


DHCW SHA Board Meeting – PUBLIC

Minutes of the meeting of Digital Health and Care Wales (DHCW) Special Health Authority Board (SHA) held on Thursday 25 July 2024 as a virtual meeting broadcast live via Zoom.

 10:00 – 14:05

 25 July 2024

 ZOOM

Members Present	Initial	Title	Organisation
Simon Jones	SJ	Chair of the Board	DHCW
Ifan Evans	IE	Executive Director of Strategy	DHCW
Ruth Glazzard	RG	Vice Chair of the Board	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Marian Wyn Jones	MWJ	Independent Member	DHCW
Marilyn Bryan Jones	MBJ	Independent Member	DHCW
Sam Lloyd	SL	Executive Director of Operations	DHCW
Alistair Klaas Neill	AKN	Independent Member (until 11:30am)	DHCW
Claire Osmundsen-Little	COL	Deputy Chief Executive Officer / Executive Director of Finance	DHCW
David Selway	DS	Independent Member	DHCW
Helen Thomas	HT	Chief Executive Officer	DHCW

In Attendance	Initial	Title	Organisation
Chris Darling	CD	Board Secretary	DHCW
Fran Beadle	FB	Chief Nursing Information Officer (for item 3.1)	DHCW
Andrew Fletcher	AF	Associate Board Member – Trade Union	DHCW
Sam Hall	SH	Director of Primary, Community & Mental Health Digital Services	DHCW



DHCW SHA Board Meeting 25 July 2024

Joni Smith	JS	Informatics Specialist Nurse (for item 3.1)	Hywel Dda UHB
Sarah-Jane Taylor	SJT	Director of People and Organisational Development	DHCW

Observing	Title	Organisation
Jenny Allan	Content Designer	DHCW
Liam Gilsean	Senior Communications Officer	DHCW
Nerys Hurford	Translator	Translation Services
Carys Richards	Corporate Governance Support Manager (Secretariat)	DHCW
Laura Tolley	Head of Corporate Governance	DHCW

Apologies	Title	Organisation
Rowan Gardner	Independent Member	DHCW


Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
CEO	Chief Executive Officer	DPIF	Digital Priority Investment Fund
IM	Independent Member	IMTP	Integrated Medium-Term Plan
IOPR	Integrated Organisational Performance Report	WICIS	Welsh Intensive Care Information System
WG	Welsh Government	PDC	Programmes Delivery Committee
NDR	National Data Resource	A&A	Audit & Assurance Committee
DSPP	Digital Services for Patients and the Public	DPIF	Digital Investment Priority Funding
SIRO	Senior Information Risk Owner	WNCR	Welsh Nursing Care Record
ADD	Attention Deficit Disorder	POD	People & Organisational Development
DAP	Dental Access Portal		

Item No	Item Detail	Outcome	Action
PART 1 – PRELIMINARY MATTERS			
1.1	<p>Welcome and Apologies</p> <p>The Chair welcomed everyone bilingually to the DHCW SHA Board meeting and confirmed the meeting was being broadcast live via Zoom, in addition, the recording would be available via the DHCW website for any persons unable to access the meeting live. The Zoom platform was being used to allow for members to be visible throughout the entire meeting and for simultaneous translation to take place, allowing members to engage in the meeting in English or Welsh.</p> <p>The Chair provided some housekeeping notices regarding the technical aspects of live streaming the meeting, the planned breaks, and the use of the consent agenda for items 2.1 to 2.5.</p>	Noted	None to note
1.2	<p>Apologies for Absence</p> <p>Apologies were received from: Rowan Gardner – Independent Member.</p>	N/A	None to note
1.3	<p>Declarations of Interest</p> <p>There were no declarations of interest.</p>	N/A	None to note
PART 2 – CONSENT AGENDA			
2.1	<p>Unconfirmed Minutes of 30 May 2024 Board Meeting</p> <p>i. Matters Arising</p>  <p>The Board resolved to: APPROVE the minutes of 30 May 2024 Board Meeting.</p>	Approved	None to note
2.2	<p>Unconfirmed Minutes of 9 July 2024 Extraordinary Board Meeting</p> <p>i. Matters Arising</p>  <p>The Board resolved to: APPROVE the minutes of 9 July 2024 Extraordinary Board Meeting.</p>	Approved	None to note
2.2	<p>Action Log</p> <p>There were no open actions.</p>	N/A	None to note
2.3	<p>Forward Workplan</p> <p>The Board resolved to: NOTE the Forward Plan.</p>	Noted	None to note

2.4	<p>DHCW Follow-up response to Welsh Parliament Health and Social Care Committee and Public Accounts Public Administration Scrutiny Report</p> <p>The Board resolved to:</p> <p>NOTE the DHCW Follow-up response to Welsh Parliament Health and Social Care Committee and Public Accounts Public Administration Scrutiny Report.</p>	Noted	None to note
2.5	<p>Annual Quality Report</p> <p>The Board resolved to:</p> <p>APPROVE the Annual Quality Report.</p>	Approved	None to note

MAIN AGENDA

PART 3 – FOR REVIEW

3.1	<p>Shared Listening and Learning Presentation:</p> <ul style="list-style-type: none"> Welsh Nursing Care Record <p>Rhidian Hurlle, Executive Medical Director (RH) invited Fran Beadle, Chief Nursing Information Officer (FB) and Joni Smith, Informatics Specialist Nurse (JS) to discuss the following digital story on the Welsh Nursing Care Record (WNCR).</p>  <p>The story is from the perspective of a nurse, JS, with dyslexia and attention deficit disorder (ADD) and how the implementation of the WNCR has impacted her ability to work in nursing.</p> <p>The video outlines the difficulties she faced prior to WNCR regarding her personal time management of tasks and handwritten notes highlighting how digital functions like typing, spellcheck and reminder alarms have supported her.</p> <p>The story follows JS through her career pathway from student nurse to an Informatics Specialist Nurse and how this digital</p>	Received & Discussed	None to note
-----	--	----------------------	--------------

	<p>solution has made a positive impact on her working life and ability to deliver safer care.</p> <p>The following observations were made:</p> <ul style="list-style-type: none"> • the importance of lessons learnt from this digital story in terms of how DHCW develops its systems and technologies for improvements in clinical workspaces; • the benefits of digital on an improved work life balance, with JS highlighting that it has allowed her to be more efficient with her tasks, created accuracy in completion of tasks, whereby she now doesn't leave work late; • how DHCW supports services and implements products across clinical communities for benefits absorbed across all health boards; • producing a roadmap for the entire WNCR product, potentially including e-prescribing, as a complete resource could make a huge difference in the nursing community; • keeping nurses included and engaged in terms of design and concept process, open discussion to understand how data is processed and used in a clinical environment; • the idea of one system as a long term goal to reduce the amount of time spent logging in to multiple systems and switching between apps; • welsh clinical portal and welsh administration system, could potentially be included as one resource along with any other ward systems, all working concurrently, with one point of access, as a national system with all information in one place, across all Healthboards; • more specifically in reference to ADD and dyslexia, lessons learnt on how the service sign-posts and supports colleagues through the way in which special needs are identified for all service users; • There was a need to strengthen the message on the importance of user centre design and engagement with service users in the design and development of services. <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the Shared Listening and Learning Presentation.</p>		
--	---	--	--

PART 4 – FOR REVIEW

4.1	<p>Chair and Vice Chair Report</p> <p>The Chair outlined the following highlights from within the report.</p> <p>Board Development, 27 June 2024</p> <p>A Board Development day was held on 27 June in our North Wales office in Mold. The Chair noted it was great to see colleagues based in the Mold office, and the day included a questions and answers session with staff. The Chair expressed gratitude for the staff engagement and insightful questions and</p>	Received & Discussed.	None to note
-----	--	-----------------------	--------------

dialog on the day. In addition, holding the Board Development day in North Wales allowed DHCW Board members the opportunity to engage with members of the Betsi Cadwaladr UHB Board members which was helpful, and The Chair thanked the Betsi Cadwaladr UHB Board for their engagement and hospitality.

Meeting with NHS Wales Chair Colleagues

The Chair advised he had been meeting with fellow NHS Wales Chairs on a face to face basis, to better understand the priorities and pressures for their organisations and understand from a digital and data perspective how DHCW can best align and support the delivery of joint objectives.

On the 3 June with a meeting was held with Ian Green, the newly appointed Chair of the Joint Commissioning Committee (JCC), soon after a meeting was held with Jonathan Morgan, on the 6 June, the Chair of Cwm Taf Morgannwg UHB. Then on the 8 July a meeting took place with Dyfed Edwards the Chair of Betsi Cadwaladr UHB (BCU) in Ysbyty Gwynedd. The Chair noted that this was particularly useful after the DHCW and BCU Board engagement which took place at the end of June and advised all meetings had been hugely helpful, and further meetings with Chairs would continue over the coming months

Digital Programme Chairs Network, 18 June 2024

The Chair informed the Board that on the 12 June he joined Welsh Government and DHCW Executive colleagues and Programme Oversight Chairs (POC), for the first of their joint meetings. The Chair advised the POC role was a key change instigated by Welsh Government following the Programme Governance review and it was good to see the network come together to help clarify the POC role and allow for engagement and discussion on how these crucial roles are best supported

Additionally, Ruth Glazzard, Vice Chair (RG) contributed the following:

DHCW Staff Awards, 12 June 2024

It was great to join DHCW staff on the evening of the 12 June to celebrate the DHCW staff nominated, shortlisted and those who won awards at this year's staff awards ceremony.

RG commented that it was a pleasure to be part of the assessment panel to shortlist the nominations for Chair team of the year award and was delighted to present unsung hero award at the awards.

RG added that it was great to attend the event with Independent Member colleagues, and congratulated all the winners, and expressed thanks to those who worked hard to ensure such a successful evening.


The Board resolved to:

RECIEVE the contents of the Chair and Vice Chair report.

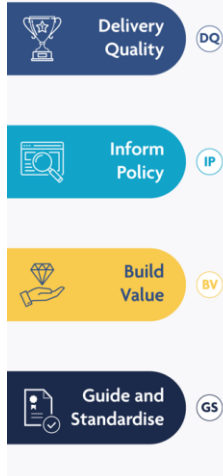
<p>4.2</p>	<p>Chief Executive’s Report</p> <p>Helen Thomas, Chief Executive Officer (HT) provided the following highlights from the report.</p> <p>Well-being of Future Generations Act</p> <p>Board members were made aware that DHCW’s Well-being of Future Generations Act statement and objectives were approved by the Board in March 2024, and DHCW formally came under the Act on 30 June 2024. DHCW will continue to work collaboratively with Future Generations Act Commissioners office to embed the Act across DHCW.</p> <p>Compassionate Leadership Pledge</p> <p>HT requested the Board to approve the signing of the Compassionate Leadership Pledge on behalf of DHCW which commits us to developing and modelling compassionate leadership and creating compassionate and collective cultures across the organisation by embedding the Compassionate Leadership Principles.</p> <p>Health Board / Trust / Special Health Authority Engagement Sessions</p> <p>HT advised the DHCW Executive team held an in-person engagement session with Betsi Cadwaladr University Health Board on 26 June. HT reflected that it was great to meet colleagues in person at Ysbyty Glan Clwyd, and to visit clinical areas to see digital systems in use. The day included several breakout sessions to deep dive into areas including Service Level Agreements, Portfolio Management, Clinical Informatics, National Data Resource and Connecting Care.</p> <p>In addition, the DHCW Executive Team had the opportunity to visit the Same Day Emergency area in Ysbyty Glan Clwyd where the team could see firsthand the clinical systems being used and challenges faced in the department and the impact and benefits that digital systems have on staff and patient care.</p> <p>HT expressed thanks to colleagues at Betsi Cadwaladr University Health Board for their time and engagement and hospitality, the session was extremely insightful.</p> <p>DHCW Leadership Development Programme</p> <p>The final Kings Fund Leadership Programme Event was held in June where the whole Senior Leadership team for DHCW reflected on all the learning from the programme and agreed an approach to future sessions.</p> <p>HT gave thanks to all staff who actively engaged in all sessions and those involved will collectively take forward the actions from the programme.</p> <p>Staff Engagement</p> <p>As part of the Executive Team Staff Engagement Programme, HT advised she held an engagement session with staff in Ty Glan Yr Afon in July, where a number of informal conversations with staff across various Directorates took place. HT commented that it was</p>	<p>Received & Discussed and Approved the signing of the Compassionate Leadership Pledge.</p>	<p>None to note</p>
------------	--	--	---------------------

	<p>an insightful session and gave thanks to those staff who took the time to engage and ask questions.</p> <p>Data Centre 2</p> <p>The DHCW teams have been working hard over the past few months, successfully moving to Data Centre 2. The project is in its closedown stages, and HT expressed thanks on behalf of the Board to all staff involved for their hard work in delivering a complex project.</p> <p>NHS Oversight and Escalation Status</p> <p>HT was pleased to make Board members aware that DHCW remained in level 1 (routine arrangements) which was confirmed in a letter received from Judith Paget, Director General of Health and Social Services / Chief Executive Officer NHS Wales on 12 July.</p> <p>HT advised the letter included a number for opportunities for DHCW, and DHCW were committed to continuing to work alongside Welsh Government colleagues over the coming months to take these forward.</p> <p>The Board resolved to:</p> <p>RECEIVE and DISCUSS the contents of the Chief Executive’s report and APPROVE the signing of the Compassionate Leadership Pledge.</p>		
--	--	--	--

PART 5 – STRATEGIC ITEMS

5.1	<p>Primary Care Strategy Action Plan Update</p> <p>Sam Hall, Director of Primary, Community & Mental Health Digital Services (SH) presented the update on the Primary Care Strategy Action Plan, underpinned by a user centred design approach.</p> <p><i>‘A strategy supporting population health and care improvement in Primary, Community and Mental Health in Wales through development of expert knowledge, information and resources that enables user centred design, interoperability, robust connectivity and security.’</i></p>  <p>Four principles were identified to underpin the strategy, with 8 priority areas for delivery, each linked to one of more of the principles.</p>	Noted	None to note
-----	---	-------	--------------

THE FOUR PRINCIPLES



THE EIGHT PRIORITIES



Current Status and Acton Plan

While already applying aspects of the strategy within current work, the delivery programme start-up activities formally commenced in May, with a review of the strategy and re-engagement of the Primary Care Management team. The focus was on programme design and building a phased delivery plan.

Leads from the management team have been identified for each of the priority delivery areas and discovery sessions completed with each and the drafting of the delivery plan has commenced, with consideration of current pressures on the Primary Care team, who were currently playing critical delivery roles in the rollout of the NHS Wales App (Digital Services for Patients and the Public Programme) and Primary Care Electronic Prescription Service, as well as managing the migration of over 190 GP practices from the Vision Clinical System to EMIS Web.

Delivery plans will also take into account the work of the DHCW Building our Future transformation programme.

One of the key early deliverables will be the development of a Charter as part of priority 1 (Creation of a full, dedicated Product, Project and Programme Transition (PPPT) function); this Charter document is designed to explain the purpose, core components and success measures of the Product Programme and Project Transition (PPPT) team. The PPPT is a core enabler to the delivery of the overall organisational strategy as, once established it will be the team through which each priority will be delivered.

Meetings have been held with the DHCW Programme Management Office lead, Welsh Government Director of Primary care, Mental Health and Early years, as well as GPC Wales and with the current Primary Care Planning & Coordination team, to inform creation of the Charter.

The Charter is now in draft and will be socialised with key internal and external stakeholders for feedback and modification over the coming weeks.

The draft programme plan is being developed and is expected to be available by the end of July.

Dental Access Portal:

SH advised the Primary Care team has been working in partnership with the NHS Wales Microsoft 365 Centre of Excellence to deliver a Dental Access Portal (DAP). The DAP is an online portal that will enable citizens to apply for allocation to an NHS Dentist. The software has been delivered using the agile methodology, with a user centred focus throughout the development cycle. The portal is currently in pilot in Powys Teaching Health Board.

Choose Pharmacy:

The team has commenced a redesign of the Choose Pharmacy application from a “Module/Service Driven” model to a “Patient Driven” approach. Activities include:

- Identifying the high-level requirements through engagement with health board leads.
- Organised workshops with users including Choose Pharmacy User Group to build on the requirements.
- Roadmap development based on requirements.

Transition of the Electronic Prescription Service (EPS) from programme to Primary Care Services:

Priority 7: Implement an agreed process for transition of projects (and products) into BAU.

The Primary Care team is working with the EPS programme preparing for the transition to service. Governance has been established in the form of a Transition Oversight Group and criteria provisionally agreed.

Clinical Engagement

Priority 8: Attendance at clinical and managerial expert user groups focused on problem solving.

The DHCW Associate Medical Directors (AMDs) for Primary Care have recently transferred into the Primary Community and Mental Health Directorate and the team has integrated them into existing project teams. Most recently the AMD’s have led a clinical reference group to identify use cases for the development of a National Demand and Capacity Tool for GP Practices – a project being delivered in partnership with the Strategic Programme for Primary Care. They have also been engaged in the initial meetings around Priority 8 and will lead this work with the clinical community.

A discussion took place on the importance of the clinical voice and the need for further and ongoing engagement with clinicians when designing digital systems.

In terms of the Dental Access Portal (DAP) it was noted that:

- the next sprint will allow members of the public to add themselves, family members and those they care for to a waiting list;
- the waiting list data would help to determine and prioritise

	<p>a plan around the shortage of dentists, and allow WG to provide a more effective dental service across Wales;</p> <ul style="list-style-type: none"> • funding was in place for this year in establishing the DAP and that funding to support a full product and development going forward was being considered; • as the target operating model is aligned to the strategy, and changes are absorbed, staff would be trained and upskilled to adapt; • the waiting list data would allow demographic research, including capturing the number of children who are seeking dental health <p>The Board resolved to: NOTE the Primary Care Strategy Action Plan Update.</p>		
5.2	<p>Strategic Procurement Report</p> <p>Claire Osmundsen-Little, Deputy Chief Executive and Executive Director of Finance (COL) presented the report, noting the following Contract Award for approval:</p> <p>P21.69 Medicines Information and Drug Tool</p> <p>Contractor: Royal Pharmaceutical Society/Pharmaceutical Press</p> <p>Term: 1 September 2024 – 31 August 2027 with an option to extend to 31 August 2029 in annual increments.</p> <p>Value: Total Contract Value including the extension options is £2,154,995 (excl. VAT)</p> <p>Additionally, the Board were asked to note that the costs for Contract are significantly more than originally indicated, however, the product selected was richer & superior in scope/functionality as set out in the report.</p> <p>The Board resolved to: APPROVE the Strategic Procurement Report.</p>	Approved	None to note
PART 6 - GOVERNANCE, RISK, PERFORMANCE AND ASSURANCE			
6.1	<p>Finance Report</p> <p>COL presented the Finance Report noting the position from end of Quarter 1 and current forecast.</p> <p>2024/25 Financial Performance Overview</p> <p>Overview: As part of its IMTP DHCW has issued a balanced plan for 2024/25. This is dependent upon the successful achievement of the savings target (£1.5m) and the mitigation of all identified financial risks (such as possible digital licensing cost pressures). All executive Director Delegated budgets have been issued and agreed.</p> <p>Revenue: DHCW was reporting a small revenue underspend of £0.046m for the period to June 30th.</p> <p>PSPP: The target Public Sector Payment Policy (PSPP) target has been exceeded with 96% of non NHS invoices being paid within</p>	Received & Discussed	Note to note

30 days.

Cash: DHCW has a cash balance of £10.674m as at June 30th.

Digital Priority Investment Fund: Spend to June totals is £8.239m against a total budget of £31.657m (£29.688m direct WG funding). DHCW has received a formal notification of 2024/25 funding, and the full amount is dependent on set criteria being achieved.

Capital: Spend to June totals is £0.933m against CRL of £20.224m. This is in line with the year to date plan.

Developments since May Board meeting:

Microsoft Year 3 Contractual Renewal: DHCW has now completed the requirements gathering with local organisations and have issued a Purchase Order totaling £30.569m (exc VAT) to Trustmarque (as Licensing Agreement Reseller) for the full All Wales list of products for year three of the contract (committing DHCW to the procurement). DHCW have received the contributions from all but 2 organisations.

Microsoft VAT: The VAT reclaim remains with HMRC internal policy team and is currently being assessed. DHCW are meeting with the VAT advisors in July to chase for an update and further advice.

Key Issues

IMTP: DHCW has received most of the SLA agreements underpinning the financial plan, however, were awaiting agreements from two new organisations, equating to £0.4m. NHS Executive and National Collaborative Commissioning Unit.

Capital: DHCW has spent £0.933m on Capital to date. DHCW received confirmation of £0.590m of DSPP funding in month.

DPIF: DHCW was notified of revenue funding letter of £29.668m and £17.255m in capital funding. DHCW are working through the detail to understand the conditions outlined in the DPIF funding letter..

WICIS: DHCW is awaiting the outcome of the urgent clinical review, which will impact the future direction and funding requirements of the programme.

Connecting Care: DHCW is currently completing the business case to submit to Welsh Government in quarter 2.

It was noted that each year savings have been made through the vacancy target rate however vacancies were being attributed to the impact of delivering certain milestones within the IMTP. Milestones will continue to be reprofiled, work packages are being developed to mitigate the volume of work in certain areas.

In terms of Primary Care, resetting of the Eye care programme is with Welsh Government, with evidence provided by DHCW, to decide on the future of the programme.

A current forecast underlying deficit of around £2.7m at end of year will be monitored closely.


Sam Lloyd, Executive Director of Operations (SL), added the Operations team are engaging with market analysts to understand the impact of market acquisitions of major software

	<p>suppliers, embedded in our infrastructure and how a move to open source software across platforms and products would allow more control over inflation / increases in the market.</p> <p>It was agreed that demonstrating value and benefit of the new operating model based around the Cloud was vital.</p> <p>The Board resolved to: RECEIVE and DISCUSS the Finance Report.</p>										
6.2	<p>Corporate Risk Register</p> <p>Chris Darling, Board Secretary (CD) presented the Corporate Risk Register report, asking Board members to note the following changes to the Corporate Risk Register (new risks, risks removed and changes in risk scores) for the period 1 May 2024 to 31 June 2024:</p> <p>NEW RISKS (1) 0 Private 1 Public</p> <table border="1" data-bbox="188 768 1042 1153"> <thead> <tr> <th>Risk Ref</th> <th>Risk Title</th> <th>Risk Description</th> <th>Committee Assignment</th> </tr> </thead> <tbody> <tr> <td>DHCW0336</td> <td>Audit + withdrawal of contracts</td> <td>IF Audit + withdraw from contract prior to a solution being put in place THEN there will be a significant risk to service delivery RESULTING IN no acceptable solution for stakeholders.</td> <td>Digital Governance and Safety Committee</td> </tr> </tbody> </table> <p>In terms of the Corporate Risk Register as a whole, DHCW currently has 18 risks on the Register, 13 public risks and 5 private risks, of which 4 are considered at every Digital Governance and Safety Committee and 1 considered at Programmes Delivery Committee.</p> <p>Additionally, the following updates were provided on specific risks;</p> <p>DHCW0332 Sustainable Major Programmes Funding, had been reviewed and will likely be managed as 2 new risks going forward, one for the current situation in terms of programme cost pressures and one for a future sustainable funding model. The Chair asked that the Audit and Assurance Committee oversee the work, with partners to develop a sustainable funding model.</p> <p>ACTION 01: CD/COL to initiate a deep dive and take the findings to Audit & Assurance Committee in October.</p> <p>DHCW0316 Technical Debt Accumulation, was also being split to mitigate and manage the components within and this risk would be discussed at the next Digital Governance & Safety Committee.</p> <p>In terms of the new risk DHCW0336, Audit+ was no longer a viable solution for the supplier. Work was in progress to mitigate the risk and replace the functionality of Audit+ which is relied on by NHS partners, this would also be discussed at the next Digital Governance & Safety Committee.</p>	Risk Ref	Risk Title	Risk Description	Committee Assignment	DHCW0336	Audit + withdrawal of contracts	IF Audit + withdraw from contract prior to a solution being put in place THEN there will be a significant risk to service delivery RESULTING IN no acceptable solution for stakeholders.	Digital Governance and Safety Committee	Received & Discussed	<p>25-07-2024-A01</p> <p>Corporate Risk Register - CD/COL to initiate a deep dive on risk 0332 and take the findings to Audit & Assurance Committee in October.</p>
Risk Ref	Risk Title	Risk Description	Committee Assignment								
DHCW0336	Audit + withdrawal of contracts	IF Audit + withdraw from contract prior to a solution being put in place THEN there will be a significant risk to service delivery RESULTING IN no acceptable solution for stakeholders.	Digital Governance and Safety Committee								

	<p>DHCW0333 WICIS Implementation Delay, work was progressing to mitigate against delays and an independent review, commissioned by Welsh Government was taking place.</p> <p>DHCW0334 Impact of cost of transition team, 12 roles of which 9 had been filled with internal DHCW staff embedded into national software supplier KAINOS for 2-3 months to work on the system in terms of architecture, design, and management. Mechanisms had been put in place to ensure delivery standards remain and are inherited by DHCW staff.</p> <p>The Board resolved to: RECEIVE and DISCUSS the Corporate Risk Register.</p>		
6.3	<p>Senior Information Risk Owner Annual Report</p> <p>Sam Lloyd, Executive Director of Operations (SL), presented the SIRO Annual Report, noting that it had been prepared for the Board to provide assurance relating to the policies and procedures that the Special Health Authority has in place to manage information risks.</p> <p>In particular, the report provides:</p> <ul style="list-style-type: none"> • Introduction to the Information Risk Management Approach in DHCW. • A summary of key developments relating to improving Information Risk Management in the financial year 2023-24. • Information on relevant audits which provide assurance relating to Information Risk Management • Information and data relating to Information Risk Management <p>The report concludes with the forward plan of activities which aim to deliver further improvements in Information Risk Management.</p> <p>Planned key activities for the coming year relating to Information Risk Management, which are in the first year of the latest DHCW Integrated Medium Term Plan (IMTP), were noted as:</p> <ul style="list-style-type: none"> • The deliverables in the 3-year cyber improvement plan, which includes the delivery of the new national security monitoring system. • Delivery of updated Cyber Security Board Training for the DHCW SHA Board Members. • A review of all externally published DHCW Power BI Dashboards commencing in 2024/25, to ensure compliance with the Power BI Assurance Framework. • Annual surveillance audit for ISO27001. • Embed and promote a national Information Governance framework to enable safe and secure sharing of patient information – through assurance, sharing, advice, assessment, and training. • Finalise a Wales Accord on the Sharing Personal Information (WASPI) Code of Conduct following public and stakeholder 	Noted for Assurance	Note to note

	<p>consultation.</p> <ul style="list-style-type: none"> Define a procurement for a tool which proactively detects unauthorised access to patient data in NHS IT systems. Extend and expand the Information Governance Toolkit to those organisations that want to access patient data in order to deliver efficient health and care services. Establish a programme to support Welsh Government identified actions in the wider engagement and communication activities of the Data Promise. Configure a once for Wales Digital tool for Data Protection Impact Assessments and Information Agreements. Review the Data Protection Officer (DPO) Support Service subscription. <p>The Board resolved to:</p> <p>NOTE the Senior Information Risk Owner Annual Report for ASSURANCE.</p>		
6.4	<p>Data Centre 2 Move Update</p> <p>SL presented an update on the status of the Data Centre 2 Move, noting the following position:</p> <p>Current status</p> <p>The new network has been successfully commissioned; all circuits have been moved; all active equipment has been transitioned to the new data hall, or decommissioned; all legacy circuits have been ceased and the racks have been handed back to BT. Therefore, the primary project objectives have been fully delivered. These included:</p> <ul style="list-style-type: none"> Procurement of a more energy efficient facility, supporting our decarbonisation agenda <ul style="list-style-type: none"> Reduction in carbon footprint of approximately 21%. Power Usage Effectiveness (PUE) of 1.65 reduced to PUE of 1.3. <ul style="list-style-type: none"> This reduction also reduces the financial risk of any future increases in power unit charges Cost savings are estimated at £300k p.a. compared to the costs when the project started in 2022 <ul style="list-style-type: none"> £100k reduction in rack footprint charges £200k reduction in power charges Procurement and installation of new networking equipment Transitioning the equipment to the new hall Avoiding a contract extension with BT <p>4.2 Remaining work</p> <ul style="list-style-type: none"> Rack disposal - A purchase order has been placed with BT to 	Noted for Assurance	Note to note

	<p>dispose of the racks, and cabling in a WEEE compliant way.</p> <ul style="list-style-type: none"> • There is one remaining change to undertake some networking work within the new data hall. This is in the planning stages • Undertake some final circuit failover tests • Complete the project closure report <p>Budget</p> <p>The DC2T Project was funded from DHCW capital and revenue budgets. Cost estimates were developed based on the previous data centre transition, undertaken in 2021. As can be seen from the table below, the transition was delivered almost £750k under budget.</p> <p>Lessons learnt</p> <p>The full lessons learnt log would be included in the project closure report, but SL highlighted some of the early key findings:</p> <ul style="list-style-type: none"> • A full cable audit should have been undertaken prior to the procurement of the new hall as the original tender requirements had significantly underestimated the structured cabling requirements which then resulted in an additional capital cost pressure. • Additional contingency should have been included for the time for the data centre supplier to deliver the new data hall • After a series of failed networking changes, a 3rd party was engaged to help plan, assure and undertake all significant networking changes. Whilst the root cause of the networking issues was eventually tracked to a bug in the network management system, this approach was beneficial and should continue for ongoing major networking changes. • The detailed planning undertaken for the move of server/storage systems worked well resulting in smooth transitions, both during the working week and weekends. <p>It was noted that the completion of the Data Centre 2 move should mean vast improvements across the organisation with legacy networks removed creating a significant impact on systems and services, not to mention the impact of completion underbudget.</p> <p>The Board resolved to:</p> <p>NOTE the Data Centre 2 Move Update for ASSURANCE.</p>		
6.5	<p>NHS Wales Staff Survey 2023</p> <p>Sarah-Jane Taylor, Director of People and Organisational Development (SJ) presented the outcome of the NHS Wales Staff Survey 2023 results for DHCW.</p> <p>Noting that the NHS Wales Staff Survey was launched on 16 October 2023 and closed on 27 November 2023 and was designed with questions based on 10 key themes and 22 sub themes:</p> <ul style="list-style-type: none"> • Morale • Patient Safety 	Noted	Note to note

	<ul style="list-style-type: none"> • Staff Engagement • Compassionate and Inclusive • Recognise everyone's contribution • Able to speak up • Stronger together • Champion Flexible Working • Nurture healthy working environments • Continuously learning and improving  <p>Health Education and Improvement Wales (HEIW) were responsible for the design, delivery and management of the NHS Wales Staff Survey on behalf of NHS Wales, with further detail available here or by scanning the QR Code above.</p> <p>DHCW had the second highest response rate at 60.45%.</p> <p>The table in the report showed the response rate for the top three NHS Wales organisations.</p> <p>The overall DHCW Engagement score is 4 (equivalent to 80%), which was the highest in NHS Wales.</p> <p>SJ advised that going forward, each Directorate senior leadership team and People & OD Business Partner would work together to co-create and explore further opportunities for development and focus aligned to the NHS Staff Survey results.</p> <p>The following observations were noted:</p> <p>A deep dive into the race equality survey was underway with results due in September for further understanding of DHCW's position on offering equal opportunities;</p> <p>The results provide a good benchmark as the Building our Future programme is established and can be revisited throughout stages of the planned work ahead;</p> <p>Interest was received from Board Members on how DHCW results compared to other NHS organisations;</p> <p>Encouraging staff to feel empowered, Board members were keen to monitor this indicator in terms of raising concerns.</p> <p>The Board resolved to: NOTE the NHS Wales Staff Survey 2023.</p>		
6.6	<p>Integrated Organisational Performance Report</p> <p>COL presented the Integrated Organisational Performance Report, highlighting the following items that impacted on organisational performance from May – June 2024 with further detail delivered by those directly involved:</p> <ul style="list-style-type: none"> • The scorecard at the end of the quarter had 5 amber indicators, with no red indicators; • In terms of delivery during the quarter 70 milestones out of 	Received & Discussed	None to note

326 milestones were achieved;

- Some deliverables and slippage in milestones were related to the NDR, reflecting the delay in the funding letter and allocation;
- There were a number of incidents, one major incident in particular was red. SL explained this was in relation to a fail over not performing as it should in one of the data centres, which affected 32 of DHCW’s services. As a result, and lapse in restoration time, a number of SLAs were breached.

This also in turn affected availability, which is reflected in the month’s numbers.

Going forward, a full major incident investigation and lessons learned report was underway and ongoing discussions with the supplier to ensure better testing mechanisms are in place of fail overs;

- There had been an uptake in the NHS Wales App with a redesign based on feedback having a positive impact on how users access the system;
- A number of milestones fell behind in cancer, relating to resource;
- As Track and Trace is decommissioned, data will now reside in the NDR;
- Within Mission 4, there’s been activities in and around Research & Innovation, with an application for a grant to develop an AI model being worked on;
- 70 out of 100 milestones were achieved in Mission 5;
- Current headcount has increased to over 1273, with turnover at its lowest level since 2022;
- Quality management process has improved by 4% to 89, but still behind target;
- 292 responses were received on the stakeholder survey with feedback being analysed, this will be fed back to Board at a later date;

Additionally, the milestone performance in quarter one and the impact on the overall annual plan of not meeting some targets in quarter one was discussed further.

IE explained that around 30 milestones had slipped within the last few weeks of the quarter, which are then re-programmed throughout the rest of the year, with all DPIF related milestones now reported monthly to WG through several different mechanisms.

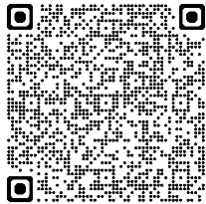
In terms of why there was slippage in these 30 milestones, it was noted that;

- A number of supplier milestones had slipped, with the full impact unknown, but work was ongoing with teams to gain an estimation and implement plans around this;

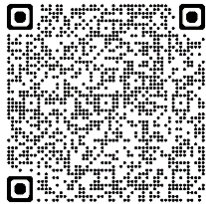
	<ul style="list-style-type: none"> • Some milestones slipped due to certain management of elements outside of DHCW’s control such as within Healthboard; • And some due to the financial impact and of knowing the funding position too late. <p>IE added that it was important to note that;</p> <ul style="list-style-type: none"> • No milestones had slipped beyond March 2025, with healthier reports expected by the end of next quarter to reflect the ongoing work by owners to re-programme and re-align their milestones; • Pressures within DHCW were apparent and currently being monitored to gain a better understanding of how relationship between teams impact certain milestones, with improvements being made to advance overall performance; • Confidence of delivery is not currently measured, and when asked in June, owners reported that all milestones would delivery on time yet regardless of this 30 had slipped. • There was reasonable confidence that now knowing the constraints and how these are being dealt with, that the milestones with slippages would be pulled back by half way point in the year. • However optimistic, teams need to learn to not over promise in planning going forward, which is something, as DHCW is developing will become more inherent. <p>The Board resolved to: RECEIVE and DISCUSS the Integrated Organisational Performance Report.</p>		
6.7	<p>Audit & Assurance Committee Highlight Report</p> <p>The following alert had been noted from the last Committee meeting held on 9 July 2024:</p> <p>The Committee was alerted to the high priority internal audit action within the Decarbonisation Audit relating to the need for a funding strategy to support the Decarbonisation Action Plan.</p> <p>HT advised this would be taken this forward as part of the BOF programme.</p> <p>The Public Committee meeting can be watched in full on our website here or below:</p>	Noted	None to note



Or alternatively by scanning the QR Code.




The Board resolved to:
NOTE the Audit & Assurance Committee Highlight Report.

	<p>Or alternatively by scanning the QR Code.</p>  <p>The Board resolved to: NOTE the Audit & Assurance Committee Highlight Report.</p>		
--	---	--	--

<p>6.8</p>	<p>Local Partnership Forum Highlight Report</p> <p>There were no alerts to raise to Board from the last Forum meeting held on 6 June 2024.</p>  <p>HT as Co-Chair with Andrew Fletcher, Associate Board Member – Trade Union (AF) noted the ongoing collaboration between DHCW’s POD team and the workforce with further engagement planned in the future. In addition, work was underway to try and increase the number of staff side representatives at LPF meetings.</p> <p>More on the Local Partnership Forum can be found here or by scanning the QR Code.</p> <p>The Board resolved to: NOTE the Local Partnership Forum Highlight Report.</p>	<p>Noted</p>	<p>None to note</p>
------------	--	--------------	---------------------

PART 7 - CLOSING MATTERS

<p>7.1</p>	<p>Any Other Urgent Business</p> <p>There was no other urgent business raised.</p>	<p>Discussed</p>	<p>None to note</p>
------------	---	------------------	---------------------

7.2	<p>Date and Time of Next Meeting: 26 September 2024</p>  <p>The Chair noted that the Annual General Meeting was due to begin at 15:00, asking members of the Board to join by 14:45, detail of which can be found by following the link or scanning the QR Code.</p> <p>The Chair expressed thanks to SJ on behalf of the Board as she was leaving DHCW in the coming months and wished her well in her new role.</p> <p>The meeting closed at 13:08.</p>	Noted	None to note
-----	---	-------	--------------