even position.	
			Downgraded for management at
		chip shortage and underlying	Directorate level
		digital price pressures and	
DHCW0314		contract renewals have a	
	Digital Cost	negative impact upon prices	
	Pressures –	THEN there will be additional	
	Supply Chain Risk	equipment and maintenance	
		contracts price increases	
		RESULTING IN an increased risk	
		to the organisations ability to	
		reach a break-even position.	

## RISKS WITH A CHANGE IN SCORE (3)

There were three changes in score during the period

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

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		delay in benefits being realised	
		by the service.	
DHCW0304	NHS Wales SLA Income Increases	committed additional spend to support current and new	Reduced in score. Work has progressed to achieve sign off, but a smaller number remaining and still to be worked through/confirmed.
DHCW0299	to support Electronic Prescription	- ·	Reduced in score from likely to possible dropped from a 20 to 15 following review at Programme Board

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



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			LIKE	LIHOOD		
	RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)	
CATASTROPH (5)			OHCW0277DHCW0278OHCW0279OHCW0280OHCW0281OHCW0281OHCW0282OHCW0387OHCW0317OHCW039Supplier capacity to support EPS	-*DHCW0315 ↔		
MAJOR (4)			DHCW0255 - Supplier Capacity O supplices + DHCW0263: DHCW Functions DHCW0264: Data Promise DHCW0296 - Allergies/Adverse Reactions - Single Source DHCW0306 - Switching Service - Succession DHCW0307 - Switching Service Responsive Development + THCW0306 - Sustainable funding for NIIAS TOHCW0310	DHCW0292 - Insufficient human resource capacity DHCW0300 - Canise (Screening and Palliative Care) + DHCW0301 - Digital Cost Pressures - Supplier Cost Model changes DHCW0318 - Digital Cost Pressure - Service Model Changes DHCW0316 - Technical Debt Accumulation	DHCW0288 – Delay in Implementation of LINC (WLIMS 2)	
MODERATE (3)				DHCW0319      DHCW0237: New requirements impact on resources and plan DHCW0259: Staff Vacancies DHCW0269 – Switching Service – Data warehouse DHCW0304 – NHS Wales SLA Income Increases		
MINOR (2) NEGLIGIBLE (1)						

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

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

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

### 5 **RECOMMENDATION**

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5.1 The Board is being asked to:

**NOTE** the Risk and Board Assurance Framework Workplan;

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

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

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# 6 APPROVAL / SCRUTINY ROUTE

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



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# 6.1ii Appendix B – Corporate Risk Register

### Risk Matrix

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

## Key – Risk Type:

Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0298	Business & Organisational	Delay in the Implementation of LINC (WLIMS 2) IF the new Laboratory Information Management System (LIMS) service is not fully deployed before the contract for the current LIMS expires in June 2025 THEN operational delivery of pathology services may be severely impacted RESULTING IN potential delays in treatments, affecting the quality and safety of a broad spectrum of clinical services and the potential for financial and workforce impact.	05/05/2021	27/04/2023	15	<ul> <li>AIM - Reduce Impact</li> <li>FORWARD ACTIONS</li> <li>Business continuity options are being explored including extending the contract for the current LIMS to cover any short-term gap in provisions.</li> <li>ACTIONS TO DATE</li> <li>27/04/23 {JS} Updated plan received from supplier and feedback gathered from DHCW, health boards &amp; trusts.</li> <li>DHCW provided written feedback to supplier</li> <li>24/03/23 - An updated plan has been received and feedback has been gathered from the DHCW, health boards and trusts and provided to the supplier.</li> <li>17/01/23 - LINC added as an associated register. Supplier expected to deliver a detailed plan by the end of January 2023. Contractual options being worked through re.</li> <li>extension of legacy and delivery of the replacement service.</li> <li>07/02/2023 Email confirmation of executive ownership, changes to DOS given the reliance on programme delivery to avoid the risk05/12/22 [NB] - Review of the Supplier</li> <li>Implementation plan took place on the 30th November 2022. Formal Feedback to the gathered from the service.</li> <li>01/11/22 [GE] - DHCW will be taking control of this project on 1st January 202301/11/2022 Escalated to Corporate register.</li> </ul>	20 (5x4)	6 (3x2)	Executive Director of Strategy	Non mover	Audit & Assurance Committee	Service Delivery	Mission 2 - Delivering high quality technology

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Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0299	Business & Organisational	Supplier capacity to support Electronic Prescription Service readiness activities IF: key stakeholders and suppliers are not able to support Electronic Prescription Service readiness activities and implementation due to resourcing pressures THEN: configuration, assurance, general set up activities during the readiness phase and business change/implementation activities will be delayed RESULTING IN: delay to the Primary Care Electronic Prescription Service Programme delivery timetable	13/07/2022	18/05/2023		<ul> <li>AIM: REDUCE likelihood</li> <li>FORWARD ACTIONS: Section 255 Agreement has been agreed with NHS Digital. Contract Change Notices being negotiated with key suppliers to deliver EPS readiness in line with Key Milestones.</li> <li>ACTIONS TO DATE:</li> <li>18/05/2023 score reviewed at programme board and agreed reduction in likelihood from Likely to Possible (4 to 3) April 2023. Risk to be reviewed at EPS programme board meeting on 18th May.</li> <li>March 2023. Risk reviewed at EPS programme board in March 2023 resulting in no change to risk scoring. NHS England have made changes to staff allocated to support EPS delivery in Wales.</li> <li>27/02/2023 No further progress ongoing discussions 01/02/2023 the impact and likelihood of this risk have increased score update to reflect the changes</li> <li>Section 255 Agreement has been agreed with NHS Digital. Agreement with Department of Health and Social Care endorsing the request to expand the use of EPS across Wales.</li> </ul>	15 (5X3)	6 (3X2)	Executive Director of Strategy	Reduce d	Digital Governance & Safety Committee	Developmen t of Services	Mission 3 - Expanding the content
DHCW0292	Service Interruption	Insufficient human resource capacity in the infrastructure teams to undertake BAU activity and activities in the 1- year plan IF DHCW are unable to secure revenue funding to support major infrastructure developments identified in the IMTP and 1-year business plans, THEN there will be a delay to these activities RESULTING IN increased costs and/or system failures. Examples include: * Data Centre 2 Project * Migration of systems from legacy virtual server	01/04/2022	03/04/2023	16	<ul> <li>AIM: REDUCE Likelihood</li> <li>FORWARD ACTIONS:</li> <li>Develop workforce plan for the resources required for major Infrastructure maintenance work such as those identified.</li> <li>ACTIONS TO DATE:</li> <li>03/04/2023 MP - Work ongoing to mitigate report suggested improvement areas</li> <li>23/02/2023 MP - Report delivered and discussions ongoing to effect recommendations and address concerns.</li> <li>02/02/2023 MP - Awaiting report output from 3rd party engagement.</li> <li>29/11/2022 MP - Ongoing engagement with a 3rd party to carry out analysis of teams capacity.</li> <li>25/10/2022 MP - Order being raised for 3rd party to analyse the capacity within teams and provide recommended sizing.</li> <li>27/09/2022 MP - Review of resource capacity to take place.</li> <li>25/08/2022. CLJ. Independent third party being engaged to undertake an assessment on the sizing of the teams which have resource constraints and highest levels of unfunded</li> </ul>		8 (4x2)	Executive Director of Digital Operations	Non- Mover	Digital Governance & Safety Committee	Financial	Mission 2 - Delivering Technology

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

	• 				Rati			Deting					
Ref	Risk Type	Description	Opened date	Review date	ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						MC 27/02/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. Commercial services to validate currency linked contracts. Finance to research medium term position as part of the formal calculation/modelling process. Agree hedging approach with commercial services for management board/audit committee approval. MC 27/02/23:- Audit Committee Digital Cost Pressure Deep Dive held at October session. Financial Sustainability audit focussing on Digital Cost Pressures presented to February Audit Committee. Single risk split into four risks for more focussed managed and mitigating action identification."							
						AIM REDUCE LIKELIHOOD FORWARD ACTIONS							
						05/05/2023: Cloud Adoption Group to support delivery of the Cloud Business Case which will detail the organisations shift to cloud and associated costs.							
		Digital Cost Pressure – Service Model Changes IF externally and internally sourced service				MC 05/05/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. External - Commercial service to identify potential areas and include discussion as part of a horizon scanning agenda item at contract review meetings, Internal – Senior Finance Business partners to assess and escalate appropriately via established SoP.							
		provision models change resulting in movement				The proposed timelines for this mitigation will run until September 2023			Executive Director of		Audit Q		Mission 4 –
DHCW0313	Finance	from CAPEX based solutions to OPEX THEN	28/02/2023	05/05/2023	16	ACTIONS TO DATE:	16 (4x4)	9 (3x3)	Finance	New Risk	Audit & Assurance	Service Delivery	Driving
		there will be an increased cost pressure for the IMTP period, RESULTING IN an increased risk to the				05/05/2023: The Cloud Adoption Oversight Group has been established which (alongside implementation of the Product Approach) will play a key role in planning potential changes in service delivery models.				Misk		Denvery	Value
		organisations ability to reach a break-even position.				03/04/2023: An updated database has now been compiled with formal guidance surrounding escalation within the appropriate organisational governance forums.							
10000000000000000000000000000000000000	~					DHCW will look to propose to DOD a process of identifying and managing cost pressures of this nature as part of its sustainable funding approach. Initial notification for discussion will be held as part of the National digital updates planned for the 04/04/23							
	·76					MC 27/02/23: DHCW to compile formal SoP setting out reporting, calculation/modelling and escalation processes. External - Commercial service to identify potential areas and							

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

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

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

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

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

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

Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
						<ul> <li>16/09/2022 - Discussed at Execs, concerns raised this has been downgraded prematurely and there would be more assurance following the external audit report</li> <li>04/08/2022: Should the switching service fail, there is a process in place, whereby spreadsheets can be imported to manually update the service. The overall risk impact should be reduced. Downgraded to Directorate level by owner</li> <li>15/07/2022 - Discussion has taken place to progress the shared ownership of this risk between ISD and Operational Services. The internal audit review of the Switching Service has begun with a number of meetings having taken place in June and July.</li> <li>21/02/2022 - NDR confirmed that a plan to replace switching service functionality will be considered as part of the data strategy work. In the meantime, a paper is being drafted within ISD to propose some immediate solutions for geographical resilience in order to consider reducing the risk score.</li> </ul>							
DHCW0296	Clinical	Allergies/Adverse Reactions - Single Source IF allergies and adverse reactions are not stored in a single source and in a simple, structured, standardised and SNOMED-coded manner THEN a clinician may not be able to retrieve all the relevant, updated information in the system that they are logged in RESULTING IN Potential patient harm due to missing or outdated information being presented in the system being used by the clinician. Possible Causes: • Single source of truth (Clinical Data Engine) in which to input and retrieve information not used widely • Lack of integration API with CDE -	13/09/2022	02/05/2023	12	<ul> <li>AIM: REDUCE Likelihood and Impact</li> <li>FORWARD ACTION:</li> <li>Awaiting response from NDR Programme following the internal Audit report</li> <li>ACTION TO DATE:</li> <li>Apr/2023: A new Shared Allergies Record will be set up aligned to the work of the Shared Medicines Record - Timescales yet to be determined. SMR project to include AR in their remit. Strategy to be determined.</li> <li>01/03/2023 Still awaiting a response on the future of the service following internal Audit review</li> <li>24/01/2023 - Response to the Internal Audit review has identified the change in scope to this risk with IRAT team taking ownership. New risks will be raised for separate Matters Arising within the report.</li> <li>23/12/2022 No update from NDR or IRAT teams around critical responses to recommendation.</li> <li>31/10/2022 - The internal audit review of the Switching Service by NHS Wales Shared Services Partnership has presented initial findings, which are being reviewed in order to develop appropriate responses to the recommendations and the development of a specific management action plan 16/09/2022 - Discussed at Execs, concerns raised this has been downgraded prematurely and there would be more assurance following the external audit report</li> <li>04/08/2022: Should the switching service fail, there is a</li> </ul>	12 (4X3)	8 (4X2)	Executive Medical Director	Non mover	Digital Governance & Safety Committee	Safety /Wellbeing	Mission 2 - Delivering Technology

					Rati								
Ref	Risk Type	Description	Opened date	Review date	ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
		Interoperability • Allergen not SNOMED coded • Reaction not SNOMED coded • Difficulty filtering through SNOMED results • No standard as how to portray Adverse reactions (i.e.: not all systems display them in the patient banner)				process in place, whereby spreadsheets can be imported to manually update the service. The overall risk impact should be reduced. Downgraded to Directorate level by owner							
DHCW0237	Business & Organisational	New requirements impact on resource and plan IF new requirements for digital solutions continue to come in, THEN staff may need to be moved away from other deliverables in the plan RESULTING in non- delivery of our objectives and ultimately a delay in benefits being realised by the service.	30/03/2020	27/04/2023	16	<ul> <li>AIM: REDUCE Impact and REDUCE Likelihood</li> <li>FORWARD ACTIONS: Continue to monitor new requirements and new initiatives. Use formal change control methods to ensure impact is mapped and impacted work is re-baselined.</li> <li>ACTIONS TO DATE:</li> <li>The risk for 23-26 will be managed in the context of the IMTP 23-26 which was approved at the SHA Board on 30 March 2023.</li> <li>The 23-26 IMTP and Annual Business planning cycle is running which identifies priorities for next year and assesses capacity against the plan. This will result in an organisational plan from April where priorities are clear and resource should be directed towards. This plan will also illustrate unresourced requests and pipeline products which aren't resourced as at time of publication. These can only enter the plan via a formal change control where resource has been confirmed as available. The status of products as 'pipeline' will be communicated to NHS partners to manage expectations.</li> <li>Annual Business Plan approved April 2022 - this plan is flexible and new requirements will be assessed against available capacity and go through a formal change control process before being added to the plan. New requirements coming through some of which are on a candidate list until resource is confirmed. Anticipated new requirements from Emergency and Unscheduled Care (Six Goals Framework) and new National Vaccination programme. New WG commissioning process being investigated to help coordinate new requests for work.</li> </ul>	12 (3x4)	9 (3x3)	Executive Director of Strategy	Reduce d	Digital Governance & Safety Committee	Developmen t of Services	Mission 5 - Trusted Partner

Ref	Risk Type	Description	Opened date	Review date	Rati ng (init ial)	Action Status	Rating (current)	Rating (Target )	Risk Owner	Trend	Committee Assignment	Primary Risk Domain	Strategic Mission
DHCW0304	Finance	NHS Wales SLA Income Increases IF DHCW is not funded for committed additional spend to support current and new services THEN further cost pressures may become unmanageable RESULTING IN a decrease in resource to support services, reduction in IMTP deliverables and a possible deficit position reported.	24/01/2023	8 26/04/2023	20	<ul> <li>AIM: To finalise SLA's and organisational approval.</li> <li>FORWARD ACTIONS:</li> <li>Detailed supporting packs to be issued 1st March 2023.</li> <li>ACTIONS TO DATE:</li> <li>03/04/2023 MC: DHCW has formally received 11 signed SLAs leaving a residual balance of 11 organisations awaiting submission. The Director of Finance is to provide an update and chase progress at the Director of Digital forum scheduled for 4th April 23</li> <li>27/02/23 MC: Additional cost schedules circulated to digital leads and deputy directors of finances for inclusion within initial planning assumptions. Presentation given to NSMB on 13th Dec 2022 outlining approach.</li> <li>Proposal on infrastructure costs to IMB on 7th Feb 2023 who endorsed the re-charging approach."</li> </ul>	12 (4x3)	10 (5x2)	Executive Director of Finance	Reduce d	Audit & Assurance	Financial	Mission 2 - Delivering high quality technology.





### **DIGITAL HEALTH AND CARE WALES BOARD ASSURANCE FRAMEWORK REPORT**

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

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

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

Purpose of the Report	For Approval
Recommendation	
The Board is being asked to: APPROVE the BAF Report Dash RECEIVE and DISCUSS the stat status.	nboard for 2023/24. us of each strategic mission, principal risk, action plan and current
¹ 0/10/10 10/10/10 10/10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10 10/10 10 10/10 10 10 10/10 10 10 10 10 10 10 10 10 10 10 10 10 1	TŶ GLAN, VP. AEON 21 Heal Ddwyreinial Y Bant-Eaen, Caerdydd CE11 9AD

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

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



### 1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services			
<b>CORPORATE RISK</b> (ref if appropriate)		All are relevant to the report		

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 9001
If more than one standard applies, pleas	e list below:
ISO 14001	
ISO 20000	
ISO 27001	
BS 10008	

HEALTH CARE STANDARD	Governance, leadership and acccountability	
If more than one standard applies, please list below:		
Safe Care		
Effective Care		

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

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

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

2 SITUATION/BACKGROUND

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

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

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

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

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

Mission one - Provide a platform for enabling digital transformation

- Title updated in line with the IMTP review ٠
- Description updated to be reflective of the updated position and title ٠
- Current score reviewed and reduced in reflection of this year's plan and progress target score reviewed and increased in light of the action plan changes
- Controls and action plans revisited and revised in line with the mission priorities and • progress

Mission 2 - Deliver high quality digital products and services

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title •
- Controls and action plans revisited and revised in line with the mission priorities and ٠ progress

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

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

Mission 4 – Drive better value and outcomes through innovation

- Title updated in line with the IMTP review
- 50013 15:37.76 Controls and action plans revisited and revised in line with the mission priorities and progress

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

- Title updated in line with the IMTP review
- Description updated to be reflective of the updated position and title
- Current score reviewed and reduced in reflection of this year's plan and progress
- Target score reviewed and reduced in reflection of this year's plan and progress
- Controls and action plans revisited and revised in line with the mission priorities and progress
- 3.4 Each strategic mission is provided with a RAG score assigned by the Executive Lead for the strategic mission, which is a delivery confidence assessment based on the risk and the plans in place to address and drive the strategic mission.

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

5 RECOMMENDATION

5.1 The Board is being asked to:

APPROVE the BAF Report Dashboard for 2023/24. **RECEIVE** and **DISCUSS** the status of each strategic mission, principal risk, action plan and current status.

6 APPROVAL / SCRUTINY ROUTE

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



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The Board Assurance Report Dashboard 2023/24

DHCW Risk appetite statement and tolerances

DHCW RISK APPETITE

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

Less Controls, more devolved decision making	
Risk with rating 25 are None reported to the lead Executive	
Risk with rating 20 or above Development of Services Open are reported to the lead Executive	
Moderate Risk with rating 15 or above Corporate Social Responsibility	
CautiousRisk with rating 12 or above are reported to the lead ExecutiveFinancial, Reputational, Safety and Wellbeing, Service Delivery, Info – Access and Sharing	rmatior
Risk with rating 9 or above Adverse reported to the lead Executive Citizen Safety	g,
More Controls, more centralised decision making	

Digital Health and Care

Principal risk summarv

The Principal risk summary gives an overview of the Principal risk in relation to each of the DHCW strategic objectives and the rationale for the scoring

	r incidal lisk summary		objectives and the rationale for the scoring.
Туре	Detail	Current risk score and rationale	Target risk score and rationale
OBJ	1. 2023/24: Provide a platform for enabling digital transformation	1	
PR	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace	12 - 4 (Likely) x 3 (Moderate) This risk score is derived from our analysis of systems as part of developing new strategies over the last twelve months.	 6 – 2 (unlikely) x 3 (Moderate) Each of our strategies addresses complexity and silos through a commitment to standards based open architecture, which is intended to streamline and simplify our systems and delivery interoperability.
OBJ	2. 2023/24: Deliver high quality digital products and services		
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.	9 - 3 (Possible) x 3 (Moderate) Established operational support is in place and work has been undertaken in recent years to improve the availability and security of the services, but further action is needed to ensure resilience and security is at the required level.	4 – 2 (Unlikely) x 2 (Minor) There are clearly articulated plans for the activity required to increase the resilience and security of the system which should reduce the risk to an acceptable level with careful scrutiny and monitoring.
OBJ	3. 2023/24: Expand the digital health and care record and the use	of digital to improve health and care	
PR	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.	9 – 3 (Possible) x 3 (Moderate) The digital health and care record has developed over recent years, but we know this expansion must continue at pace to ensure that patients and clinicians have the best possible information to support the achievement of high quality care outcomes.	6 – 2 (Unlikely) x 3 (Moderate) The new NDR strategy has set out a clear and prioritised road map for the single health record along side development in digital services such as WCP and WNCR. We will continue to explore enhanced functionality supporting use cases in the strategy and using AI.
OBJ	4. 2023/24: Drive better value and outcomes through innovation		
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.	16 – 4 (Likely) x 4 (Major) Fragmented approaches to driving value from data may result in lost opportunities to innovate, enhance operational delivery and improve health and care outcomes.	 12 – 3 (Possible) x 4 (Major) A best practice approach and operating model to sharing data for operational delivery, research and innovation.
OBJ	5. 2023/24; Be the trusted strategic partner and a high quality, in	clusive, and ambitious organisation	
PR	IF we are not a Prusted Partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.	12 – 3 (Possible) x 4 (Major) As a developing organisation the current risk score reflects the work still to do in terms of continuing to be a learning organisation which will support capacity and capability of staff as well as working collaboratively with partner organisations. This includes the implementation of the DHCW organisational structure and approach across the organisation.	8 - 2 (Unlikely) x 4 (Major) There are multiple activities that contribute to the delivery of the strategic objective and these include a focus on the digital workforce, capacity and capability, being organised in the most efficient and effective way, as well as working in a high trust environment with partners to enable digital transformation.
<mark>3/10</mark>			160/260

Principal risk heat map

Progress Report

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

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

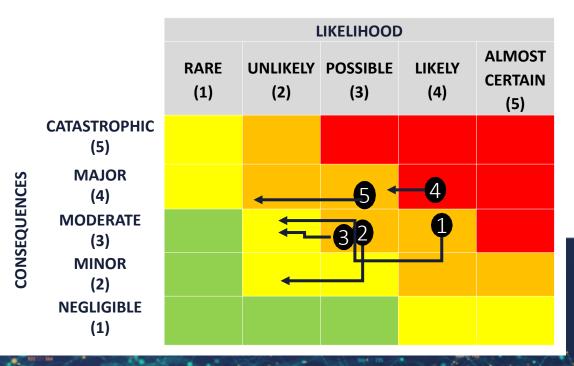
Strategic Principal Risk Impact Statement

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

Questions to ask yourself:

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

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



Digital Health and Care

Λ			Strategic Mission Delivery Confidence LO	w	Significant	concerns over the adequ	acy/effectivenes	s of the controls in place in proportion to the risks				
A	ssurance	Key – Control and assurance	Strategic Mission Delivery Confidence ME	DIUM	Some areas	s of concern over the ade	equacy/effectiver	ness of the controls in place in proportion to the risks				
C.	ummary	RAG Rating	Strategic Mission Delivery Confidence HIC	6H	Controls in	place assessed as adequa	ate/effective and	l in proportion to the risk				
30	JIIIIaly		Insufficient Data to provide RAG		Insufficient	information at present t	resent to judge the adequacy/effectiveness of the controls					
Туре	Detail			Associated risk impact domain			Risk Appetite	Risk Appetite rationale/likely scenario	Assurance Assessment			
M PR	1. 2023/24: Provide a platform for IF we do not provide robust and s and open architecture principles T and joined up digital services RESU pace	 Reputatio Developm services Informationand Sharin Informationand main 	nent of on – Access ng on – Storing	 Financial Service Delivery Patient/Citizen Safety Corporate Social Responsibility 	CAUTIOUS	DHCW will accept a small amount of risk in ensuring compliance with information governance, information security and cyber security. We will manage the associated corporate risks at their appetite levels to protect against the potential consequences.						
M PR	2. 2023/24 Deliver high quality di IF we do not deliver safe, secure, a THEN the ability of health and car compromised RESULTING IN less of not meet the expectations of pati	 Patient/C Safety Developm services Service Developm 	nent of	 Financial Information – Access and Sharing Compliance 	CAUTIOUS	DHCW will accept a small amount of risk in the provision of secure and resilient high quality digital services. Where we are developing services we will take more risks.						
M PR	health and care IF we fail to provide a comprehen the adoption and use of our Digita	sive digital health an al Services THEN we	and the use of digital to improve ad care record, engage users and drive will not realise value from Digital ced ability to use information to inform	 Reputatio Patient/C Safety Developm services Service Developm 	itizen nent of	 Financial Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk to deliver successful expansion of the digital health and care record with input from users. We will carefully manage the associated corporate risks with a focus on prioritising any patient/citizen				
	care and empower citizens, leadir		-					safety risk concerns.				
м	4. 2023/24 Drive better value and	d outcomes through	innovation	Reputatio	nal on – Access	 Development of services 		DHCW will accept risks in the pursuit of driving				
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.				ng	SEIVILES	OPEN	innovation to achieve better value evidenced by improved outcomes.				
м	 5. 2023/24: Be the trusted strategic partner and a high quality, inclusive, and ambitious organisation IF we are not a Trusted Partner and a high performing inclusive organisation THEN people will 				nal d Wellbeing	 Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk in the pursuit of becoming recognised as a trusted				
PR	not want to work with and for us delivering world leading digital se	RESULTING IN a fail	are to achieve our strategic ambition of					partner and a high performing inclusive organisation.				

M	IISSION 1: Provide a plat	n	RAG STATUS: AMBER Some areas of concern over the				Ambe	er	Amber			
EX	ECUTIVE OWNER: Director of St	RISK APPETITE: CAUTIO				equacy/effectiveness						
RE	PORTING PERIOD: 1 ST April – 31	st October 2023					of the controls in place in proportion to the risks		ASSESSMENT RANCE RATING	KEY CONTR		ASSURANCE
	PRINCIPAL RISK 1								CURRENT SC	ORE	TAR	GET SCORE
S	IF we do not provide robust and so deliver high quality, innovative an			•			12/25 4 (Likely) x 3 (Mo	-	-	6/25 Jnlikely) x 3 Aoderate)		
RISKS	ASSOCIATED CORPORATE RISK	/s		Risk Key:		X New Risk A	ion-iviove	er ↓ Keaucea ∎ II	ncreased			
					CURRENT SCORE			TARGET SCORE				
	DHCW0264 – Data Promise				1	2 (4x3	3)		4 (4x1)			
	DHCW0309**				1	3) 5 (5x:						
	KEY CONTROLS GAPS	ACTION P	LAN (CONTROLS)		ASSURANCE GAPS		ACTION PLAN (ASSURANCE		E) PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER – May 23			
CONTROLS AND ASSURANCE	 New cloud based national health and care data store API Priorities Roadmap Strategy for priority platforms/architecture building blocks Clinical Data Engine Published Open Architecture Standards Code of Conduct for Sharing Personal Information (WASPI) Engagement and communication of the Data Promise Cloud Plan and Business Case Updated Infrastructure Strategy Annual NIS CAF Assessments 	national health and ca 2. Delivery of an API F 3. Continue with the of 4. Implement Clinical 5. Work with stakeho 6. Consultation on the 7. Continued working engagement & comm 8. Develop a prioritise case 9. Further developme Strategy	Priorities Roadmap development of a strategy Data Engine Ider to publish standards e WASPI Code of Conduct with WG to agree	 Reporting production Reporting emerging fr Analysis Ability to standards Reporting of Conduct Commun Monitori Strategy service and 	ications Plan with timescales ng of optimisation of cloud us meets the growing needs of tl reflects technological advanc nual Plan (hosted by DHCW or	ata with ode age he es	 Develop reporting on da Develop and increase the live APIs Develop reporting required. Identify reporting required with strategy Determine reporting required. Produce implementation identify reporting required. Engage with WG to defind for communication Development of enhanced reporting Dialogue with partner of ensure needs are met Board to receive CRU A 	ne number irements rements in quirement n plan and ments ne timesca red cloud rganisation	1. Build of new 2. API Delivery 2. API Delivery 3. Deliverables 6. WASPI Code 7. Progressing. 8. Cloud Strate 10. Cyber Secu approved by th FORWARD LO * Assure and c APIs, documer specifications	v cloud based v team establis s included in IN e of Conductio egy confirmed urity three yea he SHA Board OK PRIORITY: operationalise nt and publish	shed workin MTP n Formal C and Cloud r plan deve cloud base	ng on priority APIs onsultation Council established eloped and

<mark>6/</mark>10

6

Μ	ISSION 2: Deliver high qual	ity techn	ology, digital products and	l services	RAG STATUS: AME Some areas of cond			ŀ	Amber	Amber
EX	ECUTIVE OWNER: Director of Operat	tions	RISK APPETITE: CAUTIOUS		adequacy/effective controls in place in					
RE 20	PORTING PERIOD: 1 ST April – 31 st Oc 23	DATE OF REVIEW: 01 st November	2023	to the risks	proportion	SELF ASSESSMENT ASSURANCE RATING		KEY NTROLS	ASSURANCE	
	PRINCIPAL RISK 2						CURRENT SCO	RE	TAR	GET SCORE
	IF we do not deliver safe, secure, acces deliver and modernise services is comp expectations of patients or professiona	promised RESI	JLTING IN less effective, less sustainab	•			9/25 3 (Possible) x 3 (Mo	derate)	2 (Unlik	4/25 ely) x 2 (Minor)
	ASSOCIATED CORPORATE RISK/S					Risk Key:	★ New Risk 🛏	Non-Mov	ver 🖡 Reduce	ed 1 Increased
RISKS	RISK REFERENCE	SCORE	TARGET SCORE		RISK REFERE	INCE	CURRENT SCORE TARG		GET SCORE	
	DHCW0298 – Delay in LINC		20 (5X4)	6(3X2)		DHCW0280**		15 (5X3) 10 (2		(5)
	DHCW0315**		20 (5X4)	10 (5X2)		DHCW0281**		15 (5X3) 10 (2		(5)
	DHCW0292 – Insufficient HR Capacity (ICT)	16 (4X4)		8 (4X2)		DHCW0282**		15 (5X3) 10 (2		(5)
	DHCW0301**		16 (4X4)	8 (4X2)		DHCW0316 Techr	nical Debt Accumulation	16 (4X4)		2)
	DCHW0278**		15 (5X3)	9 (3X3)		DHCW0317 **		15 (5X3)		2)
	DHCW0277**		15 (5X3)	10 (2X5)		DHCW0304 – NHS	Wales SLA	s SLA 12 (4X3)		(2)
	DHCW0279**		15 (5X3)	10	(2X5)	DHCW0296 – Aller	rgies/ Adverse Reactions	12 (4x3)	8 (4x)	2)
SSURANCE	KEY CONTROLS GAPS	KE	Y CONTROLS ACTION PLAN	ASSURA	NCE GAPS	ACTION PLAN	N (ASSURANCE)	NARRAT	IVE PROVID	ED BY
ILS AND A	Product Strategy WCCIS Strategic Review National Eyecare System Gateway Review Welsh Emergency Care Data Set LINC System RISP System Single Medicine Record ETP Early Adopter	 2. Delivery of the 3. Review outputs 4. Review outputs confirm future and 5. Produce the W 6. Configure, build 7. Complete proct 8. Build Single rect 	elsh Emergency Care Data set d and test new LINC System in readiness for roll out urement and FBC for new RISP system ord in medicines for every patient in Wales across Early adopter sites in Primary Care and	 Approved Product Strat Reporting against progr WCCIS Reporting against progr WEDS Formal approval of Eyer Validation of the Welsh Approved roadmap for LINC Approved FBC for new I Reporting on roll out of Service Management Boar Approved roll out 	ress and annual plan for ress and annual plan for care future arrangements a Emergency Care Data Set the implementation of RISP System f the Single Record to	 2. Ongoing monitor 3. Ongoing monitor 4. Ongoing discussion 5. Implement tools 6. Agreed NHS Walk 7. Engagement with 8. Reporting mecha present at SMB 	prove the product strategy plan ing of progress and annual plan ing of progress and annual plan ons to validate Data set es position on LINC System to Welsh Government on FBC nism and approved project plan proved roll out plan for ETP	Press Parti • Appr agre parti • Prop Prog cons • Oper revie	nership Forum, E roach to progres ed by the SHA Bo ners. tosal to transfer ramme develope ideration by the rations delivery s	o: SHA Board, Local HCW Leadership Day s the LINC Programme bard and wider the Eyecare ed and for SHA Board (May 23) tructure being ngoing focus and

	IISSION 3: Expand the digitan prove health and care	I health and care record	e of digital to	RAG STATUS: AMBER Some areas of concern over the			Amber		Amber	
i	ECUTIVE OWNER: Director of Strateg		RISK APPETITE: MODERATE		adequacy/effectiveness of the controls in place in proportion to the risks			КЕҮ		ASSURANCE
RE	PORTING PERIOD: 1 ST April – 31 st Oct	tober 2023 DATE OF REVIEW: (DATE OF REVIEW: 01 st November 2023			ASS	SURANCE RATING	CONT	ROLS	
	PRINCIPAL RISK 3						CURRENT SCOR	E	TARG	ET SCORE
RISKS	IF we fail to provide a comprehensive d will not realise value from Digital invest citizens, leading to poorer outcomes.						9 /25 3 (Possible) x 3 (Moderate)	2 (5 /25 x 3 (Moderate)
	ASSOCIATED CORPORATE RISK/S			Risk Key:	★ New Risk ↔	Non-M	1over I Reduced 1	Increased		
	ASSOCIATED CORPORATE RISK/S			(CURRENT SCORE	TARGET SCORE				
	DHCW0299 – Supplier capacity to support E	PS			20 (5x4)	6 (3x2)				
	DHCW0300 – Canisc System Phase 2			16 (4x4)			6 (3x2)			
	DHCW0308 - Sustainable funding for NIIAS			12 (3X4)			6 (2X3)			
	DHCW0319 Cumulative Value of spend with	DSPP delivery partner		16 (4X4)			4 (2X2)			
	KEY CONTROLS GAPS	ACTION PLAN (CONTROLS)	ASSURANCE GAPS		ACTION PLAN (ASSURANCE)	PR		N PLAN – NARRATIVE PROVIDED VE OWNER – May 23		
OCONTROLS AND ASSURANCE	 Digital Health Care Record Enhanced WNCR Cancer Improvement Plan NHS App Roll-out/Release Plan 	 Engage with DHCW teams and suppliers, roadmap plan to increase clinical content through APIs Roadmap for enhanced WNCR functionality Develop future phases of the improvement plan Monitor usage of the app 	native and ope 2. User researce to drive priorit enhancements 3. User researce to drive priorit enhancements	s ch and user design ies and s ch and user design ies and	 Develop plans for cloud migration and transition to open architecture Report on user feedback, benefits realisation, and service performance Report on user feedback, benefits realisation, and service performance Report on user feedback, benefits realisation, and service performance 	2. WN estab 4. NH FORV * Dev * Dev	GRESS HIGHLIGHTS NCR Adult transition to live olished IS Wales App public beta li WARD LOOK FOCUS velop common framework velop common framework S Wales App adoption and	aunch. : or user resea : for benefits	earch and use realisation. unctionality.	er design
8/	10									165/260

M	ISSION 4: Drive better value	SION 4: Drive better values and outcomes through innovation								mber	Amber
	ECUTIVE OWNER: Medical Director		RISK APPETITE: OPEN			adequacy/effectiveness of the controls in place in		SELF ASSESSMENT		ΈY	ASSURANCE
RE	PORTING PERIOD: 1 st April – 31 st Octo	ober 2023	DATE OF REVIEW: 01 st Nov	ember	2023	proportion to the risks	A	SSURANCE RATING	CON	TROLS	ASSUKANCE
	PRINCIPAL RISK 4							CURRENT SCORE	:	TAR	GET SCORE
	IF we do not focus on making use of data less sustainable health and care services			lue for citizens RESULTING I	IN	16/25 4 (Likely) x 4 (Majo	r)	3 (Possi	12/25 ble) x 4 (Major)		
			Risk Key:	★ New Risk \leftrightarrow	Non-M	over 🖡 Reduced 🕇 In-	creased				
	ASSOCIATED CORPORATE RISK/S				CURI	RENT SCORE		ТА	RGET SC	ORE	
S S	DHCW0312 - Digital Cost Pressure – Exchange			16 (4x4)			9 (3x3)				
RISKS	DHCW0313 - Digital Cost Pressure – Service	Model Changes	S			16 (4x4)		9 (3x3)			
	DHCW0269 – Switching Service - Data Ware	house			12 (3x4)				6 (3x2)		
	DHCW0263 – Establishment & Functions					12 (4x3)			4 (4x1)		
	DHCW0307 - Switching Service - Responsive	development				12 (4x3)		6 (3x2)			
	DHCW0306 - Switching Service - Succession				12 (4x3)			4 (2x2)			
	DHCW0310 – PowerBI Dashboard Publicatio	on				12 (4x3)		8 (4x2)			
	KEY CONTROLS GAPS	ΑΟΤΙΟ	ON PLAN (CONTROLS)	A	SSURANCE GAPS	ACTION PLAN (ASSURANCE)		RESS ON ACTION PLA ECUTIVE OWNER – M		RRATIVE P	ROVIDED
전도 AND ASSURANCE	 R&I Governance Research Committees Access to secure anonymised Data Health Intelligence portal Analytics Strategy 	arrangements 2. Confirm Re academic par 3. Operationa (SeRP) to ena access to ano 4. Develop He	esearch commitments with tners alise secure research platform ble the provision of secure nymised data ealth Intelligence portal ent of a formal informational	gover arran 2. Agi 3. Roa imple 4. Agi plan f porta 5. Agi	reed plan for ementation of Analytics	 SHA Board approval of R&I governance arrangements Approved Research plan in place Approved Roadmap for implementation of SeRP Management Board approval of HIP plan Approval of plan for Analytics Strategy 	oı • Re pl • D in	&I Governance arrangement perational and engagement eview of formal academic re lace. HCW Information Strategy b movation action plan and IP ealth and Care Research Wa	group first search par eing develo strategy, a	meeting in Q tnership agre oped Contrib long with R&	1 . ements taking ution to all Wales

	IISSION 5: Be the trus mbitious organisation		c partner and a high q	uality, inclu	isive and	RAG STATUS: AMBI Some areas of conce over the			Amber	Amber	
EX	EXECUTIVE OWNER: Director of Finance/Deputy CEO RISK APPETITE: MC					adequacy/effectivenes of the controls in place		SELF ASSE	SSMENT	KEY	
RE	PORTING PERIOD: 1 st April –	- 31 st October 20	D23 DATE OF REVIEW:	1 st November 2	023	in proportion to the	risks	ASSURANC		CONTROL	ASSURANCE
	PRINCIPAL RISK 5							CURRENT	SCORE	TAI	RGET SCORE
			gh performing inclusive organisa ambition of delivering world lea			vith and for us	3	12/25 Possible) x		2 (Unli	8/25 kely) x 4 (Major)
KS	ASSOCIATED CORPORATE R	ISK/S			Risk Key: 🛛 ★ Ne	w Risk \leftrightarrow Non-Mo	ver 🖡	Reduced	Increased		
RISKS	RISK REF	CURRENT SCORE	TARGET SCORE		RISK REF			CURRENT	SCORE	TARGET SCORE	
	DHCW0237 - New requirements impa and plan	act on resources	16 (4X4)	9 (3X3)							
	DHCW0318** 16 (4x4) 1 (1x1)										
	DHCW0259 – Staff Vacancies		12 (3x4)	6 (3x2)							
	KEY CONTROLS GAPS	ΑСΤΙΟ	N PLAN (CONTROLS)	ASSL	JRANCE GAPS	ACTION PLAN (ASSI	URANC	E)		ON ACTION	PLAN – NARRATIVE 23
CONTROLS AND ASSURANCE	 Digital Workforce Review Equality, Diversity and Inclusion (EDI) Strategy Digital Inclusion Charter NHS Wales Digital Maturity position confirmed Foundational Economy Decarbonisation Wellbeing of Future Generations Act Sustainable Funding Model FinOps Function Benefits Management Framework Digital Programme Office Business Continuity Policy Brand Management Guidance Quality Standards DHCW ISO Internal Audit Plan Governance Assurance 	Wales on future sustainable funding models for Digital2.2. EDI Strategy approval by Board3.3. Develop action plan to embed the 6 pledges of the digital inclusion charter3.4. Co-ordinate next steps post maturity surveys4.5. Gather data to monitor the contribution to Foundational Economy5.6. Qualitative and Quantitative reporting to Welsh Government6.7. Work with Wellbeing of future generations act commissioner in readiness for April 202347.8. Work develop a future national and local funding model 9.8.9. Develop a FinOps function for Cloud 11. Establish a digital programme office 13. Develop DHCW Brand Management guidance11.12. Implementation of the Business Continuity Policy 13. Develop DHCW Brand Management guidance12.14. EDI Strategy approval by Board annual quality report13.		 action plan. Regular reportin Strategy Reporting on co Charter Routine Digital N Foundational ec Welsh Governm Delivery of roac plans Reporting progragenerations offic Balanced financi Roadmap for Fir Implement a Bei Establish Govern for Digital Progra Business continut Embed Brand gu Publication of Au External Audit re 	Imap and Decarbonisation action ess to the Wellbeing & Future ce ial plan nOps implementations nefits Management Framework nance and reporting requirements amme office uity plans in place for all teams uidance across DHCW nnual Quality Report	 Continual review plant robust Share and learning from Ongoing reporting and inclusion charter Progress the HIMSS Diguser survey. Monitoring ongoing by Economy Group Reporting on Decarbon Continued engagement Ongoing discussions wi Agreed roll out plan fo Cloud Council Benefits Management Regular reporting on D Progress Reporting on BC progret Continued monitoring of Published External Aud Continued Board engage 	ctice 'king on Digital 'ity Matrix KLAS undational tion plan WBFGA office Government nd reporting to rammes sage ance available	 To date the Board. Digital Inc. Working C Wales firs Work on p foundatio Recent but important arrangem has starte propositic Digital pro- finalised Branding 9 Revised St following Focus in C Risk Appe considera Plans are being im 	lusion Executive Lea Froup established. t phase digital matu- blans relating to dec nal economy are pri- idget setting process- ce of a sustainable in ent and work to und- d which will include on details being finalise cakeholder Engagen Board Development Quality is on the tite and BAF Report tion by the Board in pplemented well acros	een approved by the SHA d agreed as the CEO and rity assessment completed arbonisation, WBFGA and ogressing well. . has highlighted the ational and local funding erstand how to frame this the benefits and value gn and function are being d , work is progressing well ent Plan developed session. for 2023/24 developed for	



DIGITAL HEALTH AND CARE WALES INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

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

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

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

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



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

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



1 IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply		
CORPORATE RISK (ref if appropriate)		n/a	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARDGovernance, leadership and acccountability	
If more than one standard applies, please list below:	

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

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

Page 2 of 6

Author: Alyson Smith Approver: Ifan Evans



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

2 SITUATION/BACKGROUND

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

3 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

Summary

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

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



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

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

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

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

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

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

Cyber Security

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

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threats, to protect our national digital systems.

Plan on a Page

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

Scorecard

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

Operational Measures

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

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

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

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

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

Workforce Measures

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

Personal Development Appraisals Compliance = AMBER. Performance has decreased slightly

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

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

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

4 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

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

5 **RECOMMENDATION**

5.1 The Board is asked to:

DISCUSS /REVIEW the report as representative of the performance of the organisation for the period March - April 2023.

6 APPROVAL / SCRUTINY ROUTE

 Person / Committee / Group who have received or considered this paper prior to this meeting

 PERSON, COMMITTEE OR GROUP
 DATE
 OUTCOME

 DHCW Management Board
 12th May 2023
 Approved

 Image: Committee Committ



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Author: Alyson Smith Approver: Ifan Evans



DIGITAL HEALTH AND CARE WALES BOARD PERFORMANCE MARCH - APRIL 2023

INTEGRATED ORGANISATIONAL PERFORMANCE REPORT

INTRODUCTION

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

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

CONTENTS

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

This report supports the requirements of Management Review as defined in ISO:9001 and other related standards. 175/260



INTEGRATED MEDIUM TERM PLAN AND PERFORMANCE 2022-23

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



MISSIONS -	PORTFOLIOS	Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023	
(The		Open Architecture: Develop implementation plans for embedding Architectural Building Blocks into NHS Wales digital architecture and continue to deploy APIs during the year				
150	Information Availability and Flow		Data Strategy: Develop Data Strategy implementation Plan as part of the National Data Resource.	Data Platform: procurement of national data platform	Deliver the Data Strategy and national dataset developments	
ENABLING DIGITAL TRANSFORMATION	Protecting Patient Data	Information Governance: Develop and promote a We Frame		System access: National Audit Tool Roadmap		
		Cyber: Ongo	oing audit and assurance from Cyber Resilience Unit. C	ontinue to implement DHCW Cyber Service Improver	ment plan	
	Sustainable	Ir	nfrastructure Strategy: Further develop sub strategies			
	Infrastructure	Cloud: Migrate initial services to cloud hosting plus Cloud First procurements				
A. 2000			Data Centres: Review seco	ond data centre provision		
/2 <u>0</u>	Digital		Nursing solution: More feat	tures and further roll out		
	Healthcare		Cancer solution: Initia	al implementation		
EXPANDING the content, availability and	Professional Empowerment	Digital Health Record: Populating the Digital Health Rec discipl		Establish M365 Centre of Excellence	Populating the Digital Health Record and extending test requesting	
functionality of the DIGITAL HEALTH AND CARE RECORD	Digital Patient Empowerment	Digital Services for Patients and the Public: Initial priorities and work packages				
	Public Health		Test Trace Protect: Respond to highest priority con	firmed requirements for Test Trace and Protect		
	Primary,	GP Systems: Manage the transition to new GP systems agreement ensuring support for cluster development plans				
	Community & Mental Health	Welsh Community Care Information System: Strategic Review	Welsh Community Care Information System: Future Roadmap	Mental Health: Functionality and Information sharing	Healthy Child Wales Programme functionality enhancements in the Child Health system	
	Planned and		Covid-19 Recovery: Respond to	Covid-19 recovery initiatives		
Delivering HIGH QUALITY TECHNOLOGY, DATA			are digital developments including the Emergency d	epartment system and supporting the Welsh Ambu	ulance Service	
PRODUCTS AND SERVICES	Unscheduled Care	Welsh Patient Administration System - Betsi Cadwaladr West		Eye Care: integration with national systems	Intensive Care System available for roll out	
				Welsh Patient Administration System - Velindre		
100110 W	N N			adiology Information System Roadmap of decomm		
S-LOUP	Diagnostics	Work with New Radiology and Laboratory Information Programmes: Support the RISP procurements and LINC delivery Endoscopy: Review National Programme requirements as they emerge				
~~;~			s for early e-prescribing and medicines management		agement	
· · · · · · · · · · · · · · · · · · ·	Digital C Medicines	E-Prescribing and Medicines Administration: award contract framework for health boards to buy system for hospitals				
	Research and Innovation		Research and Innovation: Complete development of DHCW R&I Strategy	Delivery of Research a	and Innovation Strategy	
INNOVATION for better outcomes	Value from Data		Analytics: Responding to analytical requirements f	rom Covid-19, Primary Care and Value in Health	177/260	





CYBER

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

CLOUD

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

RESEARCH AND INNOVATION

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

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

THE FOUR STRATEGIC AIMS





MISSION 1: ENABLING DIGITAL TRANSFORMATION



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

1. Enabling Digital Transformation					
Information Availability and Flow	Protecting Patient Data	Sustainable Infrastructure			
 Open Architecture Information Standards Integration Repositories Reference Data National Data Resource (NDR) 	 Information Governance Cyber Security Cyber Resilience 	 Core Infrastructure Cloud Strategy 			

Board Report: Mission 1 – Portfolio 1 – Information Availability and Flow

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MISSION 1: **ENABLING DIGITAL TRANSFORMATION**



PORTFOLIO 1: INFORMATION AVAILABILIT	data, softwa	'open platform' approach to digital innov are and technologies work together, and ho national data resource.		-	
Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022		Q4 JAN-MAR 2023	
OPEN ARCHITECTURE: Develop in	nplementation plans for embedding Architectural Buildi	ng blocks into NHS Wales digital architecture and	continue to depl	oy APIs during the year.	
	DATA STRATEGY: Develop implementation plan as part of the National Data Resource Programme	DATA PLATFORM: procurement of national data platform	DATA STRATEC dataset develo	GY: Deliver the Data Strategy and national pments	
SITUATIONS OF NOTE: Legal Gateway/Availability of Dat	ta work with WG is continuing.				
DELIVERY:				OUTCOMES:	
 API Management: The current phase of the API Project is nearing completion. Testing has completed, assurance is progressing, and knowledge transfer is underpin the Digital Health and Care underway. The Developer Portal is on track to deliver in April 2023. The first consumers of API Management Platform: Terminology (C&VUHB) and WCRS [Documents] (ABUHB) are on track to deliver for April 2023. Care Data Repository (FHIR Façade/Server): The FHIR Façade for WRRS has been developed and is ready for testing. The current development phase of the CDR project is being developed through the Data Platform Setup project. Clinical Data Engine: Interim contractual arrangements are in place. Acute Coronary Syndromes Pathway form being created in partnership with the Wales Cardiac Network; this element of the project is progressing towards assurance activities. 					
 DATA STRATEGY: Priority Data Sets project has re-started and is consulting on scope. It is closely aligned with the Information Governance project which has entered Phase 2 delivery, and the Target Operating Model project which is making good progress on sprint 1 – development of a prioritisation tool and framework; sprint 2 (operational delivery framework) development has commenced. There are 12 federated projects (NHS Wales organisations, Social Care Wales and DHCW). Social Care Wales & Welsh Government Deliberative Engagement exercise discovery phase continues to progress. DATA & ANALYTICS PLATFORM: Infrastructure high-level design work has been completed and is progressing to assurance. The National Data and Analytics platform (NDAP) 'readiness for production' work is also reaching conclusion. Assurance of the platform, and Service Management activities are also progressing. ADVANCED ANALYTICS (AA): The Advanced Analytics strategy was approved by the NDR Programme Board in December 2022. Inaugural AA board meeting held in Feb 2023. TOOLS: GitHub Cymru and SeRP discovery projects have completed, and recommendations reports published. Pilot service projects have been initiated. INNOVATION: Big Data Event held the 29th of March 2023; the aim was to was to engage Wales Health and Care Organisations with many high-profile speakers and a Google Cloud hands-on technical session. CAPABILITY: Phase 2 of the Analytics Learning Programme has completed and been evaluated. Phase 3 (Finance) has been initiated. 					
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MISSION 1: ENABLING DIGITAL TRANSFORMATION



PORTFOLIO 2: Develop an Information Governance and Cyber Security framework, standards and mechanisms that prioritise patient and service user safety and confidentiality, and protect data from external and internal threats, resulting in data remaining secure and NHS Wales being trusted to host patient and service user personal information. Q1 APR-JUN 2022 Q2 JUL-SEP 2022 Q3 OCT-DEC 2022 Q4 JAN-MAR 2023 INFORMATION GOVERNANCE: Develop and promote a Welsh Government National Information SYSTEM ACCESS: National Audit Tool Roadmap

CYBER: Ongoing audit and assurance from Cyber Resilience Unit. Continue to implement DHCW Cyber Service Improvement Plan

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: None

DELIVERY:

15:37:16

INFORMATION GOVERNANCE: A new version 1 of the IG Toolkit Platform has been provided for population of a newly revised IG assurance question set in Quarter 4 22/23 – The New Toolkit provided to Health Boards and Trusts – with further implementation of the new platform in Q1 23/24 for General Practice and Q2 23/24 for Community Pharmacies (to support Electronic Prescribing Services (EPS).

A Framework supporting all Wales IG assurance processes will be defined in the forthcoming DHCW IG Strategy.

A revision of the subscription charging model and fees for the Data Protection Officer (DPO) Service for General Practitioner (GP) have been agreed and accepted by DHCW and GPC Wales.

CYBER: The 3-year Cyber Plan has been approved by the DHCW board. This incorporates the \sim Service Improvement Plan items and the results and Network and Information.

Cyber Resilience Unit – Cyber Assessment Framework completed for 22/23. Plans in place for 23/24 submission to WG for review.

OUTCOMES:

Enabling organisations to better measure their level of compliance against national Information Governance standards and legislation using a new platform with increased functionality based on the Information Commissioners Office (ICO) Accountability Framework.

A more financially sustainable position has been achieved for the DPO Service which will now reflect annual uplifts based on inflationary and service provision.

The DHCW IG Strategy will be completed by Q1 23/24.

The Cyber Improvement Plan will increase protection from threats against user devices and servers, preventing both the likelihood and impact of malicious attacks, provide new technical controls, policies and ways of working that will help DHCW protect the NHS Infrastructure. It will also increase DHCW's cyber posture and national baseline of standards for NHS Wales.

Ensuring that NHS Wales is compliant with Network Information Systems (NIS) regulations.

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

PORTFOLIO 3:

MISSION 1: ENABLING DIGITAL TRANSFORMATION



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Board Report: Mission 1 – Portfolio 3 – Sustainable Infrastructure

Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023
INFRAS	TRUCTURE STRATEGY: Further develop sub strat	egies	
	CLOUD: Migrate initial services to cloud	I hosting plus Cloud First procurements	
	DATA CENTRES: review sec	cond data centre provision	
SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS	:		
Allocated, agreed and on-going funding presents th	e biggest challenge especially with suppliers mov	ving to a revenue-based charging structure.	
Several large vendor contracts have (or will be in 23	3/24) moved from perpetual to subscription licen	cing model.	
DELIVERY:		OUTCOMES:	
INFRASTRUCTURE STRATEGY: Building on the foun by DHCW board in 2021-22. A stream of 5 technica approved through the DHCW Technical Design Auth	strategies are in development and set to be	The sub-strategies will help form a standardised cloud and data strategies. Assisting the cloud firs consumption and product road map developmen	t approach, the journey to greater cloud
CLOUD: The current agreement for MS Cloud has been migrated from a Cloud Solution Provider Program (CSP) to an Enterprise Agreement (EA) style; allowing DHCW a better pricing model. Reserved instances were purchased end of Q4, the net savings will be reinvested into cloud related activities to reduce revenue requirement in 23/24. High Level Design TAD for GCP has been signed off, ICT resources aligned to assist third party create landing zone.		Migration to Cloud aligned to future product roa Wales and provides an increased flexibility and re	
DATA CENTRES: The procurement of the second da continuing with the winning bidder to finalise data availability date. Handover of new hall is expected i by Welsh Government, with agreement to meet the from discretionary, delaying other planned capital p	hall configuration arrangements and n June 2023. Business case partially approved e revenue request, capital will be resourced	The second data centre will further DHCW's reduced cloud-first approach with the ability to decrease to be a second secon	

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



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



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

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

Digital Healthcare Professional Empowerment	Digital Patient Empowerment
Cancer Informatics Programme	Digital Services for Patients and the Public
NHS Wales e-Library	NHS Wales Websites
• Office 365	
Welsh Clinical Portal	
• Electronic Test Requesting (Pathology)	
• Electronic Test Requesting (Radiology)	
• Electronic Test Requesting (New)	
Welsh Information System for Diabetes Management	
Welsh Nursing Care Record	
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MISSION 3:

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



PORTFOLIO 4: DIGITAL HEALTH PROFESSIONAL EMPOWERMENT

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

Q1 APR-JUN 2022 Q2 JUL	-SEP 2022	Q3 OCT-DEC 2022		Q4 JAN-MAR 2023
NURSING SOLUTION: More features and further roll-out				
CANCER SOLUTION: Initial implementation				
DIGITAL HEALTH AND CARE RECORD (DHCR): Populate the DHCR and Requesting to more disciplines.	extend electronic Test Establis	n Microsoft 365 Centre of Excellence	Popula	ate the DHCR and extend Test Requesting

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

Funding for the Cancer services deliverables – to include Palliative Care, Screening Services and Breast Test Wales and other phase 2 requirements – runs to March 2024.

	DELIVERY:	OUTCOMES:
	NURSING SOLUTION: The Welsh Nursing Care Record product transitions beyond its project closure in March 2023, with continuation funded by a Service Level Agreement payable by all 7	No initial impact of the agreed release content swap. Collaborative testing across Wales has proven beneficial prior to the WNCR release that will provide a Single Instance product.
10013 10013 10013	health boards and Velindre trust. At the same time, the WNCR paediatrics project commences.	All Health Boards and Velindre trust have taken SMB approved version preceding Single Instance WNCR, which will now come online in Q2 23/24, aligned to 24/7 support of the vastly simplified product. The Business Continuity solution persists to cover any service outages in the meantime.
	CANCER SOLUTION: Palliative Care Patient Preferences and Palliative Care MDT have been developed and are available across Wales for User Acceptance Testing. Swansea Bay pilot site for Breast Cancer Dataset form and Breast MDT form January – February 2023 whilst dual running in Canisc. Implementation planning, training and testing with Health Boards for the upcoming adoption of the 13 Cancer Dataset and MDT forms across Wales on a tumour site basis.	Swansea Bay are now live with the new solution for Breast Tumours and no longer using Canisc to register these diseases. Agreed plans with Health Boards to adopt Cancer Dataset and MDT forms as follows: April 2023 – Breast, May 2023 – Urology, June 2023 - Lower gastrointestinal (GI), July 2023 - Upper gastrointestinal (GI) and Lung.
	Microsoft 365 CENTRE OF EXCELLENCE:	The CoE capability has been established and the handover to the substantive team is complete. During April the CoE will promote a full range of services to all NHS Wales organisations:
	The CoE has completed consultation and has agreed the service offering with the HBs and trusts. Development of Power Platform apps continues, with a current focus on national apps on behalf of: Lymphoedema Wales Clinical Network; NWSSP (staff movement advice modernisation); Traumatic Stress Wales and the Diabetes Remission Programme.	 Provide support, advice and guidance in current usage and governance of the national M365 licenses Enable Health Board and Trusts M365 development Enable modernising and transforming of key processes and share nationally



MISSION 3:

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



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SITUATIONS OF NOTE:

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

Medium – IM1 data integration for EMIS has been delivered and initial testing complete, with final production testing to be carried out beginning of 23/24. An engagement and deployment plan for EMIS practices needs to be confirmed and MHOL migration activity agreed with Primary Care

Service support model has been agreed & will be implemented for the commencement of Public Beta in conjunction with Kainos, and to be refined/iterated during managed release plan.

NEXT PERIOD: During Q1 23/24 the formal transition from private beta to Public Beta (soft launch, available from app stores) will commence. A new contractual work package will be commissioned to deliver further capability to the App as well as commissioning the revised service support model for Public Beta. Planning will be progressed for an 'Accelerator Conference' to help the team identify early adopters of DSPP best practice technology solutions called DSPP exemplars. Procurement activity to be initiated for a 3rd party accreditation service. Production testing of EMIS IM1 interface to enable planning for EMIS deployment.	RISKS/ISSUES/CONCERNS: No Welsh POL journey in place (requiring NHS England commitment) Funding risk for activity not yet commissioned for Welsh POL. Long-term arrangements for operational service to be confirmed. Transition planning initiated Q4 but will continue throughout 23/24
DELIVERY:	IMPACT:
Private Beta has been positively received with ongoing use beyond the initial live user testing and with a satisfaction rate of over 70% Over 500 repeat prescriptions have been ordered, 3472 GP records viewed, and 100 appointments booked. Feedback and lessons have informed the approach for public beta. All 10 practices involved have agreed to be onboarded for the Public Beta phase.	The NHS Wales App will provide access to key health services through a mobile phone app (Apple and Android platforms) and supporting web services. It is being developed on an agile basis, informed by user research and user design principles. There are over 1 million people in Wales already registered with a NHS Login – the integrated user authentication process within the NHS Wales App. The second phase deployment of the App (Public Beta) will be supported by engagement activity to encourage GP Practice adoption and the availability of functionality within the App (e.g. appointment scheduling and repeat prescriptions). Further extended functionality will be added to the App through 2023 and 2024, using an open architecture approach which will enable third party

services to be launched from or within the App.

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MISSION 2:

DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



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

2. Delivering High Quality Technology, Data Products And Services

Planned and Public Health Primary, Community and Diagnostic **Digital Medicines** Mental Health **Unscheduled** Care • Test, Trace and Protect Endoscopy Welsh Hospital E-Prescribing Pharmacy and Meds Admin Screening Services • Laboratory Information Choose Pharmacy • 111 Integration • Electronic Transfer of Network Cymru Cluster Working • Eye Care Digitisation Integration Prescriptions Welsh Laboratory Information • Child Heath (CYPRiS) Maternity Management System • E-Prescribing and Medicines • Dental E-Referrals WAST Electronic Patient Record Management Radiology Informatics Solution Integration GP Systems • Patient Access to Medications • Welsh Radiology Information Welsh Community • GP Test Requesting System National Medicines Repository **Communication Gateway** • Welsh Community Care Welsh Image Archive Service • Welsh Hospital Stock Welsh Emergency Department Information System Management System • Welsh Point of Care Testing System • Welsh Intensive Care Information System Welsh Patient Administrative System Welsh Patient Referral Service

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



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Improving and expanding the content, availability and functionality of the Digital Health and Care Record, agnostic of health board and OOO PORTFOLIO 6: geographical boundaries and supporting evidence based decision making and connectivity using NHS Wales e-library and Microsoft PUBLIC HEALTH: Office 365 suite **Q1 APR-JUN 2022** Q4 JAN-MAR 2023 Q2 JUL-SEP 2022 Q3 OCT-DEC 2022 TEST, TRACE, PROTECT (TTP): Respond to the highest priority requirements for TTP SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: At the request of Welsh Government the contract tracing solution will be scaled back, DHCW will be providing business as usual support only. Due to the expiration of the Control and Patient Information 3(4) provision it has not been possible to refresh the Immunosuppressed and At Risk Cohorts within the Welsh Immunisation System prior to the Spring Campaign. A legal basis has now been established for the next year and these groups will be updated in May 2023. **OUTCOMES:** WELSH IMMUNISATION SERVICE (WIS): The team have delivered the software changes needed to implement the Spring Campaign at the To Enable the vaccination of citizens in line with JCVI advice, including the use of newly licensed products for this campaign.

On course to achieve the separation of the Welsh Immunisation System and Children and Young Peoples Immunisation System by the end of April.

This is a key enabler for more effective and efficient delivery of both services, and modernisation of the products.



PORTFOLIO 7: PRIMARY, COMMUNITY AND MENTAL HEALTH:

DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES

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

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

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

GP SYSTEMS:

MISSION 2:

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

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

	DELIVERY:	OUTCOMES:
6412023	WCCIS STRATEGIC REVIEW: The Strategic Review Phase 2 work has now concluded. Business case for potential platform replacement is being prepared for submission in April.	The Welsh Community Care Information System provides a single national system for sharing of information securely between health and social care services.
	WCCIS ROADMAP: DHCW has produced a forward plan for the Technology work stream that outlines the work required to complete the associated road map. The roadmap will include information on releases and go-lives. This is now complete and is updated regularly.	
	A MENTAL HEALTH: DHCW has worked with stakeholders to agree the priorities across Community And Mental Health information dataset requirements.	To develop a National service and Information standards for community information services. Stakeholders: Social Care, Community Nursing, Mental Health and Allied Health Professionals.
	GP SYSTEMS: Implementation of new GP Systems Framework Contract. Phase one: Practice choice and migrations complete where applicable.	New Contract in place for practices whose support was due to expire.
	DENTAL REFERRALS: Re-procurement complete and Contract awarded	New Contract in place for community dentists to enable electronic referrals to continue.

MISSION 2:

DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES



PORTFOLIO 8:		evelop, operate and maintain a set of high-quality national d nd unscheduled patient care and management	igital services to enable new models of planned			
Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023			
	COVID-19 RECOVERY: Respond to Covid-19 recovery initiatives					
UNSCHEDULED CARE: Digital developments including the Welsh Emergency Department System and supporting the Welsh Ambulance Service Trust						
WELSH PATIENT ADMINISTRATION SYSTEM: Betsi Cadwaladr	WELSH PATIENT ADMINISTRATION SYSTEM: Velindre					
		EYE CARE: Integration with national systems	INTENSIVE CARE: Development & Testing			

SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:

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

DELIVERY:	OUTCOME:		
WELSH PATIENT ADMINISTRATION SYSTEM (WelshPAS): The WelshPAS has been deployed in Velindre NHS Trust as a single instance PAS, including substantial data migration from the original CaNISC system.	The introduction of WelshPAS and WCP to Velindre enables the final decommissioning of CaNISC. This final phase will take place in stages during the course of the Year as 3rd party users are moved to suitable alternate systems.		
WELSH EMERGENCY DEPARTMENT SYSTEM (WEDS): The only live site implemented in Neath Port Talbot MIU has remained operational with some on-going issues and low confidence in system stability. Significant progress needs to be seen before the system progresses to Morriston ED. Escalation via supplier Executive team has resulted in activity to assess a proposal from the supplier to move away from central infrastructure in the national data centres and instead implement on local on-premises infrastructure. There is also uncertainty regarding proposed DPIF funding.	 The WEDS delay is creating a lack of trust in the supplier and solution by all Health Boards, which may impact the future viability of the project. The supplier had delivered some progress but risk of instability and supplier responsiveness remain critical problems, preventing meaningful engagement with Morriston ED. The proposal for local on-premise implementation requires feasibility assessment from both a commercial and technical perspective. A strategic review has been commissioned to independent consultants to deliver an options appraisal on the future of the National Programme. 		
WELSH INTENSIVE CARE INFORMATION SYSTEM (WICIS): Testing has highlighted issues relating to pathology integration and prescribing which have delayed the implementation schedule. Development and testing is ongoing to help resolve this.	The project and supplier continue to work with pathology colleagues and critical care Pharmacists to develop the solution and find solutions to the problems identified.		

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



	PORTFOLIO 9: DIAGNOSTICS:		Develop, operate and maintain a set of high-quality national digital services t modernisation of diagnostics.					
	Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023				
	WELSH RADIOLOGY INFORMATION SYSTEM: Roadmap for decommissioning							
	WORK WITH N	NEW RADIOLOGY AND LABORATORY INFORMATION	ON SYSTEMS: support the RISP procurements and L	INC delivery				
		ENDOSCOPY: Review National Prog	amme requirements as they emerge					
	SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:							
	LINC status has been escalated through formal chan	nnels and regular updates are provided to Chief I	executive Group, LINC & RISP transitioned to DHCW	/ on the 1st Jan 2023.				
	DELIVERY:		OUTCOMES:					
	Radiology Informatics Solution Programme, RISP: Board, all Health Boards endorsed a recommendati following financial approval the intention is to form	ion that Philips be awarded a contract,	Contract Award is still expected in Q1 2023-2024.					
	Laboratory Informatics Network Cymru, LINC: this Laboratory system has seen delays to the original p the plan from the supplier and production of design the work DHCW needs to undertake.	roject timelines. Further work is required on						
10512023	Welsh Image Archive Service, WIAS: Project is dep Selefore being able to test data migration (Images) a		Two key operational services moved from being on premise to cloud based. The operational services are working effectively in the cloud. WIAS requires the resilient VPN.					
	Endoscopy : Results from Cwm Taf Morgannwg, Hy boards are now available in WRRS for viewing in We boundaries. Enablement of a new Endoscopy cloud LIVE in April 23, with results availability in WCP prop	CP across organisational and geographical reporting system in Betsi Cadwaladr is going	Clinicians treating an individual patient who has had an Endoscopy test in these health boards, can now see the result in WCP, regardless of their NHS Wales organisation. This gives the clinicia					

MISSION 2:

Develop, operate and maintain a set of high-quality national digital services to enable modernisation of medicines management





DELIVERING HIGH QUALITY TECHNOLOGY, DATA, PRODUCTS AND SERVICES

	Q1 APR-JUN 2022	Q2 JUL-SEP 2022		Q3 OCT-DEC 2022		Q4 JAN-MAR 2023		
	Readiness for early e-Prescribing and medicines management sites along with enabling patient medicines management							
	E-PRESCRIBING AND MEDICINES ADMINISTRATION: Award framework for Health Boards to buy system							
S	SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS:							
Digital Medicines	 All health boards have received their Secondary Care e Trusts requests to be submitted to Welsh Government Application Programme Interfaces (API) delivery team Primary Care Electronic Prescription Service (EPS) Tech Community pharmacy system supplier innovation fund Proof of concept completed to safely share medicines 	established, with priority focussed on delivering the nical Proof of Concept (TPoC) progressing. TPoc plan l established to fund EPS development required by sy	APIs needed to support s ned to start in May 2023	econdary care ePMA imp		n teams. Velindre and Welsh Ambulance Service		
 0	DELIVERY:		OUTCOMES:					
Board Report: Mission 2 – Portfolio 10	 SECONDARY CARE ELECTRONIC PRESCRIBING AND MEDIC Procurement project formally closed following the pub All health boards have received their pre-implementati ePMA communities of practice established to share less Application Programme Interfaces (API) delivery team of 	lication of the multi-vendor framework ion team funding letters to begin local procurement a isons learned, best practices and to prepare for ePM/	As implementations acro			ribing it will be possible to improve the way harmacists access and manage the provision of Ith system.		
	 PRIMARY CARE ELECTRONIC PRESCRIPTION SERVICE (EPS): Continuing to work collaboratively with NHS England to implement EPS across Wales. This will enable a GP prescription to be sent to a patient's nominated community pharmacy digitally. This includes working closely with GP system suppliers to complete software development to their products to be EPS compliant. EPS Technical Proof of Concept (TPoC) progressing. TPoC planned for May 2023. Community pharmacy system supplier innovation fund established to fund EPS development required by system suppliers to support EPS use in Wales. 				information between pre	igital communication and sharing of prescription scribing and dispensing systems from GPs and to a community pharmacy of choice.		
Board	SHARED MEDICINES RECORD (SMR): Proof of concept completed to safely share medicines with the SMR					ecord will improve visibility of patients' ontribute to increased patient safety.		
	 PATIENT ACCESS: Discovery phase completed on (1) patient community p App. Welsh language group established to translate medicin Requirements being gathered to enable a push notification 	es information into Welsh when viewing in the NHS	Wales app		community pharmacy an patients to understand w	blication that allows data sharing from GP, d hospital systems to patients. This is to support which medicines to take and when, to record their lems they are experiencing with medicines, and licines are supplied.		

• Requirements being gathered to enable a push notification in the NHS Wales App to inform a patient when their GP prescription is ready for collection

18/41 from their nominated community pharmacy.







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

4. Driving Value And Innovation For Better Outcomes And Value Based Care

Research and Innovation	Value From Data
	 National Data Repository Data and Analytic Services PROMS and PREMS Value in Health

MISSION 4:

DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE



RESEARCH AND	INNOVATION: Delivering research insights ar	d innovation for service improvement.			
Q1 APR-JUN 2022	Q2 JUL-SEP 2022	Q3 OCT-DEC 2022	Q4 JAN-MAR 2023		
	RESEARCH AND INNOVATION: Complete development of DHCW Research & Innovation strategy	Delivery of Researd	ch and Innovation strategy		
SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS: N	eed to secure long-term funding for a dedicated DHCW R&	I resource, funding for the current resource ending in	December 2023.		
DELIVERY:		OUTCOMES:			
The DHCW R&I Governance Process (and associated n Stakeholder Engagement processes) developed, review the R&I Engagement and Operations Group commence	wed and approved by Management Board. Meetings of	All key DHCW R&I activities (requests, projects, programmes, collaborations and partnerships) will be taken forward in a more business-like, transparent and assured way from 1 st April 2023 with adherence to the four thematic principles detailed in the R&I Strategy (Approved Sept 2023).			
Resources for R&I: Head of R&I commenced work in Ja allocated to the team until 31 st March 2023. Support p		Capacity and expertise established within DHCW to take forward the R&I Strategy			
Engagement: R&I presentations to promote and raise BioWales 2023 and contributed to Wales Innovation a the outcomes of the project to Welsh Government col towards outcomes-based agreements in Wales.	ction plan). Workshop also held in December presenting	More effective promotion of the Strategy, our processes for, the sharing of our intent and examples of the impact of work we do.			
Partnerships: Discussions regarding collaborations, clo Metropolitan University (Green Transition Fund), Card University (Centre for Doctoral Training). Welsh DigitT	iff University (AI, Data Science, Medical School), Swansea	Successful joint bids for funding bringing resources into the team. R&I projects being taken forward in key strategic areas (Data Science, AI, Decarbonization, Data 2 Knowledge, clinical informatics etc). Establishment or a possible Welsh DigiTrials resource to support clinical trials and National AI Hub led by Cardiff University			
1st DHCW Annual Report for R&I summarising achieve DHCW, and our key role supporting external R&I studi		Annual Report that can be shared as part of our eng we do.	gagement strategy to promote and raise awareness of what		
U.	IOVATION: Delivery of the Research and Innovation strategitial scoping of opportunities such as find, recruit, follow-up		-		

- Aim 2 Governance structure developed and agreed.
- Aim 3 Initial partnership discussions and exploration of set up of partnership groups
- Aim 4 Development of R&I survey to understand knowledge and experience within DHCW, exploration of training opportunities and presenting R&I opportunities at national events such as BioWales in London.

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MISSION 4:

DRIVING VALUE AND INNOVATION FOR BETTER OUTCOMES AND VALUE BASED CARE



Q1 APR-JUN 2022	Q2 JUL-SEP 2022		Q3 OCT-DEC 2022		Q4 JAN-MAR 2023				
ANAI	LYTICS: Respond to analytical	requirements from CO\	ID-19, Primary Care and Value in He	ealth					
SITUATIONS OF NOTE & RISKS/ISSUES/CONCERNS : None.									
DELIVERY:	OUTCOMES:								
Publication of Prevalence data for 2020/2021 and also 2021/202 Information Portal.		s is The prevalence of identified cone P Practices, Clusters, Health Boards		ored and compared with previous ye					
The All Wales Diabetes Module was released in the Primary Care February.	The impact of this is that the Audit+ module enables GP Practices to identify patients showing pre-diabetes indicators, as well as managing the care of patients that have been diagnosed with diabetes. This will impact on Practices, Clusters, Health Boards & WG.								
Completion of the Digital Economy Act internal audit.	This allows the team to prepare for the formal Digital Economy Act accreditation review. This benefits DHCW & Swansea University.								
Development of the module for Practices to submit their Access QAIF 2022/2023 contract.	Standards for the end of the		vision for patients offered by each P		local HB with appropriate data in rel eholders are the GP Practices, Cluste				
VBHC completed dashboards:		The benefits for e	ach of the dashboards include;						
1. Acquired Brain Injury		 To highlight t health board 	-	ed brain injury patier	nts and make data widely available to				
3 Super Registry		2. To make data	on knee arthroplasty patients avail	able widely to health	boards.				
4. Nyeloma Dashboard		3. To highlight t	he increasing demand on the service	e of liver disease and	pinpoint areas where demand is gre				
5. Epilepsy dashboard		4. To make information on myeloma patients, such as admissions, incidence and survival rates, widely availa health boards.							
			5. To help evaluate the success of the management of epilepsy within primary care						
		Stakeholders for e	each of these dashboards include cli	nicians and other sta	ff working in each specialty area .				



FINANCIAL MANAGEMENT | FINANCIAL HIGHLIGHTS END OF MARCH 2023



DHCW is reporting achievement of all of the key financial indicators for the period

DHCW is reporting the following against its key Financial Performance Indicators:

- Revenue Operational underspend as per forecast of £0.069m after applying the savings target profile.
- Capital Current Spend of £11.731m against CRL of £11.789m.
- PSPP DHCW have paid 98% of non-NHS invoices within 30 days.

INDICATOR	RESULT	SUMMARY
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)		Small operational surplus of £0.069m.
Remain within Capital Resource Limit (To ensure net Capital Spend does not exceed the Capital Resource Limit CRL)		£11.731m spend for period against a capital limit of £11.789m
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)		PSPP target achieved 98% achieved against a target of 95%
Bank Sufficient bank balances		Balance as at 31/03 £1.1m

SUMMARY:

- The organisational month end revenue underspend is currently £0.069m against a forecast of breakeven.
- Capital spend to date is £11.731m of the total CRL of £11.789m.
- PSPP target exceeded @98%
- Cash balance of £1.130m.

Please note that full financial details up to April 2023 are included in SHA Board Papers



Achieved



SUMMARY



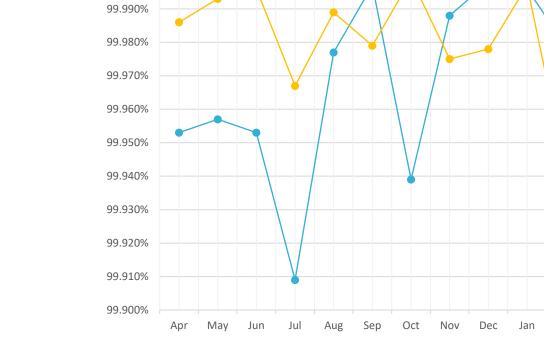
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IT Service Availability in March 2023 was 99.992% with 3 MIs totalling 3.5 hours of disruption across 5 services

IT Service Availability in 2022-23 was 99.977% with

45 MIs totalling 59 instances of

disruption across 23 Services



____ 2021-22 **____** 2022-23

DHCW Service Availability Annual Comparison

Please note that April data will be reflected in the next report so that this report provides an annual perspective to the end of March 2023

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

• The first is tracking the major IT incidents (MIs) reported to Management Board and Board through the IOPR – presenting the availability figure, developing changes to the underlying approach to MI reporting and refining the scope of the current calculation model.

100.000%

• The second is developing a Power BI dashboard to present DHCW's IT Service Availability data.

• The third is exploring the wider service issues around IT Service Availability, e.g. partial availability, start and end times, systematisation of data, Service Category (Critical /Standard), 23/41^{multiple} impacts with staggered restoration, scheduled maintenance windows.





The SCORE CARD presents a high-level view of the business areas which are monitored and presented in greater detail throughout this report. This month there are four indicators which are AMBER, and one as Red: being addressed as detailed in later sections.

Operational Measures:

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- **Operational Service Support** Twelve Major IT Incidents; one SLA breach. 5 x WRIS, 3 x WPAS (two of which affected multiple services), 1 x WCCG, 1 x MPI, 1 x WLIMS and 1 x WCP. IT Service Availability decreased to 99.982% on the month.
- Operational Service Delivery Windows Server 2008 end of extended - 4 servers outstanding, 2 of which are mitigated.
- Cyber Security Assurance increased to 82%. 7 Services are overdue for pen testing
- Service Level Agreement meetings Four meetings took place in March and ten in April, eight meetings were cancelled at the request of the Health Boards and one by mutual agreement due to industrial action.
- Strategic Engagement meetings Two meetings took place in March and none in April.
- 1 of 54 Audit Actions not completed by target date

Workforce Measures:

- Sickness Absence Decreased to 3.11%, by 0.32%. This figure includes 7 Covid-19 related absences. Anxiety, Stress, Depression is the top reason for absence.
- Appraisal Compliance 78%; below Welsh Government target of 85%.
- Statutory and Mandatory Training decreased slightly to 91.3% but remains above target.

	FI	NANCE & WORKFORG	CE	GOVERNANCE & QUALITY			
FINANCE	Small operational overspend of £0.038m	rspend of period against a capital within 30 days		1/54 audit actions not completed by target date	ISO and BS Standards compliant with requirement	e & quality	
WORKFORCE	Sickness absence (actual 3.11%)	Appraisals compliance target = above 85% (achieved 78%)	Statutory and Mandatory Training compliance target = above 85% (achieved 91.3%)	Clinical Risk Management	Corporate Risk Management	GOVERNANCE	
ERVICE DELIVERY	Commercial Services contract management compliant with KPI	Operational Service Support includes some areas which need attention. 12 Major IT Service Incidents, one not resolved within the SLA target	Continue to support NHS Wales recovery	Service Level Agreement performance meetings with stakeholders =14/22 conducted to schedule	Two Strategic Engagement meetings in March, none planned for April	& FEEDBACK	
OPERATIONAL SE	Clinical Assurance and Information Governance requests one FOI responded to outside of KPI. Incidents resolved within KPI	Operational Service Delivery includes some areas which need attention.		Customer Satisfaction Feedback to Local Service Desk target = above 93% (actual 95%)		ENGAGEMENT	

OPERATIONAL SERVICE DELIVERY









There are no escalations from Management Board.

REF	STATUS	ESCALATION	NEXT STEPS /OUTCOME
n/a	n/a	n/a	n/a





APRIL 2023 MANAGEMENT BOARD PERFORMANCE REPORT

Key

PLAN ON A PAGE 2023-24 | PORTFOLIOS

FundedConfidence in availability of funding or budget allocationResource not confirmedLimited confidence in funding or budget allocation



lechyd a Gofal Digidol Cymru Digital Health and Care Wales

					<u> </u>	WALES and care wales
Portfolios	Qtr 1 Apr-Jun 2023	Qtr 2 Jul-Sep 2023	Qtr 3 Oct-Dec 2023	Qtr 4 Jan-Mar 2024	2024-2025	2025-2026
1.1 Data Platform and			Care Data Reposito	pry		
References Services	Establish Data and Analytics Platform	Data and inte	egration Hub			
1.2 Open Architecture	API Roadmap		APIs into pro	oduction	•	
and Interoperability		Platform and Pro	oduct Roadmaps			
1.3 Protecting Patient	Data Promise Programme		Nation	al IG Governance Framework		
Data		National Audit System Award				
1. A Country in a labor of an		Cloud Plan and	Business Case			
1.4 Sustainable and Secure Infrastructure			Cyber Plan			
				Data Centre Move		
2.1 Public Health	Vaccine Transforr					
2.2 Primary, Community			igital Partner for Strategic Program			
and Mental Health		Welsh Comm	unity Care Information System Stra			
				GP Systems Preferred Supplier(s)		_
2.3 Planned and	Welsh Patient Administration across North Wales					
Unscheduled Care		Procure an All Wales	s Maternity system			
	Eye Care Gateway Review and transition arrangements					
2.4 Urgent and Emergency Care	Welsh Emergency system - review outputs of strategic review		Intensive Care Sy	stem roll out		
		New laboratory manageme	nt system readiness (LINC)		Start LINC roll out	Complete LINC roll out
2.5 Diagnostics	New radiology management system business case	New radiology management system readiness (RISP)				Complete RISP roll out
2.6 Digital Medicines	Digital Medicines Transformation (DMT	P) initial stages of: single medicines rec to m		ions, hospital e-prescribing, patient acces	DMTP next stages	DMTP next stages
3.1 Health and Care	Electronic requesting expanded across specialties					
	Future phases of Cancer Informatics Solution				Cancer Improve	ement Plan deliverables
3.2 Patients and the	s and the Develop core functional services			Support and	further development	
Public	5	Onboardir	ng and connection of third party sup	opliers with NHS Wales App core services		
4.1 Research and Innovation	Rules of engagement v	with industry partners Review of academic research partnership and develop a catalogue of commitments				
		Analysis and modelling for Strateg	ic Programmes and Public Health			
4.2 Value from Data		Information and Analytics Strategy		Implement 'Official Statistics' plan		200/260
27/41		Ongoing	priority analytics in Value in Health	and Primary and Community		200/260

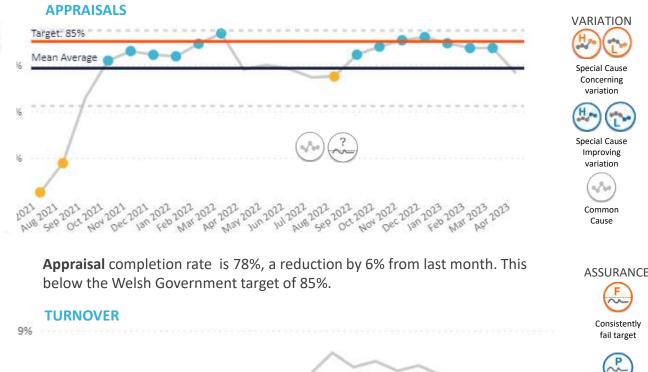


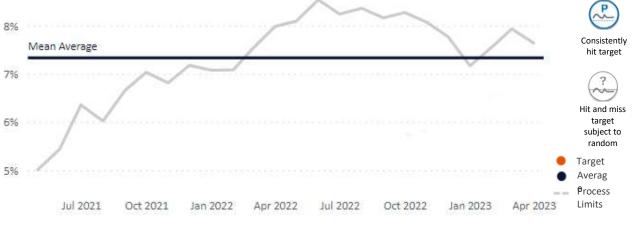
PEOPLE & ORGANISATIONAL DEVELOPMENT | SUMMARY





Statutory and Mandatory Training is 91.3% although a slight decrease by 0.5% from last month, it remains above the Welsh Government target of 85% for NHS Wales.





Turnover is 7.64% - slight reduction of 0.29% from last month

28/4 Please note that Workforce data is subject to cut-off and collection at month-end, which is dependent on stakeholders inside and outside DHCW. Therefore, some information/data may be included in later reports.

lechyd a Gofal Digidol Cymru

Digital Health and Care Wales

WAIFS



29/41

APRIL 2023 BOARD PERFORMANCE REPORT

COMMERCIAL SERVICES | STRATEGIC PROCUREMENT ACTIVITY



The following procurement contracts will be presented to the DHCW Board for approval, as noted in the Schedule.

TITLE	ALL WALES / DHCW INTERNAL	OVERVIEW OF THE SCOPE	INDICATIVE CONTRACT VALUE	INDICATIVE TERM (YEARS)	CONTRACT START DATE	SHA BOARD DATE	CURRENT STATUS
Data Quality System (DQS)	All Wales	Provision of a Data Quality System (DQS) to GP practices for data quality and reporting requirements for national and local initiatives. The software extracts, analyses and presents patient information that is derived from the data held in the practice clinical information system.	£7.2m	3+1+1	01/06/2023	25/05/2023	In plan for May 2023 SHA board approval
MS Dynamics 365 Integrated Telephony Provision	All Wales	Establish a service for an integrated telephony service into the Test, Trace, Protect CRM portal. The contract is to provide a provision in readiness should the TTP CRM need to be re-instated in response to a resurgence of Covid/Pandemic.	£6m	1+1+1	01/07/2023	25/05/2023	In plan for May 2023 SHA board approval
National Messaging Integration	All Wales	Renewal of the licences for the integrated messaging software which enables the various systems and solutions used in and by NHS Wales.	£6m	3	01/07/2023	25/05/2023	In plan for May 2023 SHA board approval
Radiology Imaging System	All Wales	Digital solution to store, access, review and report radiology images.	£60m	10	01/07/2023	TBC	The full business case (FBC) is scheduled for SHA Board approval in May 2023. It is dependent on final approval of the FBC by WG, an extra-ordinary SHA board may be sought.
Welsh Maternity System	All Wales	An All Wales digital Maternity solution to be implemented for December 2024	£7m	5+2	01/01/2024	ТВС	Procurement planning stage- defining a route to market
Clinical Data Engine	DHCW Internal	Digital Health and Care Wales is seeking to procure technical capability to facilitate access to structured clinical data using open standards, and a mechanism for capturing data as a Clinical Data Engine (CDE). This forms a key building block to the open architecture approach as described as a deliverable of the National Data Resource Programme.	£15m	3+1+1	TBC	ТВС	Procurement planning stage- defining a route to market
External Resources Framework	DHCW Internal	Establishment of a Framework Agreement with multiple lots for the provision of individual resources to augment the DHCW teams OR to outsource projects to external organisations.	£12m	4	TBC	ТВС	Awaiting award approval. If proceeding, to be submitted for approval at May 23 SHA Board



OPERATIONAL PERFORMANCE | INCIDENT & SERVICE REQUEST MANAGEMENT



		MAY-22	JUN-22	JUL-22	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23/
Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	1632 (95%)	1301 (94%)	1063 (93%)	1127 (95%)	1204 (96%)	1197 (97%)	1110 (97%)	1378 (97%)	1115 (91%)	1156 (92%)	1079 (98%)	1449 (98%)	1025 (97%)
Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	5322 (97%)	5809 (97%)	5276 (97%)	5777 (98%)	5643 (98%)	5701 (98%)	5401 (99%)	5688 (98%)	4860 (98%)	5089 (98%)	4855 (98%)	5048 (98%)	3307 (98%)
Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)	441 (99%)	403 (96%)	322 (98%)	390 (95%)	453 (98%)	330 (98%)	438 (99%)	409 (96%)	298 (97%)	412 (94%)	675 (99%)	469 (99%)	228 (100%)
Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)	1128 (97%)	1191 (97%)	1026 (98%)	1222 (98%)	1384 (97%)	1388 (99%)	1648 (98%)	1600 (98%)	1280 (98%)	1401 (98%)	1407 (98%)	1388 (98%)	756 (99%)
Total Incidents Resolved (% resolved within timescale)	1156 (97%)	1375 (97%)	1258 (94%)	1027 (97%)	1258 (95%)	1136 (95%)	1291 (94%)	1195 (93%)	992 (94%)	1250 (96%)	1235 (95%)	1315 (94%)	TBC
Total Service Requests Resolved (% resolved within timescale)	1137 (96%)	969 (97%)	971 (96%)	903 (96%)	848 (96%)	1018 (97%)	1056 (97%)	1053 (96%)	789 (94%)	840 (95%)	800 (96%)	1078 (94%)	TBC
METRIC	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEPT-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23
Calls Logged as Incidents (% resolved within timescale)	619 (99%)	645 (99%)	732 (99%)	730 (98%)	681 (100%)	757 (100%)	863 (99%)	949 (100%)	627 (98%)	765 (100%)	800 (99%)	ТВС	TBC
Calls Logged as Service Requests (% resolved within timescale)	178 (99%)	156 (99%)	294 (100%)	308 (100%)	279 (99%)	378 (99%)	331 (99%)	308 (100%)	260 (98%)	382 (100%)	299 (100%)	ТВС	TBC
	the SLA target *(Resolved total can include Incidents logged outside the month) Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month) Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month) Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month) Total Incidents Resolved (% resolved within timescale) Total Service Requests Resolved (% resolved within timescale) METRIC Calls Logged as Incidents (% resolved within timescale)	the SLA target *(Resolved total can include Incidents logged outside the month)1632 (95%)Score denotes % of Service Requests resolved within the SLA target *(Resolved total can include SRs logged outside the month)5322 (97%)Score denotes % of Incidents resolved within the SLA target *(Resolved total can include Incidents logged outside the month)441 (99%)Score 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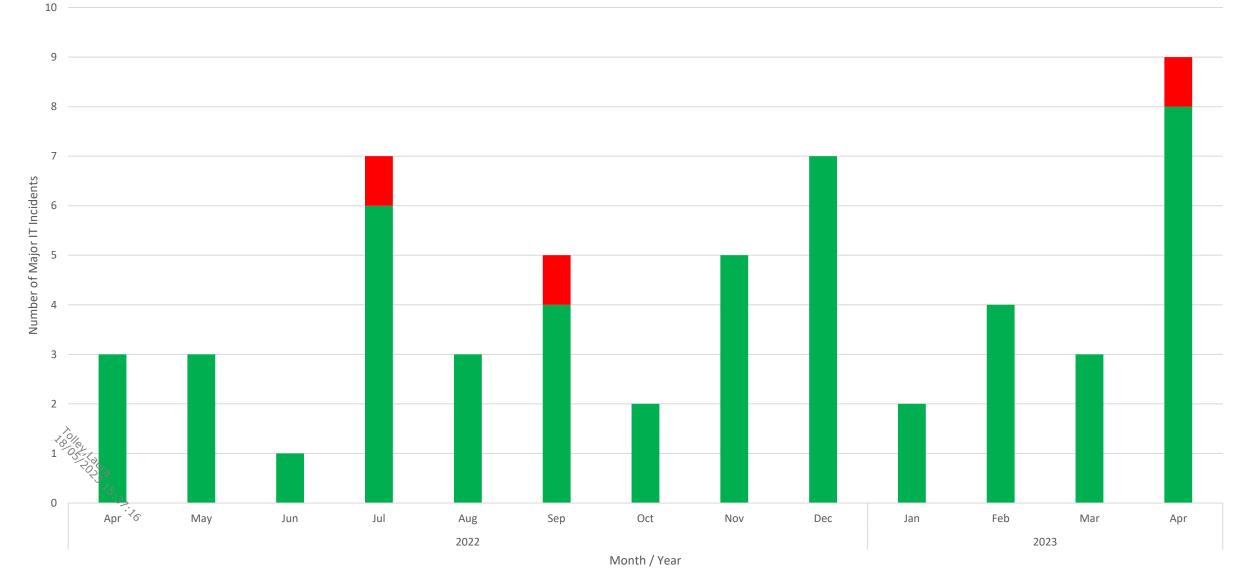
[^]Note April ServicePoint data Preliminary to 23/04.

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OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS





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AFFECTED	WELSH CLINICAL PORTA	L (WCP), MASTER PATIENT INDEX (MPI)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8314492 PROBLEM REF 28449
	44/02/2022 00 22				Time to resolution: 27 Minutes
DATE/TIME LOGGED	14/03/2023 09:22	DATE/TIME RESOLVED 14/03/2023 09:49			Incident did not breach the 8 hour SLA target
DESCRIPTION	Users across NHS Wales	reported that they were unable to use patient search in the	all Wales Instance of Welsh Clini	ical Portal (a core	e function of WCP).
		ertaken by the support teams who identified that a policy had ulted in 10 calls being raised and the service was unavailable		lanned decommi	ssioning. Amending the policy restored access to the patient
SERVICE(S) AFFECTED	WELSH PATIENT ADMIN (WCP), WELSH ADMIN P	ISTRATION SYSTEM (WELSHPAS), WELSH CLINICAL PORTAL ORTAL (WAP)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8335338 PROBLEM REF 28483
	22/02/2022 44.20	DATE /TIME DECONVED 22/02/2022 42:40			Time to resolution: 31 Minutes
DATE/TIME LOGGED	22/03/2023 11:39	DATE/TIME RESOLVED 22/03/2023 12:10			Incident did not breach the 8 hour SLA target
DESCRIPTION	Users in Cwm Taf Morga	nnwg University Health Board reported that they were expe	riencing slowness and system fr	eezing with the	Welsh Patient Administration Service (Welsh PAS).
DESCRIPTION					Welsh Patient Administration Service (Welsh PAS).
SERVICE(S)	The support team failed for 31 minutes.				
SERVICE(S) AFFECTED	The support team failed for 31 minutes. WELSH LABORATORY IN	the service over to the secondary site which restored service	e. Root cause analysis investigati SERVICE LEVEL: CLINICAL	ons continue. A t	otal of 11 calls were received with the service being unavailable
SERVICE(S) AFFECTED	The support team failed for 31 minutes. WELSH LABORATORY IN	the service over to the secondary site which restored service	e. Root cause analysis investigati SERVICE LEVEL: CLINICAL	ons continue. A t	otal of 11 calls were received with the service being unavailable INCIDENT REF 8338905 PROBLEM REF 28492
DESCRIPTION SERVICE(S) AFFECTED DATE/TIME LOGGED DESCRIPTION	The support team failed for 31 minutes. WELSH LABORATORY IN 23/03/2023 11:36	the service over to the secondary site which restored service FORMATION MANAGEMENT SYSTEM (WLIMS) DATE/TIME RESOLVED 23/03/2023 12:39 reported that they were unable to access the Welsh Laborat	e. Root cause analysis investigati SERVICE LEVEL: CLINICAL CRITICAL	P2	incident received with the service being unavailable INCIDENT REF 8338905 PROBLEM REF 28492 Time to resolution: 63 Minutes

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WELSH RADIOLOGY INF	ORMATION SYSTEM (WRIS)^		SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8362680 PROBLEM REF 19407
02/04/2022 47 42		00/04/0000 47 00			Time to resolution: 16 Minute
03/04/2023 17:12	DATE/TIME RESOLVED	03/04/2023 17:28			Incident did not breach the 4 hour SLA targe
This resulted in one call	being received by DHCW with	the service being unavailable	e for 16 minutes.		
The problem record tha	t this incident is related, has b	een reopened and returned t	o an under investigation state.		
WELSH RADIOLOGY INF	ORMATION SYSTEM (WRIS)^		SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8382375 PROBLEM REF 27480
42/04/2022 40 42		42/04/2022 40 45			Time to resolution: 3 Minute
13/04/2023 10:12	DATE/TIME RESOLVED	13/04/2023 10:15			Incident did not breach the 4 hour SLA targe
•	e ,	. ,		es. Investigations i	dentified connections issue between webservice and database
Cwm Taf Morgannwg U	niversity Health Board and the	WRIS team agreed to resolve	e and monitor. A restart of the serv	vice restored conn	ectivity.
This resulted in one call	to the service being unavailab	e for three minutes.			
WELSH RADIOLOGY INF	ORMATION SYSTEM (WRIS)^		SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8389637 PROBLEM REF NO PROBLEM RECORD RAISED
47/04/2022 42.05		47/04/2022 42.20			Time to resolution: 20 Minutes
1//04/2023 12:06	DATE/TIME RESOLVED	1//04/2023 12:26			Incident did not breach the 4 hour SLA targe
Users across all sites wit	hin Cwm Taf Morgannwg Univ	ersity Health Board were una	-	s. It was discovered	that the WRIS Service running in Cwm Taf Morgannwg
University Health Board	had been consuming more an ervice restored access to users.	d more memory and was cau	sing performance issues.		
	03/04/2023 17:12 Users in Swansea Bay U Investigations identified This resulted in one call The problem record that WELSH RADIOLOGY INF 13/04/2023 10:12 Users in Cwm Taf Morga this incident showed sin Cwm Taf Morgannwg U This resulted in one call WELSH RADIOLOGY INF 17/04/2023 12:06	Users in Swansea Bay University Health Board reported Investigations identified that this incident was a recurr This resulted in one call being received by DHCW with The problem record that this incident is related, has be WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^ 13/04/2023 10:12 DATE/TIME RESOLVED Users in Cwm Taf Morgannwg University Health Board this incident showed similarity with local network issue Cwm Taf Morgannwg University Health Board and the This resulted in one call to the service being unavailabl WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^ 17/04/2023 12:06 DATE/TIME RESOLVED	03/04/2023 17:12 DATE/TIME RESOLVED 03/04/2023 17:28 Users in Swansea Bay University Health Board reported that they were unable to loo Investigations identified that this incident was a recurrence of a known error that were this resulted in one call being received by DHCW with the service being unavailable. The problem record that this incident is related, has been reopened and returned the they were unable to loo Investigations identified that this incident is related, has been reopened and returned the they were unable to loo Investigation of the this incident is related, has been reopened and returned the they were unable. The problem record that this incident is related, has been reopened and returned the they are unable. The problem record that this incident system (WRIS)^ 13/04/2023 10:12 DATE/TIME RESOLVED 13/04/2023 10:15 Users in Cwm Taf Morgannwg University Health Board reported that they were unable to resolve this incident showed similarity with local network issues experienced in Aneurin Be Cwm Taf Morgannwg University Health Board and the WRIS team agreed to resolve This resulted in one call to the service being unavailable for three minutes. WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^ 17/04/2023 12:26	WEISH RADIOLOGY INFORMATION SYSTEM (WRIS)^A CRITICAL 03/04/2023 17:12 DATE/TIME RESOLVED 03/04/2023 17:28 Users in Swansea Bay University Health Board reported that they were unable to log in to WRIS in Singleton & Morris Investigations identified that this incident was a recurrence of a known error that was thought to have been fully mit This resulted in one call being received by DHCW with the service being unavailable for 16 minutes. The problem record that this incident is related, has been reopened and returned to an under investigation state. WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)^ SERVICE LEVEL: CLINICAL CRITICAL 13/04/2023 10:12 DATE/TIME RESOLVED 13/04/2023 10:15 Users in Cwm Taf Morgannwg University Health Board reported that they were unable to log in to WRIS across all site this incident showed similarity with local network issues experienced in Aneurin Bevan University Health Board. Cwm Taf Morgannwg University Health Board and the WRIS team agreed to resolve and monitor. A restart of the ser This resulted in one call to the service being unavailable for three minutes. SERVICE LEVEL: CLINICAL CRITICAL 17/04/2023 12:06 DATE/TIME RESOLVED 17/04/2023 12:26	WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)* CRITICAL P1 03/04/2023 17:12 DATE/TIME RESOLVED 03/04/2023 17:28 Users in Swansea Bay University Health Board reported that they were unable to log in to WRIS in Singleton & Morriston Hospitals, instrumvestigations identified that this incident was a recurrence of a known error that was thought to have been fully mitigated in a recent of this resulted in one call being received by DHCW with the service being unavailable for 16 minutes. The problem record that this incident is related, has been reopened and returned to an under investigation state. P1 WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)* SERVICE LEVEL: CLINICAL CRITICAL P1 13/04/2023 10:12 DATE/TIME RESOLVED 13/04/2023 10:15 P1 Users in Cwm Taf Morgannwg University Health Board reported that they were unable to log in to WRIS across all sites. Investigations i this incident showed similarity with local network issues experienced in Aneurin Bevan University Health Board. Investigations i this incident is related on the WRIS team agreed to resolve and monitor. A restart of the service restored connor This resulted in one call to the service being unavailable for three minutes. WELSH RADIOLOGY INFORMATION SYSTEM (WRIS)* SERVICE LEVEL: CLINICAL CRITICAL P1 13/04/2023 10:12 DATE/TIME RESOLVED 13/04/2023 10:15 Investigations i this incident is related to resolve and monitor. A restart of the service restored connor This resulted in one call to the service being unavailable for three minutes. P1

OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS APRIL 2023 (DETAIL) 2 OF 3



SERVICE(S) AFFECTED	WELSH PATIENT ADMINIS	STRATION SERVICE (WELSH PAS)	SERVICE LEVEL: CLINICAL CRITICAL	P2	INCIDENT REF 8392486 PROBLEM REF 28596
	18/04/2022 10:20	DATE/TIME RESOLVED 18/04/2023 10:56			Time to resolution: 26 Minutes
DATE/TIME LOGGED	18/04/2023 10:30	DATE/TIME RESOLVED 18/04/2023 10:56			Incident did not breach the 8 hour SLA target
DESCRIPTION	Users in Cwm Taf Universi	ty Health Board reported that they were experienci	ng slowness and system freezing with t	he Welsh Patient A	dministration Services (Welsh PAS).
	The support team failed th	ne service over to the secondary site which restored	service. Root cause analysis investigati	ons continue.	
	One call was received with	n the service being unavailable for 26 minutes.			
SERVICE(S) AFFECTED		STRATION SYSTEM (WELSH PAS), WELSH CLINICAL I DRTAL (WAP), WELSH NURSING CARE RECORD (WN		P2	INCIDENT REF 8393966 PROBLEM REF 28598
	40/04/2022 44:20				Time to resolution: 26 Minutes
DATE/TIME LOGGED	18/04/2023 14:20	DATE/TIME RESOLVED 18/04/2023 14:46			Incident did not breach the 8 hour SLA target
					incluent did not breach the 8 hour SLA target
DESCRIPTION	Users in Swansea Bay Univ	versity Health Board reported that they were experi	encing slowness and system freezing w	ith the Welsh PAS, v	which caused system function loss within WNCR and WCP.
DESCRIPTION		versity Health Board reported that they were experi he service over to the secondary site which restored	2 , 2		
DESCRIPTION	The support team failed th		service. Root cause analysis investigati		
SERVICE(S)	The support team failed the A total of 11 calls were read	he service over to the secondary site which restored	service. Root cause analysis investigati		
SERVICE(S) AFFECTED	The support team failed the A total of 11 calls were reader of the second secon	ne service over to the secondary site which restored ceived with the service being unavailable for 26 min	service. Root cause analysis investigati utes. SERVICE LEVEL: CLINICAL	ons continue.	which caused system function loss within WNCR and WCP. INCIDENT REF 8395930 PROBLEM REF NO PROBLEM RECORD RAISED
SERVICE(S) AFFECTED	The support team failed the A total of 11 calls were reader of the second secon	he service over to the secondary site which restored ceived with the service being unavailable for 26 min	service. Root cause analysis investigati utes. SERVICE LEVEL: CLINICAL	ons continue.	which caused system function loss within WNCR and WCP. INCIDENT REF 8395930 PROBLEM REF NO PROBLEM RECORD RAISED Time to resolution: 134 Minutes
SERVICE(S) AFFECTED DATE/TIME LOGGED	The support team failed th A total of 11 calls were rea WELSH RADIOLOGY INFO 19/04/2023 10:02	ne service over to the secondary site which restored ceived with the service being unavailable for 26 min	service. Root cause analysis investigati utes. SERVICE LEVEL: CLINICAL CRITICAL	ons continue.	which caused system function loss within WNCR and WCP. INCIDENT REF 8395930 PROBLEM REF NO PROBLEM RECORD RAISED Time to resolution: 134 Minutes
SERVICE(S) AFFECTED DATE/TIME LOGGED DESCRIPTION	The support team failed th A total of 11 calls were red WELSH RADIOLOGY INFO 19/04/2023 10:02 Users in Velindre Cancer O	he service over to the secondary site which restored ceived with the service being unavailable for 26 min RMATION SYSTEM (WRIS)^ DATE/TIME RESOLVED 19/04/2023 12:16	service. Root cause analysis investigati utes. SERVICE LEVEL: CLINICAL CRITICAL	ons continue.	which caused system function loss within WNCR and WCP. INCIDENT REF 8395930 PROBLEM REF NO PROBLEM RECORD RAISED Time to resolution: 134 Minutes
DESCRIPTION SERVICE(S) AFFECTED DATE/TIME LOGGED DESCRIPTION	The support team failed th A total of 11 calls were red WELSH RADIOLOGY INFO 19/04/2023 10:02 Users in Velindre Cancer C Investigations by the DHC	he service over to the secondary site which restored ceived with the service being unavailable for 26 min RMATION SYSTEM (WRIS)^ DATE/TIME RESOLVED 19/04/2023 12:16 Centre reported that they were unable to access WR	service. Root cause analysis investigati utes. SERVICE LEVEL: CLINICAL CRITICAL IS.	ons continue.	which caused system function loss within WNCR and WCP.

OPERATIONAL PERFORMANCE | MAJOR IT INCIDENTS APRIL 2023 (DETAIL) 3 OF 3



SERVICE(S) AFFECTED	WELSH CLINICAL COMMUN (GPTR)	VICATIONS GATEWAY (WC	CG), GP TEST REQUESTING	SERVICE LEVEL: CLINICAL STANDARD	P2	INCIDENT REF 8402692 PROBLEM REF 28627
	24/04/2022 00:22		24/04/2022 11:00			Time to resolution: 98 Minutes
DATE/TIME LOGGED	21/04/2023 09:22	DATE/TIME RESOLVED	21/04/2023 11:00			Incident did not breach the 36 hour SLA target
DESCRIPTION	Users across NHS Wales rep	ported that they were expe	riencing browser related issues	with WCCG and GPTR, and some	e users were unable to log in a	due to this.
	_		fied that the necessary URLs ha . The previous version of the list		d Microsoft Edge compatibilit	y list for Internet Explorer (IE) mode, which caused
	Amending the site list resto	ored access to the patient se	earch function. This resulted in t	wo internal calls being raised ar	nd with the service being impa	acted for 98 minutes.
SERVICE(S) AFFECTED	WELSH RADIOLOGY INFORI	MATION SYSTEM (WRIS)^		SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF 8420079 PROBLEM REF 24799
	20/04/2022 11:24		20/04/2022 11:25			Time to resolution: 11 Minutes
DATE/TIME LOGGED	28/04/2023 11:24	DATE/TIME RESOLVED	28/04/2023 11:35			Incident did not breach the 4 hour SLA target
DESCRIPTION	User in Aneurin Bevan Univ	ersity Health board reporte	ed that they were unable to acce	ess WRIS when logging in.		
	Investigations identified that	at this relates to a known e	rror with the service. The root c	ause of which remains under inv	vestigation, however a restart	of the primary webserver restored access.
	This resulted in one call bein	ng raised and system unava	ailability of 11 minutes.			
SERVICE(S)	MASTER PATIENT INDEX (M	ЛРІ)		SERVICE LEVEL: CLINICAL CRITICAL	P1	INCIDENT REF PROBLEM REF 28532
18 C	00/04/0000		0100110			Time to resolution:
DATE/TIME LOGGED	03/04/2023	DATE/TIME RESOLVED	ONGOING			Incident breached the 4 hour SLA target
DESCRIPTION	as having potential data qua	ality issues. The exercise want which necessitated a roll	as carried out in conjunction wit back of the change. This was im	h our supplier (IBM), following s	successful testing in the UAT e	o records which have been flagged on the system invironment. However, this caused an issue with checking/correcting process has continued for over

OPERATIONAL PERFORMANCE | SERVICE DESK



	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEP-22	OCT-22	NOV-22	DEC-22	JAN-23	FEB-23	MAR-23	APR-23
Total Number of calls logged	16704	17427	16698	17170	17688	19613	21152	21735	14617	17632	17505	19580	16077
% All Abandoned Calls (Threshold 4%)	6.5%	3.9%	10.4%	6.9%	4.0%	4.1%	7.1%	6.6%	5.3%	3.5%	7.5%	3.8%	4.2%
Average Speed of Answer (Seconds) (Target 30 sec)	12	12	14.5	10	10.5	10.5	11.5	12.5	13.5	10.0	19.0	11.5	6.0

SUMMARY:

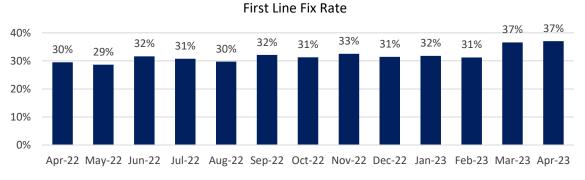
First Line Fix Rate remains at 37% for the second month.

The number of telephone calls received throughout April was 5482.

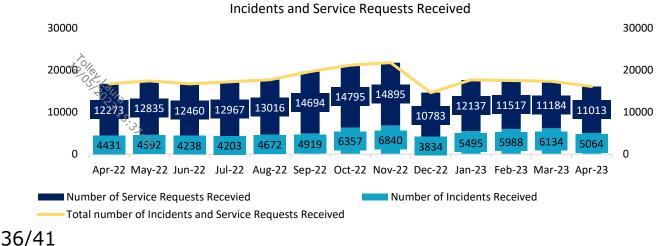
Our abandoned calls rate has risen slightly to 4.2% and is slightly above target. There was were issues with Virgin Media and Cegedim during April.

Staff Satisfaction results have dropped to 93% but remain above target.

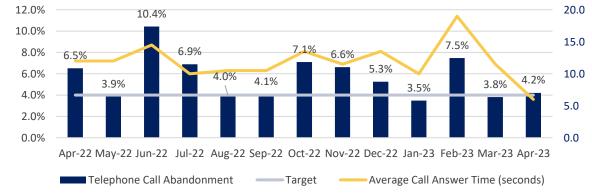
Customer Satisfaction for April was 96% and has risen by 1%.



First Line



Telephone Abandoned Calls



CLICK HERE TO SEE THE RA209/260



CLINICAL AND INFORMATION GOVERNANCE | SUMMARY



CLINICAL INCIDENTS:

There are four incident investigations underway, one of which was logged in March. There have been no new incidents were logged in April

INFORMATION GOVERNANCE:

- In March 2023,
 - DHCW received four Freedom of Information (FOI) Act requests.
 - Seven FOIs were responded to in March 2023.
- In April 2023,
 - DHCW received seven Freedom of Information (FOI) Act requests and one Subject Access Request.
 - Four FOIs and one Subject Access Request were responded to $_{\scriptstyle{>}}\,$ in April 2023.
- All requests were responded to within the statutory timescales. A summary of the responses are provided on the next slide.
- One outstanding request has not been responded to within the statutory timescales and will be reported as part of next month's Management Board report

Response

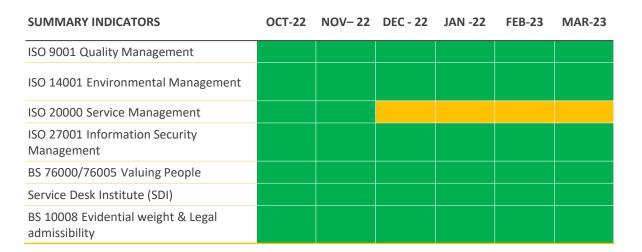


Diagram is for responses to Freedom of Information Act requests only.

Breach OnTime Oreach Oreach Oreach



💯 GOVERNANCE AND QUALITY | QUALITY MANAGEMENT STANDARDS



Summary of External Findings Indicators Key Points:

- ISO 9001 1 new Minor Non-Conformity (NC) from the re-certification audit on Document Control & 1 Opportunity for Improvement (OFI)
- ISO 14001 6 OFI
- ISO 20000 6 open NCs to be reviewed by External Auditor (SGS) prior to certification transfer
- BS 76000 20 open findings, which are mixture of NC's & OFI
- BS 76005 1 open OFI
- ISO 27001 1 Minor NC pending closure

Quality & Regulatory Compliance Summary:

- The agile, risk based internal audit programme has audits provisionally scheduled up to September 2023 with 24 audits completed within the financial year. The audit programme is currently reporting 100% on target. Moving into 2023-24 the programme will continue to target 2 audits per month. A further auditor training course will be run during Q1 2023/24.
- The Duty of Quality in the Health and Social Care (Quality and Engagement) (Wales) Act 2020 came into force on the 1st of April 2023, and the Duty of Quality implementation project plan is progressing in line with expectations. A presentation around the Duty of Quality is being prepared for the next Staff Conference on the 26th and 27th of April 2023. The Quality team will be engaging with directorates during Q1 to allow for preparation of the first 'Always On' Quality report.
- Quality annual plan and Cyber Resilience Unit annual plan have been taken to Management Board and will be taken to Audit & Assurance committee in April.

Andicators -

Quality Improvement Actions List (QIAL) = A proposal has been submitted to Quality Group to form a 'QIAL Action Task & Finish Group' to meet monthly, the objective of the group is to reduce the current open QIALs which have passed their target dates. The group will summarise and escalate the completed actions and positions of QIALs to the IMS and Quality Group monthly. Updates from the group will be included in the Quality Group highlight report.

• Integrated Management System (IMS) Document Reviews = 72% with 28% overdue (target 95%), 10% decrease from last month. Quality Team is working very closely with Authors and Department Heads to ensure that all overdue documentation is reviewed, updated and approved. Overdue documents are being monitored and actioned within the IMS Assurance Group with any concerns and issues being escalated to the Quality Group for further action.

lechyd a Gofal Digidol Cymru Digital Health

and Care Wales

ENGAGEMENT | STRATEGIC ENGAGEMENT



PROGRESS:

- A revised Action Plan was approved at Management Board in March 2023.
- SHA Board development Session planned for April to discuss the Action Plan.
- Internal Audit recommendations have been incorporated into the revised Action Plan.
- Targeting May 2023 SHA Board for approval of Action Plan.
- The Project and Planning teams meet regularly with Health Boards to work with IMTP milestones in order to agree joint plans
- DHCW signed the Digital Inclusion Charter in September 2022. Executive Directors Strategic Session in April 2023 will inform next steps to embed the 6 pledges.
- The Digital Programme Leads meeting initiated with all delivery organisations.
- Job Descriptions drafted for Engagement team.
- Inaugural meeting for Professional Network for Engagement & Comms has been agreed.

STRATEGIC ENGAGEMENT MEETINGS:

DATE	ORGANISATION
10 th March 2023	Velindre University NHS Trust
22 nd March 2023	Powys Teaching Health Board
3 rd May 2023	Welsh Ambulance Service Trust
10 th May 2023	Public Health Wales
24 th May 2023	Hywel Dda University Health Board
21 st June 2023	Health Education And Improvement Wales
28 th June 2023	Betsi Cadwaladr University Health Board
5 th July 2023	Cwm Taf Morgannwg University Health Board
6 th July 2023	NHS Wales Shared Services Partnership
31 st July 2023	Cardiff and Vale University Health Board
13 th September 2023	Aneurin Bevan University Health Board
4 th October 2023	Powys Teaching Health Board

-	
DATE	ORGANISATION
6 th March 2023	Public Health Wales (PHW)
17 th March 2023	National Imagine Academy Wales (NIAW)
23 rd March 2023	Velindre University NHS Trust (VUNHST)
31 st March 2023	Welsh Ambulance Services NHS Trust (WAST)
4 th April 2023	Finance Delivery Unit (FDU)
6 th April 2023	Aneurin Bevan University Health Board (ABUHB)
11 th April 2023	Powys Teaching Health Board (PTHB)
14 th April 2023	Betsi Cadwaladr University Health Board (BCUHB)
17 th April 2023	Cardiff & Vale University Health Board (CVUHB)
19 th April 2023	Swansea Bay University Health Board (SBUHB)
20 th April 2023	Hywel Dda University Health Board (HDUHB)
21 st April 2023	Velindre University NHS Trust (VUNHST)
24 th April 2023	Health Education and Improvement Wales (HEIW)
24 th April 2023	Cwm Taf Morgannwg University Health Board (CTMUHB)
27 th April 2023	Llais (was Community Health Councils)
27 th April 2023	NHS Wales Health Collaborative
28 th April 2023	NHS Wales Shared Services Partnership (NWSSP)
3 rd May 2023	Cardiff & Vale University Health Board (CVUHB)
5 th May 2023	Public Health Wales (PHW)
11 th May 2023	Welsh Ambulance Services NHS Trust (WAST)

SERVICE LEVEL AGREEMENT / SERVICE REVIEW MEETINGS:

 Meeting cancellations at the request of the health board, aside from DHCW's meeting with WAST on the 2nd March 2023, which was cancelled by both parties, due to industrial action and other considerations.



40/41

SUMMARY:

Customer Satisfaction levels remain above target at 95%.

SBU HQ Baglan Polite, professionalism, understanding

Hywel Dda University Health Board

My problem was resolved quickly and efficiently by the lovely lady I spoke to, she was very patient and friendly. The service was easy to use:

NWSSP - Cwmbran House (Pontypool)

person who dealt with my call was very friendly and helpful, got me set back up in no time at all \cdot

W98022 - Cwmtawe Medical Group (vSd)

Very helpful, quick response to the issue, generally very conscientious telephone manner, explained every step in detail, made the process very simple and solved the problem quickly.

W95063 - Heathbridge House (vSd)

Prompt and easy to use Call handler was excellent and helped me to resolve my issue I have had several contact with the Helpdesk over the last few weeks and my issue has been resolved each time. The support offered has been excellent on each occasion.

W97040⁻¹ Ely Bridge Surgery (vCd)

The person that I spoke to was very helpful and solved the issue that I had \cdot I had a mind blank and forgot my Nadex but the person that I was speaking to was very patient and reassuring



-----Customer Satisfaction Target ------Customer Dissatisfaction

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Digital Health and Care Wales

April 2023 Board Performance Report

Engagement | Business Change Team - Feedback



"It's easy once you know where things are, I've surprised myself with how quickly I've picked it up. The skin bundles are really easy to do and self-explanatory when you read the questions." - Cwm Taf Morgannwg (WNCR)/

"I hated it yesterday morning, but by the afternoon I absolutely loved it." - Cwm Taf Morgannwg (WNCR)

"I am dyslexic and find the spelling prompts really helpful. This has improved my confidence." – Cwm Taf Morgannwg (WNCR) "I thought I was going to struggle, but it's easy and I'm not duplicating work anymore." – Cwm Taf Morgannwg (WNCR)

"This system has made me work more efficiently, after every rounding I instantly complete the RA whereas previously on paper I would complete later on." - Cwm Taf Morgannwg (WNCR)



Diolch!



DIGITAL HEALTH AND CARE WALES FINANCE REPORT FOR THE PERIOD ENDED 30 APRIL 2023

Agenda 6.4 Item

Name of Meeting	SHA Board
Date of Meeting	25 May 2023

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

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

Purpose of the Report	For Noting
Recommendation	
The Board is being asked to:	
NOTE the contents of the fina	ancial report for April 30th 2023, the actions taken to ensure the
achievement of key financial	targets and the current status of 2022/23 financial accounts.
Te let te	



1. IMPACT ASSESSMENT

STRATEGIC OBJECTIVE	All Objectives apply		
CORPORATE RISK (ref if appropriate)		N/A	

WELL-BEING OF FUTURE GENERATIONS ACT	A Healthier Wales
If more than one standard applies, please list below:	

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

HEALTH CARE STANDARD	N/A		
If more than one standard applies, please list below: This is not a policy but a planning framework.			

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

Workforce EQIA page

No, there are no specific quality and safety implications related to the activity outlined in this report.		
No, there are no specific legal implications related to the activity outlined in this report.		
Yes, please see detail below		
No, there is no direct impact on resources as a result of the activity outlined in this report.		
No. there are no specific socio-economic implications related to the activity outlined in this report		
No, there is no specific research and innovation implications relating to the activity outlined within this report		

Board Finance Report –April Performance



Acronyms				
DHCW	Digital Health and Care Wales	DPIF	Digital Priority Investment Fund	
SLA	Service Level Agreement	PSPP	Public Sector Payment Policy	
DSPP	Digital Services for Patients & Public	NDR	National Data Resource	
VAT	Value Added Tax	HMRC	His Majesty's Revenue & Customs	
IM&T	Information Management & Technology	LINC	Laboratory Information Network Cymru	
RISP	Radiology Informatics System Procurement			

1. EXECUTIVE SUMMARY

The purpose of this report is to present DHCWs financial position for the year ending March 31st 2023 and assess the key financial projections, risks and opportunities for 2023/24. The report also advises the Board of financial performance and issues of the current financial year to April 30th 2023.

DHCW receives funding to support 3 main activities:

- Ongoing provision of core services via Welsh Government & NHS organisation's (which is delegated to directorate budgets).
- COVID-19 Response systems & activity (supported as agreed with Welsh Government) and
- Welsh Government Digital Priority Investment Fund allocations to support discrete development and implementation programmes & projects.

DHCW is required by statutory provision not to breach its financial duty (to secure that its expenditure does not exceed the aggregate of its resource allocations and income received). This duty applies to both capital and revenue resource allocations.

Key Statutory Financial Performance indicators, they can be brigaded as follows:

The two key statutory financial duties are:

- To remain within its Revenue Resource Limit
- To remain within its Capital Resource Limit

Additional financial targets are:

• Public Sector Payment Policy (PSPP): The objective for the organisation All NHS Wales bodies are required to pay their non-NHS creditors in accordance with HM Treasury's public sector payment compliance target. This target is to pay 95% of non-NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is the later) unless other payment terms have been agreed with the supplier.

Cash: Manage residual year end balances to a maximum of £2m.

Board Finance Report – April Performance

Page 3 of 8

Author: Mark Cox Approver: Claire Osmundsen-Little



1.1 Financial Performance April 1st 2022 – March 31st 2023

2022/23 Financial Performance Overview

Subject to audit, the organisation is reporting achievement of all financial targets for the financial year with following pre audit results:

- Revenue £0.073m underspend
- Capital £0.088m underspend
- PSPP target exceeded @98%
- End of Year Cash balance of £1.13m (under the notional £2m ceiling).

Core Operations: DHCW is reporting a revenue underspend of breakeven £0.009m for the period to March 31st which is subject to final agreement from Audit.

The target Public Sector Payment Policy (PSPP) target has been exceeded with 98% of non-NHS invoices being paid within 30 days.

Cash balance of £1.13m as at March 31st.

COVID-19: DHCW received £9.128m funding and £0.167m additional pay award funding for Covid and expended £9.233m throughout the year resulting in a small underspend of £0.062m

Digital Priority Investment Fund: £31.4m spend has been recorded against schemes to March resulting in a year end underspend of £0.001m.

Capital: Spend at year end totalled £11.701m of the total CRL of £11.789m resulting in a year end underspend of £0.088m.

2022/23 Financial Accounts

The draft 2022/23 Financial Accounts have now been submitted to Welsh Government. The draft was presented to Board members and later to Audit & Assurance Committee on May 4th before submission to Welsh Government on May 5th.

The final audited accounts for 2022-23 will be submitted to be approved by the Audit Committee and the Board on 27th July before submission to the Welsh Government on 31st July.

Board Finance Report – April Performance

Page 4 of 8

Author: Mark Cox Approver: Claire Osmundsen-Little



2.1 Financial Performance April 1st 2023 – April 30th 2023

2023/24 Financial Overview

The initial IMTP forecast presented that whilst DHCW met its statutory financial targets for 2022/23, the financial challenges the organisation is facing relating to addressing its underlying position including emerging price pressures, growth in demand for support for core operations, increasing cyber threats, and the Digital Priority Investment Fund (DPIF) initiatives transitioning to live services. This necessitated notification to Welsh Government of a current forecast IMTP deficit position (£1.9m via a formal Accountable Officer published on March 17th (see Appendix A).

Following on from this letter Welsh Government issued a response dated 31st March (see Appendix B) highlighting, that DHCW has been working on several mitigating actions and since our initial letter and discussions have been ongoing with Health Boards and Trusts to address the financial challenges the organisation has identified and requested that "firm actions and agreements are concluded urgently".

Whilst DHCW is not statutorily required to submit a three year balanced IMTP, however, in the absence of a balanced IMTP there was a request for DHCW to submit a balanced Annual Plan.

DHCW Executives undertook a detailed review and a number of choices and actions were considered to enable DHCW to deliver a balanced Annual Plan.

•	Additional Energy and Procurement Savings	R	£0.200m
•	Clinical Financing Efficiencies	R	£0.200m
•	Further Rationalisation in Estates	R	£0.100m
•	Additional Pay Efficiencies	NR	£0.800m
•	Other Savings	NR	£0.552m

The initiatives have been added to the DHCW savings plan and will be monitored as part the established monitoring process.

Following finalisation of the SLA funded positions DHCW will resubmit an Annual Plan with a forecast balance position. Together with WG Chief Digital Officer over the forthcoming year DHCW will work towards a future funding model that reflects the requirements now that the organisation is established and defining it new operating model.

Board Finance Report – April Performance

Page 5 of 8

Author: Mark Cox Approver: Claire Osmundsen-Little



2023/24 April Financial Performance

- **Core Operations**: DHCW is reporting forecast achievement of all financial targets with performance summarized as follows:
 - Revenue performance: DHCW is reporting a revenue underspend of £0.038m for the period to April 30th.
 - Capital performance: spend to date is £0.751m of the total Capital Resource Limit (CRL) of £10.911m.
 - The target Public Sector Payment Policy (PSPP) of 95% has been exceeded with 99% of non-NHS invoices being paid within 30 days.
 - Savings: The initial £2.4m savings target has been supplemented by a further £1.9m requirement to support the organisations breakeven position with an in month overachievement of £0.034m against plan for the period.
 - Forecast End of Year position: DHCW is forecasting breakeven position for revenue and breakeven for capital.
 - Cash Management Cash balances stood at £2.3m at the end of April (a slight increase of £1.3m from March). The intention is to minimise cash balances with an end of year target to a maximum of £2m.
 - Financial Risk Identified risks include:
 - General Digital Inflation The underlying digital price changes continue to be identified, quantified and managed.
 - Under delivery of Saving Schemes Savings programme will be continually monitored with opportunities for over achievements identified.
 - Disputed SLA Risk reflects all currently unsigned SLA's to be resolved with organisations.
 - Opportunities The Microsoft VAT recovery exercise has entered an extremely technical phase with queries raised related to system architecture and operating model. DHCW continues to work with our tax advisors and HMRC in order to reach a positive outcome.
 - **COVID-19**: The revised revenue allocation to support COVID 19 Digital Solutions is £8.0m. To April £0.4m (5%) of revenue allocation had been spent with an increasing expenditure run rate dependent on letter and text messaging requirement for the year.
 - **Digital Priority Investment Fund:** Revenue funding of £38.4m and capital funding of £8.3m (after disbursements to other NHS organisations). Management of project spend profiles remain a key activity with continued focus upon steady state funding once transition to service has been completed. DHCW is awaiting confirmation of the recent submission of the NDR business case and funding letters relating to the cyber and data centre requirements.

In terms of pipeline DPIF developments, the transition of the National Digital Eye Care Programme to DHCW has been agreed in principle and is subject to review in terms of readiness and funding. It is a Welsh Government programme of work in place to digitise the Ophthalmology Electronic Patient Record [EPR] and Referral processes across NHS Wales. The

Board Finance Report – April Performance

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National programme is currently being delivered by Cardiff and Vale University Health Board [CaVUHB] on behalf of the Welsh Government, all Welsh Local Health Boards [LHBs] and Primary care Optometrists. Once the review has been satisfactorily concluded formal transition will occur with the appropriate financial impact reflected within DHCW plans and forecast.

HIGH LEVEL PERFORMANCE AGAINST KEY TARGETS

The following table presents a summary indicator of performance against key financial targets.

Movement indicators articulate a positive movement (upwards arrow), negative movement (downwards arrow) or no movement (sideways arrow). As this is the first reporting period no movement has been logged.

Кеу	RAG
Good Performance /On Target	
Management intervention required	
Target materially missed or at risk – Director intervention required	

Table 1:Performance against KPI's

Indicator	Cumulative Performance	Forecast outlook	Comment
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.038m	£0.0m Breakeven	Small period operational overspend of £0.038m has been recorded to the end of April. DHCW is forecast to breakeven by the end of the
	Movement	Movement	financial year.
Remain within Capital Expenditure Limit	£0.0m Underspend	Breakeven	The current capital funding
(To ensure net Capital Spend does not exceed the Capital Expenditure Limit)	$\langle \rightarrow \rangle$	$\langle \rightarrow \rangle$	envelope is £10.911m, DHCW is reporting a £0.751m capital spend to date.
	Movement	Movement	
Public Sector Payment Policy	99%	95%	
(To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)		\iff	PSPP target achieved. Target – 95%, Actual 99%.
	Movement	Movement	
Cash Balances	£2.3m Increase from £1.2m	Positive Cash Balance <£2m	Cash balance on April 30th has increased in month by £1.2m.
Appropriate balances to meet creditor requirements		\longleftrightarrow	Cash balances will continue to be managed down to the end
Board Finance Report –April Performance	Page 7	of 8	Author: Mark Cox

Approver: Claire Osmundsen-Little



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of year target of £2m.

3 RECOMMENDATION

The Board is being asked to:

NOTE the contents of the financial report for April 30th 2023, the actions taken to ensure the achievement of key financial targets and the current status of 2022/23 financial accounts.

4 APPROVAL/SCRUITINY

Person / Committee / Group who ha	ve received or conside	red this paper prior to this meeting
PERSON, COMMITTEE OR GROUP	DATE	OUTCOME



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Tŷ Glan-yr-Afon 21 Cowbridge Road East, Cardiff CF11 9AD

Judith Paget NHS Wales Chief Executive/ Director General Health and Social Services Group Welsh Government Cathays Park Cardiff CF10 3NQ

17th March 2023

223/260

Dear Judith,

Re: DHCW Integrated Medium Term Plan 2023/24 – 2026/27

DHCW is forecast to meet its statutory financial targets for 2022/23. However the financial challenges the organisation is facing relating to addressing its underlying position and also the emerging price pressures and growth to support its core operations, increasing cyber threats, and the Digital Priority Investment Fund (DPIF) initiatives transitioning to live services, necessitate notification of a current forecast IMTP deficit position.

In 2023/24 there are unavoidable priorities including the Data Centre move and national cyber investments, where we have worked collectively with the WG NHS Chief Digital Officer to find a workable solution. Equally DHCW has increased the SLA with Health Boards and Trusts to ensure financial sustainability in key areas of Digital. This letter details our current status and underlying deficit position, our confirmed and assumed funding position and details the implications for three core areas:

Core operations
 Digital Priorities Investment Fund
 Covid 19

It will highlight the actions we are taking to bridge the funding gap, but conclude that we anticipate a gap relating primarily to unavoidable energy and digital price costs pressures which will mean that we are unable to balance the plan.

1 Financial Year 2022/23

DHCW will end this financial year with a balanced position, this is supported via non recurrent staff vacancies now recruited to as the SHA is fully up and running. This has allowed the organisation to meet its underlying pressure and energy costs emerging during the year whilst delivering a recurrent savings plan of £1.1m.

As part of the organisations national digital leadership considerable progress has been made in ensuring the appropriate level of VAT recovery has been determined to help support system wide challenges (including producing an offsetting LINC Programme recovery position totalling £2.3m).

DHCW has also provided further leadership as part of the coordinating response to the recent cyber security incident effecting the GP Out of Hours system provided by OneAdvanced. The quick turnaround allowed for cost effective mitigation actions to be completed and as a consequence avoiding considerable costs and service impact across the system.





2 Overview of Funding Sources

DHCW has a complex funding mechanism via multiple streams across services (with multiple funding sources both central & NHS) and non-recurrent programmes. Key funding sources include:

- Welsh Government Core Allocation
- Welsh Government Primary Care IM&T Allocation
- NHS Wales Service Level Agreements
- Welsh Government Digital Priority Investment Fund
- COVID 19 Digital Solutions

3 2023/24 IMTP Funding Assumption

The current assessment of funding to be incorporated within the IMTP for 2023/24 totals £162.4m. This includes an £8.7m increase in NHS Wales SLA to support the All Wales Microsoft licence costs and Digital Services. Primary Care IM&T increases reflect GP licencing cost increases.

Source of Funds	2022/23	2023/24	Increase	Increase	Observation
Source of Fullus	£m	£m	£m	%	Observation
Recurrent					
Welsh Government - Core	49.502	50.805	1.303	3%	Confirmed 17th February
Welsh Government - Primary Care IM&T	15.817	16.967	1.150	7%	Confirmed 17th February
Welsh Government - Depreciation	10.122	9.484	-0.638	-6%	Confirmed 17th February
NHS Wales - SLA	9.380	15.686	6.306	67%	Awaiting Confirmation
All Wales Digital Licensing	23.657	26.010	2.353	10%	Awaiting Confirmation
Total	108.478	118.952	10.474	10%	
COVID-19 Response					
Test, Trace & Protect	3.603	1.500	-2.103	-58%	Confirmed 7th February
Vaccination	5.525	6.500	0.975	18%	Confirmed 7th February
Total	9.128	8.000	-1.128	-12%	
Digital Priority investment Fund					
Allocation	33.300	35.456	2.156	6%	Position agreed 3 rd March
Total	33.300	35.456	2.156	6%	
Grand Total Funding	150.906	162.408	11.502	8%	



225/260

4 Core Operations

The core operations encompass the ongoing activities to deliver services and the functions of the SHA.

4.1 Underlying Position

DHCW is carrying forward an underlying deficit of £1.3m into 2023/24. The position incorporates cost pressures resulting from growth in requirements within:

Historic Healthcare Through Technology/Efficiency Through Technology Fund instigated investments generating increasing revenue pressures in:

• **Choose Pharmacy (£0.5m)** -The Choose Pharmacy platform was developed by NHS Wales Informatics Service (NWIS), the predecessor of DHCW, in 2012-13 as part of a Welsh Government project to establish community pharmacy as the first port of call for common ailments following a Programme for Government commitment in 2011.

Usage of the system has grown from 32 pilot pharmacies in 2013 to 705 of the 710 pharmacies in Wales in 2020, with the number of consultations increasing from 311 in 2013 to 533,239 in 2022 resulting in greater staff and digital infrastructure requirements whilst producing significant benefits in primary care by avoiding the need to be seen at GP Surgeries with the resultant time gains.

• Welsh Care Records Service (£0.2m) – Data growth requiring additional storage, licencing and backups.

Legacy Funding arrangements (£0.6m) – Historical funding arrangements (sometimes over 10 years old) may not have clear consistency between cost drivers of current service models and underpinning activity. Consequently, there has not been a provision for growth. Although DHCW has tried to address emerging pressures as part of the 2023/24 SLA process, a more holistic approach will be required across all services provided.

During 2022/23 the underlying pressures were mitigated using non recurrent savings, there is a need to address recurrently in part via efficiencies/savings and via appropriate charging to organisations who receive the service/benefit.

4.2 Emerging Issues & Pressures

Following the initial drafting of the organisations IMTP, the financial plan has revealed significant pressures which are over and above those manageable via mitigating savings and efficiency plans without the removal of key strategic deliverables or service degradation.

This information has enabled DHCW to identify a revenue funding gap for the three years within the plan, currently assessed at ± 1.9 m, ± 2.0 m and ± 2.5 m for the financial years 2023/24 - 2025/26 respectively.

Considerable pressures relate to unavoidable cost increases (such as general inflation, growth, and supplier cost increases). In particular, the need for the organisation to "self fund" energy cost increases out of its core allocation (as opposed to central funding options in 2022/23) now means that an assessed 1.9% of core funding will be required to support this, decreasing available funds for service provision pressures.



Tŷ Glan-yr-Afon 21 Cowbridge Road East, Cardiff CF11 9AD

Ensuring interoperability amongst an ever-increasing number of digital services has also presented material pressures not only in the requirement for integration staffing resource but also third party supporting solutions.

DHCW has identified these unavoidable costs:

- a) Inflationary pressures made up of energy and digital inflation (£4.7m) This pressure incorporates general inflation, energy price increases, digital sector specific issues such as software licencing linked to exchange rates, digital price model changes and the direction of travel from capital based charging to more subscription based revenue models.
- b) **Service Growth** (£1.8m) This pressure reflects the additional requirement as a result of system and user demand such as network bandwidth requirements to support agile working, increased infrastructure licensing requirements and growth in applications requiring interoperability/integration resource.
- c) Data centre move (£1.6m) A Business Justification Case (BJC) detailing the requirement for Capital and Revenue funding for the Data Centre Two Transition Project has been developed. This is required to provide continuity of digital services resulting from the expiration of the current data centre contract in June 2023. The total Capital funding requirement of £0.8m will be sourced from our internal discretionary capital funding and revenue costs sourced non recurrently via DPIF.
- d) **Cyber Resilience Investment Plan (£0.7m)** DHCW has developed a 3-year Cyber Security plan which lays out various activities to improve its security posture to meet an acceptable, base level of Cyber and Information Security. This base-level of security has been derived from the Security of Network & Information Systems Regulations (NIS Regulations). To successfully deliver the key objectives, the plan also highlights the critical investment and resources required by DHCW for the Financial Year 2023-2024, to cover the cost of establishing and resourcing this requirement. The total Capital funding requirement is £0.974m and a recurrent total revenue requirement is £1.66m. It is proposed that the capital requirement be sourced via DPIF and revenue costs for 2023/24 reprofiled with a reduced requirement of £0.7m as the service is scaled up within an adjusted timeframe.
- e) Management of transition of digital programmes (£4.3m) Over the IMTP term there are also expected to be additional digital services provided as a result of DPIF funded schemes transitioning to live operational status including, Welsh Nursing Care Record, Microsoft Centre of Excellence and Digital Intensive Care Unit. These costs have been incorporated within the SLA increase requirement for 2023/24.

4.3 New Services and Digital Cost Recharged Via Service Level Agreement

Additional NHS Wales Service Level Agreement funding incorporated within the IMTP total £8.7m. This funding will support digital infrastructure cost pressures/growth, new services and All Wales licensing commitments.

The SLA increases awaiting local organisation approval can be brigaded as follows in terms of expected positive resolution:

- High Certainty £5.9m (68%) reflects previous agreed contractual and business case commitments.
- Moderate Certainty (a) £1.1m (13%) reflects DPIF programme transitioning to live service with organisation support.
- Moderate Certainty (b) £1.0m (12%) reflects Digital Infrastructure growth costs with charging principles agreed by the Infrastructure Management Board with membership representing all NHS organisations.
- Low Certainty £0.6m (7%), reflects application service growth/emerging requirements currently being



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ratified.

DHCW continues to liaise with organisations in order to formally agree charges for 2023/24, but given pressures being experienced systemwide and the continued absence of an overarching mechanism for funding growth, this exercise will present a recurring challenge as service and core funded elements remain unclear with user/Welsh Government sources still to be resolved in some cases.

4.4 Service Choices

The organisation is faced with a number of service model and technological changes to not only facilitate service improvement (and environmental benefits) but also the achievement of our accounting direction to move away from a capital expenditure model to a more revenue based one. One key initiative will be the move away from on premise datacentres to cloud services (where practical and provide the most value).

Cloud Transition - DHCW is currently constructing its cloud transition plan to support delivery of the approved strategy. Whilst it is thought activity will primarily encompasses engagement, design, planning within year one of the IMTP, year 2 onwards projects a revenue pressure as requirement grows. A funding mechanism to support this transition will be required.

4.5 Discretionary Capital Position

The capital programme for 2023/24 is supported by central funding of £2.614m, whilst this is an increase on the 2022/23, allocation pressures remain as a consequence of addressing technical debt and previous variable funding allocations to support investment requirements:

- Infrastructure Refresh & Growth £1.0m
- Datacentre Migration £0.8m
- Facilities & Decarbonisation £0.2m
- National Integrated Audit Solution £0.6m

5 Digital Priority Investment Fund

The organisation has been in discussion with the Welsh Government Chief Digital Officer to secure funding to support the Datacentre Migration and Cyber Security Investment requirements, whilst this has been assumed within the current draft of the plan, should it not materialise, the pressures for 2023/24 would increase by £2.3m.

These elements will be jointly funded via internal discretionary capital and supporting DPIF funding. The key issue is to address funding uncertainty in transition from programme to service, over the IMTP period, we will see major schemes requiring a stable sustainable funding mechanism, including:

- Digital Services for Patients & Public
- Digital Medicines Transformation
- National Data Resource
- Weish Community Care Information System

We have assumed for the purposes of IMTP that these will be covered via SLA or similar arrangements with



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user organisations.

6 Funding for COVID Digital Solutions

DHCW had submitted a requirement of £9.5m to support assessed 2023/24 need, however the funding confirmed on February 7th is some £1.5m less at £8.0m. This has removed any allowance for product development (including adoption of cloud), price inflation and contingency to be able to respond at speed to PHW/WG requests or meet any surge requirement.

7 Addressing the Immediate and Medium Term Issues

DHCW will endeavour to identify mechanisms to balance the financial position in the short term focussing on the need to cover energy, contractual risk and finalise NHS SLA increases. DHCW will continue to look to identify mitigating actions (such as estates rationalisation) and work with the Director of Operations and the wider service to identify more transformative medium term efficiency and savings initiatives. As part of the organisation's mitigation plans an ambitious savings target of 3.6% against discretionary funding has been set for 2023/24 (exceeding the Welsh Government minimum expected target set at 2.5%).

DHCW will continue to work with Welsh Government Digital and Finance leads, alongside NHS Wales stakeholders, to develop a framework with the aim to mitigate the future pressures presented within this letter, this will not however address the immediate issues. Over the medium term to inform the 2024/25 IMTP process, a formal review to provide an agreed balanced service wide approach to sustainable funding should be jointly commissioned to inform 2024/25 financial plans and funding flows. Increasingly, we are transitioning to a more revenue-based product driven funding model and collectively we are working on what the sustainable funding model looks like.

Given the above unavoidable cost assessment in particular the energy contractual price pressures and net underlying deficit means it is unlikely that DHCW will be in a position to achieve financial balance for 23/24.

Yours sincerely

Vieros Karas

Helen Thomas Chief Executive Officer Digital Health and Care Wales



Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/ Prif Weithredwr GIG Cymru Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/ NHS Wales Chief Executive Health and Social Services Group



Llywodraeth Cymru Welsh Government

Helen Thomas Chief Executive Digital Health and Care Wales

Helen.Thomas5@wales.nhs.uk

Our Ref: JP/BS/SB

31st March 2023

Digital Health and Care Wales - Annual Plan 2023/24

Dear Helen

Thank you for your Accountable Officer letter, dated 17 March, which sets out a range of financial, strategic planning and savings delivery risks.

The current position is that DHCW has a financial deficit and I note that the Board has been unable to develop a balanced three-year Integrated Medium Term Plan (IMTP). You will be aware that in the absence of a balanced IMTP you will be required to submit an annual plan.

I note the organisation has been working on a number of mitigating actions and since your letter and discussions have been ongoing with your partners to address the financial challenges the organisation has identified. I recognise your plan is expected today and there may have been further developments, however if the position is unchanged it is imperative that firm actions and agreements are concluded urgently.

Whilst I recognise DHCW is not statutorily required to submit an IMTP, you will be aware that we take the same planning approach across all NHS organisations in Wales to ensure a joined-up and consistent planning environment. Your letter reflects an assessment at a point in time and your Board will be aware that the level of financial deficit detailed in your letter is not an acceptable position and further progress will be expected.

I recognise the challenges of the current operating environment and context which are translating into the current planning landscape, including system and operational risks, the inflationary pressures and impact of COVID. Given this prevailing outlook organisations will be considering a range of difficult choices and the Board will need to set out and understand those choices and decision points as part of the plans going forward. It is crucial that the



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Board is clear on what plans will deliver and the choices that will be made to deliver the required financial improvement.

Financial plans are also a reflection of the service delivery and workforce challenges at a point in time. It is essential that there is clarity on what are certain and definite issues and what represent risks that could be mitigated or tackled with different solutions.

The Finance Delivery Unit (FDU) and Welsh Government Officials have undertaken touchpoints with all organisations to consider draft financial positions. Detailed feedback has been provided and included issues related to variation and consistency where further progress is expected prior to final plan submissions.

The Board will need to be fully appraised of the implications of the plans presented to them, in terms of whether they are able to approve the plan, and if not, what is the Board proposing to do. The Board needs to understand the significance of submitting an IMTP or an annual plan.

As leaders we have set out the expectation and support for greater system working across organisations. Chief Executives have a clear determination to deliver change on a wider regional and national basis. I welcome this commitment and look forward to seeing the progress and impact of that work.

Yours sincerely

Judith Paget

Judith Paget CBE

cc: Nick Wood, Deputy Chief Executive NHS Wales Samia Edmonds, Planning Programme Director Mike Emery, Director for Digital and Technology





SHA Board Briefing Financial Performance: Period to April 30th 2023

Claire Osmundsen Little

May 2023

L/13



2022/23 Financial Performance

- Summary Performance
- Revenue Pun Rate

2023/24 Financial Performance

- Summary Performance
- Revenue Performance
 - Organisational Run Rate
 - Savings Performance
 - COVID Response
 - Digital Priorities Investment
- Capital Programme
- Risks & Opportunities

Recommendations

2 2/13 

CONTENTS



FINANCIAL UPDATE | OVERVIEW

The purpose of this report is to present DHCWs financial performance against key targets for the financial year 2022/23. The report also advises the Board of financial performance and issues of the current financial year to April 30th 2023 and the key financial projections, risks and opportunities.

- The report sets out the financial position as at the end of the financial year and for April 2023 against current budgets.
- DHCW receives funding to support 3 main activities:
 - 1. Ongoing provision of core services via Welsh Government & NHS organisations (which is delegated to directorate budgets).
 - 2. COVID-19 Response systems & activity (supported as agreed with Welsh Government) and
 - 3. Welsh Government Digital Priority Investment Fund allocations to support discrete development and implementation programmes & projects.
- The report provides an overview of activity taken to ensure the delivery of a balanced financial plan and that future resource requirements can be supported financially.

FINANCE UPDATE | SUMMARY PERFORMANCE AGAINST KEY INDICATORS



DHCW is reporting achievement of all of the key financial indicators for the period

Indicator	Annual Performance	Comment	
Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)	£0.072m Underspend Reduced from £0.169m	 Small period operational underspend of £0.072m has been recorded to the end of March. The underspend has been generated within the following areas: Core: £0.009m DPIF: £0.001m COVID: £0.062m 	SU • <u>\$</u> / f
Remain within Capital Expenditure Limit (To ensure net Capital Spend does not exceed the Capital Expenditure Limit)	£0.088m Underspend increased from £0.048m	£11.731m spend for period against a capital limit of £11.789m	• E 7 0 6 1
Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)	98%	PSPP target achieved. Target – 95%, Actual 98%.	
Cash Balances Appropriate balances to meet creditor requirements		Cash balance on March 31 st has decreased in month £4.2m. The end of year figure met the Welsh Government target of £2m maximum balances.	

ARY:

tory Obligations: evement of all targets ear end.

Achieved

ging Developments: otional 6.3% pension .4m and the blidated pay award of m (to be paid in May).

FINANCE UPDATE | 2022/23 FINANCIAL ACCOUNTS



The 2022/23 End of Year accounts preparation process has been initiated with two material developments:

Final Accounts Timetable

- Thursday 4th May Board Development session
- Thursday 4th May Audit & Assurance Committee submission
- Friday 5th May for the accounts package.
- Friday 12th May for the Remuneration Report, Accountability Report and Performance Report
- The final audited accounts for 2022-23 will be submitted to be approved by the Audit Committee and the Board on 27th July before submission to the Welsh Government on 31st July.

Revised Audit Standard ISA315 Identifying and Assessing the Risks of Material Misstatement

The new standard will be used to support the review of the 2022/23 Accounts. The additional requirement is reflected in higher than planned fees.

Impact:

- The finance team (and others) may receive a greater number of enquiries from our audit teams at the planning stage of the audit.
- The audit team will require greater senior level resource to support the new standard.
- For DHCW audit fees increased by 10.2% circa 16K.

FINANCE UPDATE | 2023-24 SUMMARY PERFORMANCE AGAINST KEY

INDICATORS

DHCW is reporting achievement against plan of all of the key financial indicators for the period



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	Indicator	Cumulative Performance	Forecast Outlook	Comment
•	Revenue Breakeven (To secure that the organisations expenditure does not exceed aggregated income)		£0.0m Breakeven	Small period operational overspend of £0.038m has been recorded to the end of April. Positive variance against plan. DHCW is forecast to breakeven by the end of the financial year.
	Remain within Capital Expenditure Limit (To ensure net Capital Spend does not exceed the Capital Expenditure Limit)	£0.0m Underspend	Breakeven	The current capital funding envelope is £10.911m, DHCW is reporting a £0.751m capital spend to date in line with plan.
_	Public Sector Payment Policy (To pay a minimum of all non NHS creditors within 30 days of receipt of a valid invoice)		Movement 95% Movement	PSPP target achieved. Target – 95%, Actual 99%.
	Cash Balances Appropriate balances to meet creditor requirements	£2.3m Increase from £1.2m	Positive Cash Balance <£2m	Cash balance on April 30th has increased in month by £1.2m. Cash balances will continue to be managed down to the end of year

Movement

SUMMARY:

target of £2m.

Movement

• Statutory Obligations: Forecast achievement of all targets for year end.

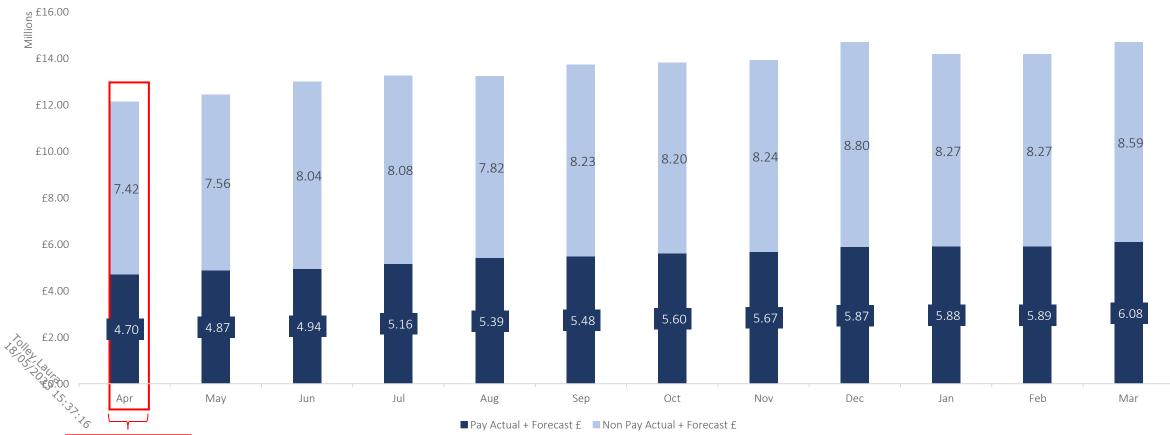
• Emerging **Developments**: Additional Pay Award Funding 1.5% consolidated to be paid in May.

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FINANCE UPDATE | REVENUE RUN RATE



The run rate for the year is materially affected by the latest DPIF expenditure profiles. At present the initial plan includes major spend items relating to contractual payments and NHS disbursements. The organisational run rate is given below. The upturn in pay reflects onboarding of additional staff and in non pay the delivery in Digital Programmes.



Organisational Expenditure Run Rate £m

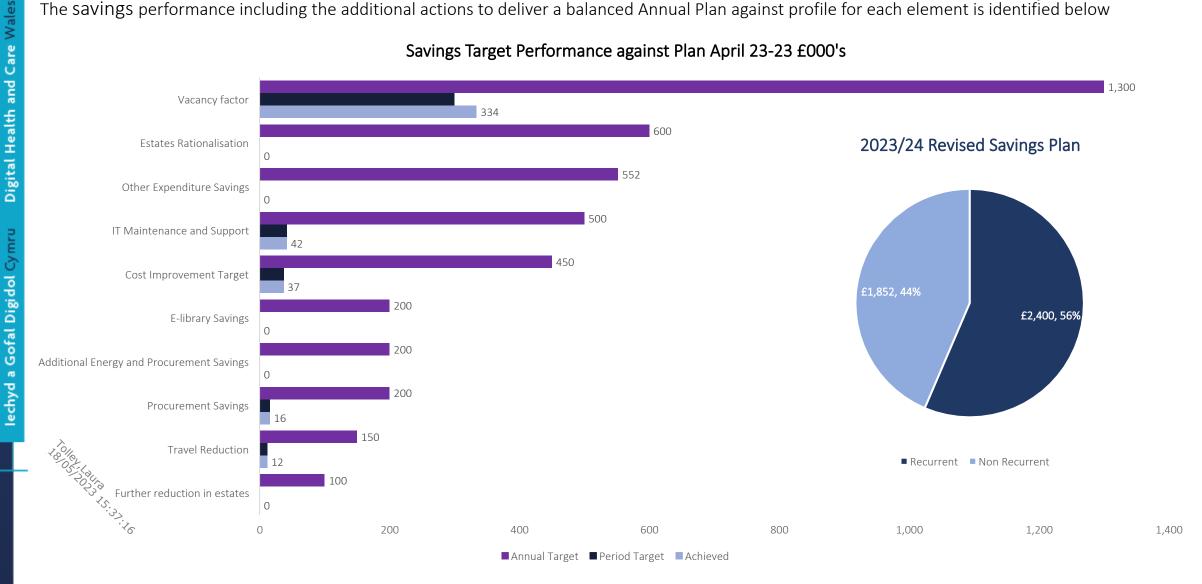
Cumulative Spend of £12.12m recorded to April 30th

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FINANCIAL UPDATE | SAVING PLAN PERFORMANCE



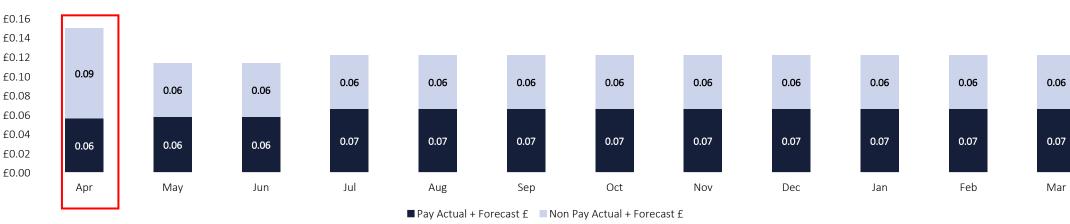
The savings performance including the additional actions to deliver a balanced Annual Plan against profile for each element is identified below



FINANCE UPDATE | COVID 19 REVENUE PERFORMANCE



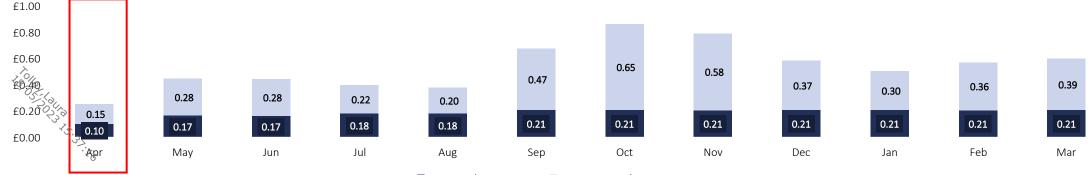
At the end of April the cumulative spend for Covid is £0.4m against an annual budget of £8.0m. Expenditure will be dependent on future development requirement, the volumes of letters and text messaging requirements & further onboarding of staff.



COVID Test, Trace & Protect Run Rate £million



COVID Vaccine Run Rate £million





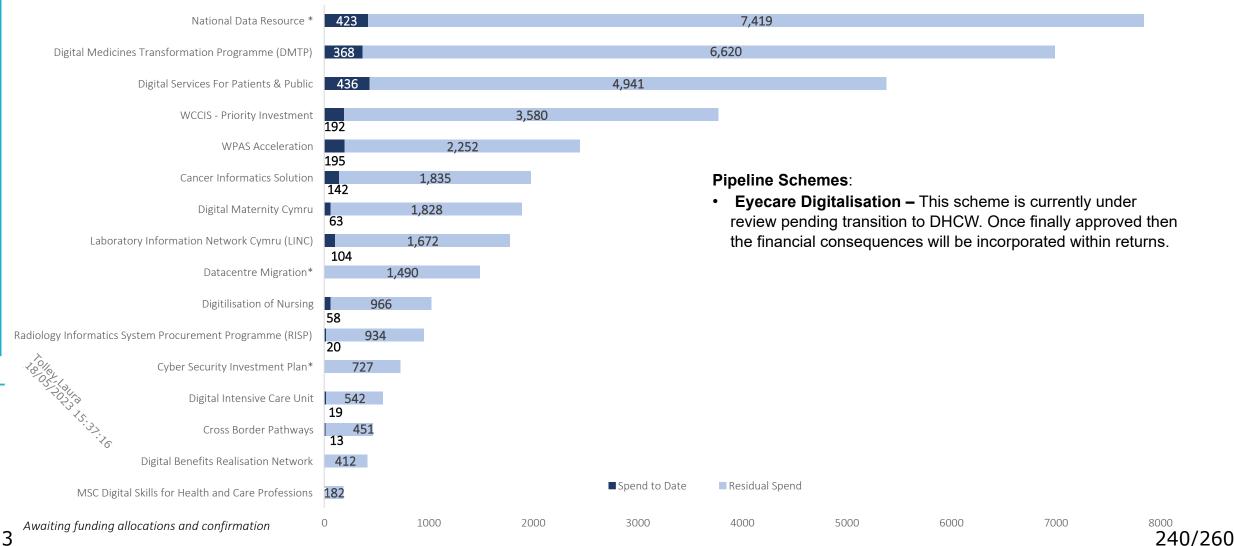
Cumulative Spend of £0.25m for period.

FINANCE UPDATE | DPIF REVENUE PERFORMANCE



The organisation has recorded £2.0m cumulative revenue spend against DPIF schemes to April. The anticipated DPIF expected revenue allocation is projected to total £38.4m for 2023/24.

DPIF Revenue Expenditure to April £000's



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Wales

FINANCE UPDATE | CAPITAL SPEND PERFORMANCE



DHCW has recorded £0.751m of capital spend against a current allocated allowance of £10.911m leaving a residual balance of £10.16m to be spent before the end of the financial year.

	Scheme	CRL Annual Forecast £000's	Period Plan £000's	Period Actual £000's	Under/-0verspend £000's	Residual Balance £000's
	Discretionary					
	Infrastructure Communications Technology	2,414	450	450	0	1,964
	Estates, Facilities & Decarbonisation	200	0	0	0	200
	Total Discretionary	2,614	450	450	0	2,164
	Digital Priority Investment					
	Digital Services for Patients & Public	980	141	141	0	839
	Digital Medicines Transformation Portfolio	59	0	0	0	59
	Radiology Information System Procurement (RISP)	0	7	7	0	-7
	Laboratory Information Network Cymru (LINC)	2,047	128	128	0	1,919
	Digital Maternity Cymru	240	0	0	0	240
X01102120	Digital Intensive Care Unit	4,707	25	25	0	4,682
4	Welsh Patient Administration System (WASP) Standardisation	264	0	0	0	264
	Total Digital Priority Investment	8,297	301	301	0	7,996
	Total Capital Plan	10,911	751	751	0	10,160



FINANCE UPDATE | RISKS & OPPORTUNITIES

DHCW Financial Risks and Opportunities are summarised below.

Financial Risks

General Digital Inflation & Contractual Energy Cost increases:

The underlying digital price pressures and energy prices continue to be identified, quantified and managed.

Under delivery of Saving Schemes(£0.6m)LowSavings programme will be continually monitored with opportunities for
over achievements identified.

Disputed SLA(£4.9m)MediumReflects all currently unsigned SLA's to be resolved with organisations.

High

RISP Confirmation of funding to enable contract placement • Microsoft VAT Recovery: Discussions continue with our VAT advisors and HMRC are ongoing.







DHCW Board are requested to:

- \succ Note the unaudited end of year position to March 31st 2023.
- > Note the status of milestones to finalise the Financial Accounts 2022/23.
- Note April 2023 financial performance and the actions taken to ensure revenue breakeven for 2023/24 following the Accountable Officer correspondence.



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

Date of Board Meeting	25 May 2023
Public or Private	Public
IF PRIVATE: please indicate reason	N/A

Name of Committee	Audit and Assurance Committee
Chair of Committee	Marian Wyn Jones, Independent Member
Lead Executive Director	Claire Osmundsen-Little, Executive Director of Finance
Date of Last Meeting	18 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	Alistair Klaas Neill GM, Independent Member and Vice Chair of Audit and Assurance Committee

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

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20/05/2013 15:37:16



STRATEGIC MISSION	All missions apply	
CORPORATE RISK (ref if appr	opriate)	

WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A

If more than one standard applies, please list below:

DUTY OF QUALITY ENABLER	Information
DOMAIN OF QUALITY	Effective
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement:	
There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:

Person/Committee/Group who have received or considered this paper prior to this meeting

COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		



Audit and Assurance Committee Highlight Report

Page 2 of 5

Author: Julie Robinson Approver: Chris Darling



IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
LINC	Laboratory Information Network		
	Cymru		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently.
ASSURE	Detail any areas of assurance that the Committee has received.
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Committee.

PUBLIC SESSION

	• Welsh Language Compliance and Improvement Framework. An issue with
ALERT	the use of Welsh Language had been identified with the NHS app log in. A meeting had taken place with the Welsh Language Commissioners Office to discuss an exemption from this part of the Welsh Language Scheme for two years. Final approval was awaited.
	• Finance Update. An update on the year end and outlook for 2023/24 was provided. The audit of financial statements was on target to be delivered ahead of schedule. Members noted the financial context and challenges looking ahead to 2023/24 relating to inflationary and other pressures. This was considered in the context of DHCW's Accountable Officer Letter.

Author: Julie Robinson Approver: Chris Darling



	• Internal Audit Annual Audit Plan 2023/24. The Committee received the
	Internal Audit Plan for approval and assurance that Internal Audit had
ASSURE	capacity within the team to carry out the plan in 2023/24.
	• Four Internal Audit reviews were received for assurance with three,
	Corporate Governance, Waste Management and Risk Management
	receiving a <i>substantial</i> assurance and Workforce Planning: PADR a
	reasonable assurance.
	Audit Wales Outline Audit Plan 2023/24. The Committee received the Audit
	Wales Outline Audit Plan for approval and assurance .
	Audit Wales Committee Update. The Committee noted the update which
	included an update on Digital Inclusion.
	 Structured Assessment / Baseline Governance Review Action Plan Report.
	The Committee noted for assurance the 'Opportunities for Improvement'
	action plan which had been populated following receipt of the Structured
	Assessment.
	• Local Counter Fraud Update. The Committee received the Local Counter
	Fraud update and were assured to note there had been no new referrals in
	this quarter.
	• Risk Management and Board Assurance. Members received assurance that
	work was ongoing on the risk appetite and risk tolerance. The number of
	risks had increased to its highest level since the inception of the register, but
	this reflected the context in which DHCW were currently operating.
	Welsh Language Compliance and Improvement Framework. The Committee
	were assured to note the progress being made on Welsh Language
	Compliance within the organisation.
	National Fraud Initiative Self Appraisal Check List. Members noted the
	introduction of the National Fraud Initiative and were assured that all
	actions identified would be completed by the end of Quarter 1.
	 Duty of Quality and Candour Act Implementation Plan. The Committee
	received a presentation outlining the implications of the Act for DHCW and
	were pleased to note the approach being taken to ensure the whole
	organisation was part of the process
	•
	• Audit Action Tracker. The Committee were advised that progress was being
	made on the actions with 21 of 53 actions considered complete. Further
ADVISE	support was being provided by the Executives following the increase in
	volume of recommendations / actions.
	• Standards of Behaviour Report. The Committee were pleased to note the
	progress made to increase the number of declarations made by the Band 8a
	and above workforce of DHCW and noted the 13 offers of hospitality which
	had been accepted during the period.
7011	High Value Purchase Order Report. The Committee received the High Value Durchase Order and noted the sumulative sum total of orders with a value
000	Purchase Order and noted the cumulative sum total of orders with a value
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	of more than £0.75m.
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Author: Julie Robinson Approver: Chris Darling



• <b>Procurement and Scheme of Delegation Compliance Report.</b> The Committee <b>noted</b> the standard report which detailed three Single Tender
Actions and one Change Control Note.
Quality and Regulatory and Cyber Resilience Unit Compliance Update
<b>Report.</b> The report was <b>noted</b> by the Committee and received <b>assurance</b> that DHCW quality systems were independently scrutinised.
• Legislative Assurance Framework. Members were assured that the
Legislative Assurance Framework was being reviewed on a monthly basis
and updated accordingly.
• <b>Decarbonisation, Estates and Compliance Report.</b> The Committee received an update and discussed if those working from home were encouraged to
make low carbon choices at home.

#### PRIVATE SESSION

ALERT	<ul> <li>Laboratory Information Network Cymru (LINC) Programme Update. The Audit and Assurance Committee received a verbal update on the programme.</li> </ul>
ASSURE	<ul> <li>Private Risk Register. The Committee received the Private Risk Register and were assured the one risk was in the process of being downgraded.</li> <li>IT Stock Review Progress on Internal Audit Recommendations. Members were assured to note the actions implemented.</li> </ul>
ADVISE	• Audit Actions (Private). The Committee were advised seven actions and noted two were complete with the remaining five on target for completion.

#### Delegated action taken by the committee:

#### APPROVED:

- POL-CG-006 Control of Contractors
- POL-CG-012 Asbestos Management Policy
- POL-CG-17 Fire Safety Policy
- POL-CG-018 Environmental and Sustainability Policy
- NEW Smoke-Vape Free Policy
- Local Counter Fraud Annual Plan (including Workplan 2023/24)
- Internal Audit Annual Audit Plan 2023/24
- Audit Wales Outline Audit Plan 2023/24



Audit and Assurance Committee Highlight Report

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Author: Julie Robinson Approver: Chris Darling

Date of next committee meeting:

3 July 2023



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

Date of Board Meeting	25 May 2023
Public or Private	Public
<b>IF PRIVATE:</b> please indicate reason	N/A

Name of Committee	Digital Governance and Safety Committee
Chair of Committee	Rowan Gardner, Chair of Digital Governance and Safety Committee
Lead Executive Director	Rhidian Hurle, Executive Medical Director
Date of Last Meeting	11 May 2023
Prepared By	Carys Richards, Governance Co-ordination
Presented By	Rowan Gardner, Chair of Digital Governance and Safety Committee

	Purpose of the Report	For Assurance
	Recommendation	
	The Board is being asked <b>NOTE</b> the content of the	d to: e report for <b>ASSURANCE.</b>
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Be the trusted strategic partner and a high quality, inclusive and ambitious organisation

CORPORATE RISK (ref if appropriate)

WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	N/A
If more than one standard applies, pl	ease list below:

DUTY OF QUALITY ENABLER	Information
DOMAIN OF QUALITY	Effective
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement:	
There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:				
Person/Committee/Group who have received or considered this paper prior to this meeting				
COMMITTEE OR GROUP DATE OUTCOME				
Committee Chair				



DG&S Chair's Report for Board

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Author: Carys Richards Approver: Chris Darling



IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
<b>LEGAL</b> IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acrony	ms		
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance & Safety		

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail any areas of assurance that the Committee has received
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Committee

### PUBLIC SESSION

ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT ALERT AL	ALERT	• WASPI (Wales Accord on the Sharing of Personal Information) Code of Conduct consultation, was noted with discussions surrounding the strategic benefits of moving towards a Code of Conduct, encompassing the achievements during the pandemic which, with a sustained, consistent
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DG&S Chair's Report for Board

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Author: Carys Richards Approver: Chris Darling



	<ul> <li>The Committee received the following Assurance Reports         <ul> <li>Information Governance Assurance Report</li> </ul> </li> </ul>			
ASSURE	o Informatics Assurance Report			
	<ul> <li>Information Services Assurance Report</li> </ul>			
	<ul> <li>Research &amp; Innovation Strategy Assurance Report</li> </ul>			
	• The Digital Programme Overview Update was received and discussed.			
	• Delivering the Data Promise for Health and Social Care in Wales was noted.			
	<ul> <li>Data Sharing during coronavirus report was noted.</li> </ul>			
	Assurance was received on Corporate Risk DHCW0296 Allergies and Adverse			
	Reactions with the Committee receiving the outcome from a recent deep			
	dive exercise.			
	An update on the progress of the Intellectual Property Policy was received			
ADVISE	with work continuing and the policy itself is to be presented at the next			
ADVISE	meeting on 3 August 2023.			
	• The Corporate Risk Register – PUBLIC, was discussed and it was noted the			
	number of new risks added since the last meeting and the Committee were			
	made aware that the number of risks on the Corporate Risk Register was at			
	its highest since DHCW had established.			

#### PRIVATE SESSION

ALERT	• N/A
ASSURE	<ul> <li>The Cyber Security Assurance Report was received and the positive cyber engagement with staff across the organisation was noted.</li> <li>The Committee welcomed the Cyber Resilience report from Audit Wales.</li> </ul>
ADVISE	• The Corporate Risk Register – PRIVATE was discussed in detail.

#### Delegated action taken by the committee:

The Committee approved two policies;

- Principles & Standards of Privileged Access Management
- Anti-Malware

Date of next committee meeting:

3 August 2023



DG&S Chair's Report for Board

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Author: Carys Richards Approver: Chris Darling



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

Date of Board Meeting	25 May 2023
Public or Private	Private
IF PRIVATE: please indicate reason	The IM Digital Network is a Private meeting

Name of Committee	All Wales Independent Member Digital Network
Chair of Committee	David Selway, Independent Member, DHCW
Lead Executive Director	Chris Darling, Board Secretary
Date of Last Meeting	19 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	David Selway, Independent Member

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



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organisation

CORPORATE RISK (ref if appropriate)

WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales	
If more than one standard applies, please list below:		

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

DUTY OF QUALITY ENABLER	Information	
DOMAIN OF QUALITY	Effective	
If more than one enabler / domain applies, please list below:		

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement:	
There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		



Committee Chair's Report for Board

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Author: Julie Robinson Approver: Chris Darling



IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WCCIS	Welsh Community Care Information Systems	NDR	National Data Resource
IM	Independent Member		

Definitions	
ALERT	Alert the Board to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail any areas of assurance that the Network has received
ADVISE	Detail any areas of ongoing monitoring where an update has been provided to the Network

### PRIVATE SESSION

ALERT	<ul> <li>Welsh Community Care Information Systems (WCCIS). The Network received a presentation on WCCIS and noted the importance of a functioning and effective system.</li> </ul>
ASSURE.	• <b>Deployment of NHS Wales App – Development Plans.</b> The Network received an update on the current status of the Deployment of the NHS Wales App.

Committee Chair's Report for Board

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Author: Julie Robinson Approver: Chris Darling



	Members discussed the ways in which GP practices could be encouraged to utilise the App.
	• IM Digital Network Evaluation and Feedback. The Network received the
	Evaluation Report for the performance of the Network for 2022/23 and
	provided their views on the forthcoming agendas. The Chair of DHCW
	attended to provide the feedback to the Chairs Peer Group to seek their
	support for the continuation of the Network.
	National Data Resource (NDR). The IM Digital Network received an update
	on the status of the NDR with National Platforms soon to go live.
ADVISE	

Delegated action taken by the committee:	
N/A	

Date of next committee meeting:

19 July 2023



Committee Chair's Report for Board

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Author: Julie Robinson Approver: Chris Darling



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

Date of Board Meeting	25 May 2023
Public or Private	Private
IF PRIVATE: please indicate reason	Local Partnership Forum is a Private meeting

Name of Committee	Local Partnership Forum
Chair of Committee	Helen Thomas, Chief Executive Officer
Lead Executive Director	Sarah-Jane Taylor, Director of People and Organisational Development
Date of Last Meeting	4 April 2023
Prepared By	Julie Robinson, Corporate Governance Coordinator
Presented By	Helen Thomas, Chief Executive Office

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

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20/05/2013 15:37:16



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

CORPORATE RISK (ref if appropriate)

WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

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

DUTY OF QUALITY ENABLER	Workforce
DOMAIN OF QUALITY	Person Centred
If more than one enabler / domain applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Statement:	
There is no requirement for an EQIA.	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Committee Chair		



Committee Chair's Report to Board

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Author: Julie Robinson Approver: Helen Thomas



IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Should the appropriate assurance not take place, there could be unforeseen quality and safety implications to the DHCW services provided
LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implication related to the activity outlined in this report
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SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

Acrony	ms		
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

Definitions	
ALERT	Alert the Board/Committee to areas of non-compliance or matters that need addressing urgently
ASSURE	Detail here any areas of assurance that the Committee has received
ADVISE	Detail here any areas of ongoing monitoring where an update has been provided to the Committee

#### PRIVATE SESSION

ALERT	• There were no items for the Board to be alerted to.
ASSURE	• Corporate Risk Register and Board Assurance Framework. The Local Partnership Forum received the Corporate Risk Register and discussed the 31 risks. The risk score for the one risk on Staff Vacancies for which LPF had oversight was reduced following a deep dive at the last Audit and Assurance Committee.
23's	

Committee Chair's Report to Board

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Author: Julie Robinson Approver: Helen Thomas



	<ul> <li>Workforce Update. The Local Partnership Forum received a verbal update on the following: Update of People and OD Strategy, Strategic Equality Plan, Gender Pay Gap Report and Strategic Workforce Group.</li> <li>Trade Union Update. The Local Partnership Forum received a verbal update on the issues of importance affecting Union Members.</li> <li>Quality &amp; Engagement Act Update. The Local Partnership Forum were provided with a brief update on the Act with a more detailed plan on the quality standards being incorporated into the Workforce Strategy update for the next meeting.</li> <li>Workforce Performance Report. The Local Partnership Forum noted the Workforce Performance Report and noted the positive trend in most reported areas.</li> <li>DHCW Estates Plan. The Local Partnership were pleased to note the progress being made against the Estates Plan.</li> </ul>
ADVISE	<ul> <li>Staff Conference and Awards Planning Update. The Local Partnership Forum were informed that the preparation for the Staff Awards was well underway with the theme for the conference being Mission Possible, DHCW's five strategic missions.</li> <li>Health and Wellbeing Network Update. The Group were updated on the work being done by the network and the future campaigns set out for 2023/24.</li> </ul>

### Delegated action taken by the committee:

N/A

Date of next committee meeting:

6 June 2023



Committee Chair's Report to Board

Author: Julie Robinson Approver: Helen Thomas